

PATIENT RECORD OF DISCLOSURES

In general, the HIPAA privacy rule gives individuals the right to request a restriction on the use 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 _____ 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
Work Telephone _____ O.K. to leave message with detailed information Leave message with call back number only	Other _____

Patient Name	Date of Birth	Patient Signature	Date
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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 accomplish the intended purpose. These provisions do not apply to uses or disclosures made pursuant to an authorization requested by an 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.

Record of Disclosures of Protected Health Information
(For in-office use only, where we will record disclosures made by our office per signed release)

Date	Disclosed to Whom Address or Fax #	(1)	Description of Disclosure/Purpose	By Whom Disclosed	(2)	(3)

(1) Check this box if the disclosure is authorized
 (2) Type Key: T= Treatment Records, P= payment Information, O= Healthcare Operations
 (3) Enter how disclosure was made: F= Fax, P= Phone, E= email, M= mail, O= Other