



# Seeking a Second Opinion

## Second Opinions

<b>Type</b>		<b>Given By</b>	
<b>Address</b>		<b>Phone</b>	
<b>Email</b>		<b>Fax</b>	
<b>Records Needed</b>		<b>Date Sent</b>	
<b>Records Location</b>			

After reviewing my records, do you agree with the first opinion? \_\_\_\_\_

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What are your recommendations? \_\_\_\_\_

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What are the advantages and risks of your options? \_\_\_\_\_

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Comments/Questions: \_\_\_\_\_

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# Evaluate Your Doctors



## Second Opinions

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<b>Address</b>		<b>Phone</b>	
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Comments/Questions: \_\_\_\_\_

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