



MEADE COUNTY PEDIATRICS, PLLC

PRIVACY STATEMENT ACKNOWLEDGEMENT

I acknowledge that Meade County Pediatrics, PLLC, has provided me a copy of its Notice of Privacy Practices, which provides a detailed description of the uses and disclosures allowed, as well as other rights I have regarding my protected health information.

Signature of Patient or Parent/Guardian/Personal Representative

Printed Name of Patient or Parent/Guardian/Personal Representative

Date

Please list all children and their dates of birth:

Please mail this form to the following address:

**HIPPA Compliance
Meade County Pediatrics, PLLC
1010 Lawrence Street
Brandenburg, KY 40108**