



First Latch & Counseling, Inc.

HIPAA Privacy Authorization Form

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

I grant permission to First Latch & Counseling Inc., its officers, directors, owners, principals, agents, volunteers, trainees and staff specifically including, without limitation, Jennifer Leopold, Tova G. Ovits and Chaya Deborah Stern (collectively “First Latch & Counseling Inc.”) to share pertinent information about this consultation along with any and all future personal, phone, text and/or email communications with my/our family physicians and health care providers, the referring person, spouse or partner, my/our community breastfeeding helper and/or my/our insurance companies.

I understand that I have a right to revoke this authorization by providing prior written notice to First Latch & Counseling Inc. at 1827 E. 28th Street, Brooklyn, NY 11229. However, this authorization may not be revoked if First Latch & Counseling Inc. has taken action on this authorization prior to receiving my written notice.

First Latch & Counseling Inc. reserves the right to change the privacy practices that are described in this notice. I may obtain a revised notice of privacy practices by writing or calling the First Latch & Counseling Inc. at 917-750-9708 and requesting a revised copy be sent in the mail. Any complaint about an alleged breach of privacy must be submitted in writing to First Latch & Counseling Inc. at the address provided above.

I understand that I have a right to have a copy of this authorization and further understand that this authorization is voluntary and that I may refuse to sign this authorization.

I, _____ on this date of _____ do hereby consent and acknowledge my agreement to the terms set forth in the HIPAA INFORMATION FORM and any subsequent changes in office policy. I understand that this consent shall remain in force from this time forward.

Jennifer Leopold, LMSW, IBCLC 917-750-9708 * Tova G. Ovits, IBCLC 718-974-1647
Chaya Deborah Stern, RN, IBCLC 347-885-2602 * Stephanie Minnich, CBC 301-440-5663