Dermatology and Laser Institute of Colorado

AUTHORIZATION TO OBTAIN MEDICAL RECORDS

I authorize _____ to release the health information of
Physician name/facility

Patient Name		**Date of Request**	_____/_____/_____
Patient DOB	_____/_____/_____	**Social Security Number**	

I authorize the information to be disclosed to:

Dermatology and Laser Institute of Colorado, P.C.
9695 S Yosemite St, Ste 175
Lone Tree, CO 80124
Phone (720) 344-5252 Fax (720) 344-0296

The type of information to be disclosed is as follows:

- □ All Information contained in patient's chart
- □ Financial Information
- □ Medical Information
- □ Laboratory results
- □ Pathology reports
- □ Other_____

Under the HIPAA Final Privacy Rule, physicians may disclose patient protected health information (PHI) to another covered entity for purposes of treatment, payment, and health care operations. The regulations under Section 164.506©(4) read as follows: *"A covered entity may disclose protected health information to another covered entity for health care operation activities of the entity that receive information, if each entity has or had a relationship with the individual who is subject to protected health information being requested."*

I do not have to sign this authorization in order to receive treatment from Dermatology and Laser Institute of Colorado, P.C. I understand that I have the right to refuse to sign this authorization. When my information is used or disclosed pursuant to this authorization, I understand that any disclosure of information carries with it the potential for an unauthorized re-disclosure and the information may not be protected by federal confidentiality rules. I have the right to revoke this authorization in writing except to the extent that the practice has acted in reliance upon this authorization. My written revocation must be submitted in writing to the Privacy Officer at Dermatology and Laser Institute of Colorado, P.C.

_____ _____/_____/_____
Signature of Patient or Legal Guardian Date

_____
Relationship to Patient