



**NOTICE OF PRIVACY PRACTICES
SUMMARY OF NOTICE
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

ROBERTA E. VOSE, LCSW, P.A. keeps medical information about you. This information is personal and private. I need to use this information in many ways. I use the information when I treat you or refer you for treatment.

Under the law, each client has certain rights to the medical information kept by ROBERTA E. VOSE, LCSW, P.A. These rights are:

- Access. You can request to view your medical information.
- Restriction. You can ask to limit who has access to your medical information. You can ask to limit what information is sent out of ROBERTA E. VOSE, LCSW, P.A.
- Accounting. You can request to review the list of places where your medical information has been sent.
- Amending. You can request that changes be made to your medical information (not to your psychotherapy notes) if you feel that there are inaccuracies.

A complete notice with explanations of uses, disclosures, rights and information on how to file a privacy complaint is available at your request.

A client also has the right to file a complaint regarding privacy of their medical information with the Secretary of Health and Human Services toll free at 1-877-696-6775.

Florida Statutes Florida statutorily grants patients the right of access to medical records maintained by health care practitioners. The disclosure of patient information by providers is generally prohibited without the patient's consent, subject to specified exceptions. Florida also has numerous laws protecting the confidentiality of health information held by a variety of entities and government agencies.

Client Name:

(Print): _____ Signature: _____

Parent/Guardian Name:

(Print): _____ Signature: _____

Date: _____