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### Patient Record of Disclosures

In general, the HIPAA (Health Insurance Portability and Accountability Act) 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.

**I wish to be contacted in the following manner (check all that apply):**

Phone \_\_\_\_\_ ( Cell  Home  Work

O.K. to leave message with details

Leave message with call-back number only

Text Appointment reminders

Written Communication:

O.K. to mail to my home address

\_\_\_\_\_  
**Patient Signature (parent/guardian if patient is a minor)**

\_\_\_\_\_  
**Date of Birth**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Print Name**

The Privacy Rule generally requires healthcare providers to take reasonable steps to limit the use of disclosure of and requests for PHI to the minimum necessary to accomplish the intended purpose. These procedures do not apply to uses of disclosures made pursuant to an authorization requested by the individual.

**Note: Uses and disclosures may be permitted without prior consent in an emergency.**