ROUND ROCK CARDIOLOGY

16010 PARK VALLEY DRIVE, SUITE 200

ROUND ROCK, TEXAS 78681

Health Information Exchange & Medication History Authorization

Our clinic participates in secure national health information exchange networks, including the CommonWell Health Alliance and Carequality. Through these networks, we may electronically share and access your medical information for treatment, payment, and healthcare operations, as permitted by law, to help coordinate your care, avoid duplicate testing, and improve patient safety.

We may also obtain and review your external medication history through secure electronic prescribing systems and pharmacy networks. This may include prescription information from pharmacies, pharmacy benefit managers, and other healthcare providers involved in your care. This information is used to verify current and past medications, prevent drug interactions, and ensure safe treatment.

All information is transmitted securely and accessed only by authorized healthcare professionals involved in your care.

I acknowledge that I have been informed of the clinic's participation in health information exchange and authorize the retrieval of my external medication history for treatment purposes. I understand I may request additional information or revoke this authorization in writing at any time, except to the extent action has already been taken.

Patient Name: _____

Signature: _____ Date: _____