

Patient HIPAA Release Form

Advanced Orthotics & Prosthetics

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The Health Insurance Portability & Accountability Act of 1996 (HIPAA) is a federal law that requires all medical records and other individually identifiable health information received or disclosed by us in any form, whether electronically, on paper or orally be kept confidential.

A copy of this policy is available to you at your request and on our website:

www.advancedo-p.com

**The practitioners and staff of Advanced Orthotics and Prosthetics may release information on my health to the following:

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Patient Name: _____

Signature: _____

Date Signed: _____