



Junction City: 707 Greenwood St. 541-998-6454
Eugene: 1400 Valley River Drive, Ste 220. 541-342-2201
www.oregoneyedocs.com

Patient's name: _____

Today's date: ___/___/_____

Authorization to Disclose Health Information to Family Members and Friends

___ I **decline** the release of health information to any individuals at this time

___ I **authorize** the release of health information to the individuals listed below

Name	Relationship	Medical Information	Billing Information	Make/Cancel Appointments	Pick up/Place orders

HIPAA Privacy Policy

HIPAA Privacy Policy Acknowledgement: I acknowledge that I was offered a copy of Oregon Eye Doc's, LLC, notice of privacy practices.

Signature: _____ Date: ___/___/_____