Request to Share Medical Records

Physicians East requires a request in writing to share medical record information. Requests may be made by filling out the appropriate Authorization to Release Health Information Form below.

- **Authorization to Release Health Information** - to be completed when a copy of the Physicians East medical record needs to be sent to someone outside of Physicians East or when medical records from an outside office need to be sent to Physicians East.
- **Authorization to Speak to Others** - to be completed when patient information can be verbally discussed with others. No written records are to be shared.

Requests may be:

- Mailed to: 1850 West Arlington Blvd, Greenville, NC 27834, Attention: Health Information Services.
- Faxed to: 252-752-7781
- Brought to any Physicians East location.
- Completed via the Physicians East Patient Portal. Forms available under the “Health Forms” section.
  - If you are not signed up for the Patient Portal, you may call our Help Desk at 252-413-6281 to obtain information on how to sign up.

Fees:

- There is no charge for sharing medical information with another healthcare provider.
- There is no charge for sharing medical information with a patient via the Physicians East Patient Portal or via e-mail.
  - Please note, sending information via email over the internet is not secure. There is a possibility that information included in an email can be intercepted and read by others beside the person whom it is addressed. Patient must consent in writing for information to be shared via e-mail.
- A flat fee of $6.50 is charged for electronic requests provided via CD or USB drive.
- A charge for labor, supplies, and postage (if mailed) will be charged for paper copies when requested by the patient or legal guardian.

The above fees do not apply for records requested for Worker’s Compensation, Disability Determination Services or by third parties.

Call 252-752-6101 and ask to speak to a release of information representative if you have any questions.