

Inland Northwest Spine and Neurosurgery, PLLC

Bret A. Dirks, M.D./Douglas Blaty, DO

850 W. Ironwood Drive #300
Coeur d'Alene, ID 83814
(208) 667-1376
Fax: (208) 292-0873

DATE: _____

TO THE OFFICE OF: _____

PLEASE SEND COPIES OF MY MEDICAL RECORDS TO THE OFFICE OF:

INLAND NORTHWEST SPINE AND NEUROSURGERY, PLLC
850 W. Ironwood Drive, Suite 300
Coeur d'Alene, ID 83814
Phone: (208) 667-1376
Fax: (208) 292-0873

THANK YOU IN ADVANCE FOR YOUR ASSISTANCE WITH THIS REQUEST.

SIGNATURE: _____

PRINT NAME: _____

ADDRESS: _____

DATE OF BIRTH: _____

TODAY'S DATE: _____