

Privacy Practices Acknowledgement

I have had the option to review the Notice of Privacy Practices for Jackson Pediatrics. I understand that a copy is available to me at anytime. Jackson Pediatrics is in compliance with the national HIPPA regulations, any comments or complaints about our practices can be sent in writing to our privacy officer at the address listed below.

Jackson Pediatrics
Attn: Mary Ness
Po Box 1029
Jackson, WY 83001

Signature

Printed Name

Date

To be completed only if no signature is obtained. If it is not possible to obtain the individual's acknowledgment, describe in good faith efforts made and the reasons why the acknowledgment was not obtained:

Signature of Provider Representative

Date

*This notice went into effect April 15,2003.