

Dear Patient:

Thank you for contacting **OBGYN Associates of Des Moines** Medical Records Department. To better serve you with your request for medical records, **OBGYN Associates of Des Moines** has partnered with Sharecare.

Sharecare will fulfill your request for records in a safe, secure, and timely manner.

To receive a copy of your records, you will need to complete and return the Authorization form. Please make sure you have *specific* instructions included as to **what** records you are requesting and **where** you are requesting records to be sent. You also have a choice of **how** you would like to have your records delivered. For records to be delivered directly to you, please choose mail or email. ***Please mail/fax/drop-off the completed Authorization form to OBGYN Associates of Des Moines Associates.***

If you choose to fax your request, please fax to (515) 288-3200. Please include a copy of your Driver's License.

If you choose to mail request, please send to:

OBGYN Associates of Des Moines
Attention: Medical Records
330 Laurel Street
Suite #1100
Des Moines, IA 50314

For Records being sent to another Health Care Provider

Please provide as much contact information for your other Doctor, including the address, phone & fax.

You can contact a Sharecare Health Data Services representative at any time by calling:

858-244-1811

Thank you,

Medical Records Supervisor
OBGYN Associates of Des Moines