

## Sample Request Letter 6

### RELEASE OF EMPLOYEE MEDICAL INFORMATION TO THE UNION TO EMPLOYER FROM EMPLOYEE OR FORMER EMPLOYEE

Date:

Employer Official  
Employer  
Address

RE: Employee Medical Records

Dear (*employer representative*),

Using my rights under OSHA/NJPEOSH standard 1910.1020 (1926.33 for construction industry), Access to Employee Exposure and Medical Records, I (*name of employee or former employee*) hereby authorize (*name of employer*) to release to (*name of authorized union or physician*) the following medical information from my personal medical records maintained by the employer or its contractors or consultants, including but not limited to:

1. Medical and employment questionnaires and histories.
2. The results of medical examinations and laboratory tests.
3. Medical opinions, diagnoses, progress notes, and recommendations.
4. First aid records.
5. Descriptions of treatments and prescriptions.
6. Employee medical complaints.

I give my permission for this medical information to be used for the following purpose(s): (*describe the approved use of these records, for example, diagnosing, treating and compensating occupational disease or analysis of workplace hazards*), but I do not give my permission for any other use or re-disclosure of this information.

Sincerely,

Name/ Signature (*Employee or former employee*)

Date of signature