

Winifred Hentschel, Ed.D.

Office: 617-497-9027

Fax: 617-497-1244

Licensed Psychologist

**22 Hilliard Street
Cambridge MA 02138**

ACKNOWLEDGEMENT OF RECEIPT OF PRIVACY NOTICE

Federal law requires that all patients be given a copy of the 'Notice of Psychologists' Policies and Practices to Protect the Privacy of Your Health Information.

This notice describes how psychological and medical information about you may be used and disclosed and how you can get access to this information.

All reasonable efforts will be made to protect the privacy of patient mental health information, whether it is maintained on paper or electronically, and regardless of how it is communicated; for example, by e-mail or facsimile mail.

I was given a copy of the Massachusetts Privacy Notice by Dr. Winifred Hentschel.

NAME (print) _____ DATE _____

SIGNATURE _____ DATE OF BIRTH: _____

Patient given Privacy Notice, however:

Patient refused or did not sign Acknowledge form ____
Patient unable to sign Acknowledge form ____