

GINA Acknowledgement

Dear Patient,

The Genetic Information and Nondiscrimination Act of 2008 (GINA) prohibits *employers* from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. Genetic Information includes:

- An individual's family medical history
- Results of an individual's or family member's genetic tests
- The fact that an individual or an individual's family member sought or received genetic services
- Genetic information of a fetus carried by an individual or an individual's family member
- An embryo lawfully held by an individual or family member receiving assistive reproductive services.

Therefore, you do not have to answer any family history questions or provide any other genetic information on our medical documents in order to be seen by our providers.

If you choose to complete the family history questions or provide other genetic information, our providers will use this information to assess and treat you.

We will not share your family medical history or other genetic information with your employer.

Family medical history information may be used in de-identified reports to your employer but we will never share any information with your personal name or identifying information.

By choosing to answer any family history questions my provider may ask me, or choosing to tell my provider any other genetic information, I acknowledge that I understand my rights under GINA and would be providing the information voluntarily.

Patient Name (Please Print)

Date of Birth

Patient Signature

Date

Health Center Staff

Date

Orig. 4/11, Rev. 5/11



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