

## MADDAS CHIROPRACTIC & REHAB CENTER

870 McClellandtown Road McClellandtown, PA 15458 Phone: (724) 430-4924 4313 State Route 51 Rostraver, PA 15012 Fax: (724) 430-4925

I hereby give my consent for **Maddas Chiropractic & Rehab** to use and disclose protected health information (PHI) about me to carry out treatment, payment and health care operations (TPO).

(The Notice of Privacy Practices provided by **Maddas Chiropractic & Rehab** describes such uses and disclosures more completely.)

I have the right to review the Notice of Privacy Practices prior to signing this consent. **Maddas Chiropractic & Rehab** reserves the right to revise its Notice of Privacy Practices at any time. A revised Notice of Privacy Practices may be obtained by forwarding a written request to Maddas Chiropractic & Rehab.

With this consent, Maddas Chiropractic & Rehab may call my home or other alternative location and leave a message on voice mail or in person in reference to any items that assist the practice in carrying out TPO, such as appointment reminders, insurance items and any calls pertaining to my clinical care, including laboratory test results, among others.

With this consent, Maddas Chiropractic & Rehab may mail to my home or other alternative location any items that assist the practice in carrying out TPO, such as appointment reminder cards and patient statements. I have the right to request that Maddas Chiropractic & Rehab restrict how it uses or discloses my PHI to carry out TPO. The practice is not required to agree to my requested restrictions, but if it does, it is bound by this agreement.

By signing this form, I am consenting to allow **Maddas Chiropractic & Rehab** to use and disclose my PHI to carry out TPO.

I may revoke my consent in writing except to the extent that the practice has already made disclosures in reliance upon my prior consent. If I do not sign this consent, or later revoke it, Maddas Chiropractic & Rehab may decline to provided treatment to me.

Patient Signature or Legal Guardian	 Date	