



Dr. Scott C. Burdge, P.A.
Podiatric Surgery - Sports Medicine

Permission to Discuss Health Information

Date: _____

The following people have my personal permission to discuss all of my medical information regarding billing and or treatment with the office of Dr. Scott C. Burdge:

Name	Relation

Signed: _____ Printed Name: _____

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Houston, TX 77024
713-467-2442
Fax: 713-465-6076

Katy Office
707 S. Fry, Ste. 355
Katy, TX 77450
281-829-9315
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713-467-2442