

To request an ambulance run report, first call 682-7177 to verify the transporting agency.
If the agency was Eugene Fire & EMS, please complete the form below and bring it in person
to the Fire & EMS Department, 1705 West 2nd Avenue.



Eugene Fire & EMS
EMS Billing Office
1705 W 2nd Ave.
(541) 682-7177



Patient Request for PHI Access

Patient Name: _____ **Date of Request** _____

Mailing Address: _____

Phone Number: _____ **Date of Service** _____

Social Security Number: _____

Patients Rights: As a patient, you have the right to access, copy or inspect your Protected Health Information, or PHI, in accordance with Federal law. You may also have the right to request an amendment to your PHI, or request that we restrict the use and disclosure of it. These rights are further described in our Notice of Privacy Practices and in other policies which you may have upon request.

To better serve you in processing your request, please indicate the type of request you are making:
(Check all that apply)

- _____ Access to simply review my health information.
- _____ Access to obtain copies of my health information.
- _____ Access to review and potentially request amendment of my health information.
- _____ Access to review and potentially request an accounting of how my PHI has been used and disclosed.
- _____ Access to review and potentially request restrictions on the use and disclosure of my health information.

Patient or legal representative Signature: _____ **Date:** _____

Signature Verified By Valid Drivers License or ID _____

Notary is required if you cannot present your identification in person when report is released.

For Office Use Only:

Information Reviewed and Approved: _____ **Disapproved:** _____

Staff Signature: _____ **Date:** _____