

# Periodontal Centers of Rochester

## Caton, Blieden, Romano, DDS, PC

\*You May Refuse to Sign This Acknowledgement\*

I have received a copy of this office's notice of Privacy Practices.

Print

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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### For Office Use Only

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We attempted to obtain written acknowledgement of receipt of our Notice of Privacy Practices, but acknowledgement could not be obtained because:

- Individual refused to sign
- Communication barriers prohibited obtaining the acknowledgment
- An emergency situation prevented us from obtaining acknowledgement
- Other (Please Specify): \_\_\_\_\_