

Patient's Name: _____

Patient's Date of Birth: ____-____-____



CONSENT FOR TREATMENT

I voluntarily give my permission to the health care providers of Yee Plastic Surgery PLLC and such assistants as they may deem necessary to provide medical care services to me. I understand that by signing this form, I am authorizing them to treat me as long as I seek care from Dr. Hilton Yee, or until I withdraw my consent.

Signature of Patient or Guardian Date

Printed Name of Patient or Guardian Relationship to Patient

Witness Signature Date

**AUTHORIZATION TO RELEASE
PROTECTED HEALTH INFORMATION**

I, _____, give my authorization to release my protected health information including results of my laboratory tests, x-ray and/or other test results to the following designated representative(s):

Patient Initials

- _____ My spouse (Name) _____
- _____ My child (Name) _____
- _____ Other (Name) _____
- _____ Personal Representative _____

- _____ May be left on my answering machine at **home**.
- _____ May be left on my answering machine at **work**.
- _____ May be left on my **cellphone/mobile device** answering service.
- _____ **MAY NOT BE GIVEN TO ANYONE OTHER THAN ME.**

PATIENT SIGNATURE Date

WITNESS SIGNATURE Date

As a patient, you have the right to revoke this authorization in writing at any time, except to the extent that action has been taken in reliance on this authorization or, if applicable, during a contestability period. In order for the revocation of this authorization to be effective, Yee Plastic Surgery PLLC must receive the revocation in writing. The revocation must include, 1) the patient's name, address, and date of birth, 2) the patient's desire to revoke the authorization, and 3) the date of the revocation and the patient's signature. All revocations must be sent in writing to the attention of Dr. Hilton Yee at 9305 Pinecroft Dr, Suite 303, The Woodlands, TX 77380 or faxed to (832) 299-6593 and will not be considered effective until received by our office.

A duplicate or faxed copy of this form is considered the same as the original document.