

Camas Physical Therapy

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Camas WA, 98607

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Notice of Patient Information Practices

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED OR DISCLOSED AND HOW YOU CAN OBTAIN ACCESS TO INFORMATION. PLEASE READ CAREFULLY.

Camas Physical Therapy, who is required by law to protect the privacy of your personal health information, provide this notice about our information practices and follow the information practices described herein.

Uses and Disclosure of Health Information

Camas Physical Therapy uses your personal health information primarily for treatment, obtaining payment for treatment, conducting internal administrative activities and evaluating the quality of care provided. For example, we may use your personal information to contact you to provide appointment reminders or information about treatment alternatives or other health related benefits that could be of interest to you. Camas PT may also use or disclose your personal health information without authorization for public health purposes, for auditing purposes, for research studies and for emergencies. We also provide information when required by law. In any situation, our policy is to obtain your written authorization before disclosing your personal health information. If you provide us with a written authorization to release your information, for any reason, you may later revoke that authorization to stop disclosures at any time.

We may change our policy at any time. When changes are made, a new Notice of Information Practices will be posted in a common area of the clinic. You may also request an updated copy of our Notice of Information Practices at any time.

Patient's Individual Rights

You have the right to review or obtain a copy of your personal health information at any time. You have the right to request that we correct any inaccurate or incomplete information in your records. You may also have the right to request a list of instances where we have disclosed your personal health information for reasons other than treatment, payment or other related administrative purposes.

You may also request, in writing, that we not use or disclose your personal health information for treatment, payment and administrative purposes except when specifically authorized by you, when required by law, or in emergency circumstances. Camas Physical Therapy will consider all such requests on a case-by-case basis, but the company is not legally required to accept them.

Patient Signature

Date