**THE EYE INSTITUTE FOR MEDICINE & SURGERY**

**POLICY/PROTOCOL**

**AMNIO-GRAFT POST CARDS**

07202015

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Applies to: Front Office Leads, Anterior Segment Assistants, Doctors, Clinic Leads

When filing out the Amniograft post cards please DO NOT USE the patient’s name.  You MUST use patient’s account # only. Any use of their name is a HIPAA  violation since this information is on a post card which anyone handling the mail would have access to.

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Authorized Signature/Date