South Dakota Public Health Laboratory
615 East 4th Street
Pierre, SD 57501-1700
605-773-3368 FAX: 605-773-8201
www.state.sd.us/doh/lab/index.htm

Secure Fax Acknowledgement

As a covered entity under the Health Insurance Portability and Accountability Act (HIPPA) privacy rule, the Department of Health (DOH) is required to attain satisfactory assurances that fax transmissions containing Protected Health Information (PHI) will be appropriately safeguarded by the receiving entity.

By signing this acknowledgment, you agree to:

a) Receive lab results containing PHI via fax from the South Dakota Public Health Laboratory (SDPHL);
b) Assure the DOH that the faxes received will be retrieved from the fax machine immediately; or
c) The fax machine is in a secure location to avoid potential breeches of patient privacy rights under HIPAA.

To verify and assure that faxes from the DOH are sent correctly, please provide the fax number where you wish to receive lab results from the SDPHL.

( ) -

Enter Fax Number Here

Signed: _____ Date: _____
Responsible facility party requesting fax lab results

Printed Name: _____

Facility/Entity Name: _____

Address: _____

_____

Please return completed and signed form to:

South Dakota Public Health Laboratory
615 E. 4th Street
Pierre, SD 57501

Or FAX to: (605)773-8201