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Sebring, FL 33870  
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2442 NE Hwy 70  
Arcadia, FL 34266  
(863) 491-5854

27 U.S. 27 South  
Lake Placid, FL 33852  
(863) 465-4904

### **New Patient Demographics/Demografía de nuevos pacientes**

Name/Nombre: \_\_\_\_\_ Date of Birth/Fecha de Nacimiento: \_\_\_\_\_

Social Security #/Seguro Social: \_\_\_\_\_ Email/Correo Electronico: \_\_\_\_\_

Address/Dirección: \_\_\_\_\_ City/Ciudad: \_\_\_\_\_

State/Estado: \_\_\_\_\_ Zipcode/Código Postal: \_\_\_\_\_

Employer/Empleador: \_\_\_\_\_ [Home](#) Phone #/Telefono: \_\_\_\_\_

Alternate Phone #/Telefono Alterno: \_\_\_\_\_ Referred by/Referido por: \_\_\_\_\_

Marital Status/Estatus Civil: M S D W Sex/Sexo: Male/Hombre Female/Mujer Referred/Referido: Yes/Si or No

Primary Care Physician/Medico Primario: \_\_\_\_\_

### **Release of Information/Liberación de información**

Pertaining to the Health Insurance Portability and Accountability Act of 1996 (HIPPA), below is our attempt to protect our patients' right of privacy. Your signature indicates the degree to which your information is to be released....  
Referente a la Ley de Portabilidad y Responsabilidad del Seguro Médico de 1996 (HIPPA), a continuación se presenta nuestro intento de proteger el derecho de nuestros pacientes a la privacidad. Su firma indica el grado en que su información debe ser liberada.

Patient Name/Nombre del Paciente: \_\_\_\_\_ Age/Edad \_\_\_\_\_

- ( ) Make appointments/Hacer/venir a las citas
- ( ) Diagnosis/Diagnostico
- ( ) Treatment/Tratamiento
- ( ) Financial: Patient balance only/Información Financiera del paciente
- ( ) All of the above/Todo lo de arriba

Name/Nombre \_\_\_\_\_ Relationship/Relación: \_\_\_\_\_

Name/Nombre \_\_\_\_\_ Relationship/Relación: \_\_\_\_\_

Signature/Firma: \_\_\_\_\_ Date/Fecha: \_\_\_\_\_



**HIPAA email consent VERY IMPORTANT! PLEASE READ!**

- HIPAA stands for the Health Insurance Portability and Accountability Act
- HIPAA was passed by the U.S. government in 1996 in order to establish privacy and security protections for health information stored on our computers is encrypted.
- Most popular email services (ex. Hotmail, Gmail, Yahoo) do not utilize encrypted email
- When we send you an email or you send us an email, the information that is sent is not encrypted. This means a third party may be able to access the information and read it since it is transmitted over the Internet. In addition, once the email is received by you, someone may be able to access your email account and read it.
- Email is very popular and convenient way to communicate for a lot of people, so in their latest modification to the HIPAA act, the federal government provided guidance on an email and HIPAA
- The information is available in a pdf (page 5634) on the U.S. Department of Health and Human Services website <http://www.gpo.gov/fdsys/pkg/FR-2013-01-25/pdf/2013-01073.pdf>
- The guidelines state that if a patient has been made aware of the risks of unencrypted email and the same patient provides consent to receive health information via email, then a health entity may send that patient personal medical information via unencrypted email

**OPTION 1 - ALLOW UNENCRYPTED EMAIL** I understand the risks of unencrypted email and do hereby give permission to Sevigny and Associates Eye Care to send me personal health information via unencrypted email

Signature: \_\_\_\_\_ DOB: \_\_\_\_\_

Printed name: \_\_\_\_\_ Date: \_\_\_\_\_

Please print email address: \_\_\_\_\_

(Parent or guardian if patient is a minor)

**OPTION 2 - DO NOT ALLOW UNENCRYPTED EMAIL** I do not wish to receive personal health information via email

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed name: \_\_\_\_\_

(Parent or guardian if patient is a minor)