



HWC Women's Research Center

CONSENT FOR RELEASE OF MEDICAL RECORDS

I hereby grant my permission to release any and all required medical records from:

Dr's Name _____
Dr's Address _____

Doctor's Phone: (____) _____ - _____

To be released to:

Stuart A Weprin, MD
HWC Women's Research Center
20 W. Wenger Road
Englewood, OH 45322
Phone: (937) 771-5103 -- Fax: (937) 771-5109

For the purpose of participating in a clinical trial regarding the following diagnoses:

Type of information to be disclosed:

Any and all medical records with pertinent medical information*

Amount of information to be disclosed:

Any and all information covering a minimum of the past 1(one) year*

.....
By signing below, I understand that the information I authorize HWC to receive may be re-disclosed and no longer protected by federal privacy regulations. I understand that this authorization is voluntary and that I may refuse to sign this authorization. My refusal to sign will not affect my ability to participate in any clinical trials. I understand that this authorization may be withdrawn at any time in writing. This authorization will be in effect for 180 days after I sign and date the form below unless I specify an earlier expiration date in this space _____.

Please PRINT full name: _____

Date of Birth ___/___/___ Soc. Sec. # (optional) _____

Address _____

City: _____ State _____ Zip _____

Phone (____) _____ - _____

Client Signature/Person authorized to give consent/Guardian Relationship to client

Date ___/___/___

Signature of staff member facilitating request Date

***Please note:** This information will be disclosed to HWC from records protected by federal confidentiality rules. The federal rules prohibit HWC from making any 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 C.F.R., 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 information to criminally investigate or prosecute any alcohol or drug abuse client.