

McLaren Print System Order

Order No: 49356 Reprint Previous Order No: 6293
Order Date: 2019-10-09
User: Shannon Pierce
Phone: 810-496-0900

Ship Location: Grand Blanc Occupational and Convenient Care
2313 E Hill Rd
Grand Blanc, MI 48439

Forms

Quantity: 1000
Paragon Dept No: 64100
Dept Name: Grand Blanc Occupational and Convenient Care
Company Number: 810

Order Total Price: 0.00

Item Number: 17418
Item Description: Authorization to Release Information (this is a corporate wide form c/o Medical Records)
Revision Date: 4/28/2015
Print: 2 sided black and white
Paper: 20# White Text
Size: 8.5 x 11
Fold:
Finish:
Drill: None
Misc Info:

McLAREN HEALTHCARE
Authorization to Release Information
Patient Name, Ethnicity, Medical Record Number, Address, Phone Number, Insurance/Other Payers, I authorize to release to, Specific type of information to be disclosed, Sensitive information to be disclosed, Consent to release (Extra Medical Record), Date(s) of Service, Please continue to the other side of this form for Acknowledgements and signatures.