



Request for Access to Protected Health Information

I request the release of the health information of:

Patient Name: _____ Date of Birth: _____
 Street Address: _____ City, State, Zip: _____
 Home Phone: _____ Cellphone: _____

Release Information From		Release Information To	
		Carolina Asthma and Allergy Center	
(List applicable Facilities and or Practices)		(Name of Facility, Person, Company)	
(Address)		(Street Address or PO Box, City, State, Zip Code)	
(Phone Number)	(Fax Number)	(Phone Number) (704) 372-7900	(Fax Number)

Purpose of Release (check reason): Request of individual/personal Continued patient care Insurance
 Legal purposes including discussions and proceedings Other

Dates of Treatment for records to be released: From _____ To _____

Specialist's Summary Information to be released:

- | | |
|--|---|
| <input type="checkbox"/> Entire Record _____
<input type="checkbox"/> Consultation Report _____
<input type="checkbox"/> Treatment for alcohol and/or drug abuse _____
<input type="checkbox"/> Skin Test Results _____
<input type="checkbox"/> FeNO _____
<input type="checkbox"/> AIDS (Acquired Immunodeficiency Syndrome) or HIV (Human Immunodeficiency Virus) Infection
<input type="checkbox"/> Other (please specify) _____ | <input type="checkbox"/> Progress Notes _____
<input type="checkbox"/> Laboratory Tests/Results _____
<input type="checkbox"/> Radiology (CT & X-Ray) _____
<input type="checkbox"/> Spirometry _____
<input type="checkbox"/> History and Physical _____ |
|--|---|

Format:

- Paper Copy Electronic Copy

Delivery Method:

- U.S. Mail Pickup Fax, where permitted

I understand that I may be charged a fee for:

- Preparation of Summary or explanation of my protected health information.
- Reproduction costs of my protected health information or a copy of the summary for explanation.
- Mailing costs.

Signature of Patient or Representative _____ Date _____

Print Name _____

Relationship of Representative to Patient (Please describe Representative's authority to act on behalf of the Patient)