

Flanary Veterinary Clinic PLLC
200 Eagle Nest Drive
Paducah, KY 42003
270-898-9738 phone
270-898-2059 fax

MEDICAL RECORDS RELEASE FORM

In accordance with the Veterinary Practice Act regarding the confidentiality of patient medical records, "a written authorization or other form of waiver executed by the client or an appropriate court order or subpoena" is required in order for us to provide a copy of your pet's medical records.

I certify that I am the owner of the patient(s) named below or that I am acting as a legal agent for the owner.

Client's Name _____
Client's address _____
Client's Phone _____
Patient Names(s) _____

By signing below, I hereby authorize Flanary Veterinary Clinic, PLLC, to release my pet's medical records to groomers, boarding facilities, other veterinary clinics and state health officials as needed.

Client's Signature

Date