MEDICAL RECORD

CHRONOLOGICAL RECORD OF MEDICAL CARE

PRIVACY ACT STATEMENT: This information is subject to the Privacy Act of 1974 (5 U.S.C. Section 552a). This information may be provided to appropriate Government agencies when relevant to civil, criminal or regulatory investigations or prosecutions. The Social Security Number, authorized by Public Law 93-579 Section 7 (b) and Executive Order 9397, is used as a unique identifier to distinguish between employees with the same names and birth dates and to ensure that each individual's record in the system is complete and accurate and the information is properly attributed.

ACKNOWLEDGEMENT OF MILITARY HEALTH SYSTEM NOTICE OF PRIVACY PRACTICES

The signature below only acknow Privacy Practices, effective date 1	-	of the Military	Health Syste	ems Notice of
Signature of patient/patient representation	ve	Date		
Last Name of patient/patient representa	tive I	First Name		Middle Initial
DoD EDIPN				
Patient/representative declined to si	gn <u></u> Staff in i	itials		
HOSPITAL OR MEDICAL FACILITY	STATUS	DEPARTMENT/		RECORDS MAINTAINED AT
SPONSOR'S NAME PATIENT'S IDENTIFICATION: (For typed or written entries,	ID NO. give: Name - last, first, mid	RELATIONSHIP dle; ID NUMBER or Social	_	ER WARD NUMBER



Security Number; Gender; Date of Birth; Rank/Grade.)

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