



NOTICE OF PRIVACY PRACTICES

This Notice describes how health information about you may be used and disclosed. Please review it carefully.

As you know, the Federal Government has enacted Patient Privacy legislation known as HIPAA (Health Insurance Portability and Accountability Act). It changes the way patients and patient records are handled and transmitted by insurance companies, hospitals, physicians, dentists and all other healthcare providers. All of our staff undergoes specialized training to maintain our patient privacy. In order for us to continue to treat you and run our practice, we need you to provide us with written consent giving us your permission to share your health information with other healthcare providers, with your health insurance company and other business associates of the practice.

PLEASE REVIEW THIS NOTICE AND SIGN THE ACKNOWLEDGEMENT AND CONSENT STATEMENT on your intake form.

We appreciate your business and, as has always been our practice, our procedures are designed to show respect for your privacy.

*** PRESCRIPTION REFILL POLICY ***

For our NON-SURGICAL patients:

If warranted and prescribed, we will provide ONE Rx (40 pills max) with **NO ADDITIONAL REFILLS**. If you require an additional prescription, you must see your primary care physician.

For our SURGICAL patients:

Prescription pain killers will NOT, under any circumstances, be refilled on Fridays. All refill requests shall be made by 5pm Thursday. We will only give ONE REFILL/WEEK FOR ONE MONTH; after this you must see your primary care physician.