



Women's Center of Florida
An Emory Medical Corporation

4812 W US HWY 90, LAKE CITY, FL 32055
Phone: (386)466-1106

PO BOX 1646, LAKE CITY, FL 3205
Fax: (386)466-1821

web: www.myOBcare.com

To: _____

I hereby authorize you to release medical records of:

Patient Name

Date of Birth

Please mail/fax records to:

Women's Center of Florida
PO Box 1646, Lake City, FL 32056
386-466-1821

Information needed:

- Entire Records (Omit Nothing) Date: From _____ to _____
 Hospital Records / OR Records / Facility Records / Administrative Records
 Hospital Consultation / Emergency Room visits
 Hospital Progress Notes / Correspondence to/from other medical providers
 Laboratory / X ray films / MRI films / CT scans
 Operative Report & Operative progress Note
 Pathology Reports

I understand that information to be released may include information regarding drug abuse, psychological or psychiatric impairments, HIV and/or AIDS or physical conditions. If information pertaining to drug or alcohol abuse has been disclosed, it has been done so from records protected by federal confidentiality rules (45 CFR Part 2). The federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by 42 CFR Part 2. A general authorization for the release of medical and other information is NOT sufficient for this purpose; The Federal Rules restrict any use of the information to criminally investigate or prosecute any alcohol or drug abuse patient.

I certify this authorization is made voluntary, I understand the information to be released is protected under state and federal laws and cannot be re-disclosed without my further written consent unless provided for by state and federal law. A copy maybe accepted by the health care facility in lieu of the original.

I understand I may revoke this authorization at any time, except to the extent that has already been taken. If not previously revoked, this consent will expire one year from the date of signature.

Date

Signature of Patient/Legal Guardian