



LookSmart Eye Care  
Comprehensive Eye Care  
Contact Lenses  
Full Service Optical

2781 Maple Ave.  
Lisle, IL 60532  
630-904-6000  
630-355-5445 (fax)

NOTICE OF PRIVACY PRACTICES ACKNOWLEDGEMENT

I understand that under the Health Insurance Portability and Accountability Act of 1996 (HIPPA), I have certain rights to privacy regarding my protected health information. I understand that this information can and will be used to:

1. Conduct, plan and direct my treatment and follow up among the multiple healthcare providers who may be involved directly or indirectly in that treatment.
2. Obtain payment from third party payers.
3. Conduct normal healthcare operations such as quality assessments and physician certifications.

I understand I may receive a copy of the Notice of Privacy Practices at any time. I understand that Looksmart Eye Care has the right to make changes in its Notice of Privacy Practices from time to time and that I may contact the office at any time at 630-904-6000 to obtain a current copy of the Notice of Privacy Practices.

I understand that I may request in writing that Looksmart Eye Care restricts how my private information is used or disclosed to carry out treatment, payment or healthcare operations. I also understand that Looksmart Eye Care is not required to agree with my restrictions, but if Looksmart Eye Care does agree, then we are bound to abide by any such restrictions. I also understand that any information I provide can be used only by LookSmart Eye Care to send reminders and promotions through text messages or emails. I may contact the office at any time and request that these reminders stop.

I understand that by signing this record I agree to allow LookSmart Eye Care to forward my medical information to other medical facilities upon my request. I also permit the following people to obtain medical records on my behalf:

<i>Name</i>	<i>Relation</i>

Patient Name (Please Print): \_\_\_\_\_

Relationship to Patient: \_\_\_\_\_  
(if patient is under age 18 or unable to sign)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_