

Timbrook Public Safety Center  
231 East Piccadilly Street, Ste. 330  
Winchester, VA 22601

Telephone: (540) 662-2298  
FAX: (540) 542-1318  
Website: [www.winchesterva.gov](http://www.winchesterva.gov)

TO: All Fire and Rescue Personnel  
FROM: C. Eddie McClellan, Deputy Chief  
RE: Patient Signature Form  
DATE: October 3, 2013

### **INFORMATIONAL BULLETIN IB-13061**

During the past month we have had repetitive requests from our EMS Billing contractor to obtain a copy of the Ambulance Billing Authorization and Privacy Acknowledgement Form. I am not sure what has changed, but obviously something has as it is not being scanned into their system when our patient care report is being scanned in.

So, to clarify expectation for department personnel regarding the Ambulance Billing Authorization and Privacy Acknowledgement Form the following **shall** be done:

- The form **must** be completed each time we have contact with a patient.
- When a patient is transported to the medical center personnel **must** make a photocopy of the signed form and attach it to the patient care report that you leave at the medical center.
- The white copy is to be attached to the patient care report that will be sent to the fire and rescue office.

- The yellow copy is to be given to the patient or the patient's authorized representative.

Thank you for your prompt compliance to correct this. If you have any questions, give me a call.