

# Texas Lung Associates



3120 Medpark Dr, Suite 150 Denton, TX 76208  
Tel (940) 382-LUNG (5864) Fax: (940) 382-FXFX (3939)  
E-mail: doctor@texaslung.com Website: www.texaslung.com



---

## Authorization to Release Medical Information from Texas Lung Associates

I, \_\_\_\_\_, hereby authorize  
(Name of patient or legal representative)

Texas Lung Associates  
209 N. Bonnie Brae St., Suite 300  
Denton, TX 76201  
Tel: (940) 382-5864  
Fax: (940) 382-3939

to release the following information to:

\_\_\_\_\_  
(Name of person/entity who should receive records)

\_\_\_\_\_  
(Address of person/entity who should receive records)

The health records of: \_\_\_\_\_  
(Name of person whose records will be released)

\_\_\_\_\_  
(Date of birth)

\_\_\_\_\_  
(Social Security Number)

All records:                      Specific records: \_\_\_\_\_

The purpose of this release: \_\_\_\_\_

Limitations of this release (to include but not limited to releasing information regarding  
AIDS or HIV status): \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_