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PATIENT RECORD DISCLOSURES

In general, the HIPPA privacy rule gives 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 correspondence to the individual's office instead of the individual's home.

I WISH TO BE CONTACTED IN THE FOLLOWING MANNER (PLEASE GIVE US FIRST PREFERENCE):

HOME PHONE: _____

- Okay to leave message with detailed information
- Leave message with call-back number only

MOBILE PHONE: _____

- Okay to leave message with detailed information
- Leave message with call-back number only

WORK PHONE: _____

- Okay to leave message with detailed information
- Leave message with call-back number only

PATIENT SIGNATURE: _____ DATE: _____