

PATIENT RECORD OF DISCLOSURES - Burgess Chiropractic, PA

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):

<p>_____ Home Telephone _____ O.K. to leave message with detailed information Leave message with call-back number only</p>	<p>_____ Written Communication _____ O.K. to mail to my home address O.K. to mail to my work/office O.K. to fax to: _____</p>
<p>_____ Work Telephone _____ O.K. to leave message with detailed information Leave message with call-back number only</p>	<p>_____ Other _____</p>
Patient Signature	Date
Print Name	

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 purposes. These provisions do not apply to uses or disclosures made pursuant to an authorization requested by the individual.
Note: Uses and disclosures for TPO may be permitted without prior consent in an emergency.

Record of Disclosures of Protected Health Information

DATE	DISCLOSED TO WHOM ADDRESS/FAX NUM.	(1)	DESCRIPTION OF DISCLOSURE/PURPOSE	DISCLOSED BY WHOM	(2)	(3)

- (1) Check this box if the disclosure is authorized.
- (2) Type key:
 T=treatment records, P=payment information, O=healthcare operations, A=authorization on file, D=discretionary
- (3) Enter how disclosure was made: F=fax, P=phone, M=postal mail, E=email, O=other