



**Truesdale  
Medical  
Center**

5064 Rivers Avenue  
North Charleston, SC 29405  
truesdalemedical.org  
palmettocare.org

TMC Office - 843-266-3870  
PCC Office - 843-747-2273  
Fax - 843-225-3674



**Palmetto  
Community  
Care**

## HIPAA-ACKNOWLEDGEMENT OF RECEIPT Notice of Privacy Practices

Printed Patient Name: \_\_\_\_\_

Patient Birth Date: \_\_\_\_\_

We at Truesdale Medical Center and Palmetto Community Care are required by law to maintain the privacy of and provide individuals with the attached Notice of our legal duties and privacy practices with respect to protected health information. If you have any objections to the Notice, please ask to speak with our HIPAA Compliance Officer in person or by phone at 843-747-2273. A copy of the Notice is available upon request.

I hereby acknowledge that I have reviewed the HIPAA Notice of Privacy Practice document.

\_\_\_\_\_  
Signature of patient or patient's representative/parent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed name of patient or patient's representative/parent

\_\_\_\_\_  
Relationship to patient