



MACOMB  
Confidentiality Agreement

\_\_\_\_\_ (“Individual”), and McLaren Macomb (“MM”) have entered into an agreement to provide an educational experience, through which Individual may have access to confidential information (oral, written, visual, or computer supported information not otherwise available to the public at large) about patients of MM, their families, and/or other MM matters.

It is the policy of MM to provide the highest level of privacy and confidentiality with respect to the Medical Information for our patients as may be required by federal laws and regulations, including, but not limited to the Health Insurance Portability and Accountability Act (“HIPAA”), and any applicable state laws and regulations.

In light of the prevailing privacy concerns of MM, Individual agrees that he/she shall hold all confidential information of which he/she becomes aware, in the truest confidence, as required by law.

It is further understood and agreed that any unauthorized disclosure, copying and/or misuse of Confidential Information is a serious breach of duty and will result in termination of this agreement.

If the unauthorized disclosure results in civil litigation or criminal fines or penalties, it is understood that the Individual will be held responsible for these costs, fines and attorney fees.

If I have any questions about my obligation under this agreement or about MPH policies and procedures related to Confidentiality, I understand that I may direct my questions to Maureen Decker, MM Compliance Officer at 586.741.4305

I have read this Confidentiality Agreement and agree to its terms.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Individual (Print)

\_\_\_\_\_  
Signature of Individual

\_\_\_\_\_  
Parent or Guardian Name – if a Minor (Print)

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Hospital/Facility Department Representative