

THE UNIVERSITY OF TEXAS AT AUSTIN
UNIVERSITY HEALTH SERVICES

Authorization to Disclose Social Security Number Contained in Medical Records

Medical Records May Contain Your Social Security Number

Please be aware that due to archiving limitations, your medical records generated prior to January 2005 likely contain your social security number, and that this information will therefore necessarily be disclosed to the entity to which you are releasing your medical information.

No statute or authority requires that you disclose your SSN to the below mentioned entity but failure to authorize release of your SSN will render us unable to release your medical records to that entity.

If you wish to not release your SSN in your medical records, you will need to make arrangements with UHS staff so that you can redact this information yourself.

I authorize University Health Services to disclose my Social Security Number to:

NAME / ORGANIZATION

ADDRESS

CITY STATE ZIP CODE

PHONE

FAX

PATIENT LAST NAME (PLEASE PRINT) FIRST NAME (PLEASE PRINT)

SIGNATURE OF PATIENT (OR IF LEGAL REPRESENTATIVE-STATE AUTHORITY TO ACT)

DATE