



The patient listed below had a mammogram exam at our office. At the time of the appointment it was stated the patient had previous mammograms at your location. Our radiologist would like to obtain those films and the reports for comparison. As soon as the comparison is completed your films will be returned. The patient has signed below giving us permission to obtain the films and reports.

I, _____ born _____, consent to and authorize _____ to release my mammogram films and my diagnostic reports to Cape Radiology Group at #70 Doctors' Park, Cape Girardeau, MO 63703.

These records are required for the treatment of this patient at our facility. This authorization expires 90 days after date signed. A photo static or fax copy of this authorization shall be considered as effective and valid as the original.

For disclosures for Cape Radiology Group purposes we will not condition treatment upon your signing of this authorization and you may refuse to sign this authorization form based upon these types of disclosures.

I understand that information disclosed pursuant to this authorization may be re-disclosed to additional parties and no longer protected. I also understand that I have the right to revoke this authorization in writing at any time. To revoke this authorization a letter in writing should be addressed to the HIPAA Compliance Officer at Cape Radiology Group. I further understand that any such revocation does not apply to the extent that persons authorized to use or disclose my health information have already acted in reliance on this authorization.

Signature: _____

Date: _____

Witness: _____

Date: _____

The information disclosed to you may be from records protected by Federal confidentiality rules (42 CFR part 2), or by Section 191.656 R.S. MO (1991). The Federal rule and Missouri law prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to who it pertains or as otherwise permitted by law. A general authorization for release of medical information is not sufficient for this purpose. The federal rules restrict any use of this information to criminally investigate or prosecute any alcohol or drug abuse patient.