



GRANITE PEAKS GASTROENTEROLOGY

9829 S. 1300 E. Ste. 300/303 | Sandy, Utah 84094 | Ph. 801-619-9000 | Fax 801-619-9001

REQUEST FOR AN ACCOUNTING OF DISCLOSURES OF HEALTH INFORMATION

- You have the right to ask Granite Peaks Gastroenterology to tell you how it has shared your personal health information on and after April 14, 2003.
- You may request this accounting of all disclosures for a period of time up to six years from the date of your request.
- Within 60 days after receiving your request, Granite Peaks Gastroenterology is required to give you an accounting or the summary you have requested or tell you if more time is necessary to respond to your request.
- The first accounting or summary in any 12 month period is free. If you request more than one accounting or summary in a 12 month period, Granite Peaks Gastroenterology can charge you a fee for the cost of the copies of your personal health information or the cost of preparing the summary. You can change your request to reduce the fee.

Patient Name: _____ DOB: _____

Patient SS#: _____

I request that Granite Peaks Gastroenterology give me an accounting of the ways my personal health information has been disclosed:

- for six years from the date of this request
- for period of time: from _____ to _____

I request that Granite Peaks Gastroenterology give me a summary of how my personal health information has been disclosed:

- for six years from the date of this request
- for period of time: from _____ to _____

Signature: _____ Date: _____

Send this Request for Accounting of Disclosure to:

Privacy Officer
Granite Peaks Gastroenterology
9829 S. 1300 E. Ste 303
Sandy, UT 84094

Call (801) 619-9000, x204 with any questions.

Fax: (801) 572-0683
