



Notice of Privacy Practices

Our Notice of Privacy Practices provides information about how we may use and disclose protected health information about you. The Notice contains a Patient Rights section describing your rights under the law. You have the right to review our Notice before signing this consent. The terms of our Notice may change. If we change our Notice, you may request a written revised copy by contacting our office at **425-318-7144** or send an email to info@premierdiabetescare.com

Premier Diabetes Care provides this form to comply with the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

The patient understands that:

- Protected health information may be disclosed or used for treatment, payment or healthcare operations.
- Premier Diabetes Care has provided or offered a copy of Notice of Privacy Practices to the patient.
- Premier Diabetes Care reserves the right to change the Notice of Privacy Practices.
- The patient has the right to restrict the uses of their information, but Premier Diabetes Care does not have to agree to those restrictions.
- The patient may revoke the Consent in writing at any time and all future disclosures will then cease. However, such a revocation shall not affect any disclosures that have already made in the reliance on you prior to Consent.

Patient Name (Print): _____

Signature: _____

Date: _____

Name of Representative (if not patient): _____

Representative Signature: _____

Relation: _____

