



Kewa Pueblo Health Corporation

P.O. BOX 340 85 W. HIGHWAY 22
SANTO DOMINGO PUEBLO, NEW MEXICO 87052
TELEPHONE (505) 465-3060 FAX (505) 465-1178

NOTICE OF PRIVACY PRACTICES ACKNOWLEDGEMENT OF RECEIPT

WRITTEN ACKNOWLEDGMENT NOT OBTAINED

Patient Name: _____

DOB: _____

Please document your efforts to obtain acknowledgment and reason it was not obtained.

- Notice of Privacy Practices Given - Patient Unable to Sign
- Notice of Privacy Practices Given - Patient Declined to Sign
- Notice of Privacy Practices and Acknowledgment Mailed to Patient
- Other Reason Patient Did Not Sign _____

Reason:

Signature of SDHC Representative

Date

Print Name

Department