



Patient fax cover sheet

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.