INTRODUCTION
This Notice describes how medical information about you is used and disclosed and how you can get access to this information. This Notice applies to all of the services and locations that we own, operate or contract with to provide services to you.

We are required to maintain the privacy of your health information and to provide you with this Notice of our legal duties and privacy practices. By using services at any of our covered locations, you are giving us your consent to follow the privacy practices and uses that are described in this Notice. We may change the privacy policies and practices described in this Notice by amending this Notice. Any amendments will be effective for health information we create or receive on or after the effective date of the amendments. We reserve the right to make the revised Notice effective for information we created or received before the revision.

HOW MAY WE USE AND DISCLOSE YOUR HEALTH INFORMATION?
We may use and disclose your health information for the purposes described in this Notice. You may request restrictions on certain uses and disclosures, but we are not required to agree.

DIRECT PATIENT COMMUNICATION
We may use or disclose health information to you as part of your treatment or to provide you with health care services and products. We may disclose health information to you as part of the process of obtaining payment for services we provide or to bill for services that we provided or to receive payment for such services.

CABINETS AND DIRECTORY INFORMATION
We may disclose certain health information in your health record to your family, other individuals you identify by name to be notified in case of your death, or to an individual involved in your care or payment for such care if you agree to this disclosure and if the information is not otherwise protected by law.

MARKETING ACTIVITIES
We may use or disclose your health information, as permitted or required by law, to contact you as a reminder about your appointment or to provide you with other information about our services or products. If you agree to our contacting you by phone for this purpose, we may contact you by phone to promote our services or products, unless you have informed us that you do not want to be contacted in this manner.

SPECIALIZED GOVERNMENT FUNCTIONS
We may disclose health information about you to federal, state or local authorities, such as the Food and Drug Administration, to report side effects from medications. We may disclose health information about you to the United States Department of Health and Human Services to ascertain whether we are complying with federal laws. If we receive a request for health information from the Department of Health and Human Services, we will consult this Notice of Privacy Practices and notify you of any such disclosures if we are required to do so by law.

RESEARCH
If we disclose health information for purposes of research, we will obtain your written authorization. We may also use and disclose health information for research activities that we publish or otherwise make public, as permitted by law.

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PUBLISHING AND CREATING A DIRECT MARKETING LIST
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