



Cynthia Crabtree
Weston County Coroner
1 West Main
Newcastle, Wyoming 82701

To: Fax #:
Location:
Completed:

Wyoming Statute: 7-4-201 (b) When the coroner is notified that the dead body of any person has been found within the limits of the county or that death resulted from injury sustained within the county and he suspects that the death is a coroner's case, he shall conduct an investigation which may include:

- (i) An examination of the body and an investigation into the medical history of the case;
- (ii) The appointment of a qualified physician to assist in determining the cause of death;
- (iii) An autopsy if the physician appointed to assist the coroner under this subsection determines an autopsy is necessary;
- (iv) An inquest; or
- (v) Any other reasonable procedure which may be necessary to determine the cause of death.

Request For Medical Records:

Wyoming Statute: 7-4-201. Reports of Death; Investigation; Summoning of Jurors; Fees and Costs; Inspection of Medical Records.

(f) Notwithstanding any other provision of law to the contrary, the coroner may inspect medical and psychological data relating to the person whose death is being investigate if the coroner determines the information is relevant and necessary to the investigation.

And

The Health Insurance Portability and Accountability Act of 1996 (HIPAA). [Code of Federal Regulations] [Title 45, Volume 1] [CITE: 45CFR164.512] Subpart E--Privacy of Individually Identifiable Health Information

Sec. 164.512 Uses and disclosures for which an authorization or opportunity to agree or object is not required.

(g) Standard: Uses and disclosures about decedents. (1) Coroners and medical examiners. A covered entity may disclose protected health information to a coroner or medical examiner for the purpose of identifying a deceased person, determining a cause of death, or other duties as authorized by law.

Pursuant to W.S. 7-4-201 (b) & (f), and 45 CFR 164-512(g)(1), The Weston County Coroner is requested all Medical Records pertaining to the death of:

Name: _____

DOB: _____

DOD: _____

Date: _____

Weston County Coroner

NOTE: IF RECORD IS MORE THAN 20 PAGES IN LENGTH, PLEASE MAIL, EMAIL, OR PROVIDE DIGITAL COPY --

DO NOT FAX EXTENSIVE RECORDS