



CENTER FOR
ORTHOPAEDIC
SPECIALTIES

Brazo *Spine*

NOTICE OF PRIVACY PRACTICES

**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.**

**This notices takes effect on
April 14, 2003 and remains in effect
until we replace it.**

4. YOUR INDIVIDUAL RIGHTS

You have the right to:

- Look at or obtain copies of your medical information. You must make your request in writing to either the COS Privacy Officer or the COS Medical Records Department. We can provide you a form to request access or your may also send a letter as indicated. You will be required to prepay copying costs as allowed under Texas law.
- Request that we change your medical information. This request must be submitted in writing and you must provide a reason that supports the request. COS is not obligated to comply with your request. If we deny your request, we will provide you a written explanation. You may respond with a statement of disagreement that will be added to the information you wanted changed. If we accept your request to change the information, we will make reasonable efforts to tell others, including people you name, of the change and to include the changes in any future sharing of that information.
- Request that we place restrictions on our use or disclosure of your medical information. We are not required to agree to these additional restrictions, but if we do, we will abide by our agreement (except in the case of an emergency). Any request for restriction must be submitted in writing to COS.
- Request that we communicate with you about your medical information by different means or to different locations. This request must be submitted in writing to the contact person at the end of this notice.
- Receive an accounting of all times COS or our business associates shared your medical information for purposes other than treatment, payment, healthcare operations, and other specified exceptions. Certain time restrictions apply.
- Receive a paper copy of this notice. You may also obtain a copy at our website, www.cos-bx.com.

5. QUESTIONS AND COMPLAINTS

If you have any questions about this notice or if you think that we may have violated your privacy rights, please contact us. You may file a complaint with COS. All complaints to COS must be in writing addressed to Privacy Officer, 3201 University Drive East, Suite 255, Bryan, Texas 77802 (979-774-0411). You may also file a complaint with the Secretary of the Department of Health and Human Services. We will not retaliate in any way if you choose to file a complaint.

LAW ENFORCEMENT, COURT ORDERS, AND JUDICIAL AND ADMINISTRATIVE PROCEEDINGS: COS may disclose health information to law enforcement officials in response to a court order, subpoena, warrant, summons, or similar process; to report a death that may be the result of criminal activity; to report crimes on our premises; to report suspected victims of criminal activity; to report crimes in emergencies, or to cooperate concerning suspects, fugitives, material witnesses, or missing persons. If you are involved in a lawsuit or dispute, COS may disclose medical information in response to a court or legal order. We may also provide medical information in response to a subpoena, discovery request, or other lawsuit process by someone else involved in the dispute proceedings.

VICTIMS OF ABUSE, NEGLECT, OR DOMESTIC VIOLENCE:

COS may disclose medical information to appropriate authorities if we reasonably believe that you are a possible victim of abuse, neglect, or domestic violence or the possible victim of other crimes. We may share your medical information if it is necessary to prevent a serious threat to your health and safety or the health and safety of others. Any disclosures would be made only to someone or some organization able to help prevent or stop the threat.

RESEARCH IN LIMITED CIRCUMSTANCES:

In limited circumstances, COS may disclose medical information about you for research purposes, so long as this information does not leave COS premises. If the research involves anything more than medical review, you will be given the opportunity to agree or disagree to participate.

LAW AND HEALTH OVERSIGHT ACTIVITIES:

COS may disclose medical information to an agency providing health oversight as authorized by law, including audits, civil, administrative, or criminal investigations or proceedings, inspections, licensure or disciplinary actions, or other authorized activities. We will also disclose medical information when required to do so by federal, state, or local law.

1. OUR PLEDGE REGARDING MEDICAL INFORMATION

The privacy of your medical information is important to us. We are committed to protecting this information. We create a record of the care and services you receive at Center for Orthopaedic Specialties (Hereinafter referred to as COS). We need this record to provide you with quality care and to comply with certain legal requirements. This notice will tell you about the ways we may use and share medical information about you. We also describe your rights and certain duties we have regarding the use and disclosure of medical information.

2. OUR LEGAL DUTY

Law Requires Us to:

- a. Keep your medical information private.
- b. Give you this notice describing our legal duties, privacy practices, and your rights regarding your medical information.
- c. Follow the terms of the notice that is now in effect.

We Have the Right to:

- a. Change our privacy practices and the terms of this notice at any time, provided that the changes are permitted by law.
- b. Make the changes in our privacy practices and the new terms of our notice effective for all medical information that we keep, including previously created or received before the changes.

Notice of Change to Privacy Practices:

- a. Before we make an important change in our privacy practices, we will change this notice and make the new notice available upon request.

3. USE AND DISCLOSURE OF YOUR MEDICAL INFORMATION

This section describes all of the different ways COS is permitted to use and disclose medical information. We will not use or disclose your medical information for any purpose not listed, without your specific written authorization. Any specific written authorization you provide may be revoked at any time by writing to us. If you revoke your permission, we will no longer use or disclose medical information about you for the reason(s) covered by your written authorization. You understand that we are unable to take back any disclosures we have already made with your permission, and that we are required to retain our records of the care that we provide to you.

FOR TREATMENT: COS may use medical information about you to provide you with medical treatment and services. We may disclose medical information about you to doctors, nurses, technicians, medical students, or other people involved in your care. We may also share medical information about you to your other health care providers to assist them in treating you.

FOR PAYMENT: COS may use and disclose your medical information for payment, preauthorization, or certification purposes.

FOR HEALTHCARE OPERATIONS: COS may use and disclose your medical information for health care operations; this might include measuring and improving quality, evaluating the performance of employees, conducting training programs, and getting the accreditation, certificates, licenses and credentials we need to serve you.

FUNERAL DIRECTOR, CORONER, MEDICAL EXAMINER: To help them carry out their duties, COS may release the medical information of a person who has died to a funeral director, coroner, or medical examiner.

APPOINTMENT REMINDERS: We may use your medical information to contact you as a reminder that you have any appointment scheduled. Should you have a telephone answering device or voicemail, we may leave the reminder in a message.

WORKERS COMPENSATION: COS may disclose health information about you to comply with law relating to workers compensation or other similar programs.

NOTIFICATION: COS may release medical information about you to a family member, your personal representative or another person responsible for your care. We may also provide information to someone who helps pay for your care. In case of emergency, or if you are not able to give or refuse permission, we will share only the health information that is directly necessary to your health care, according to our professional judgement. We will also use our professional judgement to make decisions in your best interest about allowing someone to pick up medicine, medical supplies, x-ray or medical information for you.

DISASTER RELIEF: COS will provide medical information to a public or private organization or person who can legally assist in disaster relief efforts.

ORGAN AND TISSUE DONATION: If you are a registered donor, COS may release medical information about you to organizations that handle organ procurement, transplantation or banking.

SPECIALIZED GOVERNMENT FUNCTIONS: Subject to certain requirements, COS may disclose or use health information for military personnel and veterans, for national security and intelligence activities, for medical suitability determinations for the U. S. Government, for correctional institutions and other law enforcement custodial situations, and for government programs providing public benefits.

PUBLIC HEALTH ACTIVITIES: COS may disclose medical information about you for public health activities. These activities include and are not limited to the following needs: Prevent or control disease, injury or disability; to report child abuse or neglect, to report to the Food and Drug Administration for purposes of reporting adverse events associated with products defects or problems, to enable product recalls, repairs or replacements, to track products, or to conduct activities required by these agencies. We may also notify a person who may have been exposed to a communicable disease or otherwise be at risk of contracting or spreading a disease or condition.