



**Wolff**  
P O D I A T R Y

Advanced Medical and Surgical Foot care

## NOTICE OF PRIVACY PRACTICE

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is a federal law that requires all medical records and other individually identifiable health information used or disclosed by us in any form, whether electronically, on paper, or orally, are kept properly confidential to promote privacy and trust between you and your health care provider. Staff members at Wolff Podiatry are prohibited from discussing protected health information, including appointments, test results, or treatment plans, with anyone other than the patient.

We are required by applicable federal and state law to maintain the privacy of your health information. We are also required by law to provide you with this Notice of Privacy Practices explaining our legal duties and privacy practices with respect to medical information.

We are only allowed to use and disclose medical information in the manner that is described in the Notice.

The HIPAA Privacy Rule sets rules for health care providers and health plans about who can look at and receive your health information, including those closest to you. Excluding your primary care physician, please indicate the individuals your health care provider has permission to disclose your health information to.

Individual and Relationship to Patient	Telephone

**I acknowledge and understand the above HIPAA policies and understand I may request a copy of the Notice of Privacy Practices related to the Health Insurance Portability and Accountability Act of 1996.**

-----  
Patient Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Patient or Legal Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_