

**Hilton Head General & Laparoscopic Surgery, P.A.**  
**dba "Surgical Specialists"**

**NOTICE OF PRIVACY PRACTICES**

*Effective Date: 4/1/2003; Revised 9/16/2012, 11/2/2017*

THIS NOTICE DESCRIBES HOW HEALTH CARE INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

At Surgical Specialists, we are committed to protecting your personal health information. Each time you are seen by one of our physicians in our office, a record is made containing your symptoms, history, physical examination, test results, treatment, plan for future care, and billing-related information. This notice applies to all information in your medical record generated, received or transmitted by our medical practice. While your medical record is the physical property of Surgical Specialists, the information contained therein belongs to you.

Our Responsibilities and Your Rights

We are required by Federal and/or South Carolina state law to maintain the privacy of your protected health information; to provide you with this notice of our privacy practices and a paper copy upon request; to abide by the terms of our current notice; to accommodate reasonable written requests by you to amend health information you believe to be incorrect or incomplete; to accommodate reasonable written requests by you to restrict or limit health information communicated to other individuals or entities involved in your medical care; to accommodate reasonable written requests by you restricting how our practice communicates with you; to provide upon your written request an accounting of certain disclosures of your health information made for purposes other than treatment, payment or health care operations where an authorization was not required; to submit a written revocation of a previous authorization to release your protected health information; to permit you to inspect and copy your protected health information, with the exception of psychotherapy notes.

How We May Use and Disclose Your Protected Health Information Without Your Written Authorization

- For Treatment
- For Payment
- For Health Care Operations
- For Appointment Reminders
- For Treatment Alternatives and Services
- For Business Associate Functions
- For Abuse, Neglect or Domestic Violence Reporting
- For Public Health Reporting
- For Law Enforcement/Legal Proceedings, as required by law or in response to a valid subpoena
- For Correctional Institutions, for inmates
- For Military Command Authorities
- For Food and Drug Administration
- For Organ and Tissue Donation Organizations
- For Funeral Directors, Coroners and Medical Examiners
- For Workers Compensation Agents
- For Health Oversight Agencies
- For National Security and Intelligence Agencies
- For Protective Services for the President and Others

Complaint Process

If you believe that your privacy rights have been violated by us, you may file a complaint without fear of retaliation by contacting the Regional Manager of the Office for Civil Rights:

Regional Manager

Office for Civil Rights

U.S. Department of Health and Human Services

Sam Nunn Atlanta Federal Center, Suite 16T70

61 Forsyth Street, S.W.

Atlanta, GA 30303-8909

Telephone (404)562-7453

FAX (404)562-7881