



Instructions to Request Medical Files

Please follow the steps below in order to receive your medical file:

1. All requests for medical records (Quick Contact request at www.veritrust.net, phone, mail, and fax) require completion of Patient Authorization for Release of Medical Records Form
2. Fill out the Release form and mail the **ORIGINAL**, along with a copy of a valid government issued photo ID to:

VeriTrust
PO Box 22737
Houston, TX 77227

3. Once the signed form is received, you will be provided with a secure link where you will be able to purchase and download your medical file.
4. Those requests involving image CD records, will be provided with an alternate link to pay for the file and shipping. Receipt will be made via 3rd party (Fedex or other) carrier.
5. Please allow 7-10 days for processing from when we receive your Release to your delivery/download. Rush requests will be handled on a case by case basis.

If you have any questions, you may contact us at (713) 263.9000 or at medicalrecords@veritrust.net