## AUTHORIZATION FOR SANDUSKY COUNTY EMS TO RELEASE PROTECTED HEALTH INFORMATION

I authorize the use or disclosure of the protected health information (PHI) as described below. By authorizing the use or disclosure of the PHI described, I authorize SANDUSKY COUNTY EMS; (1) to open the PHI for review or inspection by the person(s) identified below, and (2) to furnish the person(s) identified below with a copy of the PHI if he or she so requests. PATIENT NAME DATE \_\_\_\_ DATE OF BIRTH SOCIAL SECURITY NUMBER DESCRIPTION OF PHI REQUESTED, INCLUDING DATES OF SERVICE: I AUTHORIZE THE FOLLOWING CUSTODIAN OF MY PHI TO RELEASE AND/OR DISCLOSE THE PHI DESCRIBED ABOVE: I AUTHORIZE THE RELEASE AND/OR DISCLOSURE OF THE PHI DESCRIBED ABOVE TO: THE PURPOSE OF THIS REQUEST TO RELEASE AND/OR DISCLOSE THE PHI DESCRIBED ABOVE IS: PENDING PERSONAL INJURY LITIGATION OTHER PENDING LITIGATION POTENTIAL MEDICAL MALPRACTICE LITIGATION OTHER (describe) I UNDERSTAND THAT I HAVE THE RIGHT TO REVOKE THIS AUTHORIZATION, IN WRITING, AT ANY TIME BY SO NOTIFYING THE REQUESTING PERSON. SUCH REVOCATION WILL NOT AFFECT ACTIONS TAKEN BY THE REQUESTING PERSON PRIOR TO THE DATE HE OR SHE RECEIVED THE WRITTEN REVOCATION. LUNDERSTAND THAT MY HEALTH CARE PROVIDER CANNOT CONDITION MEDICAL TREATMENT ON WHETHER I SIGN THIS AUTHORIZATION THIS AUTHORIZATION WILL EXPIRE ON \_\_\_ SIGNATURE OF PATIENT OR PATIENT'S AUTHORIZED REPRESENTATIVE DATE IF SIGNED BY PATIENT'S AUTHORIZED REPRESENTATIVE, DESCRIBE REPRESENTATIVE'S AUTHORITY: PATIENT IS A MINOR; I AM THE PATIENT'S PARENT AND NATURAL GUARDIAN. PATIENT IS A MINOR, I AM THE PATIENT'S GUARDIAN, APPOINTED BY THE PATIENT IS A WARD; I AM THE PATIENT'S GUARDIAN, APPOINTED BY THE \_\_\_\_\_\_\_COUNTY PROBATE COURT. THE PATIENT IS DECEASED. I AM THE PATIENT'S SURVIVING SPOUSE. THE PATIENT IS DECEASED. 1 AM THE EXECUTOR OR ADMINISTRATOR OF THE PATIENT'S ESTATE, APPOINTED BY THE COUNTY PROBATE COURT. I AM THE PATIENT'S ATTORNEY IN FACT, AS DESIGNATED IN THE PATIENT'S DURABLE POWER OF ATTORNEY FOR HEALTH CARE. OTHER (describe)