

Cardiac Care Consultants

Acknowledgment of Receipt of Notice of Privacy Practices

Our Notice of Privacy Practices is subject to change. If we change our Notice, you may obtain a copy of the revised Notice. If you have any questions about the Notice of Privacy Practices, please contact our Privacy Officer, Tracie Cobos at 623-815-2484.

I hereby Acknowledge that I have been presented with a copy of Cardiac Care Consultants Notice of Privacy Practices.

Printed Name: _____

Signature: _____ Date: _____

To respect your privacy, please tell us which of the following numbers we should call to communicate with you regarding Appointment Reminders, Lab Results, etc. Only list the phone number(s) you want us to contact you at.

Home: (____) _____ Work: (____) _____

Cell: (____) _____ Ok to leave on Answering Machine: Y N

If you are not available, please list the name, relationship, and the telephone number of the individuals we may contact in your absence.

Name: Relationship: Phone Number:

For Office Use Only

We attempted to obtain written acknowledgment of receipt of our Notice of Privacy Practices, but acknowledgment could not be obtained because:

- Individual refused to sign
- Communication barriers prohibited obtaining the acknowledgment
- Other (please specify): _____