

PATIENT RECORD OF DISCLOSURES

Name: _____

Medical Record #: _____

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 is 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: _____

- O.K. to leave message with detailed information
- Leave message with call-back number only

Work Telephone: _____

- O.K. to leave message with detailed information
- Leave message with call-back number only

Written Communication

- O.K. to mail to my home address
- O.K. to mail to my work/office address
- O.K. to fax to this number: _____

According to the HIPAA laws, we may also release information to the people you specify. Please list the people we may release your protected health information (PHI) to and their relationship to you:

Name	Relationship to Patient
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Patient Signature

Date

Print Name

Date of Birth

The Privacy Rule generally requires healthcare providers to take reasonable steps to limit the use or disclosure of, and requests for PHI to the minimum necessary to accomplish the intended purpose. These provisions do not apply to uses or disclosures made pursuant to an authorization requested by the individual.

Healthcare entities must keep records of PHI disclosures. Information provided below, if completed properly, will constitute an adequate record.

NOTE: Uses and disclosures for TPO may be permitted without prior consent in an emergency.