Giancarlo Lauriente, DDS
Specialist in Pediatric Dentistry
Certified, American Board
of Pediatric Dentistry

Irma Perez Martinez, DMD, MS
Specialist in Pediatric Dentistry
Specialist in Orthodontics
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Five Cities Pediatric Dental Group & Orthodontics

2 James Way, Suite 201, Pismo Beach, CA, 93449 Tel: (805) 773-1600 Fax: (805) 773-7117 www.5citiesPDG.com

Record Release / Transfer In

I, the undersigned, give my permission for (transferring practice): _____
to release protected health information for my child(ren):
_____.

I request for an electronic copy of the records to be sent to Five Cities Pediatric Dental Group at the following email address: **helpdesk@5citiesPDG.com**

I recognize that e-mail may not be a secure form of communication. There is some risk that individual health and/or confidential information that may be contained in such email may be misdirected, disclosed to or intercepted by unauthorized third parties. If an electronic copy of the record is unavailable, please mail copies to our practice address: 2 James Way, Suite 201, Pismo Beach, CA, 93449.

Parent /Guardian signature: _____ Date: _____

Parent/Guardian name (printed): _____

Record request notes:

_____

_____