

PATIENT CONSENT FORM

The Department of Health and Human Services has established a "Privacy Rule" to help insure that Personal Health Information (PHI) is protected and also to provide a standard for health care providers to obtain their patient's consent for use and disclosure of PHI about that patient in order to carry out treatment, payment, or health care operations.

As our patient we want you to know that we respect the privacy of your personal dental records and we strive to always take reasonable precautions to protect your privacy. When it is appropriate or necessary, we may provide the minimum information required to other health care providers, (such as specialty providers), in regards to treatment, payment or health care operations so that we may provide health care that is in your best interest.

We may have indirect treatment relationships with providers such as laboratories that may require minimal PHI for purposes of treatment, payment, or health care operations. These entities may not require patient consent. Upon request, we also provide you with full access to your personal dental records.

If you choose to give consent, by signing below, and at some future time you wish to rescind consent, you may do so in writing. If you refuse to consent to the use or disclosure of your PHI, under the law, we have the right to refuse to treat you. You may not revoke actions that have already been taken which relied on a previously signed consent form. If you have any objections to this form, or our privacy notice, please speak with our HIPAA Compliance Officer.

Print Name _____ Signature _____ Date _____

COMPLIANCE ASSURANCE NOTIFICATION FOR OUR PATIENTS

To our Valued Patients:

The misuse of PHI has been identified as a national problem causing patients inconvenience, aggravation, and money. We want you to know that all of our employees, managers, and doctors continually undergo training so that we understand and comply with government rules and regulations regarding the Health Insurance Portability and Accountability Act (HIPAA) with particular emphasis on the "Privacy Rule". We strive to achieve the very highest standards of ethics and integrity in performing services for our patients.

It is our policy to properly determine appropriate use of PHI in accordance with the governmental rules, laws and regulations. We want to ensure that our practice never contributes in any way to the growing problem of improper disclosure of PHI. As part of this plan, we have implemented a Compliance Program that we believe will help us prevent any inappropriate use of PHI.

We also know that we are not perfect! Because of this fact, our policy is to listen to our employees and our patients without any penalization if they feel that an event in any way compromises our policy of integrity. We welcome your input regarding any service problem so that we may remedy the situation promptly.

Thank you for being one of our highly valued patients!