



Notification of Verbal Authorization

Due to the regulations created as a result of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Law, we need your authorization to release medical information and leave detailed messages with other members of you family, on your answering machine or via email.

- YES, it is okay to leave detailed messages and release medical information as stated above.
- NO, it is not okay to leave detailed messages and release medical information as sated above.

Please list any instructions for leaving information and messages.

Home Phone Number: _____ Cell Phone Number: _____

Email: _____

I have read and understand Temecula Valley Advanced Medicine's office policies and have received a copy. I have also received a copy of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Law.

Print Name

Date

Signature