Stony Brook Medicine

PATIENT REQUEST FOR DISCLOSURE

I hereby authorize _____ to disclose the following information from my health record

Patient name: _____ Date of birth: _____

Address: _____ Telephone: _____

_____ Medical Record Number: _____

Dates of Treatment being requested: _____

Requested Information:

- ☐ Abstract (subset of records)
- ☐ Discharge Summary
- ☐ Operative Report
- ☐ Radiology (X-Ray, MRI,etc.)
- ☐ Cardiac CD
- ☐ Emergency Record
- ☐ Laboratory Testing
- ☐ Consults
- ☐ Cardiac Testing
- ☐ Autopsy Report
- ☐ Pathology Report
- ☐ Endoscopy/Colonoscopy
- ☐ Complete Record

Other (please specify) _____

I understand that this may include **sensitive information** relating to:

Acquired immunodeficiency syndrome (AIDS) or human immunodeficiency virus (HIV) infection
Behavioral health services/psychiatric care
Treatment for alcohol and/or substance use disorder

This information is to be released to: _____

_____

_____

Please send by the following method:

- ☐ Printed copy @ 75 cents per page
- ☐ CD @ $6.50
- ☐ Electronic download @ $6.50
- ☐ e-Mail to _____ @ $6.50
  (print very clearly)

Please note: e-mail is not a secure method of transmission of your health information. Stony Brook Medicine is not responsible for the privacy of information e-mailed at your request.

Signed: _____ Date: _____
(Patient)

_____ Date: _____
Health Care Agent – Only if the patient lacks capacity to sign for his/her self

Any disclosure of substance use disorder patient records is governed by Federal law (see 42 CFR Part 2), and all disclosures of such records shall be accompanied by the following written statement:

This information has been disclosed to you from records protected by Federal confidentiality rules (42 CFR Part 2). The Federal rules prohibit you from making further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for the release of medical or other information is NOT sufficient for this purpose. The Federal rules restrict any use of the information to criminally investigate or prosecute any substance use disorder patient.