

Seattle Reflexology & Massage Center

P. O. Box 22
Clinton, WA 98236
(206) 284-8389

Privacy Practices (HIPAA) Form

Record Retention

Records will be maintained in a confidential manner and will be secured in a locked file when not in use by the practitioner.

Client Rights

Clients may request in writing to see or obtain a copy of their records. Clients may request that corrections be made if they identify errors or mistakes. Access to records will be made during regular business hours within 10 days of receipt of written request. A fee may be charged for copying and sending requested records. Requested records are sent standard U.S. mail unless the client requests they be sent via express mail (at the client's expense).

Use of Records

The practitioner will maintain records. No records or information shall be released without the written authorization of the client, unless compelled by law.

Disclosure of Records

At no time are client records and information released to anyone without written request and release from the client, unless compelled by law (such as subpoenas). At no time are client records sent electronically (email or fax) to anyone unless compelled by law.

I, (please print name) _____ have received, read and understand this privacy policy as it relates to receiving reflexology and/or massage treatment from this practitioner.

Signature

Date