

Devine Dental

17430 B NorthWest Freeway
Houston, TX 77040
Tel: (713)856-5000 Fax: (713)856-8090

Acknowledgment of Privacy Notice

Ihave received a copy of Devine Dental
(Name of Patient/Parent's Name if Minor)

Notice of Privacy Practices.

.....
(Signature of Patient/Parent's Signature if Minor)

Staff Will Fill Out This Section If Patient's Signature Not Obtained

Our Office made a good faith effort to obtain Acknowledgement of Receipt of our Notice of Privacy Practices, but it could not be obtained for the following reason:

- Patient refused to sign.
- Emergency situation kept us from Obtaining the patient's signature.
- language barriers kept us from obtaining the patient's signature.
- Other.....