thwest Florida ENT

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## REQUEST FOR AN ACCOUNTING OF CERTAIN DISCLOSURES OF PROTECTED HEALTH INFORMATION FOR NON-TPO PURPOSES

As a patient, you have the right to receive an accounting of certain non-routine disclosure of your identifiable health information made by our practice for on-TPO purposes. Your request must state a time period that may not be longer than six (6) years and may not include dates before April 14, 2003. The first list you request within a 12-month period will be provided free of charge. For additional lists during the same 12-month period, you may be charged for the costs of providing the list; however the practice will notify you of the cost involved and you may choose to withdraw or modify your request.

To request an accounting of disclosures for non-TPO purposes made by the practice, you must submit your request in writing to Randy Holyfield, 300 C. M. Allen Parkway, Suite A, San Marcos, TX 78666.

PATIENT NAME: Robert L. Smith	DATE OF BIRTH: 3/2/43
PATIENT ADDRESS:	
STREET: 4506 45th WY	
APARTMENT #:	
CITY, ST ZIP: Mangonia Park, FL 33407	
Signature of Patient or Legal Guardian	Date: 12/30/12
	FOR INTERNAL PURPOSES ONLY:
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