School/Department/Unit:

	Date of Disclosure	Description of PHI Disclosed		
1				
2				
3				
4				
5				

^{*}Key: 1) Disclosure due to Authorization by the employee; 2) Disclosure due to a Court Order; 3

Disclosure Information					
Purpose of Disclosure*	Who Disclosed				

3) Disclosure in connection with law enforcement Activities; 4) Other (Please explain in

University of Pittsburgh - HIPAA Policy (CS 70) - PHI Uses and Disclosures Tracking Form

		S
Covered Component or BA Employee?	Notes	First Name

Notes)

ubject of the PHI			
Last Name	ID#	Name of Individual	Name of Company

Recipient of PHI						
Street Address	City	State	Zip			