



Florham Park Memorial First Aid Squad
DENIAL AMENDMENT FOR PROTECTED HEALTH INFORMATION (PHI)

When complete please send to Compliance@fpfirstaid.org or

60 Felch Road
Florham Park NJ 07932

DENIAL AMENDMENT RESPONSE

This form is available to use to respond to the denial of your amendment request or to request that your original amendment request and our denial be attached to future disclosures of the Protected Health Information (PHI) that you requested be amended. If you need assistance completing the form, please contact the Florham Park Memorial First Aid Squad. Please provide a copy of your original denial letter to respond to this request.

If you need assistance in completing this form, or with a change of address please contact Compliance@fpfirstaid.org. WHEN COMPLETED AND SIGNED PLEASE EMAIL OR MAIL TO:

60 Felch Road
Florham Park, NJ 07932
Compliance@fpfirstaid.org

Section A: Patient's contact information that was denied the amendment.

Name
Social Security Number
Date of Birth
Address
City State ZIP
Telephone Number
E-mail Address

Section B: Please select the appropriate option. You may select only one:

Option 1: Make a statement of Disagreement below.

Option 2: I do not choose to submit a Statement of Disagreement. Instead, I request that you include my original Request for an Amendment and subsequent denial with any future disclosures of the PHI that I requested to amend.

Section C: Signature - This document must be signed by the individual, parent of a minor child or the individual's personal representative.

I understand that I can only sign on behalf of a minor child under the age of 18, unless there is proof of legal guardianship.

Signature
Date

Section D: If signed by a personal representative, please complete the information below

If you are signing as a Power of Attorney, Legal Guardian, Executor or Administrator, please attach a copy of the legal documents.

Representative's Name
Relationship to Individual
Representative's Address
City State ZIP
Telephone Number
Representative's E-mail Address

