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904-731-8300 fax 904-737-7901

Telephone number where we may reach you for future appointments.
_____ home / work / cell

May we leave a message at this number? YES or NO

May we leave a message on an answering machine / voicemail at this number? YES or NO

May we leave a message with anyone who answers the telephone at this number? YES or NO

Is there anyone that we are not able to leave a message with at this number? YES or NO

If yes, please explain _____

To whom we are able to share information about you with *(Please note this is very important. If you do not list your wife/husband/children, etc., by law we are not able to speak with them about your care at this office.)*

PLEASE NOTE THAT YOU MUST KEEP THIS INFORMATION CURRENT. PLEASE
LET US KNOW IF THERE ARE ANY CHANGES TO THIS INFORMATION

Please sign and date _____