



Sugar Land Pediatric Clinic
**WRITTEN ACKNOWLEDGEMENT OF RECEIPT OF
PRIVACY PRACTICES**

By signing below, you acknowledge receiving the Notice of Privacy Practices found in the office Telfair Pediatrics P.A, DBA Sugar Land Pediatric Clinic. The Notice explains how Sugar Land Pediatric may use and disclose your child's protected health information for treatment, payment, and health care operations purposes. "Protected health information" means your child's personal health information found in his/her medical and/or billing records.

Patient's Name Patient's Representative

Relationship to Patient Representative's Signature Date