Stacie V. Ellis, RDN, LD

[www.StacieEllisRDN.com](http://www.StacieEllisRDN.com) ● 469-608-9474 ● StacieEllisRDN@yahoo.com

This Notice describes how personal health information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

We respect patient confidentiality and only release personal health information about you in accordance with state and federal law. This notice describes our policies related to the use of records of your care generated by Stacie Ellis RDN, LD.

Use and Disclosure of protected health information

In order to effectively provide you care, there are times when we will need to share your health personal information to others beyond Stacie Ellis, RDN, LD. This includes for:

Treatment. With your permission we may use or disclose personal health information about you to provide, coordinate, or manage your care or any related services, including sharing information with others outside Stacie Ellis RDN, LD that we are consulting with or referring you to.

Healthcare Operations: we may use information about you to coordinate our business activities. This may include setting up your appointments, reviewing your care, training staff.

Information disclosed without your consent.

Under state and federal law, information about you may be disclosed without your consent in the following circumstances:

Emergency. Sufficient information may be shared to address the immediate emergency you are facing.

Follow up appointments. We may be contact you to remind you of future appointments or information about treatment alternatives or other health-related benefits and services that may be of interest to you.

As required by law: this would include situations where we have a subpoena, court order, or are mandated to provide public health information, such as communicable diseases or suspected abuse and neglect such as child abuse, elder abuse, or institutional abuse.

Coroners, funeral directors: we may disclose personal health information to a coroner or personal health examiner and funeral directors for the purposes of carrying out their duties.

Government requirements: we may disclose information to a health oversight agency for activities authorized by law, such as audits, investigations inspections and licensure. There also might be a need to share information with the Food and Drug Administration related to adverse events or product defects. We are also required to share information, if requested with the Department of Health and Human Services to determine our compliance with federal laws related to health care.

Criminal activity or danger to others: if a crime is committed on premises or against or personnel we may share information with law enforcement to apprehend the criminal. We also have the right to involve law enforcement and to warn any potential victims when we believe an immediate danger may exist to someone, or if we believe you present a danger to yourself.

Patient Rights:

You have the following rights under State and federal Law

Copy of Record: You are entitled to inspect the personal record of Stacie Ellis RDN, LD has generated about you. We may charge you a reasonable fee for copying and mailing your record.

Release of records: you may consent in writing to release of your records to others. For any purpose you choose. This could include your attorney, employer, o others who you wish to have knowledge of your care. You may revoke this consent at any time, but only to the extent no action has been take in reliance on your prior authorization.

Restriction on record: you may ask us not to use or disclose part of the personal health information. This request must be in writing. Stacie Ellis, RDN, LD is not required to agree to your request if we believe it is in your best interest to permit use and disclosure of the information. The request should be given to Stacie Ellis, RDN, LD who will determine if the request can be granted.

Contacting you: you may request that we send information to another address or by alternative means. We will honor such request as long as it is reasonable and we are assured it is correct. We have a right to verify that the payment information you are providing is correct.

Amending record: if you believe that something in your record is incorrect or incomplete you may request we amend it. To do this contact Stacie Ellis RDN, LD. In certain cases we may deny your request. If we deny your request for an amendment you have a right to file a statement you disagree with us. We will then file our response and your statement and our response will be added to your record.

Accounting for disclosures: You may request a listing of any disclosures we may have made related to your personal health information, except for information we used for treatment, payment, or healthcare operations purposes or that we shared with you or your family, or information you gave us specific consent to release. It also excludes information we were required to release. To receive information regarding disclosure made for a specific time period no longer than six years and after April 14, 2003, please submit your request in writing to Stacie Ellis RDN, LD. We will notify you of the cost involved in preparing this list.

Questions and complaints: if you have any questions, or wish a copy of this policy or have any complaints you may contact Stacie Ellis in Writing.

Changes in Policy: Stacie Ellis RDN, LD reserves the right to change its Privacy Policy based on the needs of her company and changes in state and federal law.