

CK Dental Surgery

B2-06 Sunway Velocity Mall. Lingkaran SV, Sunway Velocity. 55100 Kuala Lumpur. Malaysia.

Tel :+017-371 3328 , +603-2782 4825 , +603-2782 4826

Email : ckdentalsurgery@gmail.com

FULL NAME: _____

HOME OR MOBILE NUMBER: _____

HOME ADDRESS: _____

EMAIL ADDRESS: _____

Are you filing for someone else? YES NO

If yes, whose health information privacy rights do you believe were violated?

FIRST NAME: _____

LAST NAME: _____

Who do you believe violated your (or someone else's) health information privacy rights or committed another violation of the privacy rule?

When do you believe that the violation of health information privacy rights occurred? (List dates)

Describe briefly what happened. How and why do you believe your (or someone else's) health information rights were violated, or the privacy rule otherwise was violated? Please be as specific as possible)

Please sign and date this complaint and submit to the Practice Manager.

SIGNATURE:

.....

Patient complaints related to privacy violation

PRIVACY INQUIRY / COMPLAINT FORM
For Patient Use Only

Date: _____

Your Full Name : _____

Home Phone : _____

Work Phone : _____

Address : _____

Date of Birth: _____

Are you filing this complaint for someone else? Yes (if yes, please specify as below), No (*if No, go to next section*)

If Yes, whose health information privacy rights do you believe were violated?

Patient's First Name :

Patient's Last Name :

Patient's Date of Birth:

Your Relationship to the patient:

When do you believe that the violation of health information privacy rights occurred?

List Date(s), (include *clinic visit dates if appropriate*)

Describe briefly how and why you believe a privacy violation occurred

Please sign and date:

Signature:

Please sign and return form to:
Blanc Dental Clinic
2F-35, 2nd Floor, Bangsar Village II,
No. 2 Jalan Telawi 3, Bangsar Baru,
59100 Kuala Lumpur