



Redlands Family Practice  
A PrimeCare Provider

**PRIVACY CONSENT AND ACKNOWLEDGEMENT OF RECEIPT OF  
NOTICE OF PRIVACY PRACTICES**

Redlands Family Practice Medical Group, Inc. (also known as Redlands Family Practice) Notice of Privacy Practices provides information about how we may use and disclose Protected Health Information (PHI) about you. By signing this consent, you acknowledge the receipt of our Notice of Privacy Practices. As provided in the notice, the terms of our notice may change. If we change our notice, you may obtain a revised copy by calling our privacy Officer at (909) 793-3208.

You have the right to request that we restrict how PHI about you is used or disclosed for treatment, payment or health care operations. We are not required to agree to this restriction, but if we do, we are bound by our agreement.

**Patient Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Patient / Guardian Signature:** \_\_\_\_\_