

**Patient Fee Schedule  
for Release of Medical Records**

The following fees apply according to Ohio Department of Health (ODH) for record requests made by the patient or the patient's personal representative:

Photocopies	\$3.18 per page for the first 10 pages \$0.66 per page for pages 11-50 \$0.27 per page for pages numbering 51 and greater
Data other than paper (x-rays, CD's, etc.)	Maximum charge is \$2.18 per page
Preparing and burning a CD	\$15.00 each in addition to the per page cost
Postage	Postage will be billed at actual costs for mailing

\* Please do not send cash \*

\* We do not accept credit cards \*

Please make your check or money order payable to:

**ACUITY SPECIALTY HOSPITAL OF OHIO VALLEY**

Please mail check to: **Health Information Management Director - ROI  
Acuity Specialty Hospital of Ohio Valley at Belmont  
4697 Harrison Street – 2<sup>nd</sup> Floor  
Bellaire, OH 43906**