

Medicare Meaningful Use Compliance Form (Demographics)

Patient Name _____

RACE: (Census Bureau Categorization)

_____ American Indian or Alaskan Native

_____ Asian

_____ Black or African American

_____ Native Hawaiian or other Pacific Islander

_____ White

_____ White Hispanic or Latino

Language Preference

_____ English

_____ Chinese

_____ French

_____ German

_____ Italian

_____ Japanese

_____ Korean

_____ Portuguese

_____ Russian

_____ Spanish