

OGGOLAANSHAHA SII DAYNTA  
 MACLUUMAADKA CAAFIMAADKA EE BUKAANKA  
 (Release of Information)



Health Information Management Department 1200 12 <sup>th</sup> Ave S., Suite 901, Seattle, WA 98144 / T: 206.548.3043 / F: 206.461.8382 limayl : healthrecords@neighborcare.org		LAMBARKA DIIWAANKA CAAFIMAADKA (ikhtiyaari)	
<b>Macluumaadka Bukaanka</b>			
Magaca Bukaanka:		Taariikh Dhalasho: / /	
Magaca Hore:		Lambarka telefonka:	
<b>Macluumaadka Laga Sii Daynayo DHANKA:</b>		<b>Macluumaadka Loo Fasaxayo DHANKA:</b>	
<input type="checkbox"/> Neighborcare Health	<input type="checkbox"/> Wax kale (arag hoos)	<input type="checkbox"/> Neighborcare Health	<input type="checkbox"/> Wax kale (arag hoos)
Magaca:		Magaca:	
Cinwaanka:		Cinwaanka:	
Magaalada:	Gobolka:	Zip:	Magaalada:
			Gobolka:
			Zip:
Telefoonka:		Telefoonka:	
Fakis:		Fakis:	
<b>Qaabkee Doonaysaa in Laguugu Soo Diro Diiwaankaaga?</b> (Mid dooro. Diiwaanada waxaa lagu diri doonaa warqad ahaan hadaan la cayimin)			
<input type="checkbox"/> Warqad	<input type="checkbox"/> Sii Dhii	<input type="checkbox"/> limayl La llaaliyay (gali cinwaan iimayl):	<input type="checkbox"/> Mychart
<b>Maxaa Xogtaan Loo Sii Daynayaa?</b>			
<input type="checkbox"/> Gudbin Daryeel	<input type="checkbox"/> Adeegsi Shaqsiyadeed	<input type="checkbox"/> Adeegsi Sharciyeed	
<input type="checkbox"/> Wax Kale:			
<b>Waa Nooc ee Macluumaadka Aad Dooneyso In La Sii Daayo?</b>			
<input type="checkbox"/> Dhammaan diiwaanada sanadkii la soo dhaafay	<input type="checkbox"/> Dhammaan diiwaanada dhammaan taariikhaha adeegga	<input type="checkbox"/> Diiwaanka tallaalka	
<input type="checkbox"/> Natiijooyinka shaybaarka ee ugu dambeeyay	<input type="checkbox"/> Natiijooyinkii ugu dambeeyay ee baaritaanka tiibayda	<input type="checkbox"/> Natiijooyinka ugu dambeeyay ee shucaaca	
<input type="checkbox"/> Wax kale (fadlan sheeg):			
<b>Xiriirka Hadalka</b>			
<input type="checkbox"/> Waxaan u fasaxayaa Neighborcare Health inay hadal ahaan ugala hadasho daryeelkayga caafimaad qofka kor ku xusan.			
<b>Xog Xasaasi ah</b>			
Ilaa aan si kale hoos ugu qeexay mooyee, waxaan oggolaanayaa dhammaan macluumaadka xasaasiga ah in la sii daayo oo ay ku jiraan baaritaanka, ogaanshaha cudurka ama daaweynta cudurka maskaxda/dhimirka, daroogada iyo/ama isticmaalka khamriga, HIV/AIDS, ama cudurada galmada lagu kala qaado.			
<input type="checkbox"/> Aniga MA oggolaanayo in macluumaadkan la sii daayo.			
<b>Taariikhda Uu Dhacayo</b>			
Oggolaanshahani wuxuu dhacayaa <i>hal sano</i> oo ka bilaabanta taariikhda hoos ku saxiixan marka laga reebo haddii haddii la qorayd: / /			
<b>Xuquuqdayda Bukaanka Neighborcare Health ahaan</b>			
Waan fahamsanahay inaan saxiixin rukhsaddan si aan u helo dheefaha daryeelka caafimaadka (daaweynta, lacag bixinta ama diiwaangelinta). Si kastaba ha noqotee, waa inaan saxiixaa foomka oggolaanshaha si aan uga qayb qaato daraasad cilmi baaris ah marka ujeedku yahay in dhinac saddexaad loo sameeyo macluumaad daryeel caafimaad.			
Waan ka noqon karaa oggolaanshahan wakhti kasta anigoo u gudbinaya codsi qoraal ah Neighborcare Health. Tani ma saamaynayso wixii macluumaad ah ee la sii daayey kahor helitaanka codsiga qoraalka.			
Marka macluumaadka daryeelka caafimaadka la shaaciyo, qofka ama hay'adda heshaa ayaa dib u soo bandhigi kara, macluumaadkaasna mar dambe ma ilaalin karaan Sharciga Gudbinta iyo La Xisaabtanka Caymiska Caafimaadka (Health Insurance Portability and Accountability Act, HIPAA) ama sharciyada kale ee gaar ahaanshaha.			

**Saxiixa Bukaanka \* ama Mas'uulka Sharciga ah**

Haddii uu saxiixay qof kale oo aan ahayn bukaanka ama mas'uulka sharciga ah, markaa fadlan keen dukumiinti kuu oggolaanaya inaad saxiixdo.

Saxiixa:	Qor Magaca: Xiriirka kala dhexeeya Bukaanka:	Taariikhda: / /
----------	---	--------------------

**Oggolaanshaha Dhallinyarada (Da'da Dhallinyarada 13-17 waxaa looga baahan yahay inay saxiixaan si ay u oggolaadaan sii deynta macluumaadka).**

Saxiixa Dhallinyarada:	Qor Magaca:	Taariikhda: / /
------------------------	-------------	--------------------

\*Bukaanada jira 18+, iyo waliba bukaanada dhallinyarada waxay xaq u leeyihiin inay codsadaan nuqulada diiwanadooda caafimaad.

Updated on 05/01/2024

Language : Somali