

**ACKNOWLEDGEMENT OF UPDATED NOTICE OF PRIVACY  
PRACTICES  
EFFECTIVE SEPTEMBER 23,2013**

I have reviewed and received copies (if requested) of the updated Notice of Privacy Practices. I have discussed any questions I may have about the updated notice.

Patient(s)

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\_\_\_\_\_  
Signature of patient or guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

**FOR APPOINTMENT CONFIRMATION:**

**EMAIL** \_\_\_\_\_

**CELL # FOR TEXT** \_\_\_\_\_

**\*\*To receive text message reminders you must opt in by texting  
westmoreland to 622622**