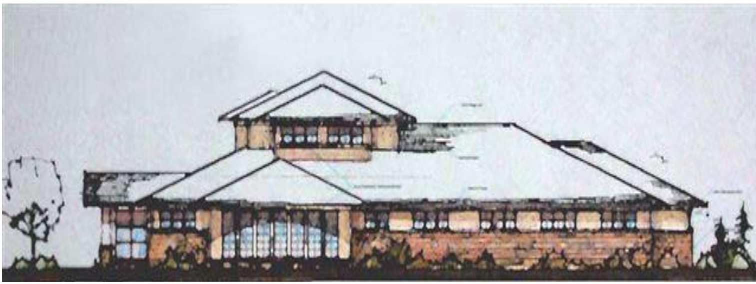

Cass Street Ear, Nose & Throat Associates, P.C.
Otolaryngology*Head and Neck Surgery*Allergy

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AUTHORIZATION FOR RELEASE OF MEDICAL RECORDS

Date: ________________________

Patient's Name:____ DOB: ________________________

Previous/Maiden Name: ______________________________________ SSN (last 4): ____________________

I authorize Cass Street Ear, Nose & Throat Associates, P.C. to:

Option 1: ☐ Release my medical records ***to*** the individual/organization listed below.
OR
Option 2: ☐ Request my medical records ***from*** the individual/organization listed below.

Name: ____ Phone: _____________________________

Address:____ Fax: _______________________________

____

Information to be released: Please Check all Applicable to Release

☐ Complete Chart ☐ Last Visit

☐ Specific Dates: From: ____________ To: ________________

I understand that this Authorization is effective for a period of 60 days from the date of signature. I understand I have the right to revoke this authorization at any time. Any revocation must be done in writing and any information previously released will not be subject to revocation. I understand that information to be disclosed may include treatment of psychiatric, substance abuse and HIV/AIDS illnesses. The Health Insurance Portability and Accountability Act of 1996 (HIPAA) protects the privacy of health information.

____ __________________________
Signature of Patient or Legal Guardian Date

____ Verification of identification performed: Yes No
Printed Name of Parent or Legal Guardian

There is a flat fee for printing copies of medical records. You may obtain a copy of your records at no charge from your patient portal. (ask for details) We can also fax your records at no charge.

I wish to have my records sent by:

☐ Fax (No Charge) Fax # if not listed above: __________________________

☐ Mail **$7.50** **Payment Received: _______________**

☐ Pick up in office **$6.50** **Payment Received: _______________**

Completed By: ______________________________ Date:_____________________ *Revised: 7/2/2019*