

## Notice of Privacy Practices

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

At Interventional Cardiologists of Gainesville, we are committed to treating and using protected health information about you responsibly. This Notice of Health Information Practices describes the personal information we collect, and how and when we use or disclose that information. It also describes your rights as they relate to your protected health information. This Notice is effective April 15, 2003, and applies to all protected health information as defined by federal regulations.

### Uses and Disclosures

- A. Treatment: Required for referral to other physicians & for diagnostic testing, hospital admission, etc.
- B. Payment: Through paper claim forms and encrypted electronic claim submittal.
- C. Healthcare Operations: Internal information between physicians in the same practice for diagnostic testing, cross-coverage, etc
- D. Public Health Activities: As required by law for certain communicable diseases, governmental statistic gathering, etc.
- E. Abuse, Neglect, Domestic Violence: As required by law.
- F. Judicial/Administrative Proceedings: Information requested by legal subpoena, court order, etc.
- G. Law Enforcement Purposes: In the event of an illegal occurrence on the premises.
- H. Tissue Donation Purposes
- I. Averting Serious Health Threats/Safety
- J. Specialized Government Functions

### Separate Statements for Certain Uses or Disclosures

- K. The practice may contact the individual to provide appointment reminders, information about treatment alternatives, or other health-related services that may be of interest to the individual.
- L. The practice may contact the individual to provide reminders regarding bill payments.

### Individual Rights

Although your health record is the physical property of Interventional Cardiologists of Gainesville, the information belongs to you.

#### YOU HAVE THE RIGHT TO:

- A. Obtain a paper copy of this notice of information practices upon request,
- B. Inspect and copy your health record,
- C. Amend your health record,
- D. Obtain an accounting of disclosures of your health information,
- E. Request communications of your health information by alternative means or at alternative locations,
- F. Request a restriction on certain uses and disclosures of your information, and
- G. Revoke your authorization to use or disclose health information except to the extent that action has already been taken.

## Our Responsibilities

INTERVENTIONAL CARDIOLOGISTS OF GAINESVILLE IS REQUIRED TO:

- A. Maintain the privacy of your health information,
- B. Provide you with this notice as to our legal duties and privacy practices with respect to information we collect and maintain about you,
- C. Abide by the terms of this notice,
- D. Notify you if we are unable to agree to a requested restriction, and
- E. Accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations.

We reserve the right to change our practices and to make the new provisions effective for all protected health information we maintain. Should our information practices change, we will mail a revised notice to the address you've supplied us, or if you agree, we will email the revised notice to you.

We will not use or disclose your health information without your authorization, except as described in this notice. We will also discontinue to use or disclose your health information after we have received a written revocation of the authorization according to the procedures included in the authorization.

## For More Information or to Report a Problem

If have questions and would like additional information, you may contact the practice's Privacy Officer:

Lonn D. McDowell, Administrator  
Interventional Cardiologists of Gainesville, PA  
1151 NW 64th Terrace  
Gainesville, FL 32605  
352-333-7030  
352-331-9095 fax

If you believe your privacy rights have been violated, you can file a complaint with the practice's Privacy Officer, or with the Office for Civil Rights, U.S. Department of Health and Human Services. There will be no retaliation for filing a complaint with either the Privacy Officer or the Office for Civil Rights. The address for the OCR is listed below:

*Office for Civil Rights*  
U.S. Department of Health and Human Services  
200 Independence Avenue, S.W.  
Room 509F, HHH Building  
Washington, D.C. 20201

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*I acknowledge receipt of Interventional Cardiologists of Gainesville Notice of Privacy Practices.*

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Patient's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Patient's Name