

MISHKEL HEART & VASCULAR CENTER
1599 NW 9TH AVE #203, BOCA RATON, FL 33486

PATIENT RECORD OF DISCLOSURES

In general, the HIPPA 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 PHU is made by alternate 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)

- Home telephone
 - OK to leave message with detailed information
 - Leave message with callback number only

- Written communication
 - OK to mail to my home address
 - OK to mail to my work/office address
 - OK to fax to this number: _____

- Work telephone
 - OK to leave message with detailed information
 - Leave message with callback number only.

- Other
 - Please specify: -

SIGN: _____

DATE: _____