



**INSTRUCTIONS FOR REQUESTING AN AMENDMENT TO YOUR MEDICAL RECORD:**

*NOTE: All documentation dealing with your medical record amendment will be part of your medical record included in any future release of information.*

You have a right to request an amendment to your medical record if you believe the information in your chart is incorrect or incomplete. The amendment would include the information that you believe is in error, and your corrections to that information.

**FOR MEDICAL INFORMATION:**

To request an amendment to your medical information, please complete the form above. You can fax, mail, or you can submit it in person at Metro Health Hospital's Health Information Management (HIM) department (Medical Records). HIM is open M-F 8am-4:30pm.

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**DEMOGRAPHIC (name, date of birth, address, phone number, etc.) CHANGES:**

See the Metro Health Hospital webpage: [www.metrohealth.net](http://www.metrohealth.net). Click on "Contact Us" and use the arrow to view drop down options. Click on "Update Personal Info." You can also visit any Registration areas as well.

**When and how you will hear from us:** *A letter will be mailed to you within sixty (60) days.*

**\*Internal Use Only\***

If you receive this form make sure to send a copy to the Information Security and Privacy Department for documentation purposes.