

NOTICE OF PRIVATE POLICY

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW CAREFULLY.

The privacy of your medical information is important to us. We understand that your medical information is personal and we are committed to protecting it. We create a record of the care and services you receive at our office. We need this record to provide you with quality care and to comply with certain legal requirements. This notice will tell you about the ways we may use and share your medical information. We also describe your rights and certain duties we have regarding the use and disclosure of medical information.

Law Requires us to:

1. Keep your medical information private.
2. Give you this notice describing our legal duties, privacy practices, and your rights regarding your medical information.

We Have the Right to:

1. Change our privacy practices and the terms of this notice at any time, provided that the changes are emitted by law.
2. Request written consent from the patient/parent/guardian before releasing any medical information regarding a patient.

the following section describes different ways our office may use and disclose medical information. Not every use or disclosure may be listed. Generally, our office will disclose medical information when referring a patient to a specialist for evaluation or a surgical procedure. Medical information may also be disclosed when authorizing or filing insurance for a visit in our office. As well as these reasons, medical information may also be disclosed at the patient's request, providing that our office has received written consent from either the patient, parent of patient, or guardian of patient if this private information is being disclosed to a third party.