

HIPPA Agreement

Poway Vision Care

COMPLAINTS

If you think we have not properly respected the privacy of your health information, you Are Free to complain to us or the U.S. Department of Health and Human Services Office for Civil Rights. We will not retaliate against you if you make a complaint. If you want to complain to us, send a written complaint by person(s) at the address, fax or email on the next page. If you prefer, you can discuss your complaint by person or by phone.

FOR MORE INFORMATION

If you want more information about our privacy practices, call or visit the office contact person(s) at the address or phone number shown on the next page.

KNOWLEDGEMENT OF RECEIPT

I acknowledge that I receive a copy of Dr. David Bloomberg O.D.'s Notice of Privacy Practices.

PATIENTS NAME: _____

RESPONSIBLE PARTY SIGNATURE: _____

DATE: ____/____/____

EFFECTIVE DATE OF NOTICE: 01/14/2011