

ALLEN COUNTY BOARD OF DEVELOPMENTAL DISABILITIES
2500 ADA ROAD LIMA, OH 45801

AUTHORIZATION TO RELEASE INFORMATION

I, _____, _____, hereby authorize
_____ to release my health information,
as specified below, to _____.

I authorize the following information to be released:

I understand that the information to be released includes (initial where appropriate):

- _____ Diagnoses and/or treatment for alcohol and/or drug abuse;
- _____ HIV test results;
- _____ AIDS/AIDS Related Complex (ARC) diagnoses and/or treatment;
- _____ Diagnoses and/or treatment relating to other communicable diseases

Except with the following limitations:

This authorization or use/disclosure is for the following purpose:

This authorization will remain effective until _____.

I understand that if I have authorized disclosure of protected health information to persons who are not required by Federal or State law to keep the information confidential, those persons who are receiving the records may disclose the protected health information to others without my consent or authorization.

I understand that I have the right to revoke/withdraw this authorization, in writing, at any time, and that the revocation/withdrawal will be effective except to the extent that _____
_____ has already taken action in reliance on my authorization.

My written statement that I want to revoke/withdraw my authorization should be delivered to _____ at the Allen County Board of Developmental Disabilities 2500 Ada Rd Lima, OH 45801.

Signature

Date

Individual's Guardian/Personal Representative if individual cannot sign.

(Print name)

(Signature)

(Date)

Minor's signature (needed only if drug/alcohol treatment information is being disclosed):

(Print name)

(Signature)

(Date)

If this authorization has been signed by a personal representative on behalf of an individual, his/her authority to act on behalf of the individual must be set forth here:

For Office Use Only:

Staff person releasing information: _____

(Signature)

(Print name)

Date information released: _____