Effective 11-1-2003

Patient Privacy Notice (short form)

HEALTH INSURANCE PORTABILITY and ACCOUNTABILITY ACT

(HIPPA)

Acupuncture in Vancouver Inc. is dedicated to preserve your “Protected Health Information” (PHI). We are required by law to protect your health information and to provide you with a notice describing how your medical information may be used and disclosed and how you can access this information. This Notice of Privacy Practices describes your rights and Acupuncture in Vancouver Inc.’s duties with respect to your protected health information.

Acupuncture in Vancouver Inc. may use or disclose your PHI for the purpose of diagnosing or providing treatment, obtaining payment for health care bills, or to conduct health care operations.

*We may be required by law to use and disclose your medical information for other purposes without your consent or authorization.*

Your PHI means health information including your demographic information, collected by us, or other health care providers, a health care clearinghouse, or an employer. This PHI relates to your past, present, or future physical or mental health or condition and identifies you, or there is a reasonable basis to believe the information may identify you.

You are provided the right to inspect and receive a copy of your medical information that we maintain, amending or correcting that information, obtaining an accounting of your disclosures of your medical information, request that we communicate with you confidentially, request that we restrict certain uses and disclosures of your health information, and file a complaint if you think your rights have violated. *All requests and complaints must be made in writing.*

We have available a detailed NOTICE OF PRIVACY PRACTICES (long form) which fully explains your rights and our obligations under the law. You have the right to receive a copy of your most current NOTICE in effect. Please ask and we will provide you with a copy.

We may revise our NOTICE from time to time. The effective date at the top right hand side of this page indicates the date of the most current NOTICE in effect. If you have any questions please contact Acupuncture in Vancouver Inc. at (360)885-1767.

I have received a short form of the patient privacy policy. I have read and understand my rights contained within this form.

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signature date

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