

HIPAA Form C

Notice and Acknowledgement

Connecticut Vascular Center, P.C.

Brief Overview of HIPAA Requirements:

The goal of the HIPAA privacy rule is to protect patients' right to confidentiality in matters involving their healthcare. In general, the privacy rule does the following:

- Provides restrictions on **uses** and **disclosures** of patient health information. The privacy rule sets forth the instances in which protected patient information can be used within Connecticut Vascular Center, P.C. or disclosed by us to outside parties.
- Creates individual patient rights to inspect and copy their records, to amend erroneous information, to request certain restrictions on the **use** and **disclosure** of patient information, to file written complaints, and to receive notice of a provider's privacy policy.
- Connecticut Vascular Center, P.C. has implemented privacy policies and procedures, and conducted privacy education with all employees to comply with the HIPAA regulations to protect patients' right to confidentiality.

Acknowledgement:

I acknowledge that I have received the attached Notice of Privacy Practices.

Patients or Personal Representative
Signature

Date

If Personal Representative's signature appears above, please describe Personal Representative's relationship to the patient.