**FAX**

July 17, 2024

Radiology Imaging Associates

10700 E. Geddes Ave, #200

Englewood, CO 80112-3861

ATTN: Medical Records and Billing Custodian

Fax #: (302) 440-3473

FROM: Rafe A. Ramos rafe@ramoslaw.com

RE: Noel Alvarado

Date of Birth: August 25, 1957

Date of Loss: April 15, 2024

Phone Number: (833) 699-0099

Pages: 2

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Our office represents the above named individual regarding injuries suffered on April 15, 2024.

We are requesting that you provide us the following information associated with their treatment:

1. ***Complete electronic file of medical records in CD form*** *including initial evaluation, treatment summary notes, referrals, prescriptions, laboratory and diagnostic testing recommendations and results, and all handwritten notes.*
2. **A complete itemized billing statement for all charges –** including those that may have been paid – *with* CPT and ICD-10 codes.
3. **Please send dates from April 15, 2024 to present.**

I have enclosed a signed *authorization for release of medical records* allowing you to release this information. Please bill our office for charges associated with the forwarding of these documents. **If you require pre-payment, cd for electronic transfer or DropBox information please email me the bill or fax charges to 303-865-5666. Please contact our office if copy charges are to exceed $50.00.  We do not authorize any copies above this amount.**

If you are unable to comply with the thirty (30) day deadline for providing the requested medical records, we ask that you contact us in writing before the deadline expires. In your letter, you must provide a written statement of the reasons for the delay and the date by which you will provide the medical records. Under the HITECH Act, you are only provided one such extension of time.

If you have any questions concerning this request, please call me at (720) 580-8335 or e-mail rafe@ramoslaw.com. Thank you in advance for your assistance regarding this matter.

Sincerely,

Ramos Law

Rafe A. Ramos

/RAR