

ARTISTRY.SCIENCE.COMPASSION MELLUL EYE & FACIAL PLASTIC SURGERY, PC DISCLOSURE OF PROTECTED HEALTH INFORMATION

PATIENT	1
NAME:	DATE OF FIRST VISIT: /
I hereby give my consent for MELLUL EYE &	FACIAL PLASTIC SURGERY and Dr. Steven D.

I hereby give my consent for MELLUL EYE & FACIAL PLASTIC SURGERY and Dr. Steven D. Mellul to use and disclose protected health information (PHI) about me to carry out treatment, payment and healthcare operations (TPO). (MELLUL EYE & FACIAL PLASTIC SURGERY, PC, Notice of Privacy Practices provides a more complete description of such uses and disclosures) I have the right to review the Notice of Privacy Practices prior to signing this consent. MELLUL EYE & FACIAL PLASTIC SURGERY, reserves the right to revise its Notice of Privacy Practices at any time. A revised Notice of Privacy Practices may be obtained by forwarding a written request to Steven D Mellul/Privacy officer at 525 Route 73 South, Suite 305A, Marlton, NJ 08053.

With this consent, MELLUL EYE & FACIAL PLASTIC SURGERY may call my home or other alternative location and leave a message on voice mail or in person in reference to any items that assist the practice in carrying out TPO, such as appointment reminders, insurance items and any calls pertaining to my clinical care, including laboratory results among others. With this consent, MELLUL EYE & FACIAL PLASTIC SURGERY, may mail to my home or other alternative location any items that assist the practice in carrying out TPO, such as appointment reminders cards and patient statements as along as they are marked Personal and Confidential. With this consent, MELLUL EYE & FACIAL PLASTIC SURGERY may e-mail to my home or other alternative location any items that assist the practice in carrying out TPO, such as appointment reminder cards and patient statements. I have the right to request that MELLUL EYE & FACIAL PLASTIC SURGERY, restricts how it uses or discloses my PHI to carry out TPO. However, the practice is not required to agree to my requested restrictions, but if it does, it is bound by this agreement.

By signing this form, I am consenting to MELLUL EYE & FACIAL PLASTIC SURGERY its Doctors and staff the use and disclosure of my PHI to carry out TPO.

I may revoke my consent in writing except to the extent that the practice has already made disclosures in reliance upon my prior consent. If I do not sign this consent, or later revoke it, Dr. Steven D. Mellul may decline to provide treatment to me.

THE UNDERSIGNED HAS READ AND UNDERSTANDS THE ABOVE TERMS AND CONDITIONS

Signature of Patient of Legal Guardian	Date
Patients Name	Date
Print Name of Patient or Legal Guardian	 Date



ARTISTRY.SCIENCE.COMPASSION MELLUL EYE & FACIAL PLASTIC SURGERY, PC

Dr. Mellul & Mellul MELLUL EYE & FACIAL PLASTIC SURGERY known herein as the "Physician" agree to provide treatment to: you the ("Patient") The Physician takes pride in being able to extend a greater degree of privacy than is required by law. Federal and State privacy laws are complex. Unfortunately, some medical offices try to find loopholes around these laws. For example, physicians are forbidden by law from receiving money for selling lists of patients or medical information to companies to market their products or services directly to patients without authorization. Some medical practices, though, can lawfully circumvent this limitation by having a third party perform the marketing. While personal data is never technically in the possession of the company selling its products or services, the patient can still be targeted with unwanted marketing information. Physician believes this

is improper and may not be in the patients' best interest. Accordingly, Physician agrees not to provide medical information for the purpose of marketing directly to the Patient. Regardless of legal privacy loopholes, Physician will never attempt to leverage its relationship with Patient by seeking Patient's consent for marketing products for others.

We want your feedback. If our office gets it right, tell us. If we could do something better, tell us. We take

quality improvement seriously. While there are scores of "rating sites" in cyberspace, many fail to provide useful information. Let's get it done right. We can make recommendations as to which sites follow minimum standards for fairness and balance. Just ask us.

Physician has invested significant financial and marketing resources in developing the practice. Nothing in

this Agreement prevents a patient from posting commentary about the Physician - his practice, expertise, and/or treatment - on web pages, blogs, and/or mass correspondence. In consideration for treatment and the above noted patient protection, if Patient prepares such commentary for publication on web pages, blogs, and/or mass correspondence about Physician, the Patient exclusively assigns all Intellectual Property rights, including copyrights, to Physician for any written, pictorial, and/or electronic commentary. This assignment shall be operative and effective at the time of creation (prior to publication) of the commentary.

This Agreement shall be in force and enforceable for a period of five years from Physician's last date of

service to Patient. As a matter of office policy, Physician is requiring all patients in its practice sign the Mutual Agreement so as to establish that any anonymous or pseudonymous publishing or airing of commentary will be covered by this agreement for all Physician's patients. Further, this Agreement will survive for a minimum of three years beyond any termination of the Physician-Patient relationship.

Patient and Physician acknowledge that breach of this Agreement may result in serious, irreparable harm.



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Patient and Physician agree to the right of equitable relief (including but not limited to injunctive relief). Should a breach of this Agreement result in litigation, the prevailing party in the litigation shall be entitled to reasonable costs, expenses, and attorney fees associated with the litigation. Patient has been given the opportunity to ask questions and receive satisfactory and adequate explanations.

SO AGREED THIS _	DAY OF	, 201 _	
Sign here:		_(PATIENT)	
Dr. Steven D. Mellul,	and MELLUL EYE	& FACIAL PLASTIC	SURGERY.