



**Jon D. Nickelsen, D.D.S.**

523 North McLean Boulevard

Elgin, Illinois 60123

847-742-8811 - Fax 847-742-8818

[info@nickelsendental.com](mailto:info@nickelsendental.com)

[www.nickelsendental.com](http://www.nickelsendental.com)

---

**HIPAA ACKNOWLEDGEMENT**

---

I, \_\_\_\_\_, have read the **Health Insurance Portability and Accountability Act (HIPAA)**, Privacy Policy and Theft Detection and Response Procedures of Dr. Jon Nickelsen, and understand the contents. I have been instructed regarding situations that may suggest possible identity theft as described in the Identity Theft Detection and Response Policy and Procedures.

I authorize the office of Dr. Jon Nickelsen to disclose protected health information to other health and dental providers to assist them in providing treatment to me.

---

Print Name

---

Signature

---

Date