

Welcome to HYGEIA

In order to maximize the time you are able to spend with Dr. Jacobs, we ask that you complete following five forms prior to your arrival at Hygeia.

Instructions for forms:

Consent for Treatment

Simply read the form you will be asked to digitally sign your consent upon your arrival in the office. If the patient seeking treatment is a minor (under the age of 18) both the patient and a parent/legal guardian will be given separate consent forms outlining the Hygeia policy for the treatment of minors. Please contact us for more information.

Patient Registration Form

Please record your name as it appears on your insurance card. Please note your preferred contact number. The subscriber number is the number on your insurance card. The subscriber is the individual who holds the policy – for some of you it will be yourself in which case you can indicate “self” and leave the rest blank. For others it will be a parent or spouse in which case that individual’s name and contact information must be entered.

Notice of Privacy Practices Receipt

The Notice of Privacy Practices can be reviewed on our website www.hygeiawomen.com or at the office upon your arrival. Your signature on the “Notice of Privacy Practices Receipt” does not imply agreement with the policy, it simply confirms that the policy has been made available to you for your review.

Patient Consent to Medical Record Access

This form allows Dr. Jacobs to access your records at DHMC including any labs or radiology reports. Signing this form also means that Dr. Jacobs can transfer your records to DHMC providers at their request without your needing to complete additional paperwork. If you have medical records at DHMC and would like Dr. Jacobs to be able to review them on an ongoing basis, please complete this form.

Patient History Form

The patient history form needs to be completed in order for our Electronic Medical Record to generate a chart for you. We understand that some of the questions are irrelevant or ambiguous – we just ask you to do your best. Please do not add additional information to the form. You will have plenty of time to review your history with Dr. Jacobs at the time of your appointment.