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Pinellas Branch Office  
 501 Dr. Martin Luther King Jr. Street South  
 St. Petersburg, Florida 33705  
 Phone: (727) 822-7344 • Fax: (727) 497-0445

Serving: St. Joseph's Children's Hospital

Serving: All Children's Hospital

**Thiru S. Arasu, M.D., Medical Director \* Rosa J. Cuenca, M.D.**

*Kristin Phillips, A.R.N.P. \* Jennifer Thayer, A.R.N.P. \* Jennifer Millett, A.R.N.P. \* Julianna Osborne, A.R.N.P. \* Ellen Carson, A.R.N.P.*

**AUTHORIZATION FOR RELEASE OF MEDICAL INFORMATION**

I, \_\_\_\_\_ Parent of: \_\_\_\_\_

(Parent's name)

D.O.B. \_\_\_\_\_ LAST FOUR OF SS# \_\_\_\_\_

GIVE: \_\_\_\_\_

AUTHORIZATION TO RELEASE CONFIDENTIAL INFORMATION REGARDING  
 MY MEDICAL STATUS TO:

\_\_\_\_\_  
 (Name)

\_\_\_\_\_  
 (Address) \_\_\_\_\_ (Phone)

THE FOLLOWING TYPES OF INFORMATION ARE SPECIALLY AUTHORIZED  
 FOR RELEASED:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**EXPIRATION DATE OF THIS AUTHORIZATION:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_  
 (Patient's signature) \_\_\_\_\_ (Date)

\_\_\_\_\_  
 (Witness signature) \_\_\_\_\_ (Date)

Our Notice of Privacy Practices provides information about our use of a patient's protected health information (PHI). The notice contains a Patient Rights section describing your rights under the law. Patients have the right to access, inspect, and copy protected health care information used to make decisions about them.