

**ROBERT J. BRICKNER, M.D.**  
**MARK I. MENNING, M.D.**  
**ALBERT C. MOELLER, M.D.**  
**DANIEL C. COFFEY, M.D.**  
**LUCAS A. JULIEN, M.D.**

737 North Grand Avenue  
Lansing, MI 48906  
(517) 372-0500  
Fax (517) 482-3220

**HIPPA CONSENT FORM**

**ACKNOWLEDGEMENT OF PRIVACY NOTICE**

Signature certifies that I have been advised of and offered a copy of the Notice of Privacy Practices for the offices of Drs. Brickner, Menning, Moeller, Coffey and Julien.

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Initials of Witness