Blake Nelson DDS
Cosmetic, Implant and Sedation Dentistry
3066 Trenwest Dr. Winston-Salem, NC 27103
(336)760-1277

Patient Record Release Form

I authorize Dr. Nelson to release my dental records and x rays to following dental office:

Doctor or Office Name: _____

Phone number: _____

Email address:_____

Patient name: _____

Patient Date of Birth: _____

Patient signature: _____

Office Staff Signature: _____

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