
For More Information or to Report a Problem

If you have questions about the Westchase Physical Therapy & Medical Supply privacy policy, you may contact us at (813) 343-3960

Revisions to Notice

Westchase Physical Therapy & Medical Supply may revise the terms of this Notice and make new Notice effective for all of your protected information. If Westchase Physical Therapy & Medical Supply makes a material change to this Notice, a new Notice will be posted at our Westchase Physical Therapy & Medical Supply physical location and will be available to you upon request.

Effective Date

This Notice is effective as of January 11, 2007.

Westchase Physical Therapy & Medical Supply is required by law to maintain the privacy of your protected information and to provide you with this Notice. Westchase Physical Therapy & Medical Supply is required to comply with the terms of this Notice for so long as it is in effect.



W E S T C H A S E
P H Y S I C A L T H E R A P Y
&
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Notice of Privacy Policy

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

PLEASE REVIEW CAREFULLY

We understand the confidential nature of the information you provide to Westchase Physical Therapy & Medical Supply. We want you to understand how Westchase Physical Therapy & Medical Supply may use and disclose certain information you may provide us, and what rights you have concerning that information.

This privacy policy will tell you:

- **What information is protected**
 - **Your rights concerning your protected information**
 - **How Westchase Physical Therapy & Medical Supplies may use and disclose your protected information**
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What information is protected?

Information protected by this policy includes information Westchase Physical Therapy & Medical Supply receives or creates that identifies you and concerns:

- **Your past, present, or future medical health or condition**
 - **Medical care that is provided to you, or**
 - **The past, present, or future payment for medical care provided to you**
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How We May Use or Disclose Your Protected Information

Westchase Physical Therapy & Medical Supply may use or disclose your protected information to provide you with treatment or to perform health care operations. Some examples of how we may use or disclose your protected information for these reasons are:

Treatment . . .

We may use or disclose your protected information to dispense prescription medications or devices to you, provide you with information and counseling on your drug therapy, and communicate with your physician, your physician's staff, emergency treatment personnel or other health care professionals to ensure you receive appropriate treatment.

Health Care Operations . . .

We may use your protected information to review the performance of our pharmacists, to prevent fraud and to develop compliance programs in order to offer more effective and comprehensive treatment to you.

Westchase Physical Therapy & Medical Supply may use or disclose your protected information for other reasons. Those reasons and some examples of how we may use or disclose your protected information for those reasons are:

Communications With You . . .

We may use your protected information to contact you. We may contact you to ensure that your prescription is working effectively, or to provide you with refill reminders or information about treatment alternatives.

Health Oversight Agencies . . .

We may disclose your protected information to agencies authorized by law to perform audits, investigations or inspections for the oversight of the health care system, government benefit programs, government regulatory programs or civil rights laws.

Judicial and Administrative Proceedings . . .

We may disclose your protected information in response to a court order, administrative order, subpoena, warrant, or other lawful process.

Law Enforcement . . .

We may disclose your protected information as required by law in response to requests from law enforcement.

Service . . .

We may hire third parties to perform certain services for us. We may disclose your protected information to these third parties so that they can perform the services we have asked them to do. These third parties will be required to protect your information and will not be allowed to use your information for any purpose other than to provide the services we have requested.

Special Circumstances . . .

We may disclose your protected information in certain special circumstances. Such circumstances include disclosures to agencies authorized by law to collect information for national security and intelligence activities, for specialized government functions in the event you are a veteran or are in the military, for investigation of a death or identification of a deceased person, for review of product quality and safety, to avert a threat to health or safety of an individual or the public or to comply with requirements for workers' compensation programs.

The examples given above are for illustration only. They may not be all inclusive. Westchase Physical Therapy & Medical Supply may also use or disclose your protected information as otherwise required by law. Westchase Physical Therapy & Medical Supply will obtain your written authorization before using or disclosing your protected information for any reason other than those included in this Notice. You may revoke your authorization in writing at any time. Upon receipt of your written revocation, we will stop using or disclosing your protected information, except to the extent that we have already.

YOUR RIGHTS . . .

You have certain rights concerning your protected information and this notice.

These Rights Include:

Notice . . .

You may request a copy of the Notice at any time.

To request a paper copy, stop by and visit Westchase Physical Therapy & Medical Supply.

Inspection and Copies . . .

You have the right to inspect and receive a copy of the protected information we maintain about you. To do so, contact Westchase Physical Therapy & Medical Supply. We may charge you a fee for the costs of copying and mailing your protected information.

Amendments . . .

If you feel that the protected information we maintain about you is incomplete or incorrect, you may request that we amend it. To request an amendment, please submit a written request to Westchase Physical Therapy & Medical Supply. The request must include the reason you are requesting the amendment.

Restrictions on Uses and Disclosures . . .

You have the right to request additional restrictions on our use or disclosure of your protected information. Your request must be submitted in writing to Westchase Physical Therapy & Medical Supply.



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