

# HIPAA Form SF1010

## Non-Patient Visitors

**PLEASE SIGN IN BELOW**

<b>NON patient Visitors (Pharmaceutical Representatives, Medical Equipment sales, etc.)</b>		
<b>Today's Date</b> _____		
1. The name of the visitor: _____	Company represented: _____	The time of arrival: _____
The purpose of the visit: _____	The person being visited: _____	Time visitor leaves facility: _____
<b>Today's Date</b> _____		
2. The name of the visitor: _____	Company represented: _____	The time of arrival: _____
The purpose of the visit: _____	The person being visited: _____	Time visitor leaves facility: _____
<b>Today's Date</b> _____		
3. The name of the visitor: _____	Company represented: _____	The time of arrival: _____
The purpose of the visit: _____	The person being visited: _____	Time visitor leaves facility: _____
<b>Today's Date</b> _____		
4. The name of the visitor: _____	Company represented: _____	The time of arrival: _____
The purpose of the visit: _____	The person being visited: _____	Time visitor leaves facility: _____
<b>Today's Date</b> _____		
5. The name of the visitor: _____	Company represented: _____	The time of arrival: _____
The purpose of the visit: _____	The person being visited: _____	Time visitor leaves facility: _____
<b>Today's Date</b> _____		
6. The name of the visitor: _____	Company represented: _____	The time of arrival: _____
The purpose of the visit: _____	The person being visited: _____	Time visitor leaves facility: _____
<b>Today's Date</b> _____		
7. The name of the visitor: _____	Company represented: _____	The time of arrival: _____
The purpose of the visit: _____	The person being visited: _____	Time visitor leaves facility: _____
<b>Today's Date</b> _____		
8. The name of the visitor: _____	Company represented: _____	The time of arrival: _____
The purpose of the visit: _____	The person being visited: _____	Time visitor leaves facility: _____
<b>Today's Date</b> _____		
9. The name of the visitor: _____	Company represented: _____	The time of arrival: _____
The purpose of the visit: _____	The person being visited: _____	Time visitor leaves facility: _____
<b>Today's Date</b> _____		
10. The name of the visitor: _____	Company represented: _____	The time of arrival: _____
The purpose of the visit: _____	The person being visited: _____	Time visitor leaves facility: _____
<b>Today's Date</b> _____		
11. The name of the visitor: _____	Company represented: _____	The time of arrival: _____
The purpose of the visit: _____	The person being visited: _____	Time visitor leaves facility: _____
<b>Today's Date</b> _____		
12. The name of the visitor: _____	Company represented: _____	The time of arrival: _____
The purpose of the visit: _____	The person being visited: _____	Time visitor leaves facility: _____
<b>Today's Date</b> _____		
13. The name of the visitor: _____	Company represented: _____	The time of arrival: _____
The purpose of the visit: _____	The person being visited: _____	Time visitor leaves facility: _____
<b>Today's Date</b> _____		
14. The name of the visitor: _____	Company represented: _____	The time of arrival: _____
The purpose of the visit: _____	The person being visited: _____	Time visitor leaves facility: _____