WINCHESTER WOMEN'S
SPECIALISTS, P.C.

1870 Amherst St., Suite 2E
Winchester, VA 22601
Tel (540) 667-4546 • Fax (540) 667-6893

John H. Lowder, Jr., M.D.
Mark T. Leonard, M.D.
James K. Nashed, M.D.
George F. Craft II, M.D.

Obstetrics • Gynecology • Infertility
Mammography & Laser Surgery
Colposcopy & Hysteroscopy
Diagnostic Laboratory

CONSENT TO MEDICAL CARE AND TREATMENT OF MINOR CHILDREN

I, _____, the natural parent/legal guardian of _____, authorize and consent to medical care and/or treatment to be performed for my child by Winchester Women's Specialists, PC when, in the sole discretion of the attending physician, such care treatment and procedures are immediately necessary or advisable in the interest of my child's health and well-being, and it is not advisable to take the time to contact me in advance.

_____
Date

_____
Signature of Parent/Guardian

_____
WWS Employee