



Luv-N-Care Pediatrics

AMBREEN ASLAM, M.D., FAAP

PRIVACY POLICY

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

PLEASE REVIEW CAREFULLY

This notice takes effect on November 1, 2008 and remains in effect until we replace it.

The privacy of your child's personal information is important to us and we are committed to protecting it. This notice will tell you the ways we may use and share medical information about your child. We also inform you of your rights and duties we have regarding the use and disclosure of medical information.

INFORMATION WE COLLECT:

We collect information about you from the following sources:

- Information you give us on patient information database forms
- Information you give us on patient history forms
- Information you give to our receptionists, billing staff, nurses, physician assistants and physicians
- Information you release to us from other doctors, hospitals and laboratories
- Information from consumer reporting agencies
- Information reported to us by hospitals, labs, imaging depts. And specialists after we order tests on you or refer you to specialists

CONFIDENTIALITY, SECURITY AND INTEGRITY OF YOUR PERSONAL INFORMATION

We maintain physical, electronic and procedural safeguards to protect information we collect about you. We restrict access to your information to only those individuals who need it in order to provide services to you. Each employee, at hiring, is counseled about confidentiality of patient's personal information with periodic reviews. Employees who violate these confidentiality requirements are subject to our disciplinary process. Where nonaffiliated third parties have access to your information, they must adhere to our privacy policy.

You have the right to keep the information in your records. You also have the right to request corrections or amendments to your child's records and the right to request limits on disclosures (your physician may not always agree to these requests). You also have the right to request an accounting of disclosures for purposes other than treatment, payment or health care operations. Our privacy policy may change from time to time to keep up with legal requirements. You may request an updated version by contacting the office. A current version will be posted in the waiting room.

If you feel your child's privacy rights have been violated or you have questions or complaints about your records at Luv-N-Care Pediatrics, please write to Luv -N-Care Pediatrics, 11307 FM 1960 W., Suite B-2A, Houston, Texas 77065 or call 832-237-8882 to talk to our privacy officer.

I HAVE READ THE ABOVE PRIVACY POLICY AND AGREE TO ALLOW LUV-N-CARE PEDIATRICS TO COLLECT AND DISCLOSE INFORMATION ABOUT ME AS OUTLINED ABOVE.

Parent's or Legal Guardian's Name (First, Middle, Last)

Authorized Signature

Date