



# Physical Therapy & Hand Centers

## Notice of Patient Information Practices

**This notice describes how medical information about you may be used or disclosed and how you can get access to information. Please review it carefully.**

### **Physical Therapy & Hand Centers, Inc. Legal Duty**

Physical Therapy & Hand Centers, Inc. (PTHC) is required by law to 1) protect the privacy of your personal health information 2) provide this notice about our information practices 3) follow the information practices that are described herein.

### **Uses and Disclosures of Health Information**

PTHC uses your personal information primarily for treatment, obtaining payment for treatment, conducting internal administrative activities and evaluating the quality of care that we provide. PTHC may use your personal information to contact you for appointment reminders, information about treatment alternatives, or other health related benefits that could be of interest to you.

PTHC may also use or disclose your personal information without prior authorization for public health purposes, for auditing purposes, for research studies, and for emergencies. We also provide information when required by law.

In any other situation, PTHC's policy is to obtain your written authorization before disclosing your personal information. If you provide us with a written authorization to release your information, you may later revoke that authorization to top future discloses at any time.

### **Patients' Individual Rights**

You have the right to review or obtain a copy of your health information at any time. You have the right to request that we correct any inaccurate or incomplete information in your records. You also have the right to request a list of instances where we have disclosed your personal information for reasons other than payment, or other related administrative purposes.

You may also request in writing that we not use or disclose your personal information for treatment, payment, and administrative purposes except when specifically authorized by you, when required by law or in emergency circumstances. PTHC will consider all such requests on a case by case basis, but PTHC is not legally required to accept.

### **Concerns and Complaints**

If you are concerned that PTHC may have violated your privacy rights or if you disagree with any decisions we have made regarding access or disclose your personal information, please contact our practice manager at the address listed below. You may also send a written complaint to the US Department of Health and Human Services.

**Physical Therapy & Hand Centers, Inc.**  
**Julianna Chavez, Director of Business Affairs**  
**11777 Bernardo Plaza Court, Suite 105**  
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**Phone: (760) 591-7750 Ext 201 | Fax: (760) 294-9813**