



TYSON EYE

239•542•2020 | TysonEye.com

Doctors

Farrell C. Tyson, MD, FACS

Board Certified Ophthalmologist
Cataract & Refractive Surgery

J. David Stephens, MD

Board Certified Ophthalmologist
Cataract, Cornea, & Glaucoma Surgery

Roman O. Pravak, MD

Board Certified Ophthalmologist
Retina Specialist

Katia E. Taba, MD

Board Certified Ophthalmologist
Retina Specialist

John Patrick, MD

Board Certified Anesthesiologist
Consulting Anesthesiologist

Janice I. Birr, OD

Chief of Optometry
Board Certified Optometrist

Stuart I. Kaplan, OD

Board Certified Optometrist

Jennifer L. Gallo, OD

Board Certified Optometrist

Rory D. Brienens, OD

Board Certified Optometrist

Offices

Main Office - Cape Coral

4120 Del Prado Blvd. S-

North Fort Myers

18770 Tamiami Trail N

South Fort Myers

8004 Vintage Parkway

Bonita Springs

3925 Bonita Beach Road

Naples

2640 Golden Gate Pkwy, #115

Surgery Centers

Eye Surgery and Laser Center

Cape Coral

4120 Del Prado Blvd. S-

Naples Premier Surgery Center

2335 Tamiami Trail N. #304

Practice Administrator

Mark King, COE

RELEASE OF RECORDS TO SELF

Date: _____

From: Tyson Eye of Cape Coral Eye Center, PA

____ Farrell C. Tyson, MD

____ J. David Stephens, MD

____ Roman O. Pravak, MD

____ Katia E. Taba, MD

____ Janice I. Birr, OD

____ Stuart I. Kaplan, OD

____ Jennifer L. Gallo, OD

____ Rory D. Brienens, OD

I hereby authorize and request you to release the complete medical records in your possession concerning my illness and/or treatment during the period from _____ to _____.

To: MYSELF

OR

Requested Pick Up Date: _____

Patient Signature

Date

Patient Name

Date of Birth

Florida Statute 395.3025 Rule64B8-10.003, Florida Administrative Code

Florida statute allows for billing to copy and release medical records for the following situations: subpoena for records from the court, request for records from an insurance company, and release of records to "self", the patient for their own records.