

PATIENT MEDICAL RECORDS RELEASE FORM

Date Request Submitted:	Date Received: office use	Date Complete (contacted requestor/sent): office use
Please indicate if you need these records before a specific date. We have fifteen (15) days to process your request. However, if records are needed before the 15 day deadline, we will make the effort to expedite your request.		Date needed by:
Requestor name:	Relationship to patient:	Phone number:

PATIENT NAME: _____ **DOB:** ____/____/____

Approximate date or year patient was last seen in our office: _____ (leave blank if unknown)

Requesting the following records: (Select one)

☐ All ☐ Office visit notes & echo reports only ☐ Specific visit date(s): _____

RECORDS WILL BE SENT VIA: ☐ **WILL ARRANGE FOR PICK UP**

(Select one) ☐ **MAIL to:** _____

Name (Attention)

Street Address

City

State

Zip code

Please fax this request to (703)573-4856 or mail to 8500 Executive Park Ave. Suite 110 Fairfax, VA 22031.

Please allow 15 business days to process your request. We will do everything we can to process these requests in a timely fashion. We will contact you with the final cost upon completion. Records will be released upon receipt of payment. Thank you.

APPLIED	FEES	DESCRIPTION	CHARGES
	Search & Handling	\$5.00 flat rate for first page	
	Search & Handling (OFFSITE)*	\$10.00 flat rate for first page	
	2 – 50 pages	\$0.50 per page	
	Pages 51+	\$0.25 per page	
	Copy of a DVD (Echo)	\$30 per DVD	
	Completed Forms (physical/sports clearance)	\$15 flat fee	
	Postage for mailing	Based on weight	
TOTAL DUE:			

* OFFSITE Search & Handling fee is only applied if the patient chart needs to be requested from an offsite storage facility. This usually applies to patients that have not been seen in our office in over six (6) years. Please allow 2-3 additional days for turnaround time for offsite patient charts.

Please keep a copy of the records we send you. This will save you any cost for future requests.

This request may only be authorized by the patient (if over 18 years old), a parent, or legal guardian.

Authorization for release of records signed by: _____

Relationship to patient

SIGNATURE: _____ **DATE:** _____

MEDICAL RECORDS LAWS IN THE STATE OF VIRGINIA

Who owns the medical record - the practitioner or the patient?

Virginia Code [§ 32.1-127.1:03](#) declares that medical records are the "property of the provider maintaining them". The law recognizes "a patient's right of privacy in the content of a patient's medical record" and makes the practitioner responsible for ensuring that the patient's records are only released in accordance with law.

The definition of "record" is expansive and includes all written, printed or electronically recorded material, maintained by a provider in connection with a patient, as well as the substance of any communication between the patient and provider during the course of providing services. It also includes other information acquired by the provider about the patient in connection with the provision of health care services to the patient, including records obtained from or created by another health care provider.

How do I get a copy of my medical record?

A request for copies of medical records must be in writing, dated and signed by the person making the request, and include a reasonable description of the records sought. If someone is making a request on your behalf, he or she must provide evidence of the authority to receive the records (such as a power of attorney). The provider must accept a photocopy, facsimile, or other copy of the original signed by the requester as if it were an original (Virginia Code [§ 32.1-127.1:03](#)).

Upon receipt of such a request, the health care provider has 15 days to do one of the following:

1. *provide copies of the records;*
2. *inform the requester if the information does not exist or cannot be found;*
3. *inform the requester of the provider who now maintains the records; or*
4. *deny the records for specific reasons set out in Section F of the statute.*

[§ 32.1-127.1:03](#) also provides that the patient's physician or clinical psychologist may make a notation in a patient's record that furnishing of the records will be "would be reasonably likely to endanger the life or physical safety of the individual or another person, or that such health record makes reference to a person other than a health care provider and the access requested would be reasonably likely to cause substantial harm to such referenced person." If a patient's request for his record is denied for this reason, the provider must permit the record to be copied and reviewed by a provider, selected by the patient, of similar background to the individual who made the notation in the chart, and that practitioner may make a judgment as to whether the records should be made available to the patient.

What will I be charged for a copy of my medical record?

If an individual requests a copy of his health record from a health care entity, the health care entity may impose a reasonable cost-based fee, which shall include only the cost of supplies for and labor of copying the requested information, postage when the individual requests that such information be mailed, and preparation of an explanation or summary of such information as agreed to by the individual. For the purposes of this section, "individual" includes a person with authority to act on behalf of the individual who is the subject of the health record in making decisions related to his health care.

If an attorney or insurer requests a copy in conjunction with civil litigation, the charges are set in [§ 8.01-413](#) of the Code of Virginia.