

SCCA Medical Records Request form

When you would need this form:

Give us permission to speak with your loved ones

- To give your family members, caregivers, or anyone else coordinating your care permission to **TALK** to your doctor and/or care team about your care (this could also include email communication).

Example: Your spouse, child, or loved one can call and get your appointment schedule or confirm upcoming appointments. You can have multiple listed even though the table only looks like room for two.

Give us permission to share your medical records with others

- To have your records **GIVEN** to you, a family member, caregiver or anyone else (insurance company or attorney).

Example: You would like a copy of your most recent imaging report. Or, you would like to send this imaging report to your spouse or another specialist.

Give us permission to get your medical records from another medical office

- To give us (SCCA) permission to get your records from other health facilities or doctors' offices. Some out of state organizations require you to authorize the release of your records to us. This would allow us to **GATHER** your records from another doctor's office.

Example: Records from when you were seen at different doctor in Texas or another state.

You would like to make more than one request

- To make multiple requests (to give us permission to TALK to, GIVE out, or GATHER protected health information) please submit an individual form for each request.
 - Example: Your spouse wants to talk to your doctor AND get your most recent imaging report. We would need one form for the permission to TALK, and a second to process the request to GIVE records. The second form can always be done at another time when the need presents itself.