



Patient fax cover sheet

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Use this page when sending completed forms or records by fax.

DESTINATION

Secure fax: 571-601-2937

Virginia Surgical Services | Suite 205B | Fairfax, Virginia

SENDER AND TRANSMISSION

Patient or sender name

Best callback number

Patient date of birth

Date sent

Total pages

Appointment date, if known

CONTENTS

New patient intake packet

Medication and allergy list

Prior medical records

Imaging or laboratory reports

Insurance information

Other

Notes for the office

CONFIDENTIALITY NOTICE

This fax may contain confidential health information intended only for Virginia Surgical Services.
If you sent it in error, call the office promptly. Fax is not monitored for emergencies. Call 911 for an emergency.