

# La Vista Norcross Clinic

2625 Beaver Ruin Rd Suite B

Norcross; GA 30071

Tel: (770) 446-2820 Fax: (770) 446-2868

Please release my child's medical records to the physician, Dr. Juana M Sanchez

Previous Doctors's Name : \_\_\_\_\_  
Nombre del doctor

Telephone Number : \_\_\_\_\_  
Numero de Telefono

Fax Number : \_\_\_\_\_  
Numero de Fax

Patient's Name  
Nombre del Paciente

Birthdate  
Fecha de Nacimiento

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Thank you,  
Gracias

\_\_\_\_\_  
Mother/Father  
Mama/ Papa

Juana Maria Sanchez  
M.D. MPH. F.A.A.P