

Patient Information and Treatment Authorization

PATIENT I	NFORMATION #		WESTSTAR DOWNTOWN LA	
Name:	ERIK VELIE	SSN:	XXX-XX9999	
Address:	1130 SOUTH FLOWER ST	Sex:	M	
City, Zip:	LOS ANGELESCA90015	DOB:	01/01/1982	
Home Ph:	(213)422-5061	Age:	41	
Work Ph:		Email:		
Cell Ph:				
PATIENT I	NFORMATION#			
Date:	11/20/2022	Post Sx:		
Type:	PI	Sx Date:		
REFERRIN	G DOCTOR INFORMATION			
Name:	FRANK, JONATHAN M	Body Pts:		
Address:	8501 WILSHIRE BLVD STE 316			
City, Zip:	BEVERLY HILLSCA90211			
Phone:	(310)247-0466	Dx:		
ATTORNE	YINFORMATION			
Name:		Address:		
City, Zip:		Phone:		
EMPLOYM	ENT INFORMATION:			
Name:		Address:		
City, Zip:		Phone:		
PRIMARY	INSURANCE INFORMATION	SECONDARY	Y INSURANCE INFORMATION	
Name:		Name :		
Address:		Address:		
Adj/Ph#:		Adj/Ph#:		
Type:		Type:		
Ins Name:		Ins Name :		
Pol#/Clm#:		Pol#/Clm#:		
RELEASE (OF INFORMATION and ASSIGNMENT	OF BENEFITS		
concerning t	horize WestStar Physical Therapy to releating the his illness upon request. I hereby authorize trapy for services rendered.			
		05/23/23		
ERIK VELIE		Date Signed		



JOB INFORMATION #

Name: ERIK VELIE SSN: XXXX9999 JOB INFORMATION # Job Title:	PATIENT	#							
ADDITIONAL JOB DETAILS During a typical 8-hour day, How many hours do you? Si: Hours Squatting: Hours Stand: Hours Stooping/bending: Hours Walk: Hours Reaching Up: Hours Drive: Hours Reaching Up: Hours At work, on average, how many hours do you work per Day/Shift: Hours Crawling: Hours Week: Hours Crawling: Hours Using a Computer: Hours Week: Hours Using a Computer: Hours Using the Telephone: Hours At work, my job requires that I lift Constantly Often Sometimes Never 1 libs to 25 lbs: 26 lbs to 50 lbs: 51 lbs to 75 lbs: 15	Name:	ERIK VELIE			SSN:		XXX-XX9	999	
ADDITIONAL JOB DETAILS During a typical 8-hour day, How many hours do you? Si: Hours Squatting: Hours Stand: Hours Stooping/bending: Hours Walk: Hours Reaching Up: Hours Drive: Hours Reaching Up: Hours At work, on average, how many hours do you work per Day/Shift: Hours Crawling: Hours Week: Hours Crawling: Hours Using a Computer: Hours Week: Hours Using a Computer: Hours Using the Telephone: Hours At work, my job requires that I lift Constantly Often Sometimes Never 1 libs to 25 lbs: 26 lbs to 50 lbs: 51 lbs to 75 lbs: 15	JOB INFO	RMATION #							
ADDITIONAL JOB DETAILS During a typical 8-hour day, How many hours do you? Sit: Hours Squatting: Hours Stand: Hours Stooping/bending: Hours Walk: Hours Reaching Up: Hours At work, on average, how much time do you spend? Squatting: Hours Stand: Hours Stooping/bending: Hours Reaching Up: Hours At work, on average, how many hours do you work per Twisting: Hours At work, on average, how many hours do you work per Day/Shift: Hours Crawling: Hours Stair Climbing: Hours Ladder Climbing: Hours Using a Computer: Hours Using a Computer: Hours Pushing: Hours At work, my job requires that I lift Constantly Often Sometimes Never I libs to 25 lbs: 1									
ADDITIONAL JOB DETAILS During a typical 8-hour day, How many hours do you? Sit: Hours Squatting: Hours Stand: Hours Stooping-beding: Hours Walk: Hours Reaching Up: Hours At work, on average, how many hours do you work per Day/Shift: Hours Crawling: Hours Week: Hours Crawling: Hours Week: Hours Crawling: Hours Using a Computer: Hours Wising: Hours Using a Computer: Hours At work, my job requires that I lift Constantly Often Sometimes Never 10 lbs or less: 11 lbs to 25 lbs: 26 lbs to 50 lbs: 51 lbs to 75 lbs: 76 lbs to 100 lbs: over 100 lbs: At work, my job includes Constantly Often Sometimes Never Repetitive Hand Movement: Repetitive Hand Movement: Power Oripping: Precision Handling: Balancing: Hours Constituting: Hours Precision Handling: Hours Handling: Hours Precision Handling: Hours Precision Handling: Hours Precision Handling: Hours Handling: Hours Precision Handling: Hours Precision Handling: Hours Handling: Hours Precision Handling: Hours Precisi	Job Title:								J
During a typical 8-hour day, How many hours do you? Sit: Hours Squatting: Hours Stand: Hours Stooping-bending: Hours Walk: Hours Reaching Up: Hours At work, on average, how many hours do you work per Day/Shift: Hours Crawling: Hours Week: Hours Stair Climbing: Hours Ladder Climbing: Hours Wisting: Hours Lusing a Computer: Hours Wisting: Hours Lifting Overhead: Hours At work, my job requires that I lift Constantly Often Sometimes Never At work, my job includes Constantly Often Sometimes Never At work, my job includes Constantly Often Sometimes Never At work, my job includes Constantly Often Sometimes Never Repetitive Foot Movement: Repetitive Hand Movement: Repetitive Foot Movement: Power Gripping: Hours Halancing: Hours Never Precision Handling: Hours Never Repetitive Foot Movement: Power Gripping: Hours Never Lifting Overhead: Hours Never Repetitive Foot Movement: Hours Hours Never Repetitive Foot Movement: Hours H	Job Descript	ion:							
During a typical 8-hour day, How many hours do you? Sit: Hours Squatting: Hours Stand: Hours Stooping-bending: Hours Walk: Hours Reaching Up: Hours At work, on average, how many hours do you work per Day/Shift: Hours Crawling: Hours Week: Hours Stair Climbing: Hours Ladder Climbing: Hours Wisting: Hours Lusing a Computer: Hours Wisting: Hours Lifting Overhead: Hours At work, my job requires that I lift Constantly Often Sometimes Never At work, my job includes Constantly Often Sometimes Never At work, my job includes Constantly Often Sometimes Never At work, my job includes Constantly Often Sometimes Never Repetitive Foot Movement: Repetitive Hand Movement: Repetitive Foot Movement: Power Gripping: Hours Halancing: Hours Never Precision Handling: Hours Never Repetitive Foot Movement: Power Gripping: Hours Never Lifting Overhead: Hours Never Repetitive Foot Movement: Hours Hours Never Repetitive Foot Movement: Hours H									
Sit: Hours Squatting: Hours Stand: Hours Stooping/hending: Hours Walk: Hours Kneeling: Hours At work, on average, how many hours do you work per Day/Shift: Hours Reaching Up: Hours At work, on average, how many hours do you work per Twisting: Hours Stair Climbing: Hours Using a Computer: Hours Using a Computer: Hours Pushing: Hours At work, my job requires that I lift Constantly Often Sometimes Never 10 lbs or less: 11 lbs to 75 lbs : 26 lbs to 50 lbs: 51 lbs to 75 lbs : 76 lbs to 100 lbs: Constantly Often Sometimes Never At work, my job includes At work, my job includes Constantly Often Sometimes Never Constantly Often Sometimes Never At work, my job includes Constantly Often Sometimes Never Constantly Often Sometimes Never Constantly Often Sometimes Never Repetitive Hond Movement: Constantly Often Sometimes Never Repetitive Foot Movement: Constantly Often Sometimes Never	ADDITION	NAL JOB DETAII	LS						
Sit: Hours Squatting: Hours Stand: Hours Stooping/hending: Hours Walk: Hours Kneeling: Hours At work, on average, how many hours do you work per Day/Shift: Hours Reaching Up: Hours At work, on average, how many hours do you work per Twisting: Hours Stair Climbing: Hours Using a Computer: Hours Using a Computer: Hours Pushing: Hours At work, my job requires that I lift Constantly Often Sometimes Never 10 lbs or less: 11 lbs to 75 lbs : 26 lbs to 50 lbs: 51 lbs to 75 lbs : 76 lbs to 100 lbs: Constantly Often Sometimes Never At work, my job includes At work, my job includes Constantly Often Sometimes Never Constantly Often Sometimes Never At work, my job includes Constantly Often Sometimes Never Constantly Often Sometimes Never Constantly Often Sometimes Never Repetitive Hond Movement: Constantly Often Sometimes Never Repetitive Foot Movement: Constantly Often Sometimes Never									
Stand: Hours Stooping/bending: Hours Walk: Hours Kneeling: Hours Reaching Up: Hours At work, on average, how many hours do you work per Day/Shift: Hours Cawling: Hours Hours Stair Climbing: Hours Ladder Climbing: Hours Using a Computer: Hours Pushing: Hours Hours Lifting Overhead: Hours Hours Lifting Overhead: Hours At work, my job requires that I lift Constantly Often Sometimes Never 10 lbs or less: 11 lbs to 25 lbs: 26 lbs to 50 lbs: 51 lbs to 75 lbs: 76 lbs to 100 lbs: over 100 lbs: At work, my job includes Constantly Often Sometimes Never Repetitive Hand Movement: Repetitive Foot Movement: Repetitive Foot Movement: Precision Handling: Hours Handling: Hours Never Using of the Mours Precision Handling: Hours Never Handling: Hours Handling: Hours Handling: Hours Never Handling: Hours Hou	During a typ	ical 8-hour day, How	many hours do you	1?			age, how m	uch time do you	
Walk: Hours Kneeling: Hours At work, on average, how many hours do you work per Day/Shift: Hours Week: Hours Hours Hours Crawling: Hours Stair Climbing: Hours Ladder Climbing: Hours Using a Computer: Hours Pushing: Hours Hours Hours Hours Lifting Overhead: Hours At work, my job requires that I lift Constantly Often Sometimes Never 10 lbs or less: Hours At work, my job includes To ibs to 10 lbs: Over 100 lbs: Hours At work, my job includes Constantly Often Sometimes Never	Sit:		Hours		Squatting	g:			Hours
At work, on average, how many hours do you work per Day/Shift: Hours Week: Hours Pushing: Hours Pulling: Hours Pulling: Hours Hou	Stand:		Hours		Stooping	/bending:	:		Hours
At work, on average, how many hours do you work per Day/Shift: Hours Week: Hours Hours Hours Stair Climbing: Hours Ladder Climbing: Hours Using a Computer: Hours Using a Computer: Hours Pushing: Hours Lifting Overhead: Hours At work, my job requires that I lift Constantly Often Sometimes Never 10 lbs or less: 11 lbs to 25 lbs: 51 lbs to 50 lbs: 51 lbs to 75 lbs: 76 lbs to 100 lbs: Over 100 lbs: Sometimes Never At work, my job includes Constantly Often Sometimes Never At work, my job includes Constantly Often Sometimes Never Pepetitive Hand Movement: Sometimes Never Repetitive Hand Movement: Sometimes Never Repetitive Foot Movement Sometimes Never Nev	Walk:		Hours		Kneeling	g:			Hours
At work, on average, now many nours do you work per Day/Shift: Hours Week: Hours Hours Ladder Climbing: Hours Ladder Climbing: Hours Using a Computer: Hours Pushing: Hours Pushing: Hours At work, my job requires that I lift Constantly Often Sometimes Never 10 lbs or less: 11 lbs to 25 lbs: 26 lbs to 50 lbs: 51 lbs to 75 lbs: 76 lbs to 100 lbs: over 100 lbs: At work, my job includes Constantly Often Sometimes Never Constantly Often Sometimes Never Constantly Often Sometimes Never Repetitive Fand Movement: Repetitive Foot Movement: Power Gripping: Hours Repetitive Foot Movement: Power Gripping: Hours Repetitive Foot Movement: Hours Balancing: Hours Hou	Drive:		Hours		Reaching	g Up:			Hours
per Day/Shift: Hours Week: Hours Hours Stair Climbing: Hours Ladder Climbing: Hours Using a Computer: Hours Using the Telephone: Hours Pushing: Hours At work, my job requires that I lift Constantly Often Sometimes Never 10 lbs or less: 11 lbs to 25 lbs: 26 lbs to 50 lbs: 51 lbs to 75 lbs: 76 lbs to 100 lbs: over 100 lbs: 100 lb	At work, o	n average, how ma	ー any hours do you	work	Reaching Out:				Hours
Week: Hours Hours Ladder Climbing: Hours Ladder Climbing: Hours Using a Computer: Hours Pushing: Hours Pushing: Hours Pulling: Hours At work, my job requires that I lift Constantly Often Sometimes Never O lbs or less: 11 lbs to 25 lbs: 26 lbs to 50 lbs: 51 lbs to 75 lbs: 76 lbs to 100 lbs: over 100 lbs: At work, my job includes Constantly Often Sometimes Never At work, my job includes Constantly Often Sometimes Never Constantly Often Sometimes Never At work, my job includes Constantly Often Sometimes Never Power Gripping: Precision Handling: Hours Balancing: Use of computer mouse/touch pad: Timed work for efficiency:			any mount do you	,, 0111	Twisting:				Hours
Week: Hours Hours Hours Hours Hours	Day/Shift:		Hours		Crawling	g:			Hours
Ladder Climbing: Using a Computer: Hours Hours Hours Pushing: Hours Pushing: Hours Hours Hours Hours Hours Hours Hours Hours At work, my job requires that I lift Constantly Often Sometimes Never 10 lbs or less: 11 lbs to 25 lbs: 26 lbs to 50 lbs: 51 lbs to 75 lbs: 76 lbs to 100 lbs: over 100 lbs: At work, my job includes Constantly Often Sometimes Never Constantly Often Sometimes Never Repetitive Hand Movement: Repetitive Foot Movement: Power Gripping: Precision Handling: Balancing: Use of computer mouse/touch pad: Timed work for efficiency:			\Rightarrow		Stair Cli	mbing:			Hours
Using the Telephone: Pushing: Hours Pulling: Lifting Overhead: Hours At work, my job requires that I lift Constantly Often Sometimes Never 10 lbs or less: 11 lbs to 25 lbs: 26 lbs to 50 lbs: 51 lbs to 75 lbs: 76 lbs to 100 lbs: At work, my job includes Constantly Often Sometimes Never Constantly Often Sometimes Never Sometimes Never Often Sometimes Never Power Gripping: Repetitive Hand Movement: Repetitive Foot Movement: Power Gripping: Precision Handling: Balancing: Use of computer mouse/touch pad: Timed work for efficiency:	,, , , , , , , , , , , , , , , , , , , ,				Ladder C	Climbing:			Hours
Pushing: Pulling: Hours Hours At work, my job requires that I lift Constantly Often Sometimes Never 10 lbs or less: 11 lbs to 25 lbs: 26 lbs to 50 lbs: 51 lbs to 75 lbs: 76 lbs to 100 lbs: At work, my job includes Constantly Often Sometimes Never Repetitive Hand Movement: Repetitive Foot Movement: Power Gripping: Precision Handling: Balancing: Use of computer mouse/touch pad: Timed work for efficiency:					Using a	Computer	:		Hours
Pulling: Lifting Overhead: Hours At work, my job requires that I lift Constantly Often Sometimes Never 10 lbs or less: 11 lbs to 25 lbs : 26 lbs to 50 lbs : 51 lbs to 75 lbs : 76 lbs to 100 lbs : Over 100 lbs : At work, my job includes Constantly Often Sometimes Never Constantly Often Sometimes Never Repetitive Hand Movement : Repetitive Foot Movement : Power Gripping : Precision Handling : Balancing : Use of computer mouse/touch pad : Timed work for efficiency :					Using the	e Telephoi	ne:		Hours
At work, my job requires that I lift Constantly Often Sometimes Never 10 lbs or less: 11 lbs to 25 lbs: 26 lbs to 50 lbs: 51 lbs to 75 lbs: 76 lbs to 100 lbs: Over 100 lbs: At work, my job includes At work, my job includes Constantly Often Sometimes Never Repetitive Hand Movement: Repetitive Foot Movement: Power Gripping: Precision Handling: Balancing: Use of computer mouse/touch pad: Timed work for efficiency:					Pushing	:			Hours
At work, my job requires that I lift Constantly Often Sometimes Never 10 lbs or less: 11 lbs to 25 lbs : 26 lbs to 50 lbs : 51 lbs to 75 lbs : 76 lbs to 100 lbs : over 100 lbs : At work, my job includes Constantly Often Sometimes Never Repetitive Hand Movement : Repetitive Foot Movement : Power Gripping : Precision Handling : Balancing : Use of computer mouse/touch pad : Timed work for efficiency :					Pulling:				Hours
10 lbs or less: 11 lbs to 25 lbs: 26 lbs to 50 lbs: 51 lbs to 75 lbs: 76 lbs to 100 lbs: At work, my job includes Constantly Often Sometimes Never Repetitive Hand Movement: Repetitive Foot Movement: Power Gripping: Precision Handling: Balancing: Use of computer mouse/touch pad: Timed work for efficiency:					Lifting C	Overhead:			Hours
10 lbs or less: 11 lbs to 25 lbs: 26 lbs to 50 lbs: 51 lbs to 75 lbs: 76 lbs to 100 lbs: At work, my job includes Constantly Often Sometimes Never Repetitive Hand Movement: Repetitive Foot Movement: Power Gripping: Precision Handling: Balancing: Use of computer mouse/touch pad: Timed work for efficiency:	At work, m	ny job requires that	t I lift	Constai	ntly	Ofte	en	Sometimes	Never
26 lbs to 50 lbs : 51 lbs to 75 lbs : 76 lbs to 100 lbs : over 100 lbs : At work, my job includes Repetitive Hand Movement : Repetitive Foot Movement : Power Gripping : Precision Handling : Balancing : Use of computer mouse/touch pad : Timed work for efficiency :									
51 lbs to 75 lbs : 76 lbs to 100 lbs : over 100 lbs : At work, my job includes Repetitive Hand Movement : Repetitive Foot Movement : Power Gripping : Precision Handling : Balancing : Use of computer mouse/touch pad : Timed work for efficiency :	11 lbs to 25 lb	os:					\longrightarrow		{
76 lbs to 100 lbs : over 100 lbs : At work, my job includes Repetitive Hand Movement : Repetitive Foot Movement : Power Gripping : Precision Handling : Balancing : Use of computer mouse/touch pad : Timed work for efficiency :	26 lbs to 50 lb	os:				-	}		1
over 100 lbs : At work, my job includes Constantly Often Sometimes Never Repetitive Hand Movement : Repetitive Foot Movement : Power Gripping : Precision Handling : Balancing : Use of computer mouse/touch pad : Timed work for efficiency :									
At work, my job includes Repetitive Hand Movement: Repetitive Foot Movement: Power Gripping: Precision Handling: Balancing: Use of computer mouse/touch pad: Timed work for efficiency:									
Repetitive Hand Movement: Repetitive Foot Movement: Power Gripping: Precision Handling: Balancing: Use of computer mouse/touch pad: Timed work for efficiency:	over 100 Ibs:]		(
Repetitive Foot Movement: Power Gripping: Precision Handling: Balancing: Use of computer mouse/touch pad: Timed work for efficiency:	At work, my job includes Cons		Constai	ntly	Ofte	en	Sometimes	Never	
Power Gripping: Precision Handling: Balancing: Use of computer mouse/touch pad: Timed work for efficiency:	Repetitive Hand Movement :								
Precision Handling: Balancing: Use of computer mouse/touch pad: Timed work for efficiency:									
Balancing: Use of computer mouse/touch pad: Timed work for efficiency:									
Use of computer mouse/touch pad : Timed work for efficiency :		ndling:] [
Timed work for efficiency:		iter mouse/touch and						-	{
				}		-	}		{
Simultaneous computer & terephone.	Simultaneous computer & telephone :					-			$\langle \cdot \rangle$



INJURY INFORMATION

PATIENT #	‡					
Name:	ERIK VELIE		SSN:	XXX-XX9999		
INJURY IN	FORMATION #					
Briefly descri	be your injury :					
					Yes	No
Did you go	to the Emergency Ro	oom at a Hospital?				
If not an En	nergency Room, Ad	you go to some other typ	pe of medical fac	ility?		
Were x-rays	s taken?					
If an auto ac	ecident, was the vehi	cle drivable after the acc	cident?			
Do you have	e any previous injury	to the sense area?				
Are you stil	l being treated for th	is injury?				
If you are st	till being treated for	this injury, by whom?				
Name:						
Address:						
City, Zip:						
Phone	Phone					



PAIN INFORMATION

Document Date: 05/23/23

PATIENT

Name: SSN: XXX-XX9999

PAIN INFORMATION

Draw the location of your pain on the body outlines using the following markers.

A = Achesches

B = Burning

N = Nurnbness

P = Pins & Needles

S = Stabbing

0 = Other







Document Date: 05/23/23

Name:	ERIK VELIE	SSN:	XXX-XX9999				
WAIVER INFORMATION							
*	LEGAL AGE AND HEREBY CER WN DISCRETION AND DECISIO						

I, AM OF LEGAL AGE AND HEREBY CERTIFY THAT I WENT TO WEST STAR PHYSICAL THERAPY OF MY OWN DISCRETION AND DECISION TO RECEIVE PHYSICAL THERAPY TREATMENTS. I UNDERSTAND THAT I MAY OR MAY NOT HAVE A DOCTORS REFERRAL AND THAT GETTING PHYSICAL THERAPY IS MY TREATMENT OF CHOICE. I ALSO UNDERSTAND THAT I WILL BE EVALUATED BY A LICENSED AND CERTIFIED PHYSICAL THEREAPIST AND THAT THE THERAPISTS EVALUATION AND RECOMMENDATION WILL BE EXPLAINED TO ME BEFORE TREATMENT. I UNDERSTAND THAT THE PHYSICAL THERAPIST WILL COMMUNICATE WITH MY MEDICAL DOCTOR TO GET AUTHORIZATION FOR MY PHYSICAL THERAPY TREATMENTS. I ALSO UNDERSTAND THAT I CANNOT RECEIVE PHYSICAL THERAPY TREATMENTS FROM WEST STAR PHYSICAL THERAPY WITHOUT SIGNED AUTHORIZATION FROM MY MEDICAL DOCTOR. FURTHERMORE, I UNDERSTAND THAT PHYSICAL THERAPY, WHILE DESIGNED TO, IS NOT GUARANTEED TO IMPROVE MY CURRENT CONDITION.

IF MINOR:

PATIENT #

NAME OF PARENT OF GUARDIAN:	
RELATIONSHIP:	
PATIENT SIGNATURE:	
Date	
WITNESSED BY:	
NAME OF STAFF MEMBER:	
SIGNATURE:	
Date	



Notice of Privacy Practices

Document Date: 05/23/23

PATIENT #						
Name:	ERIK VELIE	SSN:	XXX-XX9999			

PRIVACY INFORMATION Page (1 of 3)

Treatment: Your health information may be used by staff members or disclosed to other health care professionals for the purpose of evaluating your health, diagnosing medical conditions and providing treatment. For Example, results of laboratory tests and procedures will be available in your medical record to all health professionals who may provide treatment or who may be consulted by staff members.

Uses and Disclosures

Treatment: Your health information may be used by staff members or disclosed to other health care professionals for the purpose of evaluating your health, diagnosing medical conditions and providing treatment. For Example, results of laboratory tests and procedures will be available in your medical record to all health professionals who may provide treatment or who may be consulted by staff members.

Payment: Your health information may be used to seek payment from your health plan, from other sources of coverage such as an automobile insurer, or from credit card companies that you may use to pay for services. For example, your health plan may request and receive information on dates of service, services provided and the medical condition being treated.

Health Care Operations: Your health information may be used as necessary to support the day-to-day activities of and management of West Star Physical Therapy. For Example, information on the services you received may be used to support budgeting and financial reporting and activities to evaluate and promote quality.

Law Enforcement: your health information may be disclosed to law enforcement agencies to support government audits and inspections, to facilitate law enforcement investigations and to comply with government mandated reporting.

Public Health Reporting: Your health care information may be disclosed to public health agencies as required by law. For example, we are required to report certain communicable diseases to the states public health department.

Other Uses and Disclosures That Require Your Authorization: Disclosure of your health information or its use for any purpose other than those listed above requires your specific, written authorization. However, your decision to revoke authorization will not affect of undo any use or disclosure of information that occurred before you notified us of your decision to revoke your authorization.



DATERIT #

Notice of Privacy Practices

Document Date: 05/23/23

ranchi #						
Name :	ERIK VELIE	SSN:	XXX-XX9999			
PRIVACY	INFORMATION Page (2 of 3)					
Appointme	ent Reminders: Your health info	ormation will be used by our	staff to send you appointment reminder	S.		
interesting		ent of your medical condition	to send you information that you may fi on. From our database, we may also send to of interest to you**			
	Please do not use my l	nealth information for the al	pove-mentioned services.			

Individual Rights: You have certain rights under the federal privacy standards. These include:

The right to request restrictions on the use and disclosure of your protected health care information;

The right to receive confidential communications concerning your medical condition and treatment;

The right to inspect and copy your protected health information;

The right to amend or submit corrections to your protected health care information;

The right to receive an accounting of how and to whom your protected health information has been disclosed;

The right to receive a printed copy of this notice

West Star Physical Therapy Duties: We are required by law to maintain the privacy of your protected health information and to provide you with this notice of privacy practices.

We are also required to abide by the privacy policies and practices that are outlined in this notice.

Right to Revise Privacy Practices: As permitted by law, we reserve the right to amend to modify our privacy policies and practices. These changes in our policies and practices may be required by changes in federal and state laws and regulations. Upon request, we will provide you with the most recently revised notice on any office visits. The revise policies and practices will be applied to all protected health information we maintain.



Notice of Privacy Practices

Document Date: 05/23/23

P	T	IEI	VT	#

Name:	ERIK VELIE	SSN:	XXX-XX9999

PRIVACY INFORMATIONPage (3 of 3)

Requests to Inspect Protected Health Information: You may generally inspect or copy the protected health information we maintain. As permitted by Federal Regulations we require that requests to inspect or copy protected health information be submitted in writing. You may obtain a form to request access to your records by contacting our corporate office. Your request will be reviewed and will generally be approved unless there are legal or medical reasons to deny the request

Complaints: If you would like to submit a comment or complaint about our privacy practices, you can do so by sending a letter outlining your concerns to:

West Star Physical Therapy PO BOX 6209 Garden Grove, CA 92846

If you believe that your privacy rights have been violated, you should call the matter to our attention by sending a letter describing the cause of concern to the same address. You will not be penalized or otherwise retaliated against for filing a complaint.

Contact Person: The address of the person you may contact for further information consenting privacy practices is:

West Star Physical Therapy PO BOX 6209 Garden Grove, CA 92846

Effective Date: This notice is effective as of May 18, 2012



Notice of Privacy Practices

PATIENT	#		
Name:	ERIK VELIE	SSN:	XXX-XX9999
PRIVACY	ACKNOWLEDGMENT INFORMATION		
acknowled	Acknowledgement of Receipeived, read and fully understand the Notice of and understand that West Stat Physical the outlined in the notice.	Privacy Pr	ractices for West Star Physical therapy and
	Patient : SIGNATURE:_ Date_		
Patient Re	presentative is required if the patient is a mino Name of Patient Representative:_ Relationship to Patient :_ SIGNATURE:_ Date_	•	t is an adult who is unable to sign this form.