

Resource Management

Referral Pass

Fax to Lobby Desk - 2616

This pass grants limited authorization to the representative from the health care provider listed below to review the protected private information of the patient named for continued health care. The representative and the health care provider are obligated under Federal and State law to maintain the information in a safe, secure, and confidential manner. Re-disclosure without additional patient permission or as otherwise permitted by law is prohibited and could subject you to penalties.

Place Sticker or write in name

Patient Name: _____

Medical Record Number: _____

Room Number: _____

Referred Provider's Name:

Phone Number:

This pass is the property of Charlotte Regional Medical Center and must be surrendered back to the front desk upon completion of your visit or on demand.