



RIVERSIDE - SAN BERNARDINO COUNTY INDIAN HEALTH, INC.

Patient Request for Health Information

Patient Information (Please Print)

First Name:	Middle Initial:	Last Name:	
Name at Time of Treatment (if different than above):			
Date of Birth (MM/DD/YYYY):	Phone:	E-mail:	
Street Address:	City:	State:	Zip:

What records are you requesting? (Check appropriate boxes below):

- Medical Dental Eye Care BHS (Use BHS Form)
 Alcohol & Substance Use (Use BHS Form) Other Specify: _____
and includes: (Check as appropriate)

- Most Recent Visit
— Procedure Report
— X-Ray Film Report Please Circle
— Mammo U/S X-Ray ABI
— Laboratory Results
— Immunization Records

- Covid Vaccine Records
— Medication Lists
— AIDS, HIV, STD's Test and Results
— Pregnancy & Contraceptive Records
— Billing Records
— Other Specify: _____

Date(s) of Service: ____/____/____ through ____/____/____ OR
All my medical records

How would you like your records delivered? (Paper and U.S. Mail is default if not marked)

- Electronic (Email encrypted - secure format), Email (unsecure format, i.e., Gmail, Yahoo), CD secure format, Flash drive - secure format, or via Patient Portal

Other, Please specify: _____

- U.S Mail In-Person Pickup Personal Representative

Where do you want the information sent? (Fill in boxes below)

RSBCIHI should provide my records to: Self Personal Representative

Recipient or Personal Representative Name:	Telephone:
Mailing Address:	E-mail:

Please print your name and sign below:

Name of Patient or Personal Representative (please print)	
Signature: Patient or Personal Representative	Date and Time:
Indicate Legal Authority (if signed by other than patient)	
(For Office Use Only)	
Please return completed form to:	E-mail: HIM@rsbcihi.org
	Fax: Add HIM clerk eFax#
	HR#: _____
	Date Received : ____ / ____ / ____
	Date Records Sent: ____ / ____ / ____
Print Full Name of Person Approving Form and Department:	

RSBCIHI recognizes a patient's right under HIPAA to access copies of his/her health information. There may be charges associated with processing a request and producing requested records.