TYBEE TEETH

Dr. Jessanna Smith, DMD

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HIPAA Privacy Acknowledgement

This notice describes how medical/dental information about you may be used and disclosed and how you may access the information. Please read carefully. The privacy of your medical/dental information is important to us.

OUR LEGAL DUTY

Under the Health Insurance Act of 1996 (HIPAA) we are required to maintain the privacy of your protected health and dental information. In accordance with state and federal law, we are required to give you this notice about our privacy practices, our legal duties, and your rights concerning your medical/dental information.

OUR PLEDGE TO YOU

We understand that medical history and dental information about you is personal and we are committed to protecting medical/dental information about you. We create a record of the care and services you receive to provide quality care and to comply with legal requirements. This notice applies to all of the records that we maintain, whether created by facility staff or your personal doctor. We are required by law to:

- A. Keep medical and dental information about you private.
- B. Give you this notice of our legal duties and privacy practices with respect to medical/dental information about you.
- C. Follow the terms of the notice that is currently in effect.

Patient / Guardian Signature:		Date:
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FOR OFFICE USE ONLY

Individual	refused	to	sign

- $\hfill\square$ Communication barriers prevented obtaining the acknowledgment
- □ An emergency situation prevented office from obtaining acknowledgment
- 🗌 Other: ___