Neurology & Neuroscience Associates, Inc. is part of the Western Reserve Health System (WRHS). As part of our involvement with WRHS, we have implemented an electronic medical record in order to improve the efficiency in our offices and provide the highest quality healthcare services to our patients.

As part of that process, we will be able to check the medication history of all of our patients via a secure, electronic system; and we are able to seamlessly share patients’ clinical information with other providers that are or may be involved with our patients’ care. In addition, we continue to follow the regulations associated with the Health Insurance Portability and Accountability Act (HIPAA) and a notice of our privacy practices is available to you upon request.

We hope you recognize the importance of the steps we are taking in order to provide high quality, efficient, healthcare services. As always, our patients are our number one priority.

Sincerely,

The Physicians and Staff of Neurology & Neuroscience Associates, Inc.

Please sign below indicating your receipt of this notification:

Print Name: ___________________________________________________________

Signed: ________________________________________________________________ Date: __________

Parent or Guardian Signature (if applicable):

______________________________________________________________ Date: __________