

OrthoSport Physical Therapy, LLC
19217 36th Ave. West, Suite 102
Lynnwood, WA 98036

Notice of Privacy Practices

This notice is a brief description of how medical information about you may be used and disclosed. It also informs you of how to obtain this information for yourself.

Our Obligation:

By law, we are required to:

- Maintain the privacy of protected Health Information.
- Give you this notice of our legal duties and privacy practices regarding health information about you.
- Follow the terms of our current policy that is in effect.

How We May Use and Disclose Health Information:

The following are reasons for us to utilize and disclose your Health Information: treatment, payment, health care operations, appointment reminders, treatment alternatives, health-related benefits and services, individuals involved in your care or payment of your care, and research. We will utilize this information only with your written permission. You may revoke this agreement at anytime by writing to our office manager.

Special Situations:

There are certain situations that require us to utilize your Health Information. These include as required by law and/or to avert a serious threat to your health or safety. We may also disclose Health Information to our business associates that perform functions on our behalf or provide us with services if the information is necessary for such functions or services. For example, we may use another company to perform billing services on our behalf. All of our business associates are obligated to protect the privacy of your information and are not allowed to use or disclose any information other than as specified in our contract.

Your Rights:

You have the following rights: to inspect and copy, amend, accounting disclosures, request restrictions, request confidential communication, and paper copy of this notice.

Changes to This Notice:

We reserve the right to change this notice and make the new notice apply to the Health Information we already have as well as any information we receive in the future.

Complaints:

If you believe your privacy rights have been violated, you may file a complaint with our office or with the Secretary of the Department of Health and Human Services. To file a complaint with our office, contact our office manager. All complaints must be made in writing. **You will not be penalized for filing a complaint.**