



NEWPORT BEACH  
PEDIATRIC  
PULMONOLOGY

**Over 18 HIPAA Release and Authorization Form**

I understand and acknowledge that as of my 18th birthday, my parents and/or guardians will no longer be permitted access to my medical records, information, providers, or inquire about appointment status without my specific written permission. Newport Beach Pediatric Pulmonology will not release medical information to my parents without my written authorization in accordance with this document.

- I DO NOT grant any access to my parents and/or guardians. No medical information, records or appointment status information can be discussed or released.
- I WISH TO grant my parents and/or guardian access to my healthcare providers and/or medical information as follows:

\_\_\_\_\_  
(Print Name of the parent or guardian; indicate his/her relationship to you.)

\_\_\_\_\_  
(Print Name of the second parent or guardian; indicate his/her relationship to you.)

- I give the above-named individual(s) permission to act on my behalf with no limitations. I understand that they may contact any provider or staff member to discuss my healthcare, and access my complete medical records. THEY HAVE NO RESTRICTIONS.
- I give the above-named individual(s) permission to request refills and pick up my prescriptions.
- I give the above-named individual(s) permission to access my chart in the patient portal.

Print Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Patient Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Patient Phone Number: \_\_\_\_\_

I acknowledge that I have received the Notice of Privacy Practices (Initials): \_\_\_\_\_

This authorization is valid for one year from the date signed. I understand that I can withdraw consent at any time by providing Newport Beach Pediatric Pulmonology with written notice indicating the changes in access. I understand that authorizing this disclosure of this health information is voluntary.

I need not sign this form to assure healthcare or treatment. I understand that once the above information is disclosed it may be re-disclosed by the recipient and may no longer be protected by federal or state privacy regulations.