

PATIENT RECORD OF DISCLOSURES

In general, the HIPAA privacy rule gives individuals the right to request a restriction on uses and disclosures of their protected health information (PHI). The individual is also provided the right to request confidential communications or that a communication of PHI be made by alternative means, such as sending correspondence to the individual's office instead of the individual's home.

I wish to be contacted in the following manner: (check all that apply)

- Home Telephone
- OK to leave message with detailed information
- Leave message with call back number only
- Work Telephone
- OK to mail to home address
- OK to fax to this # _____
- Written Communication
- OK to leave message with detailed information
- Leave message with call back number only

Individuals whom you allow health information released to:

 Name Relationship

 Name Relationship

 Name Relationship

 Patient Signature Date / /

 Print Name Date of Birth / /