



MedStar Georgetown
University Hospital

MedStar Georgetown University Hospital
Division of Pediatric Endocrinology and Diabetes
202-243-3560

Request to be placed on distribution list to receive important
information regarding Type 1 Diabetes

Parent Name _____

Name of Child _____

Email _____

Home Address: _____

Signature _____ Date _____

Please email this completed form to Barbara Runner, Administrative Assistant, at
runnerb@gunet.georgetown.edu