

Notice of Privacy Practice

This notice describes how health information about you (as a patient of this practice) may be used and disclosed, and how you can get access to your individually identifiable health information. Please review this notice carefully.

Privacy: We are committed to protecting your personal health information against disclosure to unauthorized entities/ persons. With your permission we will share your personal health information only with entities/ persons directly related to your health care and insurance/ payment needs. We will ask for your written permission for any other disclosure of your personal health information.

Access: You have the right to review and amend your personal health care records. Fees for copying your personal health information/ records are set by state regulators annually.

Restrictions: You have the right to restrict certain uses and disclosures of your protected health information.

Communications: You have the right to receive confidential communications from our office. If you would like restricted/ confidential communications from our office, inform our office staff on your first visit and we will make the necessary accommodations.

Consent: I authorize Vitality Chiropractic to share my personal health information only with entities/ persons directly related to my health care and my insurance/ payment needs.

If you have a complaint regarding our privacy notice, our privacy practices or any aspect of our privacy activities you should direct your complaint to Dr. Bonnie Verhunce at (206) 824-5521.

If you would like further information about our privacy policies and practices please contact Dr. Bonnie Verhunce at (206) 824-5521.

This notice is effective as of April 14, 2003. This notice and any alterations or amendments made hereto will expire seven years after the date upon which the record was created. My signature acknowledges that I have received a copy of this notice.

PROPERTY OF:
Vitality Chiropractic
(206) 824-5521

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Des Moines, WA 98198