CEDARS HEALTH, LLC
CASPER CARDIOLOGY

RECORDS RELEASE

Patient Name: ________________________________DOB: _______________Last 4 of SSN: _____________

☐ **The individual above has requested that his or her medical records be released and forwarded to:**

Physician's Name: ____

Phone: ______________________________________Fax: ______________________________________

Street Address: ____

City: __________________________________ State: ______________ ZIP Code: ____________________

☐ **The individual above has requested that his or her medical records be released and forwarded to:**

Patient's Address: ____

City: ____State: ____________ZIP: ____________

I hereby authorize the release of all necessary medical records from:
____/_____/_____ to _____/_____/______

1. I understand that this authorization will expire one year from today's date.
2. I understand that I may revoke this authorization at any time by notifying the appropriate health care facility 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 is not a health care provider or plan covered by federal privacy regulations, the information described above may be re-disclosed and would no longer be protected by these regulations.

Patient's Signature: ____Date: ________________
(or parent/guardian if patient is a minor)

Signature of Witness: ____

428 South Durbin St. Ste 104, Casper, WY 82601 307.337.4284 | Fax: 307.224.3436
1906 E Cedar St., Rawlins, WY 82301 307.324.2294 | Fax: 307.264.2606
716 College View Dr. Ste A, Riverton, WY 82501 307.856.1315 | Fax: 888.243.8018
1453-A Dewar Drive, Rock Springs, WY, 82901 307.382.2466 | Fax: 888.395.0359
813 Highland Ave, Sheridan WY 82801 307.673.5501 | Fax: 307.459.5046

HIPPA Authorization for Release of Information
This form does not constitute legal advice and covers only federal, not state, laws.