

**Karen A. Brown L.Ac.
Acupuncturist and Herbalist
881 Fremont Avenue, Suite A5
Los Altos, CA 94024
408-202-9375**

Notice of Privacy Practices

Your name _____ Date of birth _____

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

Karen A. Brown L.Ac. is required by law to maintain the privacy and confidentiality of your protected information and to provide you with notice of her legal duties and privacy practices with respect to your protected health information.

Disclosure of your health care information.

Treatment We may disclose your health care information to other health care professionals within our practice for the purpose of treatment, payment or health care operations.

Payment We may disclose your health information to your insurance provider for the purpose of payment or health care operation.

Workers' compensation We may disclose your health information as necessary to comply with the State Workers' Compensation Laws.

Emergencies We may disclose your health information to notify or assist in notifying a family member, or other person responsible for your care about your medical condition or in the event of an emergency or of your death.

Public health As required by law we may disclose your health information to public health authorities for the purposes related to: preventing or controlling disease, injury or disability reporting child abuse or neglect, reporting domestic violence, reporting to the Food and Drug Administration problems with products and reactions to medications, and reporting disease or infections exposure.

Judicial and administrative proceedings We may disclose your health information to a law enforcement official for purposes such as identifying or locating a suspect, fugitive, material witness or missing person, complying with court order or subpoena, or other law enforcement purposes.

Deceased persons We may disclose your health information to coroners or medical examiners.

Organ donation We may disclose your health information to organizations involved in procuring, banking or transplanting organs and tissues.

Research We may disclose your health information to researchers conducting research that has been approved by an Institutional Review Board.

Public safety It may be necessary to disclose your health information to appropriate persons in order to prevent or lessen a serious and imminent threat to the health or safety of a particular person or the general public.

Specialized government agencies We may disclose your health information for military, national security, prisoner and government benefit purposes.

Marketing We may contact you for marketing purposes or fund raising purposes.

Change of ownership In the event that Karen A. Brown L.Ac. sells or merges with another organization, your health information/records will become the property of the new owner.

Your health information rights You have the right to request restrictions on certain uses and disclosures of your health information. Please be advised, however, that Karen A. Brown L.Ac. is not required to agree to the restrictions that you requested.

You have the right to have your health information received and communicate through an alternative method or sent to an alternative location other than the usual method of communication or delivery, upon your request.

You have the right to inspect and copy your health information.

You have a right to request that Karen A. Brown L.Ac. amend your protected health information. Please be advised that Karen A. Brown L.Ac. is not required to agree to amend your protected health information. If your request to amend your health information has been denied, you will be provided with an explanation of our denial reasons and information about how you can disagree with the denial.

You have a right to receive an accounting of disclosures of your protected health information made by Karen A. Brown L.Ac..

You have a right to a paper copy of this Notice of Privacy Practices at any time upon request.

Changes to this notice Karen A. Brown L.Ac. reserves the right to amend this Notice of Privacy Practices at any time in the future, and will make the new provisions effective for all information that she maintains. Until such amendment is made, Karen A. Brown L.Ac. is required by law to comply with this Notice.

Karen A. Brown L.Ac. is required by law to maintain the privacy of your health information and to provide you with notice of her legal duties and privacy practice with respect your health information. If you have questions about any part of this notice or if you want more information about your privacy rights please contact Karen A. Brown L.Ac. by calling this office at 408 977-0691. If Karen A. Brown L.Ac. is not available, you may make an appointment for a personal conference in person or by telephone within 2 working days.

Complaints Complaints about your privacy rights or how Karen A. Brown L.Ac. has handled your health information should be directed to Karen A. Brown L.Ac. by calling this office at 408 977-0691. If Karen A. Brown L.Ac. is not available, you may make an appointment for a personal conference in person or by phone within 2 working days. If you are not satisfied with the manner in which this office handles your complaint, you may submit a formal complaint to:

DHHS, Office of Civil Rights, 200 Independence Avenue, SW, Room 509F HHH Building, Washington, DC 20201

This notice is effective as of today's date listed below.

I have read the Privacy Notice and understand my rights contained in the notice. By way of my signature, I provide Karen A. Brown L.Ac. with my authorization and consent to use and disclose my protected health care information for the purpose of treatment, payment, and health care operation as described in the Privacy Notice.

Signature

Print Name

Date