

Notice of Privacy Policies

This notice describes our policy for how medical information about you may be used and disclosed, how you can get access to this information, and how your privacy is being protected. This notice will remain in effect until it is replaced or amended by changes in law.

We gather personal information and health information in several ways; Information we receive, information we receive from other healthcare providers, and information we receive from third party payers.

This information is used for treatment, payment and healthcare operations. You should be aware that during the course of our relationship with you we will likely use and disclose health information about you for the treatment, payment, and healthcare operations.

You may specifically authorize us to use protected health information for any purpose or to disclose your health information by submitting the authorization in writing. Such disclosures will be made to any personal representation you choose to have your protected health information.

This office may use or disclose your Protected Health Information when required by law.

Upon written request, you have the right to access, review or receive copies of your healthcare records. Upon written request, you have the right to receive a list of items this office disclosed about your healthcare information. Upon written request, you have the right to request that this office place additional restrictions on disclosure of your Protected Health Information. Upon written request, you have the right to request that we amend your Protected Health Information. You have a right to receive all notices in writing.

If you have questions, complaints or require additional information, please contact Kirsty Docken LAc at 503-544-7665.

Patient Signature

Date

Patient Name (Printed)