

INDEPENDENCE URGENT CARE
7192 N. MAIN ST
CLARKSTON, MI 48346

CONSENT TO USE AND DISCLOSE PROTECTED HEALTH INFORMATION

Use and Disclosure of your Protected Health Information:

Your protected health information will be used by Independence Urgent Care or disclosed to Others for the purposes of treatment, obtaining payment, or supporting the day to day health care operation of the practice.

Notice of Privacy Practices:

Independence Urgent Care is required to provide to you a notice that describes how information about you may be used and disclosed. Additionally, we must provide you information on how we may get access to this information. These policies and practices are defined in the **“Notice of Privacy Policies and Practices”** brochure provided to you. **Please Review it Carefully.**

Reservations of Right to Change Privacy Practices:

Independence Urgent Care reserves the right to modify the privacy practices outlined in the notice. Independence Urgent Care may or may not agree to restrict the use or disclosure of your protected health information.

Revocation of Consent:

You may revoke this consent of use and disclosure of your protected health information. You must revoke this consent in writing. Any use or disclosure that has already occurred prior to the date on which your revocation of consent is received will not be affected.

Patient Name (PRINT)

Date

Signature of Patient