

## NOTICE TO INDIVIDUAL<sup>i</sup>

The attached document means that:

\_\_\_\_\_  
Name of party requesting or causing issuance of the subpoena

has either asked the court or administrative agency to issue a subpoena or a subpoena has been issued by the other party's attorney to your doctor, other health care providers or other health care entity:

\_\_\_\_\_  
Name of doctor, other health care providers or other health care entity

Your doctor, other health care provider or other health care entity is required to respond by providing a copy of your health records.

If you believe your health records should not be disclosed and object to their disclosure, you have the right to file a motion with the clerk of the court or the administrative agency to quash the subpoena. If you elect to file a motion to quash, such motion must be filed within 15 days of the date of the request or of the attorney-issued subpoena.

You may contact the clerk's office or the administrative agency to determine the requirements that must be satisfied when filing a motion to quash and you may elect to contact an attorney to represent your interest. If you elect to file a motion to quash, you must notify your doctor, other health care provider(s), or other health care entity, that you are filing the motion so that the health care provider or health care entity knows to send the health records to the clerk of court or administrative agency in a sealed envelope or package for safekeeping while your motion is decided.

The final day to file a motion to quash (object to) the subpoena *duces tecum* with the court or administrative agency is: \_\_\_\_\_.  
Date

Additional Information (optional):

<sup>i</sup> Va. Code § [32.1-127.1:03](#)