



Patient Privacy & Procedure Statement

The Hand Clinic of Austin maintains compliance with Health Insurance Portability and Accountability Act of 1996 (HIPPA) privacy regulations passed into law on December 20, 2000.

We obtain your voluntary consent to provide treatment, release medical records to the appropriate entities and those who you designate to provide health care treatment, payment and daily operations of the facility.

Our clinical and front office staff uses patient information to ensure quality care and appropriate billing for services.

You may correct, amend, access, and request a copy of your medical record and access history by signing a letter for release of your medical information. The cost for copies of medical records is in accordance with state law.

We protect all patient information within the guidelines provided by federal, state, and local governments.

If you have any grievance pertaining to the privacy of medical records or wish to inquire further about how our facility manages patient information, please contact our Privacy officer at 512-444-4263.

The Hand Clinic of Austin reserves the right to amend, change, and/or revise our privacy policy at any time in accordance with federal, state, and local rules, regulations and guidelines.

Thank you for choosing The Hand Clinic of Austin!

Signature _____
Patient/Guardian

Date _____