



South Philadelphia Pediatrics
1408 S. Broad Street 2nd floor
Phila, PA 19146
P:215-467-3515

Whitman Pediatrics
2240 S. 3rd Street
Phila, PA 19148
P:215-755-2652

Queen Village Pediatrics
528 S. 2nd Street, Suite 109
Phila, PA 19147
P:215-592-0715

Fax # 215-467-0338

PRACTICE RECORDS ARE COMING FROM:

Doctor/ Practice Name:

Address:

(STREET)

CITY

STATE

ZIP)

Phone #:

Fax#

I hereby authorize

to release my child's/children's records to

(NAME OF DOCTOR OR PRACTICE RECORDS ARE COMING FROM)

South Philadelphia Pediatrics

Please fax the following records to 215-467-0338

Immunization records

Growth measurements/growth chart

Medical history/problem list

Medication list

Allergy list

Labs

Visit note from last check up

Patient Name:_____DOB_____

Patient Name:_____DOB_____

Patient Name:_____DOB_____

Parent/Guardian Name:

Date:

(PLEASE PRINT)

Parent/Guardian Signature:

Phone #

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