

MONTE O. HARRIS, MD

Notice of Privacy Practices

This notice describes how medical information about you may be used and disclosed and how you can get access to this information

Our pledge regarding your medical information

The office of Dr. Monte O. Harris is committed to protecting medical information about you. We create a record of the care and services you receive at our office for use in your care and treatment.

This Notice tells you about the ways in which we may use and disclose medical information about you. It also describes your rights and certain obligations we have regarding the use and disclosure of your medical information.

We are required by law to:

- Make sure that your medical information is protected
- Give you this Notice of Privacy Practices which describes our legal duty and privacy practices with respect to your medical information
- Abide by the terms of this Notice

Who will follow this notice?

All of Dr. Monte O. Harris' health care professionals, medical staff, employees, and trainees will follow the privacy practices described in this Notice.

HOW THE OFFICE OF MONTE O. HARRIS MAY USE AND DISCLOSE YOUR MEDICAL INFORMATION

Your health information will be used for treatment, payment, and health care operations

Treatment: Information obtained by your health care physician in this office will be recorded in your medical record and used to determine the course of treatment that should work best for you. This consists of your physician recording his/her own expectations and those of others involved in providing you care. The sharing of your health information may progress to others involved in your care, such as other physicians, nurses, physician assistants, medical assistants, skin care specialists, and estheticians.

Payment: Your health care information will be used in order to receive payment for services rendered at the office of Dr. Monte O. Harris. All payments are due at the time of your service.

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Health Care Operations: The medical staff at Dr. Harris' office may use your health information to assess the care you received and the outcome of your case compared to others like it. Your information may be reviewed for quality improvement purposes in our efforts to continually improve the quality and effectiveness of the care and services we provide.

Appointments: Dr. Monte O. Harris' front office staff may use your medical information and treatment history to make your next appropriate appointment. We may also contact you to remind you that you have an appointment the following day.

Family and Friends: With your consent, we may release medical information to anyone involved in your medical care, such as a friend, family member, or personal representative or any individual you identify with you when you come into the office of Dr. Monte O. Harris for care. With your consent, we may also give information to someone who helps pay for your treatments.

Marketing: The office of Dr. Monte O. Harris will not disclose your health information for health related marketing services outside of our office. The office of Dr. Monte O. Harris will use your information for internal marketing only.

Law Enforcement: When required to do so by law, we may disclose your health information.

Questions: Please inform a member of our staff if you have any questions. If you would like to comment, please use the space below.

Patient Signature

Date: _____

Witness

Date: _____