

Fisher Foot & Ankle

1010 North Tennessee St, Ste 114 Cartersville, GA 30120
phone: 770-386-4111 fax: 770-386-4905 fisherfoot.com

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.

Effective Date: August 1, 2007

Understanding your health record/information

Each time you visit a hospital, physician, or healthcare provider, a record of your visit is made. This record typically includes symptoms, examination and test results, diagnoses, treatment, and a plan for future care or treatment. This information, your record, serves as a:

- basis for planning your care and treatment
- means of communication among the many health professionals who contribute to your care
- legal document describing the care you received
- means by which you or a third party payor can verify that services billed were actually provided
- tool in educating health professionals
- source of data for medical research
- source of information for public health officials charged with improving the health of the nation
- source of data for facility planning and marketing

tool with which we can assess and continually work to improve the care we render and the outcomes we achieve

Understanding what is in your record and how your health information is used helps you to ensure its accuracy, better understand who, what, when, where, and why others may access your health information and make more informed decisions when authorizing disclosure to others.

Your health information rights

Although your health record is the physical property of the healthcare provider, the information belongs to you. You have the right to request a restriction on certain uses and disclosures of your information. This includes the right to obtain a paper copy of the notice of information practices upon request, inspect and obtain a copy of your health record.

You have the right to request the Fisher Foot & Ankle (FFA) communicate with you in a certain way. For example, you may ask that FFA only conduct communications about your health information with you privately and with no other family members present. If you wish to receive confidential communications, please inform the staff. FFA will not ask that you provide any reasons for your request and will attempt to honor your reasonable requests for confidential communications.

You have the right to obtain an accounting of disclosures of your health information and the right to revoke your authorization to use or disclose health information, except to the extent that action has already been taken.

If you believe that your health information records are incorrect or incomplete, you may request that FFA amend those records. Your request must be made in writing and may be denied if:

- the information you wish to amend is not maintained by FFA
- the request is not in writing or does not include a reason for the amendment
- your health information records were not created by FFA
- the records you are requesting are not a part of FFA's records
- the health information you wish to amend is not part of the health information you or your legal representative are permitted to inspect and copy

in the opinion of FFA, the records containing your health information are accurate and complete

Our responsibilities

FFA is required to maintain the privacy of your health information, provide you with a notice as to

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our legal duties and privacy practices with respect to information we collect and maintain about you, abide by the terms of this notice, notify you if we are unable to agree to a requested restriction, accommodate reasonable requests you may have to communicate health information by alternative means or at alternative locations. FFA reserves the right to change our practices and to make new provisions effective for all Protected Health Information (PHI) we maintain. Should our information practices change, we will provide a copy of the revised notice to you or your representative. We will not use or disclose your health information without your written authorization, except as described in this notice.

For more information or to report a problem

If you have questions and would like additional information, you may contact FFA at 770-386-4111. If you believe your privacy rights have been violated you can file a complaint with the Secretary of Health and Human Services at 1-888-398-2633. There will be no retaliation for filing a complaint.

Examples of disclosures for treatment, payment, and health care operations

- We will use your health information for treatment. Information obtained by any member of your healthcare team will be recorded and used to determine your course of treatment. your physician will document in your record her expectations of the members of your healthcare team. Members of the team will then record the actions they took and their observations. In that way, the physician will know how you are responding to treatment. We will also provide your physician or a subsequent healthcare provider with copies of various reports that should assist him or her in treating you.
- We will use health information for payment. For example: A bill may be sent to you or a third party payor. The information on or accompanying the bill may include information that identifies you as well as your diagnosis, procedures and supplies used.
- We will use your health information for regular health operations. For example: Members of the medical staff, risk or quality improvement manager or members of the quality improvement team may use information in your health record to assess the care and outcomes in your case and others like it. This information will then be used in an effort to continually improve the quality and effectiveness of the healthcare and service we provide.
- We may use your health information with business associates. There are some services provided in our organization through contacts with business associates. Examples include some physician and radiology services and certain laboratory tests. When these services are contracted, we may disclose your health information to our business associates so that they can perform the job we have asked them to do and bill you or your third party payor for services rendered. To protect your health information, however, we require the business associates to appropriately safeguard your information.
- Notification: We may use or disclose information to notify or assist you in notifying a family member, personal representative or other person responsible for your care, of your location and general condition.
- Communication with family: If you are incapacitated or otherwise unable to give your permission in advance, or if there is an emergency, health professionals, using their best judgment, may disclose to a family member, other relative, close personal friend or any other personal you identify, health information relevant to that person's involvement in your care or payment related to your care.
- Research: We may disclose information to researchers when an institutional review board that has reviewed the research proposal and established protocols to ensure the privacy of your health information has approved their research.
- Funeral directors: We may disclose health information to funeral directors consistent with applicable law to carry out their duties.
- Organ procurement organizations: Consistent with applicable law, we may disclose health information to organ procurement organizations or other entities engaged in the procurement, banking or transplantation of organs for the purpose of tissue donation and transplant.

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alternatives or other health-related benefits and services that may be of interest to you.

- Food and Drug Administration (FDA): We may disclose to the FDA health information relative to adverse events with respect to food, supplements, product and product defects or post-marketing observation information to enable product recalls, repairs, or replacement.
- Workers compensation: We may disclose health information to the extent authorized by and to the extent necessary to comply with laws relating to workers compensation or other similar programs established by law.
- Public health: We may disclose your health information, as required by law, to public health or legal authorities who are charged with preventing or controlling disease, injury, disability, abuse, neglect, or domestic violence.
- Health oversight activities: We may disclose your health information to government or other health agencies for activities including audits, civil, administrative or criminal investigations, inspections, licensure or disciplinary action. FFA may not, however, disclose your health information if you are the subject of an investigation and your health information is not directly related to your receipt of health care of public benefits.
- Correctional institution: Should you be an inmate of a correctional institution, we may disclose to the institution or agents thereof health information necessary for your health and the health and safety of other individuals.
- Law enforcement: We may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena. Federal law makes provision for your health information to be released to an appropriate health oversight agency, public health authority or attorney, provided that a work force member or business associate believes in good faith that we have engaged in unlawful conduct or violated professional or clinical standards and are potentially endangering one or more patients, workers, or the public.