AGREEMENT REGARDING CONFIDENTIALITY OF PATIENT CARE INFORMATION

This Agreement regarding the confidentiality of patient care information ("Agreement") is entered between Bridge Staffing, Inc. (the “Company”) and ______________________, ("Employee") on this _____ day of ________, 200__.

RECIITALS

A. The purpose of this Agreement is to comply with the privacy requirements imposed by the Health Insurance Portability and Accountability Act of 1996 ("HIPPA").

B. The parties understand that the Company is in the business of providing staffing to healthcare facilities. The parties have entered into an agreement wherein Employee will provide services for the Company and/or healthcare facilities that are clients of said Company.

C. The parties understand that in the scope of providing patient care services at healthcare facilities that are clients of the Company, Employee will necessarily receive or have access to Confidential Patient Information. The parties agree that in regards to such Confidential Patient Information, confidentiality shall be maintained and not disclosed unless such disclosure is in compliance with the rules and regulations of the healthcare facility to which Employee has been assigned, and;

AGREEMENT

1. Employee agrees to maintain the confidentiality of Confidential Patient Information.

2. Employee agrees to comply with all applicable state and federal laws and regulations, including, without limitation, the privacy provisions of HIPPA.

3. Employee agrees to comply with the policies of the healthcare facility to which Employee has been assigned by the Company.

4. Employee agrees that this Agreement shall survive the termination of his/her employment with the Company and the conclusion of any assignment with a healthcare facility.

Employee’s Signature:______________________________ Date:______________

Company Representative Signature:____________________________ Date:______________