

# Garden Street Dental Surgery

36 Garden Street Geelong 3220. Phone 52295811, Fax 52295030  
Dr. Rohan Arora BDS (Melb.) & Dr. Kathy Zandi BDS (Melb.)  
Arora and Zandi Pty Ltd. ABN 19 115 965 510

Dear Colleague,

Currently legislation requires that written permission be obtained from patients for the release of copies of their dental records. The patient listed below has signed an authority release agreement, requesting that a copy of their dental records and recent radiographs be forwarded to our dental practice.

Thank you for your assistance,

Dr. Kathy Zandi  
Dr. Rohan Arora

## **PATIENT AUTHORITY FOR RELEASE OF DENTAL RECORDS**

I \_\_\_\_\_

D.O.B. \_\_\_\_\_

OF: \_\_\_\_\_

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Hereby authorize the immediate release of all records and radiographs previously held at your surgery, to be sent to Garden Street Dental Surgery, 36 Garden St (PO Box 2266) Geelong 3220

(Please be aware that it is lawful for a practitioner to charge fees to a patient requesting access to, and copies of written records and other forms of Diagnostic records, such as radiographs etc.)

**I agree to pay any fees incurred in this process, as defined in the privacy regulations.**

Signed \_\_\_\_\_

Date: \_\_\_\_\_