



STEWART FAMILY DENTISTRY

Kenneth W. Stewart DMD

Michael E. Kanellis DMD

HIPAA NOTICE OF PRIVACY PRACTICES

Our commitment here at Stewart Family Dentistry is to serve our patients with professionalism and care, being sure at all times to protect the privacy and security of all Protected Health Information.

During the course of serving your interests, it may be necessary to share information with other Health Care Providers. The following are examples of instances where information may be shared:

- ▶ During treatment we may find it necessary to refer you to a Specialist, and the information we may provide to them would assist your treatment.
 - ▶ To obtain payment for services we provide to you.

We may use or disclose your information to provide you with appointment reminders such as voicemail messages, post cards or letters.

You have the right to look at or get copies of your health information, with limited exception. We will not charge you any additional fee for such a request.

We are committed to obeying all Federal, State and Local laws and regulations regarding Privacy Practices. If any other uses or disclosures than the ones listed above are needed, information will only be released with the written authorization of the individual in question. The individual, as provided for by law, may revoke this written authorization at any time.

You may request a more detailed version of this notice at any time. If you have any questions or comments, feel free to contact us at (775)359-5072.

I have read and understood the Notice of Privacy Practices.

Print Name _____

Signature X _____ Date _____
Patient or Legal Guardian