



Orna Fisher, MD * Board-Certified Plastic Surgeon

NOTICE OF PRIVACY PRACTICES

This notice describes how medical information about you may be used and disclosed. Please review it carefully.

We are required by law to:

Keep confidential and maintain the privacy of your protected health information and to provide you with this notice of privacy practices. We are also required to abide by the privacy policies and practices that are in this notice.

How we may use and disclose medical information about you:

The following categories describe different ways that we may use and disclose medical information:

- Treatment- your health information may be used by staff members or disclosed to other health care professionals for the purpose of evaluating your health, diagnosing medical conditions, and providing treatment. For example, results of laboratory tests and procedures will be available in your medical record to all health professionals who may provide treatment or who may be consulted by staff members.
- Payment- Your health information may be used to seek payment from your health insurance plan, from other sources of coverage such as car insurance, or from credit companies that you use to pay for services. For example, your insurance plan may request and receive information on dates of service, the services provided, and the medical condition being treated.
- Health care operations- your health information may be used as necessary to support the day to day activities and management of this practice. For example, information on the services you received may be used to support budgeting and financial reporting and activities to evaluate and promote quality.
- Patient Reminders- your health information may be accessed by staff for the purpose of reminding you of upcoming services, Appointments, or insurance requirements.
- As required by law- your health information may be disclosed to law enforcement agencies without your permission, to support audits and inspections, to facilitate official investigations, and to comply with government-mandated reporting.
- Public Health Reporting- your health information may be disclosed to public health agencies as required by law. For example, we are required to report specific communicable diseases to the State Public Health Department.

Disclosure of your health information for other purposes requires your specific written authorization. If you change your mind after you already authorized a use or disclosure of your



Orna Fisher, MD * Board-Certified Plastic Surgeon

information, you may submit a written revocation of the authorization. However, the revocation cannot undo or affect any use or disclosure of information that occurred prior to your notification of decision to revoke.

Individual Rights

You have certain protected rights under Federal Privacy Standards. These include the rights to:

- Request restrictions on the use and disclosure of your protected health information
- Receive confidential communications concerning your medical condition and treatment.
- Receive copies of your protected health information.
- Receive a printed copy of this notice.

Right to Revise Privacy Practices

As permitted by Law, we reserve the right to amend or modify our privacy policies and practices. These changes in our policies and practices may be required by changes in Federal and/or State laws and regulations. The revised policies and practices will be applied to all protected health information that we maintain.

Requests for Your Protected Health Information

As permitted by Federal regulation, we require that requests to receive copies of protected health information are submitted in writing.

ACKNOWLEDGEMENT

I hereby acknowledge that I have been presented this Notice of Privacy Practices

Signature: _____

Printed Name: _____ Date: _____