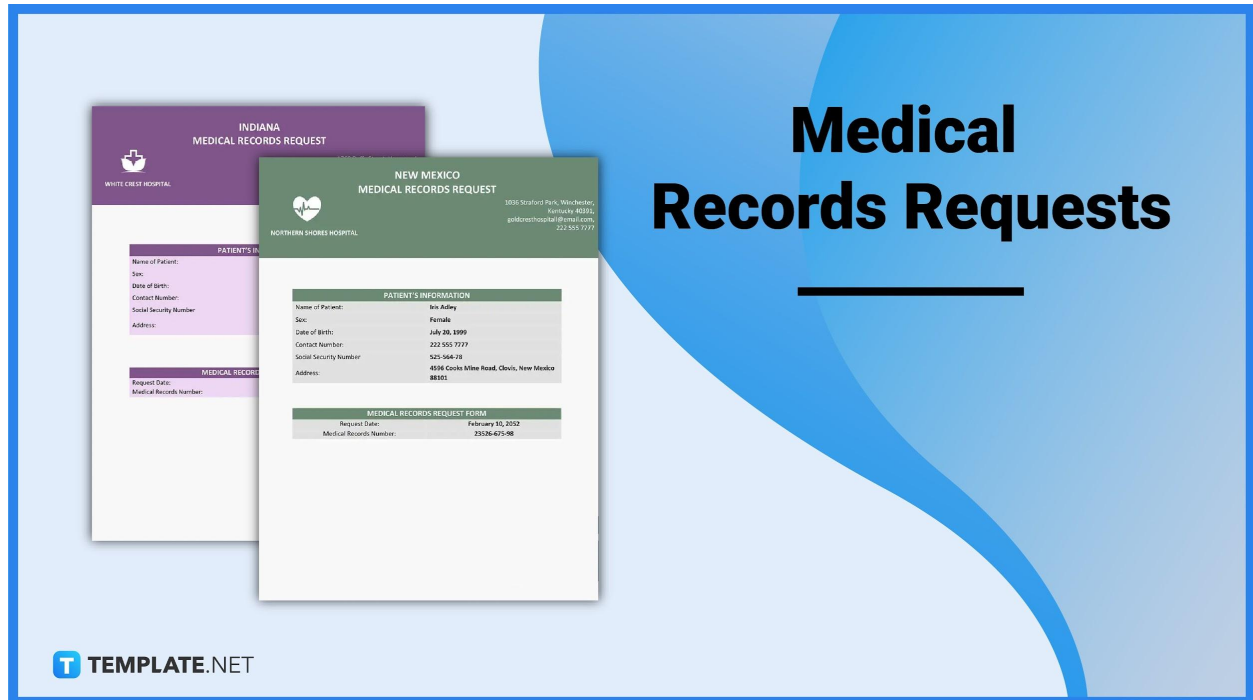


# Medical Records Requests

Medical records requests are important documents that are used for several reasons. These are often requested from a health care provider since documents such as medical records contain sensitive and confidential information.



## Medical Records Request Definition & Meaning

A medical records request is a letter or form which is written and filed to obtain medical copies for the sender or in behalf of the patient.

It is essential that a letter is written beforehand to ensure proper documentation and to verify and record information from the person who is requesting this document.

## What are Medical Records Requests?

First, a medical record is a detailed and comprehensive list of a patient's medical details, findings and results. This document is highly confidential, thus obtaining a copy must be properly documented. To do so, medical records request form or letter is written to obtain this document and a valid reason(s) must be accurately written down to determine if the record is worth releasing.

# 10 Types of Medical Records Request

## Alabama Medical Records Request

In the state of Alabama in the US, there are certain terms one must follow to obtain a medical record. One of which is an [Alabama medical records request](#) form. It should be noted that in this state, medical records shall be retained in their original or legally reproduced form for a period of at least five years, thus you are able to request this document within the given period.

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# ALABAMA MEDICAL RECORDS REQUEST



## ALABAMA MEDICAL RECORDS REQUEST

February 10, 2051

Nathan Raymond  
Medical Records Department  
West River Medica Hospital  
4507 Bedford Street, Birmingham  
Alabama, 35203

Dear Mr. **Nathan Raymond**:

I am writing this formal request for the issuance and release of my medical records. I was in your hospital receiving treatment for pneumonia from January 20, 2050, to January 28, 2050. I would like to request for all of my medical records be mailed to me. Please include all charts, laboratory results, imaging, doctor's notes, and prescriptions.

I am also requesting for my medical records to be sent to me through this email address [alexander.magnus@email.com](mailto:alexander.magnus@email.com), as well as a physical or hard copy of all the records. Include this letter in a self-addressed envelope for your use.

Sincerely,

Alexander Magnus

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## Hawaii Medical Records Request

The US state of Hawaii would also require a [Hawaii medical records request](#) whenever a patient or an authorized person is in need of medical records document. To start, you can call to ask for more information or fax your request to a given health provider. Make sure you understand what is required to be written down on the form or letter.

# HAWAII MEDICAL RECORDS REQUEST



EAST VALLEY HOSPITAL

3072 Randall Drive, Kohala,  
Hawaii 96755  
eastvalleyhospital@email.com,  
222 555 7777

## PATIENT'S INFORMATION

Name of Patient:	Austin Bennett
Sex:	Male
Date of Birth:	January 10, 2050
Contact Number:	222 555 7777
Social Security Number	575-435-13
Address:	4237 Indiana Avenue, Honolulu, Hawaii 96814

## MEDICAL RECORDS REQUEST FORM

Request Date:	November 20, 2070
Medical Records Number:	3245-56-1

- Editable | Printable
- Instant Download



## **Delaware Medical Records Request**

For those in Delaware, USA to obtain a medical record for personal or business purposes you must first double-check with the hospital or your local health provider for the requirements. Aside from a [Delaware medical records request](#) form, certain fees may apply when requesting the said document. It should be also noted that after 7 years, any patient or medical records that have not been procured may be permanently disposed of.



## DELAWARE MEDICAL RECORDS REQUEST

### Carson Medical Center

4219 School Street, New Haven, Connecticut 06510  
carson@.com | 222 555 7777

#### MEDICAL RECORDS REQUEST FORM

Request Date:	July 10, 2070
Medical Records Number:	35216-4627

#### PATIENT'S INFORMATION

Name of Patient:	Sophia Browne
Sex:	Female
Date of Birth:	February 26, 2050
Contact Number:	222 555 7777
Social Security Number	221-8564-43
Address:	4091 Maud Street, Dover, Delaware 19901

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## California Medical Records Request

In the state of California, patients have the right to see and receive copies of their medical records. Thus, a [California medical records request](#) is needed in order to release the said document. If the patient is a minor or is unable to write down the request, authorization and consent are given to the legal guardian or representative.



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# CALIFORNIA MEDICAL RECORDS REQUEST

**CALIFORNIA  
MEDICAL RECORDS REQUEST**



ST. MICHAEL MEDICAL HOSPITAL

1909 Felosa Drive, Los Angeles,  
California 90017,  
stmichael@hospital.com  
222 555 7777

PATIENT'S INFORMATION	
Name of Patient:	Tristan Morgan
Sex:	Female
Date of Birth:	March 15, 2030
Contact Number:	222 555 7777
Social Security Number	545-546-63
Address:	2818 Emily Renzelli Boulevard, Monterey, California 95940

MEDICAL RECORDS REQUEST FORM	
Request Date:	May 10, 2051
Medical Records Number:	1452-4521

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## Georgia Medical Records Request

When you need to obtain medical records in the state of Georgia, you too will need a [Georgia medical records request](#) form or letter. Aside from the request you will be providing the physician, you will need to include a signed released form and pay certain fees. Make sure to double-check if other requirements are needed aside from the request letter.

# GEORGIA MEDICAL RECORDS REQUEST



LOGAN MEDICAL HOSPITAL

4275 Holly Street, Athens,  
Georgia 30601,  
loganmedicalhospital@email.com,  
222 555 7777

## PATIENT'S INFORMATION

Name of Patient:	Jordan Colton
Sex:	Female
Date of Birth:	January 10, 2050
Contact Number:	222 555 7777
Social Security Number:	252-530-12
Address:	278 Neuport Lane, Griffin, Georgia 3022

## MEDICAL RECORDS REQUEST FORM

Request Date:	December 30, 2070
Medical Records Number:	324-32-8

- Editable | Printable
- Instant Download



## Florida Medical Records Request

A [Florida medical records request](#) is a letter or a form you need to fill up so a medical provider could legally release your medical records and files if you are residing or were admitted to a hospital in Florida. Just take note that each state has its own set of rules and requirements when releasing this kind of document. So you may be required to include other attachments and fill up certain details that are essential.

EDITABLE | PRINTABLE

# FLORIDA MEDICAL RECORDS REQUEST

FLORIDA MEDICAL RECORDS REQUEST	
 FAIRVIEW CANCER CENTER	3554 Barnes Street, Winter Park, Florida 32789, fairviewcancercenter@email.com, 222 555 7777
<b>PATIENT'S INFORMATION</b>	
Name of Patient:	Isabelle Morganstern
Sex:	Female
Date of Birth:	February 26, 2050
Contact Number:	222 555 7777
Social Security Number	267-323-09
Address:	839 Tetrick Road, Fort Myers, Florida 33901
<b>MEDICAL RECORDS REQUEST FORM</b>	
Request Date:	February 10, 2070
Medical Records Number:	2134-3122

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## Idaho Medical Records Request

If you need a medical record in the state of Idaho, then double-check the requirements from your health provider. Some hospitals or clinics may or may not require fees to be paid. But it is a must to fill up an [Idaho medical records request](#) form.



SAFESIDE HOSPITAL

## IDAHO MEDICAL RECORDS REQUEST

1071 Science Center Drive,  
Coeur D Alene, Idaho 83814,  
safesidehospital@email.com,  
222 555 7777

### PATIENT'S INFORMATION

Name of Patient:	Simon Raphael
Sex:	Male
Date of Birth:	February 10, 2050
Contact Number:	222 555 7777
Social Security Number	518-534-06
Address:	2211 Maple Avenue, Grangeville, Idaho 83530

### MEDICAL RECORDS REQUEST FORM

Request Date:	October 30, 2070
Medical Records Number:	32516-4536-32

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## **Kentucky Medical Records Request**

To make sure you know what sort of requirements are needed, give your medical provider a call or an email. In the state of Kentucky, it's most likely that you will need to provide a [Kentucky medical records request](#) form so the hospital or clinic would release these health records. Also, take note that the law requires contains certain criteria included on this form.



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# KENTUCKY MEDICAL RECORDS REQUEST

KENTUCKY MEDICAL RECORDS REQUEST	
	1036 Straford Park, Winchester, Kentucky 40391, goldcresthospital@email.com, 222.555.7777
<b>GOLD CREST HOSPITAL</b>	
PATIENT'S INFORMATION	
Name of Patient:	Zachary Calvin
Sex:	Male
Date of Birth:	August 10, 2050
Contact Number:	222 555 7777
Social Security Number	400-439-054
Address:	1620 Straford Park, Lexington, Kentucky 40507
MEDICAL RECORDS REQUEST FORM	
Request Date:	May 30, 2070
Medical Records Number:	546-571-98

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## Illinois Medical Records Request

An [Illinois medical records request](#) letter or form is needed by patients or authorized persons to obtain medical files and data. You may do it online and the records are delivered straight to your doorstep or emailed for convenience. Just make sure you fill-up the form properly to not cause further misunderstandings or delays.

EDITABLE | PRINTABLE

# ILLINOIS MEDICAL RECORDS REQUEST

ILLINOIS MEDICAL RECORDS REQUEST	
	434 Dingamon Branch Road, Chicago, Illinois 60606, gracewillowhospital@email.com, 222 555 7777
GRACE WILLOW HOSPITAL	
PATIENT'S INFORMATION	
Name of Patient:	Micah Dominic
Sex:	Male
Date of Birth:	March 10, 2050
Contact Number:	222 555 7777
Social Security Number:	318-234-87
Address:	1199 College View, Centralia, Illinois 62801
MEDICAL RECORDS REQUEST FORM	
Request Date:	September 30, 2070
Medical Records Number:	5463-0876

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## Missouri Medical Records Request

Like most states in the US, you will need a [Missouri records request](#) letter or form to obtain a medical record. It is important that you properly fill up the form or write down the letter so the record would be released within a reasonable time. Also, make sure to double-check if you need to pay certain fees or attach other documents aside from the request form.

EDITABLE | PRINTABLE

# MISSOURI MEDICAL RECORDS REQUEST



## MISSOURI MEDICAL RECORDS REQUEST

June 10, 2051

Fairchild Hospital  
Medical Records Department  
2576 Penn Street, Jefferson City,  
Missouri 65101

To Whom It May Concern:

I am sending you this letter to officially make a request for copies of my medical records to be furnished to me. Please send me copies of my Laboratory Results, Special Imaging Results, and Doctor's Prescriptions during my stay from April 24, 2051, up to April 30, 2051, for COVID-19.

Please use the self-addressed envelope I have enclosed with this letter to send my documents to me at my home address. Please contact me at 222 555 7777 should you have any questions.

Sincerely,

**Timothy Aspen**

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# **Medical Records Request Uses, Purposes, Importance**

A medical records request is an important document required by a number of health institutions and practitioners. It is standard practice to prepare such a document since this would also allow the patient to authorize somebody else on their behalf to access their medical and health records. This request also serves as a reference or proof that the patient or someone else has legally sought the records.

## **Standard Practice**

Requesting something as confidential as medical records isn't easily released to a 3rd party or sometimes even if the patient themselves asked for an additional copy. It is standard practice or procedure to forward a written request for formality. And to ensure the receiving party has the correct information they need.

## **Reference**

Medical records request form or letter, whichever is required from the hospital or doctor would need this document as a reference. Medical records are not readily released to just anyone else for that without formality. Thus a request form or letter is needed to serve as reference or proof that someone, in particular, has been given authority to obtain the records.

## **Level of Confidentiality**

It is also important to note that not just anyone else is able to obtain medical records. Given its level of confidentiality, releasing one to the public or just anyone requires a medical records request. Even if it should be used for an investigation of some sort, the requester should be able to completely indicate what exact information they need so the receiving party such as the doctor will know what data to release.

## **Patient's Right**

Requesting a copy of their medical records is a patient's right. With a medical records request form, patients are able to obtain a copy of their health records and even make corrections if there is a need to do so. However, it is also important to double-check in

advance what other requirements are needed aside from the request form to ensure that the request is not denied.

## **Correction and Verification**

As mentioned, a medical records request would help hospitals and clinics double-check and verify their records. Discrepancies cannot be avoided, thus a request will help institutions reconcile their records. With that, they are able to make corrections as well.

## **What's In A Medical Records Request? Parts?**

### **Logo**

If you are writing a letter or completing a medical record request form, then the doctor's or hospital's logo can be found in the middle section of the document.

### **Date**

It is also important to write the correct date on the letter/form.

### **Addressee**

Another essential part of the form or letter is the name(s) to whom the request is addressed to. This can be the doctor's or hospital's name and don't forget to include the address as well.

### **Body of the Letter/Form**

When writing the letter or completing the form, you will need to include all important details such as the name of the patient, the address, contact details, date of birth and other important personal details and more importantly the reason for the request. If there are other documents needed, make sure to include this as well so the reader is aware of any attachments.

# Medical Records Requests Anatomy

Logo



NORTHERN SHORES HOSPITAL

## NEW MEXICO MEDICAL RECORDS REQUEST

1038 Stratford Park, Winchester,  
Kentucky 40391  
gr@ncshospital@gmail.com  
222 555 7777

Addresses

Body of the  
Letter/Form

PATIENT'S INFORMATION	
Name of Patient:	Iris Adley
Sex:	Female
Date of Birth:	July 20, 1999
Contact Number:	222 555 7777
Social Security Number:	525-664-78
Address:	496 Cooks Mine Road, Clovis, New Mexico 88101

Date

MEDICAL RECORDS REQUEST FORM	
Request Date:	February 10, 2052
Medical Records Number:	25326-675-98



# How To Design Medical Records Request?

1. Choose a [Medical Records Request Size](#).
2. Decide on the purpose of the medical records request form/letter.
3. Select a [Medical Records Request template](#).
4. Customize the template and add all the necessary details.
5. Add a logo, if applicable.
6. Finalize and download.

# How To Design Medical Records Request?

---

STEP  
**01**

Choose a Medical Records Request Size.

Decide on the purpose of the medical records request form/letter.

STEP  
**02**

STEP  
**03**

Select a Medical Records Request template.

Customize the template and add all the necessary details.

STEP  
**04**

STEP  
**05**

Add a logo, if applicable.

Finalize and download.

STEP  
**06**

## Records Request Vs. Incident Report

A medical records request is a document that requests copies of a patient's health record.

An incident report is a detailed account of an unusual event or activity that may or may not involve someone else.

## **What's The Difference Between Medical Records Request, Authorization, and Consent Forms?**

Medical records request is an electronic or written document that is requesting a copy of a patient's medical records.

An authorization is a letter that authorizes the person whose name appears in the document to perform a certain task or specific requirements on behalf of someone else.

Consent forms also authorize the person whose name appears on the document, however, it is more of a voluntary agreement or permission.

## **Medical Records Request Sizes**

Formal documents such as request letters or forms are required to use paper standard paper sizes. These are the following medical records request sizes you can choose from.

- Letter Size: 8.5 × 11 inches
- Legal: 8.5 × 14 inches
- A4 Size: 8.3 × 11.7 inches

# Medical Records Request Sizes

TYPE OF DOCUMENT	SIZES
Letter Size	8.5 x 11 inches
Legal	8.5 × 14 inches
A4 Size	8.3 × 11.7 inches

## Medical Records Request Ideas & Examples

Different states, cities and even medical institutions have their own set of requirements and formats when requesting medical records. There are several [medical records request ideas](#) and examples to help you understand further how this document is created and completed.

- Medical Records Request Ideas and Examples
- Michigan Medical Records Request Ideas and Examples
- Nevada Medical Records Request Ideas and Examples
- Ohio Medical Records Request Ideas and Examples
- Rhode Island Medical Records Request Ideas and Examples
- Pennsylvania Medical Records Request Ideas and Examples
- Oregon Medical Records Request Ideas and Examples
- Virginia Medical Records Request Ideas and Examples

- Texas Medical Records Request Ideas and Examples
- Wisconsin Medical Records Request Ideas and Examples
- Utah Medical Records Request Ideas and Examples

## **FAQs**

### **What should be included in a Medical Records Request?**

The date of the request, reason for the request, patient's name and other personal information, and to whom the request is addressed to.

### **Who owns the information in the medical record?**

The patient owns the information written in the medical record.

### **What is found in a patient's medical record?**

You may find the patient's medical charts, doctor's diagnoses, lab data, patient's progress, imaging reports, immunization data, allergies, and medical history.

### **Are emails part of a medical record?**

If the physician has sent the patient's diagnosis or reports via email, then yes it should be included in the medical record.

### **What are the sections found inside the Medical Records Request?**

You will be able to find the health provider's name, the patient's personal information, the reason for the request and the date of the request.

## **What happens when a medical record is incomplete?**

An incomplete medical record reflects the incompetence of the physician and the health institution and it might result to legal consequences and loss of practice revenue.

## **What is a deficient medical record?**

This is when the doctor or the hospital fails to complete the medical records and insufficient data are being provided.

## **How long does a physician need to retain medical records?**

Retention of medical records depends on the hospital or the doctor, however, the usual duration is from 6-10 years.

## **What should be done if a patient's medical record request is withheld?**

If a doctor or hospital refuses to release a patient's medical/health records then legal action should be taken against those involved since the patient has the right to demand all communication and information pertaining to their records.

## **What can you do if you lose your medical records?**

If you have lost your medical records, then you can always request another copy from the hospital, clinic or doctor provided it is still kept in their files.