## McLAREN BARIATRIC AND METABOLIC INSTITUTE HIPAA / PATIENT RECORD OF DISCLOSURES

## Healthcare entities must keep records of PHI disclosures. Information provided below shows intended purpose of discolsure. Note: In the event of an emergency, uses or disclosures may be permitted without prior consent.

Date:	Disclosure to Whom Address or Fax Number	Description of Disclosure/ Purpose of Disclosure	By Whom Disclosed	Date Completed



PT.

MR.#/P.M.

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