

THE DIAGNOSTIC & TREATMENT CENTER

A service of Marshfield Clinic and Ministry Health Care

PAUB TXOG COV KEV CAI UA DEJ-NUM (ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES)

Kem no cia rau tus-neeg-mob sau (This section to be completed by the Patient)

Kos npe rau daim ntawv no yog ua tim khawv tias koj to taub txog lub tsev kho mob Diagnostic and Treatment Center tsab cai ua dej num, qhia txog:

- Peb siv thiab muab koj tej ntaub ntawv hauv tsev kho mob nthuav tawm li-cas
- Koj txoj cai hais txog kev ceev koj tej ntaub ntawv teev hauv tsev kho mob
- Peb kev cog lus rau koj hais txog kev txhawj xeeb ntawm koj tej ntaub ntawv teev uas tau ceev es ho yuav muab siv thiab nthuav tawm

Tom qab lub kaum hli tim 4, xyoo 2005, yog koj tau tuaj kuaj mob, peb xav kom koj kos npe rau daim ntawv no. Qhov no yeej xam tag nrho thaum koj xub pib tuaj kuaj mob. Yog tias thawj hnuv koj tuaj kuaj mob ntawd, yog tuaj rau hauv chav tsev muaj xwm txheej ceev heev ces tom qab ntawd, peb yuav muab cov ntawv qhia txog kev ua dej-num rau koj thiab kom koj suam npe.

Tus-neeg-mob/Tus-sawv-cev Kos Npe

Hnuv tim

Kem no cia rau tus-neeg-ua-hauj-lwm sau rau (This section to be by Staff Member)

If Acknowledgment Form was not signed by patient/legal representative:

1. Does patient have a copy of the Privacy Notice?
 - Yes
 - No – Why: _____
2. Please explain why the patient was unable to sign an acknowledgment form or why it was not possible to obtain the patient's signature:
 - Patient/Legal Representative Left Before Signature Obtained
 - Emergency/Urgent Admission With Patient Not Present for Registration
 - Patient By-passed Registration – Not Available
 - Patient Unable to Comprehend
 - Patient Communication Barrier Existed
 - Legal Representative (Guardian) of Patient Not Available
 - Other: _____

Patient Acknowledgment in System: Date _____

Completed By: _____

Maintained in Medical Record