

# Lexington Pediatrics, P.C.

Pediatric and Adolescent Medicine

## RECORD REQUESTS AND REQUESTS FOR FORMS POLICY

- The information contained in the medical record belongs to the patient/guarantor.
- The medical record itself belongs to Lexington Pediatrics.
- Requests for copies of your medical record should be made two weeks in advance.
- There will be a twenty dollar (\$20) fee to process the copying of your Medical Record regardless of its size and regardless of whether it is picked up in person or mailed via US mail. Chapter 135 of the Acts of 2003 established a new schedule of charges allowable for medical records.
- Lexington Pediatrics will provide one copy of you or your child's updated Health Form at the conclusion of each routine physical examination. You should keep and make copies of this form as all subsequent requests for copies will require a five dollar fee.
- For college forms, camp forms, and other forms which may need to be completed by Lexington Pediatrics in lieu of our standard form, all demographic, non-medical information should be completed by the patient prior to submission to our office for the doctor's review and signature. Please allow two weeks for completion and return of these forms.

I have read and understand the above policies, and I agree to accept responsibility for any financial obligations incurred.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name