Lone Tree Facial Plastic & Cosmetic Surgery Center 9218 Kimmer Dr Ste 201 Lone Tree, CO 800124 303-788-6632 303-788-6719

DATE

Notice of Privacy Practices and Patient Consent For Use and Disclosure of Protected Health Information

understand that under the Health Insurance Portability and Accountabilicertain Patient Rights regarding my protected health information.	lity Act of 1996 (HIPAA), I have
understand that Lone Tree Facial Plastic & Cosmetic Surgery Center in protected health information for treatment, payment or health care operatoroviding health care to me, the patient; handling billing and payment; and care operations. Unless required by law, there will be no other uses and without my authorization.	ions—which means for d, taking care of other health
Lone Tree Facial Plastic & Cosmetic Surgery Center has a detailed docu Privacy Practices'. It contains a more complete description of your rights use and disclose protected health information.	
I understand that I have the right to read the 'Notice' before signing this Facial Plastic & Cosmetic Surgery Center will provide me with the most conference.	
My signature below indicates that I have been given the chance to revie Privacy Practices. My signature means that I agree to allow Lone Tree Facuations Center to use and disclose my protected health information to calcand health care operations. I have the right to revoke this consent in writing extent that Lone Tree Facial Plastic & Cosmetic Surgery Center has take	acial Plastic & Cosmetic arry out treatment, payment, ing at any time, except to the
SIGNATURE (Patient or Legal Custodian/Authorized Representative)	DATE
Relationship to Patient if signed by another party	DATE
You may obtain a copy of our <i>Notice of Privacy Practices</i> , including any itime by contacting: Lone Tree Facial Plastic & Cosmetic Surgery Center 9218 Kimmer Dr Ste. 201 Lone Tree, CO 80124.	

FORM Us

PATIENT NAME