

## **Marketing**

**We may contact you for marketing or fundraising purposes, as described below:**

*“As a courtesy to our patients, it is our policy to call your home on the evening prior to your scheduled appointment to remind you of your appointment time. If you are not home, we will leave a reminder message on your answering machine or with the person answering the phone. No personal health information will be disclosed during this recording or message other than the date and time of your scheduled appointment along with a request to call our office if you need to cancel or reschedule your appointment.”*

*“It is our practice to participate in charitable events to raise awareness, food donations, gifts, money, etc. During these times, we may send you a letter, post card, invitation or call your home to invite you to participate in the charitable activity. We will provide you with information about the type of activity, dates and times and request your participation in such events. It is not our policy to disclose any personal health information about your condition for the purpose of practice sponsored fund-raising events.”*

## **Change of Ownership**

**In the event that this practice is sold or merged with another organization, your health information/record will become the property of the new owner.**

## **Your Health Information Rights**

- **You have the right to request restrictions on certain uses and disclosures of your health information. Please be advised however, that this practice is not required to agree to the restriction that you requested.**
- **You have the right to have your health information received or communicated through an alternative method or sent to an alternative location other than the usual method of communication or delivery, upon your request.**
- **You have the right to inspect and copy your health information**
- **You have a right to request that this practice amend your protected health information. Please be advised, however, that this practice is not required to agree to amend your protected health information. If your request to amend your health information has been denied, you will be provided with an explanation of our denial reason(s) and information about how you can disagree with the denial.**
- **You have a right to receive an accounting of disclosures of your protected health**
- **information made by this practice.**
- **You have the right to a paper copy of this notice of Privacy practices at any time upon request.**