

Suffolk Pediatric Dentistry and Orthodontics

Philip M. Coniglio, D.D.S. • Robert J. Serino, D.D.S & Associates

ACKNOWLEDGMENT OF NOTICE OF PRIVACY

The undersigned acknowledges receipt of a copy of the currently effective notice of privacy practices for "Suffolk Pediatric Dentistry". A copy of the signed receipt date must be as effective as the original. You may refuse to sign this recognition.

Print Name
Signature
Date
FOR OFFICE USE ONLY
We attempted to obtain written acknowledgment of our Notice of Privacy Practices but could not be obtained because:
□ Individual refused to sign
☐ Communication barriers prohibited obtaining recognition
☐ An emergency situation prevented us from obtaining acknowledgment
□ Others (specify)

8 Medical Drive • Port Jefferson Station, NY 11776 • Phone: 631.928.8585 • Fax: 631.928.8861 6144 Route 25A, Suite D20 • Wading River, NY 11792 • Phone: 631.929.7575 • Fax: 631.929.6664 320 West Main Street • Sayville, NY 11782 • Phone: 631.750.9175 • Fax: 631.750.9177