

Pediatric Helping Hands Therapy, LLC
JMST for Kids, Inc.
MVPT for Kids, Inc.
OT for Kids, Inc
Speech Tree, Inc.

2 Chelsea Boulevard
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Fax: (713) 807-1141

ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES

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I understand and have been provided with a *Notice of Privacy Practices for Protected Health Information also known as "PHI"* which provides a more complete description of information uses and disclosures.

I understand that I have the following rights and privileges:

- The right to review the notice prior to signing this consent
- The right to request restrictions as to how my health information may be used or disclosed to carry out treatment, payment, or health care operations

Patient Printed Name

Date

Patient Signature

Date

Patient Representative and/or Legal Guardian
Printed Name
(If patient is unable to sign and /or if patient is a minor)

Date

Patient Representative and/or Legal Guardian
Signature
(If patient is unable to sign and /or if patient is a minor)

Date