

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.

Who do you give permission to pick up your medical reco	ords?
1	
2	
3	
A valid driver's license will be required at the time of pickup.	
Patient's Name	Today's Date
Patient's / Guardian's Signature	Patient's Date of Birth
The Privacy Rule generally requires healthcare providers to take reason requests for PHI to the minimum necessary to accomplish the intended disclosures made pursuant to an authorization requested by the individual	purpose. These provisions do not apply to uses or
Healthcare entities must keep records of PHI disclosures. Information an adequate record.	provided below, if completed properly, will constitute
Note: Uses and disclosures for TPO may be permitted	d without prior consent in an emergency.

Record of Disclosures of Protected Information

	Disclosed To Whom		Description of Disclosure/			
Date	Address or Fax Number	(1)	Purpose of Disclosure	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