

Tumwater Chiropractic Center, PLLC
128 D. Street Tumwater, WA 98501
360.570.9580

Personal Health Records Privacy/Access Policy

Privacy: We will protect your personal health information against disclosure to unauthorized entities/persons. With your permission we will share your personal health information only with entities/person directly related to your health care and insurance/payment needs. We will ask for your written permission for any other disclosure of your personal health information.

Access: You have the right to review and amend your personal health care records. Fees for copying your personal health information/records are set by state regulators annually.

Consent: Yes _____ I authorize

No _____ I do not authorize

Date signed

To share the personal health information of _____
Print patients name

with entities/persons directly related to health care and insurance/payments needs.

Patient's Signature/Guardian's Signature