LIBERTY UNIVERSITY | HEALTH CENTER

Services by: cvfp

Authorization for Release of Information-Compound Release

Name of patient: ______________________________ Date of Birth: _______________________

Central Virginia Family Physicians, Inc, is authorized to release protected health information about the above named patient in the following manner and to identified persons.

Recipient	Information
Name: ______________________________ Phone: ______________________________ Relationship: _________________________	O Financial O Medical O Appointment Information
Name: ______________________________ Phone: ______________________________ Relationship: _________________________	O Financial O Medical O Appointment Information
Name: ______________________________ Phone: ______________________________ Relationship: _________________________	O Financial O Medical O Appointment Information

Communication	Information
Email Communication-Provide email address** _____________________________________	O Financial O Medical O Appointment Information O Breach notification
Text communication-Provide number** _____________________________________	O Financial O Medical O Appointment O Breach notification

O **For email/text communication, I understand that if information is not sent in an encrypted manner, there is a risk it could be accessed inappropriately. I still elect to receive email/text communication as selected.

Patient Rights:

I have the right to revoke this authorization at any time.

I may inspect or copy the protected health information to be disclosed as described in this document.

Revocation is not effective in cases where the information has already been disclosed but will be effective going forward.

Information used or disclosed as a result of this authorization may be subject to disclosure by the recipient and may no longer be protected by federal or state law.

I have the right to refuse to sign this authorization and that my treatment will not be conditioned on signing.

____ ___________________________

Signature Date

Revised 1/15 LM