

Umpqua Periodontics & Implants

Acknowledgement of Receipt of Notice of Privacy Practices

**** You may refuse to sign this acknowledgement****

I _____, have received a copy of this office's Notice of Privacy Practices.

Signature

Date

For office use only we attempted to obtain written acknowledgement of receipt of our Notice of Privacy Practices, but acknowledgement could not be obtaining because: Please check one that applies below:

- Individual refused to sign
- Communication barriers prohibited obtaining the acknowledgement
- An emergency situation prevented us from obtaining acknowledgement
- Other (Please Specify) _____