

Facsimile Cover Letter

The University of Texas at Dallas
Callier Center for Communication Disorders
1966 Inwood Rd.
Dallas, TX 75235
Telephone number: 214-905-3000
Facsimile number: 214-905-3016

Date: _____ Time: _____ # of pages (incl. Cover:) _____

Recipient Information

To: _____
(Name of authorized receiver)

(Name of authorized receiver's facility)

Telephone: _____ Fax: _____

Sender Information

From: _____

Telephone: _____ Fax: _____

Name of UTD Callier Center personnel sending fax: _____

Comments: _____

Confidentiality Notice: Confidential Health Information Enclosed

Protected Health Information (PHI) is personal and sensitive information related to a person's health care. It is being faxed to you after appropriate authorization. You, the recipient, are obligated to maintain it in a safe, secure and confidential manner. Re-disclosure without additional patient consent or as permitted by law is prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties described in federal and state law.

IMPORTANT WARNING: This message is intended for the use of the person or entity to which it is addressed and may contain information that is privileged and confidential, the disclosure of which is governed by applicable law.

If you are not the intended recipient, or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any disclosure, copying or distribution of this information is **Strictly Prohibited**. If you have received this message by error, please notify the sender immediately to arrange for return or destruction of these documents.