



COMPLAINT OF ALLEGED VIOLATION OF AHIMA CODE OF ETHICS

In filling a formal complaint, it should be clearly understood that a copy of the complaint shall be forwarded to the individual named in the complaint (the respondent).

Expenses incurred in proving or disproving an alleged violation will be paid by the party incurring the expenses.

Completion of this form is the only method of filing a complaint.

Complete all Items:

Name of complainant: _____

Address of complainant _____

Place of Employment: _____

City/State/Zip: _____

Email: _____

AHIMA Member Non-Member Credentialed Which credentials: _____

Name of Respondent: _____

Address of Respondent: _____

Place of Employment: _____

City/State/Zip: _____

Email: _____

AHIMA Member Non-Member Credentialed Which credentials: _____



American Health Information Management Association®

Complaint of Alleged Violation – Section II

Cite the specific code/codes section(s) allegedly violated.

Describe the alleged violation, including place, date and surrounding circumstances.

Attach supporting proof of alleged violation.

Supply a list of names and addresses of persons who might have knowledge of the alleged violation.

I attest that the information submitted in and with this form is true and correct to the best of my knowledge and belief.

Signature: _____

Date: _____