Summary of Notice of Privacy Practices

Our Privacy Practices comply with Omnibus 2013

Oral & Facial Surgery keeps information of all your dental visits. We are required by law to maintain the privacy of your protected health information, and to provide you with notice of our legal duties and privacy practices with respect to your information upon request. You can also find the Notice in our website. This notice is a detailed explanation on how we may use your protected health information and your rights to inspect, and amend your information. We are required by law, and by our own code of ethics, to keep your information private, and to follow the practices outlined in this Notice. Our Privacy Practices comply with Omnibus 2013, and are updated effective 09/23/2013.

* You May Refuse to Sign This Acknowledgment*

I have had full opportunity to read and consider the contents of this office's Notice of Privacy Practices. I understand I am giving

Print Name:	Signature	Date
	For Office Use Only	
We attempted to obtain written acknowledgement of re	eceipt of our Notice of Priv	acy Practices, but acknowledgement could not be
obtained because: Individual refused to sign	Λr	emergency situation prevented us from obtaining
Communications barriers prohibited obtaining t		knowledgement
acknowledgement		her (Please Specify)
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* You May Ref I have had full opportunity to read and consider the commy permission to use and disclose my protected health operations. I also understand that I have the right to re	information to use in trea	ce of Privacy Practices. I understand I am giving atment, payment activities, and healthcare
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