



Due to changing governmental regulations with regard to the handling of confidential patient data, and in order for us to comply with the established health care requirements, we need to collect information from you with regard to your preference for receiving information from us concerning your healthcare.

Use of our web portal will be the fastest way for you to receive this information. However, if you do not have internet access, or prefer not to receive your information through the web portal, you may select one of the other two options.

Patient Name: _____ Date of Birth: _____

Please select your communication preference below and supply the appropriate information:

(check only one)

_____ Web Portal (e-mail address) _____

_____ Printed (mailing address) _____

_____ Phone (phone number) _____

Please note that this will not replace or change how we remind you of upcoming appointments. We will continue to use the automated call system for appointment reminders.

Patient's Signature

Date

Office use only:
(Employee to initial when completed)

_____ Data entered into patient's account

_____ Document scanned into patient's account