

## Medical Record Request



## INSURANCE CLAIM TEST

Synergy Health  
Advisors, West  
Grand Avenue,  
Montvale, N.J.  
USA

15555555555

testclaimspractice@navierre.com

https://web-stage-  
navierre.osd.io/profile

Date: Jan 29, 2026

Time: 12:13 pm

Attn: **Null Mother Frances Hospital Ja  
cksonville**

Address: PO BOX 847522, DALLAS, TX 75284

Phone: -

Fax: ((90)-3) -5414679

Re: **Shelley Winn**

**REQUESTING MEDICAL RECORDS FROM YOU**

Release of Information

**URGENT****Appointment Details**

Patient: Shelley Winn \*

Appointment Date: Jun 16, 2025

Amount: \$17895.69

We are requesting medical records related to the above appointment in order to complete and process an insurance claim on behalf of the patient.

Please include the following documents if available:

- Visit summary / encounter notes
- Diagnoses (ICD-10 codes)
- Procedures performed (CPT codes)

Go to <https://pablo-dev.vercel.app/api/s/0X3oo5Yd> or  
scan the QR code and enter code below to submit

**710839**

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