



RELEASE OF SHC MEDICAL RECORDS TO OTHERS

607 West Main • Grangeville, ID 83530 • 208-983-1700 • www.syringahospital.org

Fax: 208-983-8520

Patient Name _____ Date of Birth _____

Address: _____ Phone _____

This release authorizes the described medical records regarding the above patient to be released by:

Syringa Hospital
607 West Main Street
Grangeville, ID 83530

Syringa Hospital FP Clinic
722 West North Street
Grangeville, ID 83530

Syringa Hospital Kooskia Clinic
22 North Main Street
Kooskia, ID 83539

Records to be released to: _____

Address _____ Phone _____

Contact Person _____ Dates of service to include: _____

Purpose or need: _____

Information requested (check all that apply)

- Checkboxes for: All hospital records, Laboratory reports, Progress Notes, History & Physical, X-ray Records, Emergency Record, Discharge Summary, Pathology reports, Clinic record, Operative Report, Physician Orders, Billing statements, Other.

* The following items must be initialed to be included in the use and/or disclosure of other health information:
_____ *Mental health information and/or records
(Federal regulations require a description of how much and what kind of information is to be disclosed.)

Describe: _____

I understand that information disclosed per this authorization may be subject to re-disclosure and no longer protected.

I understand that I may revoke this authorization in writing at any time, provided that I do so in writing, except to the extent that action has been taken in reliance upon this authorization. Unless revoked earlier, this authorization will expire 1 year from the date of signing. I will also provide a copy of my photo identification (i.e. driver's license, etc.). You are entitled to a copy of this authorization after you sign it.

Signature of Patient (or Patient's Legal Representative if applicable)

Date

Print Patient's Name (or Patient's Legal Representative if applicable)

Relationship to Patient

Pick Up _____ Electronic Copy _____

Mail _____ Fax # _____

For Office Use Only

