



Greater Baltimore Vitreoretinal Specialists, LLC
Christina Antonopoulos, MD, FACS
(410) 696 - 4785
hello@gbretina.com

HIPAA Privacy Authorization Form

I authorize Dr. Christina Antonopoulos of the Greater Baltimore Vitreoretinal Specialists, LLC to use and disclose my protected health information (PHI). *Note: Uses and disclosure for Treatment Records, Payment Information, and Healthcare Operations may be permitted without prior consent in an emergency.*

This authorization for release of information covers the period of healthcare from all past, present, and future periods.

This PHI may be used for medical treatment or consultation, billing or claims payment, or other purposes deemed necessary by Dr. Antonopoulos.

I understand that I have the right to revoke this authorization, in writing, at any time. I understand that a revocation is not effective to the extent that any person or entity has already acted in reliance on my authorization or if my authorization was obtained as a condition of obtaining insurance coverage and the insurer has a legal right to contest a claim.

I understand that my treatment, payment, enrollment, or eligibility for benefits will not be conditioned on whether I sign this authorization.

I understand that information used or disclosed pursuant to this authorization may be disclosed by the recipient and may no longer be protected by federal or state law.

Printed name of patient

Date of Birth

Signature of patient or authorized representative

Date