**Confidential Contact**

The \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Health Department makes every effort to protect the privacy of our clients. We do not release medical records or verbal information to anyone unless we have your written authority to do so. We also will not disclose that you have been or will be here for services.

**In addition** to protection of your medical record information, we offer for you to be identified as a “Confidential Contact”. This means that upon your request we will not contact you by mail, phone or at home.

We do request that you provide us with an emergency contact name and phone number. You may also provide us with a phone number and specify to contact you at that number only.

If we need to contact you by phone, staff will not identify themselves unless they are certain that they are speaking directly with you (for example confirm your SS#, password, etc).

**Please note: we are obligated to contact you for follow-up and treatment of any abnormal test result. Please advise our staff how you wish to be contacted.**

If you wish to be identified as a “Confidential Contact”, as stated above, please let the clerk know upon registration. Thank you.

***Persons requesting confidential contact status will be given an appointment to return in 3 weeks to discuss test results. It is imperative that this appointment is kept!***