Records Transfer / Release

i,, allow my dental records
and the listed dependants' dental records to be released from and/or sent
to Dr. Ryan Kowalczyk of Downtown Dental, 1625 W. Bannock Street,
Boise Idaho 83702.
Phone: (208) 342-5444. Fax: (208) 342-2076.
E-mail: frontdesk@rkdds.com
L maii. Irontacok@naao.com
Dependants:
I allow any of the following information to be released to/from the office of Dr. Kowalczyk:
Facial photographs
Oral photographs
Dental photographs
Dental charting
Dental x-rays – includes panoramic, bite-wing, and periapical
Any dental laboratory work done - impressions, casts, and actual
restorations
Previous dental offices:
Signature:
Date: