DERMATOLOGY & CUTANEOUS SURGERY, INC.
MICHAEL E. MCCADDEN, M.D., F.A.A.D.
LISA BURGARD, F.N.P.

ST. JOHN'S MERCY DOCTORS BUILDING
621 S. NEW BALLAS ROAD
TOWER A – SUITE 498
ST. LOUIS, MO 63141
(314) 251-3376
FAX (314) 251-5781

DIPLOMATE AMERICAN BOARD
OF DERMATOLOGY
FELLOW AMERICAN ACADEMY
OF DERMATOLOGY

HIPAA RELEASE

I authorize the office of Michael E. McCadden, M.D. to release my PHI (personal health information) to:

______________________________ relationship to patient ________________________

______________________________ relationship to patient ________________________

______________________________ relationship to patient ________________________

____
Signature Patient/Guardian

____ ______________________
Witness Date