

## Biometric Screening Release of Data Form

Orlando Health team members must have labs completed within the timeframe of December 1, 2016 - November 1, 2017. This form will not be accepted if incomplete. Patient portal lab results must be attached along with this form to be considered eligible for the medical premium discount.

**The labs must include the required metrics below:**

- Blood Pressure (under 140/90); (under 150/90 for 65 and older)
- BMI (24.9 and under)
- Total Cholesterol (under 200)
- Triglycerides (under 150)
- HbA1c – blood sugar (under 6.5)

**EMAIL completed form to: [R-Biometrics@orlandohealth.com](mailto:R-Biometrics@orlandohealth.com) or FAX to: 321.843.6346  
NO LATER THAN November 17, 2017.**

**Please complete all of the information below. Print clearly. Include portal results along with this form.**

<b>Team Member ID:</b>	<b>First Name:</b>	<b>Last Name:</b>
<b>Date of Birth:</b>	<b>Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Location of Employment (ex. Health Central):</b>

**I am an Orlando Health team member and by sending this document, I am authorizing Healthchoice access to my medical lab results for the sole purpose of obtaining medical information to complete my biometric screening.**

**Date of Annual Physical/Wellness Visit:** \_\_\_\_\_

**Medical Provider's Name:** \_\_\_\_\_ **Practice Name:** \_\_\_\_\_

**Team Member's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

If you have forgotten your Patient Portal password or cannot access your labs, please contact the Patient Portal Support Team at 321.843.7759.

If you have any further questions regarding this form, please contact [R-Biometrics@orlandohealth.com](mailto:R-Biometrics@orlandohealth.com) or call Katerina Sideri at 407.481.7162.