

Gateway Dental  
44330 Premier Plaza - Suite 140  
Ashburn, VA 20147  
Phone: (703)726-0333

## **NOTICE OF PRIVACY PRACTICE**

**THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION**

**PLEASE REVIEW IT CAREFULLY**

**THE PRIVACY OF YOUR HEALTH INFORMATION IS IMPORTANT TO US**

---

### **USES AND DISCLOSURES OF HEALTH INFORMATION:**

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

**Treatment:** We may use or disclose your health information to a physician or other healthcare provider providing treatment to you, or to family and friends you approve.

**Payment:** We may use and disclose your health information to obtain payment for services we provide 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.

**Your Authorization:** In addition to our use of your health information for treatment, payment or healthcare operations, you may give us written authorization to your health information or to disclose it to anyone for any purpose. You also have the right to request restrictions on disclosure of PHI (Personal health Information), or alternative means of communication to ensure privacy.

**Marketing Health-Related Service:** We will not use your health information for marketing communications without your written authorization.

**Required by Law:** We may disclose your health information when we are required to do so by law or national security activities.

**Abuse or Neglect:** We may disclose your health information to the appropriate authorities when we suspect abuse or neglect.

**Appointment Reminders:** We may use or disclose your health information to provide you with appointment reminders (such as voicemail messages, postcards, or letters).

### **PATIENT RIGHTS**

**Access:** You have the right to look at or get copies of your health information with limited exceptions. If you request copies, we will charge you \$25.00 to locate and copy your information, and postage if you want the copies mailed to you.

**Amendment:** You have the right to request that we amend your health information.

## **QUESTIONS AND COMPLAINTS**

If you want more information about our privacy practices or if you have any questions or concerns, please contact us.

If you are concerned that we may have violated your privacy rights, or you disagree with a decision we made about access to your health information or in response to a request you made to amend or restrict the use of disclosure of your health information or to have us communicate with you by alternative means or at alternative locations, you may complain to us using the contact information listed at the end of this notice. You also may submit a written complaint to the U.S. Department of Health and Human Services. We will provide you with the address to file your complaint with the U.S. Department of Health and Human Services upon request.

We support your right to the privacy of your health information. A Privacy/Contact Officer has been designated for this office. Please ask our front desk personnel and they will direct you to the Privacy/Contact Officer.

## **PATIENT ACKNOWLEDGEMENT OF RECEIPT OF NOTICE OF PRIVACY PRACTICES AND CONSENT FOR NECESSARY USE OF PERSONAL HEALTH INFORMATION**

---

Print Patient's Name

Date

I, \_\_\_\_\_, have received a copy of this

(Signature of Patient or Parent or Legal Guardian)

office's NOTICE OF PRIVACY PRACTICES as required by federal law.

I, \_\_\_\_\_, consent to the use and disclosure of my

(Signature of Patient or Parent or Legal Guardian)

personal health information by Gateway Dental during Treatment, Billing/Payment and Healthcare Operations as outlined in the Notice of Privacy Practices.