

A center for the diagnosis and treatment of heart disease in the fetus, newborn, infant, child & adult with congenital heart disease.

Adult Consent form:

Cardiology

Charles Baker, M.D.
Daniel Beissel, M.D.
David Burton, M.D.
Christopher Carter, M.D.
Bradford Chu, M.D.
Kirsten Dummer, M.D.
David Gremmels, M.D.
B. Kelly Han, M.D.
Christine Hills, M.D.
Rodrigo Rios III, M.D.
Rodrigo Rios IV, M.D.
Charles Shepard, M.D.
Marko Vezmar, M.D.
Jocelyn Berbee, C.P.N.P.
Amy Gould, C.P.N.P.
Angela Reu, P.A.-C.

Cardiovascular Surgery

Frank Moga, M.D.
David Overman, M.D.
Robroy MacIver, M.D.
Leah Zupancich, P.A.-C.

Cardiovascular Intensive Care

Robert Horvath-Csongradi, M.D.
Kelly Rood, M.D.

Sub Specialty Programs

Lipid Clinic
PCA-Pediatric & Congenital
Arrhythmia Program

Additional Services Provided

Advanced Cardiac Imaging
Electrophysiology
Fetal Echocardiography
Interventional Catheterization

Minneapolis

Children's Specialty Center
2530 Chicago Avenue S Ste 500
Minneapolis, MN 55404-4522
Phone: 612-813-8800
Fax: 612-813-8825

St. Paul

Gardenview Medical Building
347 N. Smith Avenue, #603
St. Paul, MN 55102-2387
Phone: 612-813-8800
Fax: 612-813-8825

Appointments are available in:

Coon Rapids Burnsville
Minnetonka Woodbury
Duluth
Fargo, ND
Grand Forks, ND

I (being an adult over the age of 18; or an emancipated minor) **would like** to give The Children's Heart Clinic, PA the following persons permission to speak on my behalf. I understand this would allow them to speak with the Doctors, nurses, schedulers, business office, administrative staff and or medical records on my behalf.

Name:

Relationship to patient:

1. _____

2. _____

I (being an adult over the age of 18; or an emancipated minor) **do not** want The Children's Heart Clinic, PA to speak with anyone on my behalf.

Thank you,

Printed name _____ DOB _____

Signature _____ Date _____

I understand I have the right to revoke this consent, in writing, at any time. Authorization will expire 3 years from the date above unless revoked in writing.