

Family Practice and Sports Medicine Phone: (229) 333-0616

117 W. Northside Drive

Fax: (229) 333-0647 Valdosta, GA 31602

CONFIDENTIAL NAME RELEASE

Patient confidentiality is very important to me and my staff. There are times that we need to speak with family members or significant others about your care. We ask that you list those persons which take an active part in your healthcare. Without your permission we do not discuss any information with anyone except for other physicians and their staff that are taking an active part in your healthcare. If you have any questions, please do not hesitate to ask me or my staff. This list can be changed or altered at anytime.

Bennett Pate Hogan, M.D.

NAME	RELATION	DATE
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PATIENT'S SIGNATURE/	LEGAL GUARDIAN:	