



Tyler Cardiovascular Consultants, P.A.
EXPERIENCE. HEALING.

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.

1. **Purpose.** Tyler Cardiovascular Consultants, P.A. and its physicians, employees and representatives as well as any healthcare professional authorized to enter information into your medical record (referred to collectively as “CVC”) follow the privacy practices described in this notice. CVC maintains your medical information in records that will be maintained in a confidential manner, as required by law. However, CVC must use and disclose your medical information to the extent necessary to provide you with quality healthcare. To do this, CVC must share your medical information as necessary for treatment, payment and healthcare operations.
2. **What are treatment, payment and healthcare operations?** Treatment includes sharing information among healthcare providers involved in your care. For example, your physician may share information about your condition with the pharmacist to discuss appropriate medications or with radiologists or other consultants in order to make a diagnosis. CVC may use your medical information as required by your insurer or HMO to obtain payment for your treatment, office visit or hospital stay. CVC also may use and disclose your medical information for our healthcare operations, which includes activities to improve the quality of care (e.g., review and training purposes).
3. **How will CVC use my medical information?** Your medical information may be used, unless you ask for restrictions on a specific use or disclosure, for the following purposes:
 - To provide appointment reminders.
 - To inform you of treatment alternatives, benefits or services related to your health. You will have the opportunity to refuse to receive this information.
 - To individuals, such as family members or close friends involved in your care or payment for your treatment.
 - Disaster relief agency if you are involved in a disaster relief effort.
 - As required by law.
 - Public health activities, including disease prevention, injury or disability; reporting births and deaths; reporting child abuse or neglect; reporting reactions to medications or product problems; notification of recalls; infectious disease control; notifying government authorities of suspected abuse, neglect or domestic violence if you agree or as required by law.
 - Health oversight activities (e.g., audits, inspections, investigations, and licensure).
 - Lawsuits and disputes - we will attempt to provide you advance notice of a subpoena before disclosing the information.
 - Law enforcement - in response to a court order or other legal process; to identify or locate an individual being sought by authorities; about the victim of a crime under restricted circumstances; about a death that may be the result of criminal conduct; and in emergency circumstances relating to reporting information about a crime.
 - Coroners, medical examiners, and funeral directors.
 - Organ and tissue donation.
 - Certain research projects.
 - To prevent a serious threat to health or safety.
 - To military command authorities if you are a member of the armed forces or a member of a foreign military authority.
 - National security and intelligence activities.
 - Protection of the President or other authorized persons for foreign heads of state, or to conduct special investigations.
 - Inmates - medical information about inmates of correctional institutions may be released to the institution.

- Workers' Compensation - your medical information regarding benefits for work-related illnesses may be released as appropriate.
 - To carry out healthcare treatment, payment, and operation functions through business associates.
4. **Your authorization is required for other disclosures.** Except as described above, CVC will not use or disclose your medical information unless you authorize (permit) CVC in writing to disclose your information. You may revoke your permission, which will be effective only after the date of your written revocation. Certain types of information may be subject to additional restrictions on disclosure such as substance abuse treatment records, AIDS test results, and psychotherapy notes.
5. **You have rights regarding your medical information.** You have the following rights regarding your medical information, provided that you make a written request to CVC to invoke the right:
- **Right to request restriction.** You may request limitations on your medical information we use or disclose for healthcare treatment, payment, or operations (e.g., you may ask us not to disclose that you have had a particular surgery), but we are not required to agree to your request.
 - **Right to confidential communications.** You may request communications in a certain way or at a certain location, but you must specify how or where you wish to be contacted.
 - **Right to inspect and copy.** You have the right to inspect and copy your medical information regarding decisions about your care; however, psychotherapy notes may not be inspected and copied. We may charge a fee for copying, mailing and supplies. Under limited circumstances, your request may be denied; you may request review of the denial by another licensed healthcare professional chosen by CVC. CVC will comply with the outcome of the review.
 - **Right to request amendment.** If you believe that the medical information we have about you is incorrect or incomplete, you may request an amendment in writing. CVC is not required to accept the amendment.
 - **Right to accounting of disclosures.** You may request a list of the disclosures of your medical information that have been made to persons or entities other than for healthcare treatment, payment or operations in the past six (6) years, but not prior to April 14, 2003, such as, a list will not include certain disclosures, including disclosures made to you; with your authorization; or for treatment, payment and healthcare operations. After the first request, there may be a charge.
 - **Right to a copy of this notice.** You may request a paper copy of this notice at any time, even if you have been provided with an electronic copy. You may obtain an electronic copy of this notice at our website, www.tylercvc.com.
6. **Requirements regarding this notice.** CVC is required by law to maintain the privacy of medical information and to provide you with this notice of CVC's legal duties and privacy practices. CVC will be governed by this notice for as long as it is in effect. CVC may change this notice and these changes will be effective for medical information we have about you as well as any information we receive in the future. Each time you register at CVC for health care services as an inpatient or outpatient, you may receive a copy of the notice in effect at that time.
7. **Complaints.** If you believe your privacy rights have been violated, you may file a complaint with CVC or with the Secretary of the United States Department of Health and Human Services. You will not be penalized or retaliated against in any way for making a complaint to CVC or the Department of Health and Human Services.

Contact our Privacy Officer if you have a privacy complaint; have any questions about this notice; wish to request restrictions on uses and disclosures for health care treatment, payment, or operations; or wish to obtain a form to exercise your individual rights described in paragraph 5.

Tyler Cardiovascular Consultants, P.A.
ATTN: Privacy Officer
619 S. Fleishel
Tyler, Texas 75701
(903) 510-7273

Effective: April 14, 2003
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