**Udacity Health Privacy Assessment**

Student Name

Date

# Executive Summary

## Number of Findings

Total:

### Finding #1

**Detail Explanation:**

**Regulation(s) in question:**

**Recommendation:**

### Finding #2 { Title of Issue}

**Detailed Explanation:**

**Regulation(s) in question:**

**Recommendation:**

### Finding #3 { Title of Issue}

**Detailed Explanation:**

**Regulation(s) in question:**

**Recommendation:**

### Finding #4 { Title of Issue}

**Detailed Explanation:**

**Regulation(s) in question:**

**Recommendation:**

### Finding #5 { Title of Issue}

**Detailed Explanation:**

**Regulation(s) in question:**

**Recommendation:**

### Finding #6 { Title of Issue}

**Detailed Explanation:**

**Regulation(s) in question:**

**Recommendation:**