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Dignity Health Nevada

Request For Medical Records Guide Sheet

Please note the department and return request accordingly:

For Hospital Records Only:

St. Rose Siena Hospital PLEASE FAX REQUEST TO: 702-616-5235

St. Rose San Martin Hospital PLEASE FAX REQUEST TO 702-492-8165

St. Rose DeLima Hospital
PLEASE FAX REQUEST TO 702-492-8165

For Clinic Records Only:

Blue Diamond

Henderson Clinic

North Las Vegas

Pavilion MultiSpecialty

Pavilion Primary Care

Pavilion Urgent Care

Peccole Plaza Clinic

San Martin Clinic

Siena MultiSpecialty

St. Rose Dream Fund Clinic

St. Rose Specialty Clinic-CVT

St. Rose Specialty Clinic-Neuro

Surgery Tivoli Village Clinic

West Flamingo Clinic

PLEASE SEND REQUEST TO:

DHMG-HIMMedicalRecords@DignityHealth.org

Or Fax to:

702-616-7807

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Patient Label

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Billing Records-Send to PBSCustomerService@DignityHealth.org

Or Fax 602-798-0809

Radiology/Imaging for Nevada only to:

St. Rose Siena and St. Rose DeLima: Fax 702-616-5488 and Phone 702-616-5585

St. Rose San Martin:

Fax 702-492-8338 and Phone 702-492-8585

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