

**HIPAA Form C
Notice and Acknowledgment**

Brief Overview of HIPAA Requirements:

The goal of the HIPAA privacy rule is to protect patients' right to confidentiality in matters involving their healthcare. In general, the privacy rule does the following:

Provides restrictions on uses and disclosures of patient health information. The privacy rule sets forth the instances in which protected patient information can be used within Amarillo Plastic Surgery or disclosed by us to outside parties.

Creates individual patient rights to inspect and copy their records, to amend erroneous information, to request certain restrictions on the use and disclosure of patient information, to file written complaints, and to receive notice of a provider's privacy policy.

Amarillo Plastic Surgery has implemented privacy policies and procedures, and conducted privacy education with all employees to comply with the HIPAA regulations to protect patients' right to confidentiality.

Acknowledgment:

I acknowledge that I have received the attached Notice of Privacy Practices.

Patient or Personal Representative Signature Date

If Personal Representative's signature appears above, please describe Personal Representative's relationship to the patient:
