



I acknowledge that I have access to the following policies at Vitality Health and Wellness:

- HIPAA (Health Insurance Portability and Accountability Act)
- Financial Policy
- Patient Rights and Responsibilities
- Disclosures and Consents
- Controlled Substance Policy

All Policies are located in our front lobby in the white notebook on the front desk. They are also located online at www.vitalityhealthservices.net. If you have any questions, or if you would like a copy to take home with you, please feel free to ask to speak to our office manager.

Patient Name: _____ Date: _____

Signature: _____