

## PATIENT RECORD DISCLOSURE

In General, the HIPPA privacy rule gives individuals the right to request a restriction on uses and disclosures of their protected 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	owing manner:	
Home Telephone:	OK to leave message with detailed information Leave message with call back number only	
Cell Phone:	OK to leave message with detailed informationLeave message with call back number only	
Work Telephone:	OK to leave message with detailed informationLeave message with call back number only	
Written Communication:	OK to mail to my home address Ok to mail to my work/office address Ok to fax and or to email address	
Contact Names/Phone Numbers  1)	(who we can release medical/financio	al information to)
Name	Telephone	Relationship
2))		
Name	Telephone	Relationship