

FAIRMOUNT PEDIATRICS AND ADOLESCENT MEDICINE

Acknowledgment of Receipt of Notice of Privacy Practices and Notice of Research Participation

This form does three things:

1. It points you to a lengthy document that outlines the privacy practices of this pediatric practice. You are encouraged to review this document, and ask any questions you may have regarding the document or the practice;
2. It allows you to acknowledge that you have received the privacy document, or that you have declined a copy but know that you can have a copy at any time;
3. It outlines the practice's research participation and gives you the opportunity to decline to participate

FAIRMOUNT PEDIATRICS&ADOLESCENT MEDICINE PRIVACY PRACTICES are available at our office and also on our website at: http://www.fairmountpediatrics.com/documents/HIPPA_000.pdf The practice reserves the right to modify the privacy practices outlined in the notice.

Signature: I have received a copy (or have been offered but declined a copy) of the Notice of Privacy Practices for FAIRMOUNT PEDIATRICS& ADOLESCENT MEDICINE

Name of Patient (Print or Type)

Signature of Patient

Date

Signature of Patient Representative / Relationship of Representative to Patient
(Required if the patient is a minor or an adult who is unable to sign this form.)

THE REMAINDER OF THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU OR YOUR CHILD (AS A PATIENT OF THIS PRACTICE) MAY BE USED FOR RESEARCH PURPOSES.

Fairmount Pediatrics and Adolescent Medicine occasionally participates in research projects related to pediatric care. As part of this research, we may provide data about our patients to academic research teams. These data are always anonymous, or “de-identified,” meaning that researchers are not able to link data to specific children. For example, we do not provide parent names, patient names, date of birth, date of office visit, street address, or any other pieces of information that could be used to identify a patient. Research projects are always approved by a research review committee and are in accordance with the research participation guidelines included in the practice's privacy policies referenced above. These guidelines are available at our office and also on our website at: http://www.fairmountpediatrics.com/documents/HIPPA_000.pdf

If at any time you would prefer not to participate in this or other future research projects, you may notify the office in writing to remove your child's information from our research data.