



# Rocky Mountain OB-GYN

UNIVERSITY OF COLORADO

## PATIENT RECORD OF DISCLOSURES

In general, the HIPPA privacy rule give 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.

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

Cell phone # ( \_\_\_\_\_ ) \_\_\_\_\_

**AND/OR**

Email Address: \_\_\_\_\_

### Emergency Contact

First and Last Name/ Relation: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

### Pharmacy

Name of pharmacy: \_\_\_\_\_

Location and/or Zip Code: \_\_\_\_\_

### Primary Care

Physician Name: \_\_\_\_\_

The privacy rule generally requires healthcare providers to take reasonable steps to limit the use or disclosure of, and results for PHI to the minimum necessary to accomplish the intended purpose. These provisions do not apply to uses or disclosures made pursuant an authorization requested by the individual.