

Live Here. Live Well.

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PATIENT RECORD OF DISCLOSURES AND PROTECTED HEALTH INFORMATION Village Crossing Women's Health.

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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.

Name:	DOB:
I wish to be contacted in the following manner (che	eck all that apply):
o Home Telephone:	
o O.K. to leave message with detailed information	_
o Leave message with call back number only	
o Work Telephone:	
o O.K. to leave message with detailed information	
o Leave message with call-back number only	
o Cell Phone	
o O.K. to leave message with detailed information	
o Leave message with call-back number only	
o Written Communication	
o O.K. to mail to my home address	
o O.K. to mail to my work/office address	
o O.K. to fax to this number:	
o OTHER Please list any family members you wou	ald like your information to be released to:
I certify I that I have read or been given a copy of t	he Notice of Privacy Practices.
PATIENT SIGNATURE	DATE
The Privacy Rule generally requires healthcare providers to take	e reasonable steps to limit the use
or disclosure of, and requests for PHI to the minimum necessary	
purpose. These provisions do not apply to uses or disclosures ma	ade pursuant to an authorization

or disclosure of, and requests for PHI to the minimum necessary to accomplish the intended purpose. These provisions do not apply to uses or disclosures made pursuant to an authorization requested by the individual. Healthcare entities must keep records of PHI disclosures. NOTE: Uses and disclosures for TPO may be permitted without prior consent in an emergency.