



I authorize Houston MRI & Diagnostic Imaging to release my medical records as directed below.

Patient Name: _____

DOB: _____

Address: _____

Phone: _____

Email: _____

Records to Release: _____ ALL

Radiology Report(s)

Imaging Study(s) CD

Billing Records

Release Records to:

Patient

Patient Designee

Physician

Hospital

Legal Representative

Other: _____

Name of Patient Designee: _____

Address: _____

City: _____

State: _____

Zip: _____

Relationship: _____

Delivery Method: Pickup

USPS-Mail

Fax number _____

Other: _____

While most email traffic is encrypted with Transport Layer Security (TLS), there is still a risk that PHI may be intercepted, read, or disclosed to unauthorized individuals during transmission or storage. Email
By selecting email, I acknowledge that email transmissions may not be fully secure, and that there is a possibility that PHI may be compromised despite reasonable precautions taken by Houston MRI & Diagnostic Imaging. I will not hold Houston MRI & Diagnostic Imaging responsible for any breach of PHI that may occur due to email communications.

Notes:

*Signature of Patient/Guardian

*For electronic signature, please type /s/ and then your first and last name on the signature line.

Date

Printed Name of Signatory

Relationship

For internal use only:

Date Records Released: _____

Verification of ID completed: Yes

Staff signature: _____

Date: _____

Print Name: _____

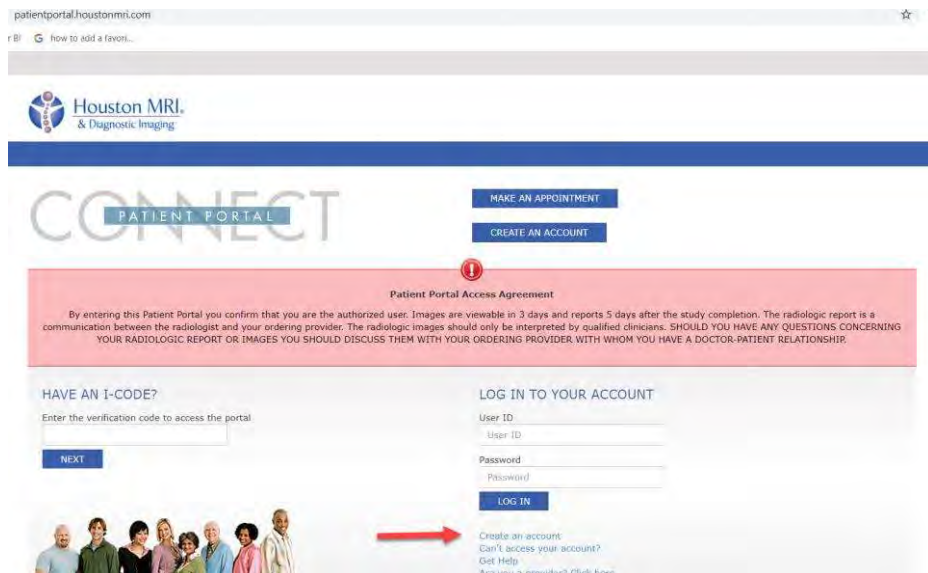


Houston MRI[®]

& Diagnostic Imaging

HOUSTON MRI MEDICAL RECORDS PRICING

Houston MRI provides all patients with a Patient Portal Account, free of charge. The Patient Portal Account allows patients to view their images 3 days after the date the images were performed, and it allows patients to view and print their radiology reports 5 days after the images were performed. In order to create your Patient Portal Account, go to patientportal.houstonmri.com and click on “Create an account”.



Billing Records (\$25.00) Medical Records (\$25.00) Imaging/Radiology on CD (\$8.00 per each CPT exam)

Billing Affidavit (\$15.00) Medical Affidavit (\$15.00) Imaging/Radiology Affidavit (\$15.00)

Billing Records Deposition (\$50.00) Medical Records Deposition (\$50.00) Imaging/Radiology Deposition (\$50.00)

Each Notarized Document (\$6.00) USPS (Mail) (\$10.00) UPS, 1-2 day shipping (\$20)

In order to request a copy of your medical records or imaging, please contact the location where your imaging was performed. Please visit houstonmri.com for our locations.