

Fenske Holistic Healthcare Center LLC

Dr. Nicole Fenske
Functional Medicine
7702 Terrace Ave., Ste 2
Middleton, WI 53562
Phone: 608 836-8883
Fax: 608 836-8863
E-mail: Info@DrFenske.com

**PATIENTS, PLEASE RETURN THIS
COMPLETED FORM TO DR FENSKE'S OFFICE
WITHIN TWO DAYS OF SCHEDULING YOUR
INITIAL APPOINTMENT!**

Request for Records

Patient's Name: _____

Address: Street: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____ Telephone Number: _____

Requesting Records of Doctor:

Doctor's Name: _____

Address: Street: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Please release the following records:

Health Records Lab Results

Other: _____

Federal and state laws require special permission to release certain information. Please check if these records should be released:

Mental Health Alcohol / Drug Abuse HIV/AIDS Test Results Developmental Disabilities

Please include dates of service from _____ to present
(if no date specified please send records from previous two years based on date below).

Requested by: Fenske Holistic Healthcare Center LLC
7702 Terrace Ave., Ste 2
Middleton, WI 53562
Attn. Dr. Fenske
FAX 608 836-8863

Patient's Signature: _____

Date Requested: _____