



University of
Massachusetts
Quinnobiquin
Medical Center
REQUEST TO
RESTRICT THE
OR DISCLOSURE
PATIENT
INFORMATION
University of
Massachusetts
Quinnobiquin
Center Patient
Identification:

Print
this form

I request that **University of Massachusetts Quinnobiquin Medical Center** restrict the use or disclosure of my health information in the ways described below:

Restricted Information:

How it works:

Effective standards and patient control are the essential foundation for a national health information network (NHIN). Although leading vendors and physician groups have both tackled the standards challenge with gusto, patient control is still widely considered "too hard". Until now.

MedCommons puts the NHIN on the fast track by offering a standards-based enterprise-ready solution to the patient control problem.

MedCommons integrates three complementary services:

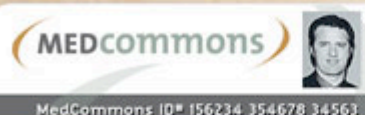
Security and HIPAA Log - Recent Account Activity Patient: Adrian Gropper

| Date/Time | MC Tracking # | Sender | Type | Status |
|-----------------------|----------------|--------------|------|------------------|
| 09-Dec-2004 01:41:18 | 7290 7944 5682 | DEMOAGATEWAY | CT | Alpha Test-53698 |
| 08 -Dec-2004 23:48:18 | 2266 1002 5141 | DEMOAGATEWAY | CT | Alpha Test-53698 |

All of your activity (2 total) on MedCommons is listed in the [Security and HIPAA Log](#)

CONTACTS ▼

CCR Patient ☐ Send Notification Email
email@emailaddress.com



MedCommons ID# 156234 354678 34563

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MedCommons Tracking 376 9896 2316
MedCommons Status No Errors
CCR Creation Date 01/23/2005 10:42am
CCR Patient Name Adrian Gropper

CCR Purpose

CCR Source ☐ Send Email on Receipt
email@emailaddress.com

CCR To ☐ Send Notification Email
email@emailaddress.com



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