



**Talal M. Nsouli, M.D., FAAAAI, FAAAAI**  
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HIPAA CONSENT FORM  
Please Print

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) is the federal law that establishes standards for the privacy and security of health information, as well as standards for electronic data interchange (EDI) of health information.

The primary goal of HIPAA is to facilitate people maintaining their health insurance by protecting the confidentiality and security of healthcare information and help the healthcare industry control administrative costs.

ACKNOWLEDGMENT

I acknowledge that I have read a copy of Talal M. Nsouli, M.D.'s **Notice Regarding Privacy of Personal Health Information.**

I also authorize Dr. Nsouli's office to call my home, cell, and/or office and leave a message if necessary to confirm an appointment.

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PATIENT NAME - PLEASE PRINT  
(FIRST, M.I., LAST)

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SIGNATURE OF PATIENT  
(OR PARENT/GUARDIAN IF MINOR)

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MONTH DAY YEAR  
TODAY'S DATE