**PATIENT REQUEST FOR ACCESS TO PROTECTED HEALTH INFORMATION**

**This request is for an opportunity to secure copies of protected health information**

 **Films\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OFFICE USE ONLY FILMS GIVEN ARE TO BE LISTED HERE**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of Patient Signature of Patient or Personal Representative Date

**Please List your address here if you would like films mailed to you.**

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 City State Zip

**Please Select From the Options Below**

 **Inactivate me as a patient I will not be back**

 **I am just going for a second opinion**

 **Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

The privacy Officer of this facility must first review this request, to determine if the information can be made available. We may be legally prohibited from making certain information available to you or your representative, including:

* Information related to legal proceedings
* Information that federal or state laws prevent from disclosure
* Information related to medical research in which I agreed to participate
* Information obtained under a promise of confidentiality

Every effort will be made to accommodate your request. We will, within 30 days, either arrange for you to inspect the records, provide you with copies of these records, or provide a written explanation of any restrictions of the information you requested. If we deny your request, in whole or in part, you may request a review of that decision.

Charges for this service, as permitted by law, will be due and payable upon receipt of record copies.