



LAKESIDE SURGICAL
ASSOCIATES, PA

Gregory B. Hall, M.D., F.A.C.S.
150 Fairview Road, Suite 300
 Mooresville, NC 28117
 Phone: (704) 664-6677
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I authorize Lakeside Surgical Associates and/or their staff to leave medical information pertaining to my care on the phone/cell/work numbers that I have provided on page 1. I will assume responsibility to notify them whenever this information changes. I authorize Lakeside Surgical Associates to disclose to the following person(s) or entity medical information regarding my care.

Spouse/ Parent/ Other Person (please circle) _____ (Name)
DOB: _____

Fax medical records to medical doctor or new referral doctor _____ (Name)

Please list any person or entity you do **not** want us to release your private health information _____ (Name)

You acknowledge you have had an opportunity to review our Notice of Privacy Practices prior to signing this consent.

By signing this form, I grant my consent to Lakeside Surgical Associates to use and disclose my protected health information for the purposes of treatment, payment and health care operations.

| _____ Signature of Patient/POA/ Surrogate Decision Maker | _____ Date |
|---|---------------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

_____ I authorize Lakeside Surgical Associates, PA to obtain medical records from Lake Norman Regional Medical Center or Presbyterian Hospital Huntersville pertaining to my current medical care provided to me by Gregory B. Hall, MD, FACS.