



Petaluma Dental Group

Authorization for the Release of Dental Records

I hereby authorize _____, DDS to release the information in the dental record of _____ (patient's name) to

(name of dentist, clinic or patient's representative)

(Address)

(Email)

Any and all information may be released including, but not limited to mental health records protected by the Lanterman-Petris-Short Act, drug and/ or alcohol abuse records and/ or HIV test results, if any, except as specifically provided on the line below.

[Optional: I understand and agree to pay reasonable charge to cover the cost of transfer, as allowed in Health and Safety Code §§123100 et seq. and Evidence Code §1158]

This authorization is effective now and will remain in effect until _____ (date).
I understand that I may receive a copy of this authorization.

Signature

Date

If not signed by the patient please indicate relationship: () parent or guardian of minor patient, () guardian or conservator of incompetent patient, () beneficiary of personal representative of deceased patient.

Note: This authorization is intended to comply with applicable state laws. It is not intended as a "Consent" or "Authorization" for the use and disclosure of protected Health Information (PHI) under the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) or its implementing regulations. The medical provider to whom this authorization is directed should ensure that he or she is in compliance with applicable HIPAA requirements before releasing the requested record.

Caution: If you intend to use the requested information for any other purpose other than providing medical treatment, 45 CFR Section 164.502 requires that you make efforts to limit your request for PHI to the minimum necessary to accomplish the intended purpose of the request.

To Be Valid, an authorization must be clearly separate from other language on a page and executed by a signature which serves no purpose other than to execute the authorization. It can either be handwritten by the person who signed it or in typeface to accomplish the intended purpose of the request.