

Happy&Healthy 
Pediatrics PC

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I am requesting that my child/children's medical records be copied and forwarded to:

Happy and Healthy Pediatrics PC

Elissa Rubin, MD

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77 Jericho Turnpike

Suite 175

Mineola, NY 11501

Phone: 516-216-5910

Fax: 516-216-5907

Names of Child(ren): _____

I am requesting these records in accordance with the HIPPA regulations.

Parent/Guardian Signature: _____