

**HCA SHARED SERVICES CENTER  
552 METROPLEX DRIVE  
NASHVILLE, TN 37211**



contracts with HealthPort to process requests for copies of medical records. The release of patient medical information is governed under Federal and Tennessee state statutes.

**The following must be presented:**

- A completed authorization (all sections of the authorization must be completed for records to be released)

**What we will provide at no cost to you:**

- Records to your physician for continuing care. Pertinent information (an abstract) for continuing care includes transcribed reports (discharge summary, history and physical, operative reports), radiology reports, lab reports and clinic notes (if applicable). If you would like additional records sent, please specify on the authorization what records are to be sent.
- Page 1 through 5 of your patient records will be provided at no cost

Requests for records to be sent to a third party (attorney, insurance company) can only be completed with a request and authorization directly from that party. If you desire records for this purpose or for your own personal use, the records will be mailed to you and the following fees will apply based on Tennessee Code Annotated 68-11-304(a)(2). If you believe the records you are requesting may exceed a certain dollar amount and would like to be notified of this in advance, please indicate in the area below.

**A charge of \$ .25 per page + applicable tax and postage cost**

**Please notify me if the cost of my records exceeds \$\_\_\_\_\_.**

By my signature below, I acknowledge that I am aware of the fee for copies of medical records. I agree to pay this fee when I receive an invoice from **HealthPort**.

PLEASE PRINT:

NAME: \_\_\_\_\_ PHONE #: (\_\_\_\_) \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
Street City State Zip

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

\*ROI\*

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