
Kuy E. Ky, D.D.S.

NOTICE OF PRIVACY PRACTICE

We are required by applicable federal and state law to maintain the privacy of your health information. This notice takes effect 05/03/03, and will remain in effect until we replace it.

We reserve the right to change our privacy practices and the terms of this Notice at any time, provided such changes are permitted by applicable law. We reserve the right to make changes in our privacy practices and the new terms of our Notice effective for all health information that we maintain, including health information that we have created or received before we made the changes. Before we make significant change in our privacy practice, we will change this Notice and make a new Notice available upon request.

We use and disclose health information about you for treatment, payment, and healthcare operations. For example:

TREATMENT: We may use and disclose your health information to a physician or other healthcare provider providing treatment to you.

PAYMENT: We may use or disclose your health information to obtain payment for services provided to you.

HEALTHCARE OPERATIONS: We may use and disclose your health information in connection with our healthcare operations. Healthcare operations include quality assessment and improvement activities, reviewing the competence or qualifications of healthcare professionals, evaluating practitioner and provider performance, conducting training programs, accreditations, certification, licensing or credentialing activities.

PERSON INVOLVED IN CARE: We may use and disclose your health information to notify, or assist in the notification of (including identifying or locating) a family member, your personal representative or another person responsible for your care, of your location and general condition. If you are present, then prior to use or disclosure of your health information, we will provide you with the opportunity to object such uses or disclosures. In the event of your incapacity or emergency circumstances, we will disclose health information based on a determination using our professional judgement disclosing only health information that is directly relevant to the person's involvement in your healthcare. We will also use our professional judgement and our experience with common practice to make reasonable inferences of your best interest in allowing a person to pick up filled prescriptions, medical supplies, x-rays, or other similar forms of health information.

APPOINTMENT CONFIRMATIONS: We may use and disclose your health information to provide you with appointment confirmations (such as voicemail messages, email, postcards, or letters).
