

Ocean Point Physical Therapy
HIPAA Confidentiality Agreement

Volunteers/employees of Ocean Point PT will have access to confidential information, both written and oral, during the course of their time spent at Ocean Point PT. It is imperative that this information is not disclosed to any unauthorized individuals to maintain the integrity of the patient information. An unauthorized individual would be any person who is not currently an employee of the practice and/or any individual who is an employee of the practice who has no business use for the information. Any other disclosures may only occur at the discretion of the Privacy Officer or by the patient authorization.

I have read and understood the practice's policies with regards to privacy and security of the personal health information. I agree to maintain confidentiality of all information obtained in the course of my volunteer hours including, but not limited to, financial, technical, or proprietary information of the organization and personal and sensitive information regarding patients, employees, and vendors. I understand that inappropriate disclosure or release of patient information is grounds for removal from the position.

Signature

Print Name

Date