



**NACOGDOCHES
G.I. CONSULTANTS**
P L L C

Authorization to Release Medical Information to Individuals/Family Members

In accordance with Federal government privacy rules implemented through the Healthcare Portability Act of 1996 (HIPPA), in order for your Dr. Carl Jones or the staff of Nacogdoches G.I. Consultants to discuss your condition with members of your family or other individuals that you designate, we must obtain your authorization prior to doing so. In the event of a critical episode or if you are unable to give your authorization due to the severity of your medical condition, the law stipulates that these rules may be waived.

_____ I **DO NOT** authorize Dr. Carl Jones/Nacogdoches G.I. Consultants to release any or all information concerning my medical care to any individual except as set for above.

_____ I **DO** authorize Dr. Carl Jones/Nacogdoches G.I. Consultants to verbally release any or all information concerning my medical care to the following individuals:

Name

Relationship to Patient

Name

Relationship to Patient

Name

Relationship to Patient

Patient Signature

Date

Print Patient Name

Date of Birth