

I AUTHORIZE THE USE/DISCLOSURE OF HEALTH INFORMATION ABOUT ME AS DESCRIBED BELOW.

Patient Name: _____

Patient's Date of Birth: _____ Patient's SSN: _____

- A. Person(s) or Organization(s) authorized to provide the information:

- B. Person(s) or Organization(s) authorized to receive this information:

- C. Specific description of the information that may be used or disclosed [including date(s)]:

- D. Specific description of how the information will be used:

- 1) I understand that this authorization will expire on _____
- 2) I understand that I may revoke this authorization (except to the extent that action was already taken in reliance on this signed authorization) at any time by notifying Orthopaedic Specialists of Maryland, P.A. in writing.
- 3) I understand that I can refuse to sign this authorization and that my refusal will not affect my ability to obtain treatment, payment or my eligibility for benefits (if applicable.)
- 4) I may inspect or copy any information used or disclosed under this agreement.
- 5) I understand that if the person or organization that receives the information described above may be re-disclosed and would no longer be protected by these regulations.
- 6) I understand that the covered entity may not condition services on whether I (the patient) sign this authorization.

Patient's Signature or Patient's Representative

Date

Printed Name of Patient's Representative

Relationship to Patient

NOTE:
 You have the right to know specifically what information you are authorizing for release (e.g., "results of a lab test performed on _____" or, if your entire medical record is included, "all health information.")
 You have the right to know the name(s) or other identification of the person(s) or organization(s) authorized to release the information [e.g., the names of your health care provider(s)].
 You have the right to know who is going to use it and what it is going to be used for, (e.g., John Smith, PhD/Research)

HIPPA Authorization for Release Information

This form does not constitute legal advice and covers only federal, not state, laws.