

GORDON N. CROMWELL, JR., M.D., P.C.

NOTICE OF PRIVACY PRACTICES-ACKNOWLEDGEMENT

This Notice of Privacy Practices Acknowledgement is required by the Privacy Regulations created as a result of the Health Insurance Portability and Accountability Act (HIPAA) of 1996. Your signature is also a requirement.

We keep a record of the health care services we provide you. You may ask to see and copy the record. You may also ask to correct that record. We will not disclose your record to others unless you direct us to do so or unless the law authorizes or compels us to do so. You may see your record or get more information about it by contacting your physician or the medical records department.

The physician may request and obtain previous medical records or forward records to other providers if deemed necessary to provide you with proper care and treatment. The information released may need to include records regarding HIV/AIDS, sexually transmitted diseases, mental health, drug and alcohol abuse treatment.

Our Notice of Privacy Practices describes in more detail how your health information may be used and disclosed, and how you can access your information. A copy of the Notice of Privacy Practices is kept at the front desk and is accessible for your review upon request.

PLEASE LIST THE INDIVIDUALS YOU WISH TO PARTICIPATE IN YOUR CARE.

This will be someone we can talk to or leave messages with in regards to your medical care, appointments, insurance and account information. We will not give out or take in any information from a contact unless the person is listed below. If more space is needed, please add to notation area at bottom of page.

CONTACT NAME RELATION

PHONE NUMBER

CONTACT NAME RELATION

PHONE NUMBER

BY MY SIGNATURE BELOW I ACKNOWLEDGE RECEIPT OF THE NOTICE OF PRIVACY PRACTICES.

Patient or legally authorized individual's signature

Date Time

Printed name if signed on behalf of the patient

Relationship
(Parent , legal guardian, personal rep.)

This form will be retained in your medical record.