



PATIENT PRIVACY NOTICE

This notice effective as of October 16, 2002 describes in detail how your medical information may be used and disclosed. Moreover, how you as a patient can obtain access to this information. Please review this carefully.

A covered entity receives and/or maintains protected health information/ individual identifiable health information (PHI/IIHI). This PHI/IIHI is used when within the entity it is analyzed, examined, shared, or applied.

PHI/IIHI is considered to be disclosed when it is released, transferred, or allowed to be accessed and or disclosed outside of the covered entity.

Disclosure may not occur unless permitted with the authorization of the patient. However, in emergency situations, patient authorization is not required. Moreover, you have the right as the patient to limit disclosure to family members, and you have the right to see and copy medical records and request corrections. Also, you have the right to an accounting of non-routine disclosure of PHI.

If you have any complaints, you may contact the Secretary of the Department of Health and Human Services. If you have any questions regarding this notice, you may ask to speak to Belinda.

Signature of Individual or Guardian

Date