



# Benton Chiropractic Clinic

105 N. Key Ave. • Lampasas, Texas 76550 • (512) 556-8223

## **Notice of Privacy Practices-Acknowledgement**

We keep a record of the health care services we provide you. You may ask to see record. You may also ask to correct that record. We will not disclose your record to others unless you direct us to do so or unless the law authorizes or compels us to do so. You may see your record or get more information about it by contacting our Privacy Director.

## **Notice of Privacy Practices**

All health information is considered confidential and we are careful about how we use it. The following describes how your information may be used. Please read the following and let us know if you have any questions.

### *Clinical Operations:*

- Communication between you and the doctor
- Appointment reminders/Get Well Notes/Birthday Cards
- Telephoning you at home to remind you of an appointment or leaving a message

### *Your information will be used to:*

- |                |                                    |
|----------------|------------------------------------|
| Treat you      | Handle financial/insurance matters |
| Run our Office | Inform you of our services         |

### *Your information may be used for:*

- |  |  |
|--|--|
| Health and Safety reasons              | Reporting victims of abuse                         |
| Court Hearings and filings             | Reporting to law officials                         |
| Your name on our referral board        | Thank you notes for referring                      |
| Discuss treatment with family member   | Share with other providers involved with your case |
| Sending treatment summary to your M.D. |  |

### *You have the right to:*

- Amend your health information
- Request a copy of your records (there may be a copying charge)
- Ask to limit information that we share
- Request a list of who we share your health records with
- Advise us if you believe that your privacy rights have been violated

Our Privacy Director is Craig Benton, D.C. 512-556-8223

Any questions about your care or account are invited. Feel free to ask any available staff member or your doctor. We will make every effort to answer your inquiries.

I have read the clinic policies. By my signature below I acknowledge receipt of the Notice of Privacy Practice:

Patient/legal guardian Sign

Print Full Name

Date