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**IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF UTAH**

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UNITED STATES OF AMERICA

Plaintiff,

v.

\_\_\_\_\_

Defendant.

**AUTHORIZATION FOR  
RELEASE OF MEDICAL  
RECORDS**

Case No. \_\_\_\_\_

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To: \_\_\_\_\_, this instrument authorizes you to furnish and  
release to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

or a representative thereof, for the purpose of legal representation, all records, including those normally considered private, privileged, confidential, controlled and protected, including but not limited to medical records, progress reports, psychiatric, or psychological evaluations, psychotherapy notes, and court records or any records incidental thereto, military testing reports or medical evaluations and reports, and any records including evaluations, findings, treatment rendered and opinions in your records on the following:

- \_\_\_\_ MEDICAL/EMERGENCY ROOM
- \_\_\_\_ PSYCHOLOGICAL/PSYCHIATRIC
- \_\_\_\_ DRUG/ALCOHOL ABUSE
- \_\_\_\_ VERBAL COMMUNICATION
- \_\_\_\_ EDUCATIONAL
- \_\_\_\_ SOCIAL SECURITY NUMBER & MEDICAL RECORDS
- \_\_\_\_ OTHER: \_\_\_\_\_

**PROHIBITION ON REDISCLOSURE:** Alcohol and Drug Abuse Medical Records are protected by Federal confidentiality rules (42 CFR Chap. 1, Part 2, Subpart C § 2.32) The

Federal Rules prohibit further disclosure of this information unless further disclosure is expressly permitted by written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Chap. 1, 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 the information to criminally investigate or prosecute any alcohol or drug abuse patient.

I understand that authorizing the disclosure of this health information is voluntary. I understand that any disclosure of information carries with it the potential for an unauthorized re-disclosure and the information may not be protected by federal confidentiality rules. If I have any questions about disclosure of my health information, I can contact the authorized individual or organization making disclosure. I understand that the information authorized for release may indicate the presence of a communicable or venereal disease. This document specifically authorizes the release of psychiatric information. If psychiatric information is included in the information to be released to the patient, a physician authorization must also be obtained. With this knowledge, I give my consent to the release of all information in my medical records, including any information concerning my identity, and release the above agency / health provider, its affiliates, agents and employees, from any liability in connection with the release of the information contained herein. I understand that I have a right to revoke this authorization at any time. I understand that if I revoke this authorization I must do so in writing and present my written revocation to the Medical Record Department and /or Privacy Officer. I understand that the revocation will not apply to information that has already been released in response to this authorization. The medical provider to whom this authorization is furnished may not condition its treatment of me on whether or not I sign the authorization. I understand that the revocation will not apply to my insurance company when the law provides my insurer with the right to contest a claim under my policy. Unless otherwise revoked, this authorization will expire 180 days from the date signed. Notarized photocopies of this authorization are to be given the same effect as the original.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

State of Utah

County of Salt Lake

On this \_\_\_\_ day of \_\_\_\_\_, before the Court, authorized to perform Notarial Acts pursuant to Utah Code § 57-2a-3(2)(b), provided on the basis of satisfactory evidence to be the person whose name is subscribed to this instrument, and acknowledged he/she executed the same.

Witness my official seal.

S  
E  
A  
L

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Magistrate Judge  
United States District Court  
District of Utah