

## Summary Of Notice Of Privacy Practices

The following is a brief summary addressing how MANONI CHIROPRACTIC protects and respects each of our patient's personal health information (PHI). This Summary is for your convenience and is not a substitute for reading the entire Notice, which is available upon request. If you have any questions or requests, please direct them to Robyn Dunham, Practice Manager, Manoni Chiropractic 8 Locust Avenue, Danbury, CT 06810, telephone 203-792-9582.

1. **Uses and Disclosures of Your Health Information.** Manoni Chiropractic may use the personal health information it develops and collects for diagnostic services or treatment by its staff and to disclose the information to either health care providers who have referred you here for services or to the appropriate health insurance plan, workers' compensation plan, Medicare and/or designated attorneys (in the case of personal injury claims) for the payment for those services that Manoni Chiropractic provide you. Also, your personal health information may be used for certain health care "operations" such as improving the competence and quality of our staff and business planning management. Manoni Chiropractic may disclose your information to our business associates such as medical transcriptionist, billing services and others who assist in the operation of our practice. Manoni Chiropractic may telephone you to remind you of appointments, mail to you appointment reminder cards and may leave a message on your answering machine, if you have one. Manoni Chiropractic may also disclose information to your family about your location, general condition or death. If you are available and able, Manoni Chiropractic will ask your consent first. Your medical information may also be disclosed without your authorization as required by law, for public health purposes, healthcare oversight, including audits and investigations, judicial and administrative proceedings, subject to the limits imposed by state and federal law, and certain other purposes.
2. **Other Uses and Disclosures.** Except as described in the Notice, Manoni Chiropractic will not use or disclose your medical information without your written authorization. You can revoke an authorization at any time, except to the extent that Manoni Chiropractic has already taken action in reliance on the authorization.
3. **Your Health Information Rights.** You have a number of rights under state and/or federal law which are subject to the terms and conditions specified in the Notice:
  - a) You may request restrictions on certain uses and disclosures of your information
  - b) You may request that you receive your information from us in a certain way
  - c) You may inspect and copy your medical records
  - d) You may request an amendment to any record you believe is inaccurate
  - e) You may request an accounting of disclosures made of your records
4. **Changes to the Notice.** Manoni Chiropractic reserves the right to change the Notice. If Manoni Chiropractic does so, Manoni Chiropractic will post it in our office, and provide a copy upon request.
5. **Complaints.** You may file a complaint to our Practice Manager whose name is above or with the federal government as detailed in the Notice. You will not be penalized for filing a complaint.

I hereby acknowledge that I received a copy of Manoni Chiropractic 's Privacy Practices. I further acknowledge that a copy of the current notice will be posted in the reception area, and that I may request a copy of any amended Notice of Privacy Practices at each appointment.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Telephone: \_\_\_\_\_