

The Heart
Health Centre



EDUCATION • PREVENTION
INTERVENTION
SUPPORT & MANAGEMENT

The Heart Health Centre

Physical Address:
Unit #7 West Shore Center
508 West Bay Rd.

Mailing Address:
PO Box 32148
KY1-1208

Grand Cayman, Cayman Islands

Tel: 345 943 5800 Fax: 345 943 5801

Email: info@hearthealthcayman.com

Date: _____
mm / dd / yyyy

Mr. /Mrs. /Ms. /Dr. _____

DOB: _____, has authorized the release of his/her medical records from the Heart Health Centre to:

Please check:

_____ Self

_____ Other: _____

I authorize The Heart Health Centre to disseminate these records via

_____ **Hard Copy** – pick up _____ **Email** _____ **Fax** - _____
(Please provide number)

Signature of patient (or other authorized person)

Signature of witness

Date: _____
mm/dd/yyyy

Form of ID: _____

(If records are to be transmitted via email or fax a copy of photo identification must be provided)