

Drs. James & Enyart Optometrists, S.C.

Your Vision Source Headquarters

Oregon Clinic
185 W. Netherwood St.
Oregon, WI 53575
P: (608) 835-3579
F: (608) 400-0290

Monona Clinic
700 River Place
Madison, WI 53716
P: (608) 223-0202
F: (608) 440-8220

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jamesandenyart@gmail.com

Authorization to Release Protected Health Information

I authorize the use and/or release of my protected health information as described below. I may refuse to sign this authorization, which will not result in my inability to obtain treatment. I have the right to revoke this authorization by providing written notice to Drs. James & Enyart, Optometrists, S.C. Revocation of this authorization will not disrupt any action prior to the receipt of written notice of revocation.

Name of Patient

____/____/____
Date of Birth

Address, City, State, Zip Code

Patient has authorized the release of protected health information as follows:

From / To

(circle one)

Drs. James & Enyart Optometrists

Oregon Clinic

P: 608-835-3579

F: 608-400-0290

Drs. James & Enyart Optometrists

Monona Clinic

P: 608-223-0202

F: 608-440-8220

From / To

(circle one)

Name of Facility: _____

Provider Name: _____

Street Address: _____

Phone Number: _____

Fax Number: _____

This Authorization will expire one (1) year from the signed date below unless otherwise specified here: ____/____/____

[MM/DD/YYYY]

Signature _____ Date _____

Disclaimer:

IMPORTANT: This facsimile transmission contains confidential information, some or all of which may be protected health information as defined by the federal Health Insurance Portability & Accountability Act (HIPAA) Privacy Rule. This transmission is intended for the exclusive use of the individual or entity to whom it is addressed and may contain information that is proprietary, privileged, confidential and/or exempt from disclosure under applicable law. If you are not the intended recipient (or an employee or agent responsible for delivering this facsimile transmission to the intended recipient), you are hereby notified that any disclosure, dissemination, distribution or copying of this information is strictly prohibited and may be subject to legal restriction or sanction. Please notify the sender by telephone (number listed above) to arrange the return or destruction of the information and all copies.