



# VERMA SPINE

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**Kushagra Verma, M.D., M.S., FAAOS**

3851 Katella Ave, Suite 255 • Los Alamitos, CA 90720

(562) 732-4578 Phone • (562) 452-9207 Fax

www.vermaspine.com

## REQUEST FOR RELEASE OF MEDICAL RECORDS FROM:

I hereby authorize you to release medical records of:

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Patient Name

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Date of Birth

Please mail medical records to:

**Verma Spine**  
**3851 Katella Ave, Suite 255**  
**Los Alamitos, CA 90720**  
**Phone: 562-732-4578**

**Or FAX: (562) 452-9207**

### Information Needed:

\_\_\_\_\_ CD of most recent MRI, XRays of Spine (less than 2 years)

\_\_\_\_\_ Recent note

\_\_\_\_\_ Imaging reports (less than 2 years)

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Signature of Patient

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Date