

University General Surgeons
1932 Alcoa Highway, Bldg C, Ste 270
Knoxville, Tennessee 37920
(865) 251-4658

Patient Privacy Questionnaire

Patient's Name:

Please indicate how we may contact you regarding confidential information such as appointments, test results, return calls you make to the office, prescriptions and other healthcare needs. Please circle all that apply:

Home Phone number*	May we leave a voicemail message? Yes No
Cell Phone Number*	May we leave a voicemail message? Yes No
Work Phone Number*	May we leave a voicemail message? Yes No

* UGS will use the phone number you enter on your demographic form at check in. Please be sure to update this information if it changes.

I authorize discussion of my medical information with my pharmacists if I am receiving any prescriptions from this office.

I authorize the release of or discussion of my medical records or condition to the following individuals or companies:

Name:	Relationship:
Name:	Relationship:
Name:	Relationship:
Name:	Relationship:

I may revoke these instructions at anytime in writing to University General Surgeons. I have received a copy of the University General Surgeons (UGS) Notice of Privacy Practices. I understand that this Notice describes how my health information may be used by UGS and that I should read it carefully. I am aware that the Notice may be changed at any time. I may obtain a revised copy of the Notice by calling (865) 251-4658, requesting via the Patient Portal or checking the website at [HYPERLINK "http://www.utksurgery.com" www.utksurgery.com](http://www.utksurgery.com)

Signature

Date

Signature of Guardian (if under age 18)

Date

Revised 2/10/2016