

Nebraska Endocrinology Specialists  
8207 Northwoods Dr.  
Lincoln, NE 68505  
402-484-3440

## Consent to Leave Voicemail on Answering Machine

Nebraska Endocrinology Specialists (NES) staff may contact you by telephone with information such as medication adjustments, or instruction from your doctor. NES staff can leave detailed medical information on your answering machine with your consent.

By signing this "Consent to Leave Voicemails", you consent to NES staff leaving voice mail message containing detailed medical information on the phone number(s) listed below. This information may include, but not limited to, demographic information (partial or full name, date of birth, address, etc.), billing information, medical information (diagnosis, medications, test results, etc.).

Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Do not leave information on any phone number

I understand that NES cannot require me to sign this consent form in order to receive treatment.

I understand that I have the right to revoke this consent at any time by sending a written request to Nebraska Endocrinology Specialists. This "Consent to Leave Voicemail" is valid until such revocation is received by NES. My decision to revoke this consent does not apply to any information disclosed in a voicemail prior to the date of my revocation of this consent.

I understand that I am entitled to a copy of this completed consent form.

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_