

Congrats! You have graduated from using a pediatric provider as your primary care provider for your health and medical needs! Due to your age, you must choose an adult primary care physician for your medical care.

We require a written letter signed by you, (the patient) indicating the physician and/or practice you would like your records sent to. There is a \$20.00 transfer fee.

We have enjoyed being a part of your medical care through the years and possibly we will be fortunate enough to care for the next generation in your family.