



Communication Station Georgia
Chatsworth, Georgia 30705
info@communicationstationga.com

Acknowledgement That You Have Received Our HIPAA Privacy Notice

Communication Station Georgia is required by law to keep your health information and records safe.

This information may include:

- Notes from your doctor, teacher or other healthcare provider
- Medical history
- Test results
- Treatment notes
- Insurance information

We are required by law to give you a copy of our privacy notice. This notice tells you how your health information maybe used and shared.

☐ I acknowledge that I have received a copy of Communication Station Georgia's HIPAA Notice of Privacy Practices that fully explains the uses and disclosures they will make with respect to my individually identifiable health information.

☐ I have had the opportunity to read the notice and to have any questions regarding the notice answered to my satisfaction.

☐ I understand Communication Station Georgia cannot disclose my health information other than as specified in the notice.

☐ I understand that Communication Station Georgia reserves the right to change the notice and the practices detailed therein if it sends a copy of the revised notice to the address I have provided.

Print Name of Client

Date

Signature of Client or Legal Representative

Relationship to Client

Please Note: It is your right to refuse to sign this Acknowledgement.
HIPAA Privacy Notice Acknowledgement
