

Sandy Springs Pediatrics & Adolescent Medicine, PC

Fax: 404-256-1759

Dear Parent,

All medical record requests are handle by HealthPort. They come to the office on a weekly basis to scan all requested records. They download the scanned records to their corporate office each evening and the records are printed and mailed the following day. There is a charge for copying and mailing these records. HealthPort will send you a bill. The fees for copies of medical records are based on the State of Georgia Fee Schedule, Chapter 33 of Title 31 of the Official Code of Georgia Annotated, Section 2-A.

Your child/children’s records are the property of Sandy Springs Pediatrics and Adolescent Medicine. We are required by law to keep these records for 5 years after your child turns 21.

Your bill rates will be as follows:

Pages 1 - 20 0.93 per page
Pages 21 –30 0.80 per page
Pages 31 + 0.76 per page
Plus postage

Please copy –

- Immunization Records
- Last 2 years records
- Complete chart

Children Names & Date of Birth

Please mail records to:

Reason for leaving: _____

Name, address and phone number:

_____ Phone: _____

Parent Signature _____

Patient Signature (18 yrs & older) _____