

Dr. Irwin C. Steinberg, MD, LLC

**PATIENT CONSENT FOR USE AND DISCLOSURE
OF PROTECTED HEALTH INFORMATION**

Dr Irwin C. Steinberg, MD, LLC and staff may use and disclose protected health information (PHI) about me to carry out treatment, payment and healthcare operations (TPO). Please refer to Dr. Irwin C. Steinberg, MD, LLC Notice of Privacy Practices for a more complete description of such uses and disclosures.

I have the right to review the Notice of Privacy Practices prior to signing this consent. Dr. Irwin C. Steinberg, MD, LLC reserves the right to revise its Notice of Privacy Practices at anytime. A revised Notice of Privacy Practices may be obtained by forwarding a written request to Privacy officer at 10796 Pines Boulevard, Suite 104, Pembroke Pines, FL 33026.

Dr. Irwin C. Steinberg, MD, LLC and staff may call my home or other designated location and leave a message on voice mail, or in person in reference to any items that assist the practice in carrying out TPO, such as appointment reminders, insurance items and any call pertaining to my clinical care, including laboratory results among others.

Dr. Irwin C. Steinberg, MD, LLC may mail to my home or other designated location any items that assist the practice in carrying out TPO, such as appointment reminder cards and patient statements.

I have the right to request that Dr. Irwin C. Steinberg, MD, LLC restrict how it uses or discloses my PHI to carry out TPO. However, the practice is not required to agree with my requested restrictions, but if it does, it is bound by this agreement.

By signing this form, I am consenting to Dr. Irwin C. Steinberg, MD, LLC use and disclosure of my PHI to carry out TPO.

I may revoke my consent in writing except to the extent that the practice has already made disclosures in reliance upon my prior consent. If I do not sign this consent, Dr. Irwin C. Steinberg, MD, LLC may decline to provide treatment to me.

Signature of Patient or Legal Guardian

Print Patient's Name

Date _____

Print Name of Legal Guardian