Step 1: Log Into KP.org

Head to KP.org and sign into your account. Once you're logged in, look at the top navigation bar. Click on 'Medical Records'.

Step 2: Select "Request Records, Forms & Certifications"

A popup or dropdown will appear. Choose 'Request records, forms & certifications'.

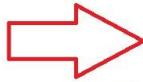## Step 3: Order Your Full Detailed Kaiser Permanente Medical Record

Scroll down to the section titled: 'Order an Electronic Copy of my DETAILED Kaiser Permanente medical record'.

Medical records

+ Immediately download certain health information.

− Order an electronic copy of my detailed Kaiser Permanente member medical records from Kaiser Permanente Georgia.

You can specify the date range, which medical records, and the party receiving the copy of your medical records. Allow 10 business days for the completion of your request. Note that Medical Office records released as part of this request may contain references related to mental health, addiction, and HIV conditions. Order an electronic copy of your detailed medical records.

+ To request the following records:

Disability certification

We can assist your physician in completing your Disability certification forms.

Website Feedback

Step 4: Fill Out the Request Form

Choose record types, specify a date range, and designate who receives the records — you or a provider.

KAISER PERMANENTE.   Language English ∨   👤 My Account ∨

Request medical records

- ● Select Request Type
- ○ Select Recipient
- ○ Review Information
- ○ Confirmation

Which type of request would you like to make?

All fields are required, except where marked as optional.

Please allow 10 business days for completion of your request

Medical Office records released as part of this request may contain references related to mental health, addiction, and HIV medical conditions.

Select the type(s) of records you want to request

○ Order an electronic copy of my general medical records from the past 2 years.

○ Order an electronic copy of specific record types (such as hospital stays or lab results) from a certain period of time.

Cancel   Continue ›

Website Feedback

Request medical records

- ✓ Select Request Type
- ✓ Select records and range
- ✓ Select Recipient
- ● Review Information
- ○ Confirmation

Review the information below

If the information does not look correct, go back to edit your responses.

Your request

Requested for

Removed for privacy

Date range requested

10/07/2024 **to** 06/06/2025

Records requested

Medical Office Records
Diagnostic Imaging Results
Laboratory/Pathology Results

Recipient information

Verify this info!

[Cancel] [‹ Back] [Submit]

- ✓ Select Request Type
- ● Select records and range
- ○ Select Recipient
- ○ Third-Party Information
- ○ Review Information
- ○ Confirmation

Choose a date range for your records ⓘ

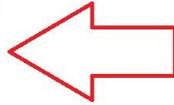All fields are required, except where marked as optional.

Start Date

[📅]

MM/DD/YYYY

End Date

[📅]

MM/DD/YYYY

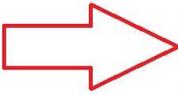You can choose one or more records. Unselected records will be excluded.

Note: Hospital and medical office records released as part of this request may contain references to mental health and addiction medical conditions.

Select the type(s) of records you want to request

You can choose one or more records. Unselected records will be excluded.

Note: Hospital and medical office records released as part of this request may contain references to mental health, addiction, and HIV medical conditions.

- ☐ Medical Office Records
- ☐ Diagnostic Imaging Results
- ☐ Laboratory/Pathology Results

Website Feedback

Step 5: Confirm & Submit

Review all entered information and hit 'Submit'.

So… What Happens Now?

If you requested the records be sent to a doctor, they'll be faxed within about 3–10 days.

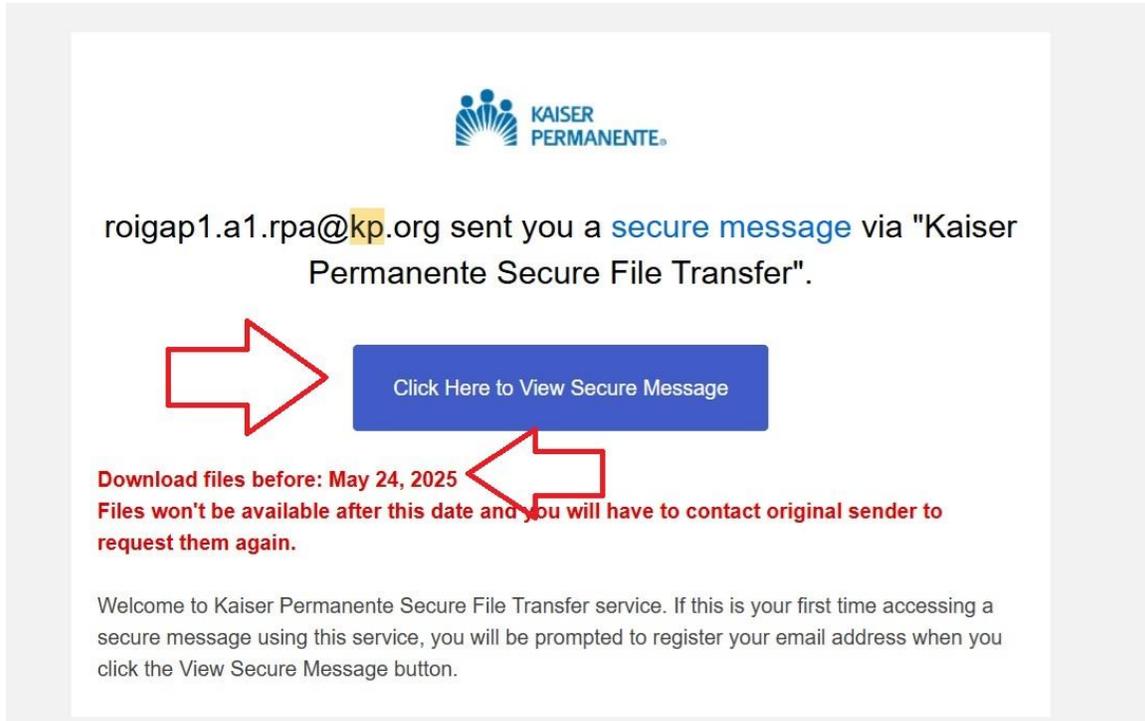If you asked for the records to be sent to you, you'll get two emails:

Email #1: Secure File Transfer (SFT)
Includes a Request ID, login instructions for Kaiser's Secure File Transfer portal (separate from KP.org), and a PDF for password setup.
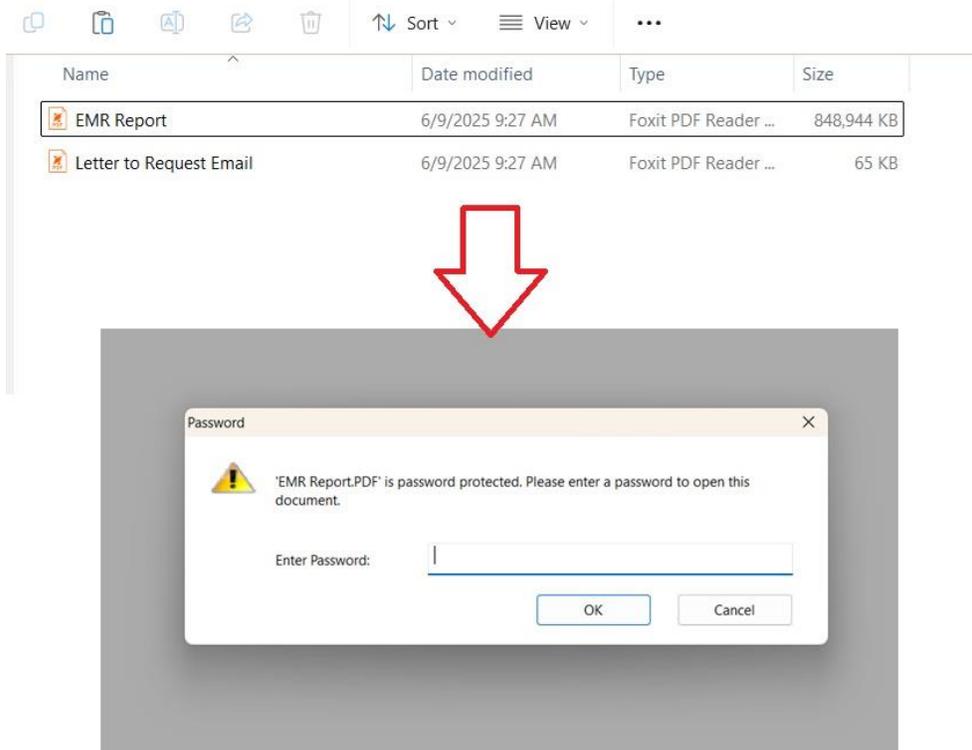
Email #2: Record Download Notification
This email contains a link to download your records and an expiration date for access.

Final Step: Download & Open the Record

Log into the secure site to download your .zip file. Extract the files and open the EMR Report PDF using your birthday as the password in MMDDYYYY format. Example: 01012001

Next Steps

1. Check for errors, denied care, or provider notes.
2. Revisit: [How to build a Medical TImeline](#)
3. Explore: [How to use chagpt](#)

Need help? Email admin@thezebranetwork.com