



Brigham City, Utah 84302
435-734-2248

OFFICE PRIVACY POLICIES

This notice describes the privacy policies of this dental office. This office strives to maintain confidentiality as far as your dental treatment information. In this summary we describe how this confidential dental and health information is used and disclosed and how you can gain access to this confidential information.

BACKGROUND INFORMATION:

We are required by applicable law to maintain confidentiality of dental health information generated for patients during the course of treatment. We are required to notify all patients about our privacy practices and your right concerning your health information. These office privacy practices and your right concerning your health information. We reserve the right to change the privacy practices of this office and the terms of this notice at any time, provided that applicable law permits such changes, we will make you aware of any changes we make. Our patients are welcome to request copies of our privacy policies at any time.

USE AND DISCLOSURES OF HEALTH INFORMATION:

Treatment: We may use or disclose your dental information to dental colleagues, your physician or other health care providers rendering treatment.

Payment: We may use or disclose your dental treatment information through regular mail, fax or electronic transmissions to your dental insurance carrier to obtain payment for services rendered.

Persons involved in care: We may use or disclose dental health information to identify or assist in the identification of you or a family member in conjunction with a forensic investigation.

Marketing: We will not use your dental health information or images or your face and/or teeth for marketing communications without your authorization to do so.

Subpoena: We may use or disclose your health information when we are required to do so by law through subpoena.

Abuse or Neglect: We may disclose dental information of minor patients to appropriate authorities if we have reason to believe that they are possible victims of abuse, neglect or domestic violence or the possible victim of other crimes.

Appointment Reminders: We may use or disclose basic dental information in so far as the fact that you have a dental appointment scheduled in the form of appointment reminders such as voicemail messages, postcards, letter or e-mail messages.

PATIENT RIGHTS:

Access: You have the right to read over or obtain copies of your dental health information, with limited exceptions. Utah law (R-156-69-502(7)) specifies that original records must remain in possessions of the treating dentist for seven years, but you may request copies for a nominal fee.

Questions and Complaints: If you want additional information about our privacy policies or have questions or concerns, you should contact our privacy officer. If you believe or are concerned that we may have violated your privacy rights, or you disagree with a decision we made about access to your dental health information, you may complain to us by writing to our privacy officer. You also may correspond with the U.S. Department of Health and Human Services. We will provide you with the address of the U.S. Department of Health and Human Services upon request.

ACKNOWLEDGE OF OFFICE PRIVACY POLICIES

I _____ have read and agree to this office's privacy policies.

Signature

Date