

Rex Bariatric Specialists

Peter C. Ng M.D.

Lindsey S. Sharp M.D.

Dustin M. Bermudez M.D.

Tricia Burns, P.A.-C

Afton Carducci, P.A.-C

Erica McKearney, P.A.-C

Diplomats’ of the American Board of Surgery Fellows of

The American Society for Metabolic and Bariatric Surgery

Mary Gray Hutchison, R.D., L.D.N.

Registered Dietitian

Margaret Bova, M.S., R.D., L.D.N.

Registered Dietitian

Amanda Hopkins, M.S., R.D., L.D.N.

Registered Dietitian

Michelle Wallace, RN, BSN

Bariatric Coordinator

Laura Turik RN, CBN, CMSRN

Nurse Navigator

Clinton Bolton III, Ph.D., LPC, NCC

Rex Bariatric Specialists

Rexbariatrics.com

4207 Lake Boone Trail

Suite 210

Raleigh, 27607

Phone 919-784-7874

Fax 919-784-2801

Records Release Authorization

Practice/Doctor’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby authorize you to release any and all records in your possession to the following:

Rex Bariatric Specialists

4207 Lake Boone Trail

Suite 210

Raleigh, NC 27607

Fax # 919-784-2801

(Please circle one Physician)

Peter C. Ng, MD Lindsey S. Sharp, MD Dustin M. Bermudez, MD

**Patients Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date of Birth:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**S.S. #**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Witness**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_