

HIPPA PRIVACY ACT

The new Federal (HIPPA-Health Insurance Portability and Accountability Act) laws are written to protect the confidentiality of your health information seriously. This notice describes how health information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

TO PROVIDE TREATMENT

We will use your HEALTH INFORMATION within our office to provide you with the best dental care possible. This may include all necessary healthcare personnel providing you treatment. You have the right to ask us for a description of how and where your health information was used by our office for any reason other than for treatment.

You have the right to request restrictions on certain uses and disclosures of your health information. You may request that we only communicate your health information privately with no other family members present or through mailed communications that sealed.

Other than is stated above or where Federal, State or Local law requires us, we will not disclose your health information other than with your written authorization. You may revoke that authorization in writing at any time.