## Czarkowski Pediatric Dentistry 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.

## I. Dental Practice Covered by this Notice

This Notice describes the privacy practices of Czarkowski Pediatric Dentistry ("Dental Practice"). "We" and "our" means the Dental Practice. "You" and "your" means our patient.

## II. How to Contact Us/Our Privacy Official

If you have any questions or would like further information about this Notice, you can contact Czarkowski Pediatric Dentistry's Privacy Official at:

Kara Czarkowski 1927 Broad Ripple Indianapolis, IN 46220 317-964-0900 317-602-2474 drkara@broadripplepediatricdentist.com

## III. Our Promise to You and Our Legal Obligations

The privacy of your health information is important to us. We understand that your health information is personal and we are committed to protecting it. This Notice describes how we may use and disclose your protected health information to carry out treatment, payment or health care operations and for other purposes that are permitted or required by law. It also describes your rights to access and control your protected health information. Protected health information is information about you, including demographic information, that may identify you and that relates to your past, present or future physical or mental health or condition and related health care services.

We are required by law to:

- Maintain the privacy of your protected health information;
- Give you this Notice of our legal duties and privacy practices with respect to that information; and
- Abide by the terms of our Notice that is currently in effect.