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**NOTICE OF PRIVACY PRACTICES**

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED. PLEASE REVIEW IT CAREFULLY. THE PRIVACY OF YOUR HEALTH INFORMATION IS IMPORTANT TO US.

We care about our patient's privacy and strive to protect the confidentiality of your medical information. New federal legislation requires that we issue this official notice of privacy policies. We reserve the right to change our privacy policies and the terms of this notice at any time for all health information that we maintain. You may request a copy of our notice at any time. For more information about our privacy policy please contact our office.

**USES AND DISCLOSURES OF HEALTH INFORMATION**

We use and disclose information about you for treatment, payment and health care operations. We may disclose information for treatment or to another health care provider providing treatment for you. We may use your information to obtain payment for services we provide to you or your dependent. We may use and disclose your information for our health care operations including quality assessment and improvement activities, reviewing the competence and qualifications of health care professionals, conducting training programs, accreditation, certification, licensing or credentialing activities. We may disclose your information to another health care provider or organization that has a relationship with you.

You may give us written authorization to use your information or to disclose it to anyone for any purpose and you may revoke the same authorization in writing at any time. We may disclose your health information to a family member, friend or other person to the extent necessary to help with your health care or with payment for your health care. We may use or disclose information about you to notify or assist in notifying a person involved in your care, of your location and general condition. You have the right to request in writing with appropriate reasons that we amend your health information.

We may disclose your information to provide you with appointment reminders (such as voicemail messages, postcards and letters). We may use or disclose your information to a public or private entity authorized by law to assist in disaster relief efforts. We may use or disclose your information as authorized by law for public health activities, such as child abuse reporting, disease statistic reporting, FDA oversight, CDC activities, and to employers regarding work related illness or injury, to report adult abuse, neglect or domestic violence, to health oversight agencies, to court and administrative orders and other lawful processes, to law enforcement officials, to coroners, medical examiners, and funeral directors, to avert a serious threat to health or safety, for research activities, to the military for national security activities, and as authorized by state workers compensation laws.

**PATIENT RIGHTS**

You have the right to look at or get copies of your health information with limited exceptions. You must make a request in writing to obtain access to your health information. If you request copies, we will charge a reasonable fee for this service. You have the right to request that we communicate with you about your health information by alternative means or to alternative locations. You must make this request in writing and you must specify in writing the alternative means or location and provide satisfactory explanation on how you will handle payment under the alternative means or location you request.

If you believe your privacy rights have been violated, you may file a complaint with the privacy officer of the practice or to the office of the U.S. Department of Health and Human Services.