Ellen Noble Heckerd, PT, MS

91 Elm St
Camden, ME 04843

Phone: 207-236-3605 Fax: 207-230-0323 Email: eheckerd@gmail.com

Client Name: _____

Consent to Use of Health Care Information

I understand that Ellen Noble Heckerd, PT will make use of my health care information for purposes of treatment and other lawful functions of Ellen Noble Heckerd, PT's practice, including securing payment and other usual health care operations. I understand that this information may be available to persons working on Ellen Noble Heckerd, PT's behalf, who will be subject to the same duty of confidentiality as Ellen Noble Heckerd, PT with respect to any of my information.

I understand that if Ellen Noble Heckerd, PT holds certain sensitive information related to my health care, such as:

- Records covered by federal rules governing confidentiality of alcohol and drug abuse treatment programs
- Records covered by state rules governing mental health services
- Records concerning my, or my child's diagnosis or treatment for HIV or AIDS

then my specific authorization will be required to disclose such information to others. However, I consent to the use of such information by Ellen Noble Heckerd, PT for purposes of my evaluation and treatment, and other lawful functions of Ellen Noble Heckerd, PT's practice, including securing payment and other usual health care operations. I understand that such information may be made available to persons working on Ellen Noble Heckerd, PT's behalf, who will be subject to the same duty of confidentiality as Ellen Noble Heckerd, PT with respect to such information. I understand that I may refuse to allow the sharing of some or all such information, but that refusal may result in improper diagnosis or treatment or other adverse consequences.

I have received a copy of the Notice of Privacy Practices.

Signatures:

Client (14 years and older): _____ Date: _____

Authorized representative: _____ Date: _____

Relationship to Client: _____

Witness: _____