

Bradley Shumway DO

Shumway Family Medicine PLLC 4447 E. Broadway Rd. Suite 107, Mesa, AZ 85206

Phone: 480-550-9610 Fax: 480-500-6858

shumwayfamilymedicine@shumwayfamilymedicine.com

Notice of Privacy Practices for Protected Health Information

- Shumway Family Medicine PLLC abides by current medical standards and ethics to maintain privacy of your protected health information as required by law.
- Shumway Family Medicine PLLC may use and disclose your protected health information in the following scenarios:
 - To provide treatment: For example, your information may be shared to coordinate care with other medical providers or facilities, order tests and receive results, provide prescriptions, and coordinate with others who may assist in your care.
 - To arrange payment of services.
 - For business health care operations of the practice, such as with business associates.
 - For lawsuits and similar proceedings or when required by law enforcement.
 - o In the case of suspected abuse, negligence, or domestic violence.
 - To coroners and medical examiners in the event of death.
 - To organizations that handle organ and tissue donation in the event of death.
 - When required for public health risks.
 - For possible health oversight activities.
 - o To a correctional facility if you become an inmate.
 - To contact you for appointment reminders.
 - When necessary to reduce or prevent a serious threat to an individual's health or safety.
 - If required by military authorities if you are a member or veteran of armed forces.
 - If required for national security.
 - If required for workers' compensation.
 - If practice ownership changes.
 - Providing immunization records to a school if you have informally agreed to disclosure.
 - Breach notification purposes.
- Your Rights Include:
 - Confidential communications performed via the means documented and agreed upon in the "Communication Permission Form".
 - Requesting restrictions to the above disclosures (if feasible and not otherwise required by law).
 - Inspect, request amendment to, and obtain copies of your protected health information.
 - Requesting an accounting of non-routine disclosures of your protected health information.
 - Obtaining a paper copy of this notice if requested.
- To request more information or to file a complaint for suspected violations in privacy rights, please contact the practice at 480-550-9610.