Arkansas Medical Foundation

for

The Physicians Health Committee

10 Corporate Hill Drive, Suite 150, Little Rock, AR 72205
Telephone (501) 224-9911 • Fax (501) 224-9966
E-Mail: staff@arkmedfoundation.org

Bradley Diner, M.D.
Medical Director

Danny Wilkerson, M.D.
Executive Director

Rebecca Gaston
Program Director

AUTHORIZATION FOR RELEASE OF INFORMATION TO AMF

I, _____ hereby authorize:

_____ _____
Name Organization

_____
Address

_____
City State Zip

(___)_____ (___)_____ _____
Phone No. Fax No. Email

To disclose/release

- Treatment and discharge summary reports including recommendations
- Evaluations including urine results and reports including recommendations
- Clinical updates
- Other_____

To: The Arkansas Medical Foundation
Purpose:

- To facilitate case management and advocacy efforts
- Other_____

_____ _____
Signature Date

This information has been disclosed to you from records protected by federal confidentiality rules (42CFR Part 2). The federal rules prohibit you from making any further disclosure of this information unless further disclosure is expressly permitted by the written consent of the person to whom it pertains or as otherwise permitted by 42 CFR Part 2. A general authorization for release of information is **NOT** sufficient for this purpose.