



PATIENT REQUEST FOR ACCESS (45 CFR §164.524)

Patients or their personal representative can complete this form for access to or release of protected health information (PHI) and submit it via email to help@baylorgenetics.com or to the fax number above. Baylor Genetics (BG) will provide the requested PHI within 15 business days from receipt of the completed form unless an extension is requested.

PATIENT INFORMATION

____ / ____ / ____ Request Date (MM / DD / YYYY)	_____ Patient First Name	_____ Patient Last Name		
____ / ____ / ____ Birth Date (MM / DD / YYYY)	_____ Phone	_____ Fax	_____ Email	
_____ Address		_____ City	_____ State	_____ Zip

PATIENT REQUEST FOR ACCESS TO OR RELEASE OF PHI TO ANOTHER

I request that BG release the patient's PHI maintained by BG to:

The Patient or their Personal Representative

The following Person/Organization:

_____ Name				
_____ Phone	_____ Fax	_____ Email		
_____ Address		_____ City	_____ State	_____ Zip

INFORMATION TO BE DISCLOSED, FORMAT, DELIVERY METHOD, FEES* AND EXPIRATION DATE

Test Results Raw Data Billing Records Other (Please describe): _____

I understand the PHI requested to be disclosed may contain genetic information and by checking this box consent to its release. (If you do not check this box, BG will not be able to release any records containing genetic information.)

DATE RANGE: To _____ From _____

FORMAT: Paper Electronic Other: _____

DELIVERY: Mail Fax Other: _____

EXPIRES: _____ If no date is entered this request expires one (1) year from the date signed unless written revocation is received before then.

*Fees: A reasonable, cost-based fee for copies, including postage to mail records if requested. You will be notified of the fee before the request is processed.

SIGNATURES

Patient Signature ____ / ____ / ____
Date (MM / DD / YYYY)

Patient's Personal Representative** Signature ____ / ____ / ____
Date (MM / DD / YYYY)

Printed Name _____
Relationship to Patient

**Attach documents demonstrating your authority to act on behalf of the patient if you are not the parent (e.g., A valid power of attorney letter, court order; guardianship papers).