



Swedish Medical Center
499 E Hampden Ave., Ste 450
Englewood, CO 80113
PH: 303.756.SKIN (7546)
Fax: 303.756.7547

Sky Ridge Medical Center
Conifer Building, Ste 260
10099 Ridge Gate Pkwy.
Lone Tree, CO 80124
PH: 303.799.4260
Fax: 303.799.4696

www.aboutskinderm.com

Joel L. Cohen, MD
Michael E. Contreras, MD
Clare Wightman MS, PA-C

AUTHORIZATION FOR RELEASE OF MEDICAL INFORMATION

Patient Name: _____

Address: _____

Birthdate: _____ **Telephone Number** _____

I authorize the following Physician or Facility to release information:

Physician Name: _____

Address: _____

Telephone Number: _____

Fax Number: _____

Please release Medical Records to: AboutSkin Dermatology and DermSurgery, PC
499 E. Hampden Ave., Ste. 450
Englewood, CO 80113
Telephone: 303-756-7546
Fax: 303-756-7547

All Records: _____

Physician Notes: _____

Lab Results: _____

HIV: _____

Signature of Patient/Patient Guardian

Date

Witness: _____