

Alfred J. Rodriguez, M.D.
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According to state statute Art.4495b, we must have patients consent before any medical information is released to a third party. This statute requires us to have permission before we can discuss treatment or test results to your designated representative.

Wife:

I, _____ hereby authorize and request, Alfred J. Rodriguez, M.D. and or his agent to provide any and all information regarding my medical records or current treatments to my husband:

_____. This consent shall remain in effect for 5 years unless terminated by me in writing.

Patient
Signature _____ Date _____

Witness _____

Husband:

I, _____ hereby authorize and request Alfred J. Rodriguez, M.D. and or his agent to provide any and all information regarding my medical records or current treatments to my wife:

_____. This consent shall remain in effect for 5 years unless terminated by me in writing.

Patient
Signature _____ Date _____

Witness _____