



Authorization to Obtain/Release Medical Records

(Patient Name)

(Date of Birth)

Address: _____

I hereby authorize the use and disclosure of individually identifiable health information relating to me as described below:

Specific description of information to be used or disclosed:

All medical records CD/Disc & Reports

Other: _____

How do you want to obtain the records?

Pickup in person Fax or Email Mail to address above

Please select physician:

- Rick Sasso, M.D.
- Kenneth Renkens, M.D.
- Kevin Macadaeg, M.D.
- Jose Vitto M.D.
- Joseph Smucker, M.D.
- Tom Reilly, M.D.
- Bradley Herold, D.C.
- Johnathan Gentile, M.D.
- John Arbuckle, M.D.
- Paul Kraemer, M.D.
- Justin Miller, M.D.
- Robert Funk, M.D.
- Barrett Boody, M.D.
- Shalini Barkat, D.C.

I authorize the following person(s) to use or disclose the above health information:

Person(s) receiving my authorization information include:

I understand that I may revoke this authorization at any time by notifying Indiana Spine Group in writing. If I choose to do so, my revocation will not affect any actions taken by Indiana Spine Group before receiving my revocation.

I understand that I may refuse to sign this authorization; and that my refusal to sign in no way affects my treatment, payment, enrollment in a health plan, or eligibility for benefits.

This authorization expires one year after signature date.

Patient Signature

Date

Guardian Signature (if minor patient)

Date

Relationship to Patient

Spine Surgery

Orthopaedic

Rick C. Sasso, M.D.

Thomas M. Reilly, M.D.

Paul E. Kraemer, M.D.

Justin W. Miller, M.D.

Joseph D. Smucker, M.D.

Barrett Boody, M.D.

Neurosurgery

Kenneth L. Renkens, M.D.

Spinal Diagnostics & Therapeutics

Kevin E. Macadaeg, M.D.

Jonathan P. Gentile, M.D.

John W. Arbuckle, M.D.

Jose Vitto, M.D.

Robert Funk, M.D.

Chiropractic

Bradley M. Herold, D.C.

Shalini Barkat, D.C.

Office Locations

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Fax: (765) 553-5504

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Ste. 201
Fishers, IN 46037
Phone: (317) 228-7000
Fax: (317) 715-4887

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Danville, IN 46122
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Greenwood, IN 46143
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Greenfield, IN 46140
Phone: (317) 228-7000
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