

PEDIATRICS IN BREVARD 'S NOTICE OF PRIVACY PRACTICES

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

Pediatrics in Brevard is dedicated to protecting your medical information. We are required by law to maintain the privacy of protected health information and to provide you with this Notice of our legal duties and privacy practices with respect to protected health information. Pediatrics in Brevard is required by law to abide by the terms of this Notice.

HOW YOUR MEDICAL INFORMATION WILL BE USED AND DISCLOSED:

We will use your child's medical information as part of rendering patient care. For example, your child's medical information may be used by the doctor or nurse treating him/her (treatment), by the business office to process payment for the services rendered (payment) and by administrative personnel reviewing the quality of the care he/she receives (healthcare operations).

We may also use and/or disclose your child's information in accordance with federal and state laws for the following purposes:

Appointment Reminders.

- We may contact you to provide appointment reminders.

Treatment Information.

- We may contact you with information about treatment alternatives or other health-related benefits and services that may be of interest to you.

Disclosure to Department of Health and Human Services.

- We may disclose medical information when required by the United States Department of Health and Human Services as part of an investigation or determination of our compliance with relevant laws.

Notification.

- Unless you object, we may use or disclose your medical information to notify a family member, a personal representative or another person responsible for your child's care of your child's location, general condition or death.

Disaster Relief.

- We may disclose your child's medical information to a public or private entity, such as the American Red Cross, for the purpose of coordinating with that entity to assist in disaster relief efforts.

Health Oversight Activities.

- We may use or disclose your child's medical information for public health activities, including the reporting of disease, injury, vital events and the conduct of public health surveillance, investigation and/or intervention. We may disclose your child's medical information to a health oversight agency for oversight activities authorized by law, including audits, investigations, inspections, licensure or disciplinary actions, administrative and/or legal proceedings.

Abuse or Neglect.

- We may disclose your child's medical information when it concerns abuse, neglect or violence in accordance with federal and state law.

Legal Proceedings.

- We may disclose your child's medical information in the course of certain judicial or administrative proceedings.

Law Enforcement.

- We may disclose your child's medical information for law enforcement purposes or other specialized governmental functions.

Coroners, Medical Examiners and Funeral Directors.

- We may disclose your child's medical information to a coroner, medical examiner or a funeral director.

Organ Donation.

- If you are an organ donor, we may disclose your child's medical information to an organ donation and procurement organization.

Research.

- We may use or disclose your child's medical information for certain research purposes if an Institutional Review Board or a privacy board has altered or waived individual authorization, the review is preparatory to research or the research is on only decedent's information.

Public Safety.

- We may use or disclose your child's medical information to prevent or lessen a serious threat to the health or safety of another person or to the public.

Family and Friends, Clergy, Schools.

We may disclose your child's medical information to family members, other relatives, clergy, school or day care personnel, camp or close personal friends when the opportunity for you to agree or object to a use or disclosure cannot practicably be provided because of an emergency circumstance. We will exercise our professional judgment to determine whether a disclosure is in your child's best interest and only disclose information that is directly relevant to that person's involvement with your child's care.

Workers' Compensation.

- We may disclose your child's medical information as authorized by laws relating to workers' compensation or similar programs.

Business Associates.

- We may disclose your child's health information to a business associate with whom we contract to provide services on our behalf. To protect your child's health information, we require our business associates to appropriately safeguard the health information of our patients.

AUTHORIZATIONS:

We will not use or disclose your child's medical information for any other purpose without your written authorization. Once given, you may revoke your authorization in writing at any time. To request a Revocation of Authorization form, you may contact:

Privacy Officer

Pediatrics in Brevard
134 S Woods Dr
Rockledge, FL 32955

YOUR RIGHTS REGARDING YOUR MEDICAL INFORMATION:

You have the following rights with respect to your child's medical information:

- You may ask us to restrict certain uses and disclosures of your child's medical information. We are not required to agree to your request, but if we do, we will honor it.
- You have the right to receive communications from us in a confidential manner.
- Generally, you may inspect and copy your child's medical information. This right is subject to certain specific exceptions as required by state statutes and you may be charged a reasonable fee for any copies of your records. Examples of records that are **NOT** discloseable are: 1) information regarding sexual activity or sexually transmitted disease 2) pregnancy. If we deny your request, we will provide you with a written explanation for the denial and information regarding further rights you may have at that point.
- You may ask us to amend your child's medical information. We may deny your request for certain specific reasons. If we deny your request, we will provide you with a written explanation for the

denial and information regarding further rights you may have at that point.

- You have the right to receive an accounting of the disclosures of your child's medical information made by Pediatrics in Brevard during the last six years, except for disclosures for treatment, payment or healthcare operations, disclosures which you authorized and certain other specific disclosure types. The request can not include dates prior to April 14, 2003.
- You may request a paper copy of this Notice of Privacy Practices for Protected Health Information.
- You have the right to complain to us and/or to the United States Department of Health and Human Services if you believe that we have violated your privacy rights. If you choose to file a complaint, you will not be retaliated against in any way. To complain to us, please contact:

Deborah Sapp
Pediatrics in Brevard
134 S Woods Dr
Rockledge, Fl 32955
Phone 321-636-3066

If you would like further information regarding your rights or regarding the uses and disclosures of your medical information, you may contact:

Deborah Sapp
Pediatrics in Brevard
134 S Woods Dr
Rockledge, Fl 32955
Phone 321-636-3066

THIS NOTICE IS EFFECTIVE AS OF APRIL 14, 2003. REVISED APRIL 16, 2003

REVISION OF NOTICE OF PRIVACY PRACTICES

We reserve the right to change the terms of this Notice, making any revision applicable to all the protected health information we maintain. If we revise the terms of this Notice, we will post a revised notice at Pediatrics in Brevard and will make paper copies of the revised Notice of Privacy Practices available upon request.