

VINU GANTI, M.D., P.C.

12800 MIDDLEBROOK ROAD SUITE # 204
GERMANTOWN, MD 20874
TELEPHONE: (301) 540-8146
FAX: (301) 540-8162

***NOTICE OF PRIVACY PRACTICE REQUIRED UNDER
FEDERAL LAW***

THIS NOTICE DESCRIBES HOW PERSONAL OR MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

We have chosen to participate in the Chesapeake Regional Information System for our Patients (CRISP), a regional health information exchange serving Maryland and D.C. As permitted by law, your health information will be shared with this exchange in order to provide faster access, better coordination of care and assist providers and public health officials in making more informed decisions. You may “opt-out” and disable access to your health information available through CRISP by calling 1-877-952-7477 or completing and submitting an Opt-Out form to CRISP by mail, fax or through their website at www.crisphealth.org. Public health reporting and Controlled Dangerous Substances information, as part of the Maryland Prescription Drug Monitoring Program (PDMP), will still be available to providers

Dr. Ganti and his staff recognize the importance of keeping your health information secure and confidential. Under applicable law, we are providing this notice and will make sure that your personal information I used and disclosed in the manner it describes. However, we reserve the right to amend this notice and any amendment will be effective for all of the information that we already have about you as well as any information that we may receive or create in the future. Or current notice is posted in our waiting room and our exam rooms; you may also request a copy at anytime.

Under various laws, different requirements apply to types of information that we collect, use and disclose. We use the term "health information" to mean individually identifiable information regarding your health care. We use the term "personal information" to mean both health information and any other non-public identifiable information that we obtain in providing benefits to you, such as your address and Social Security number.

What types of personal information do we collect?

In providing health care and products to you, we may obtain health information as well as personal information in writing, by telephone or electronically from you or other health care providers, such as name, address, phone number, Social Security number, date of birth, marital status and other demographic information. We also receive information from other health care providers regarding your health care services, medical history, and service request information.

How do we protect the confidentiality of your personal information?

We restrict access to personal information about you, only to those staff members and health care providers who need to know that information to provide services to you. We maintain physical, electronic and procedural safeguards to guard your personal information. Dr. Ganti and his staff have the overall responsibility for developing policies and procedures to safeguard personal information against uses and disclosures that are inconsistent with this notice and with training our staff in regards to our privacy and security policies.

We may share your personal information without your authorization and in accordance with the law in order for us to conduct our office operations. When we share such information, we enter into confidentiality agreements with these entities that prohibit them from disclosing or using the information other than to carry out the purposes of the disclosure, except as permitted by law.

Use and disclosure of personal information

The law recognizes that in administering your health care we may use and disclose your personal information for all purposes the law categorizes as "treatment". The following is an example of the uses and disclosures, although not every use or disclosure that fall into this category is listed.

- Treatment. We may use and disclose personal information to other health care providers who are providing services to you.

- **Payment.** We may use and disclose health information to obtain payment for services we provide for you.
- **Others involved in your health care:** unless you inform us in writing, we may disclose personal information to a relative, close friend or others involved in your health care. For example, we may mail medical information to the address on record for the patient.
- **Legal proceedings:** to comply with a court order or other lawful process.
- **Other situations:** as detailed in the federal privacy regulations, we also may disclose personal information in certain public interest situations, such as disclosure to protect victims of abuse or neglect, avert a serious threat to health or safety, to track diseases or medical devices, to inform military or veteran authorities if you are an armed forces member, to coroner's for workers' compensation, national security and generally as required by law.

Other uses

We will obtain your written authorization for uses and disclosures of your health information that are not identified by this notice. You may revoke any such authorization, in writing, at any time but such revocation will not apply to any disclosures that have been made in reliance on your authorization. We do not destroy health information once you are no longer a patient in our office. It is necessary to use and disclose your information for many of the purposes described above even after you leave our care. However, the policies and procedures that protect that information against inappropriate use or disclosure apply regardless of your patient status with our office,

Rights established by law

The following rights regarding your health information are established by law but must be exercised by notifying us:

- **Inspect and copy health information**

You have the right to inspect and copy health information about you, except for psychotherapy notes or information compiled in reasonable anticipation of, or for use in, a civil, criminal or administrative action or proceeding. We may charge you a fee for the costs of copying, mailing or other supplies associated with your request. Under limited circumstances, we can deny your request and copy your health information.

- Amendment

If you believe that any of the health information is incorrect or incomplete, you may ask us to amend the health information. If we deny your request, we will tell you our reasons for the denial in writing.

- Accounting of disclosures

You may request a list of certain disclosures that we made of your health information, including disclosures in response to court orders or disclosures to government agencies that license us. All requests for an accounting of disclosures must state a time period that may not include a date earlier than six years prior to the date of the request and may not include dates before April 14, 2003. (We will provide you with the list free of charge unless we have already provided you with a list within the same 12-month period). Uses and disclosures identified in this Notice of Privacy Practices will not be included in the accounting.

- Restrictions

You may request a restriction on our use and disclosure of your personal information. However, we are not required to agree to your requested restriction.

- Confidential communications

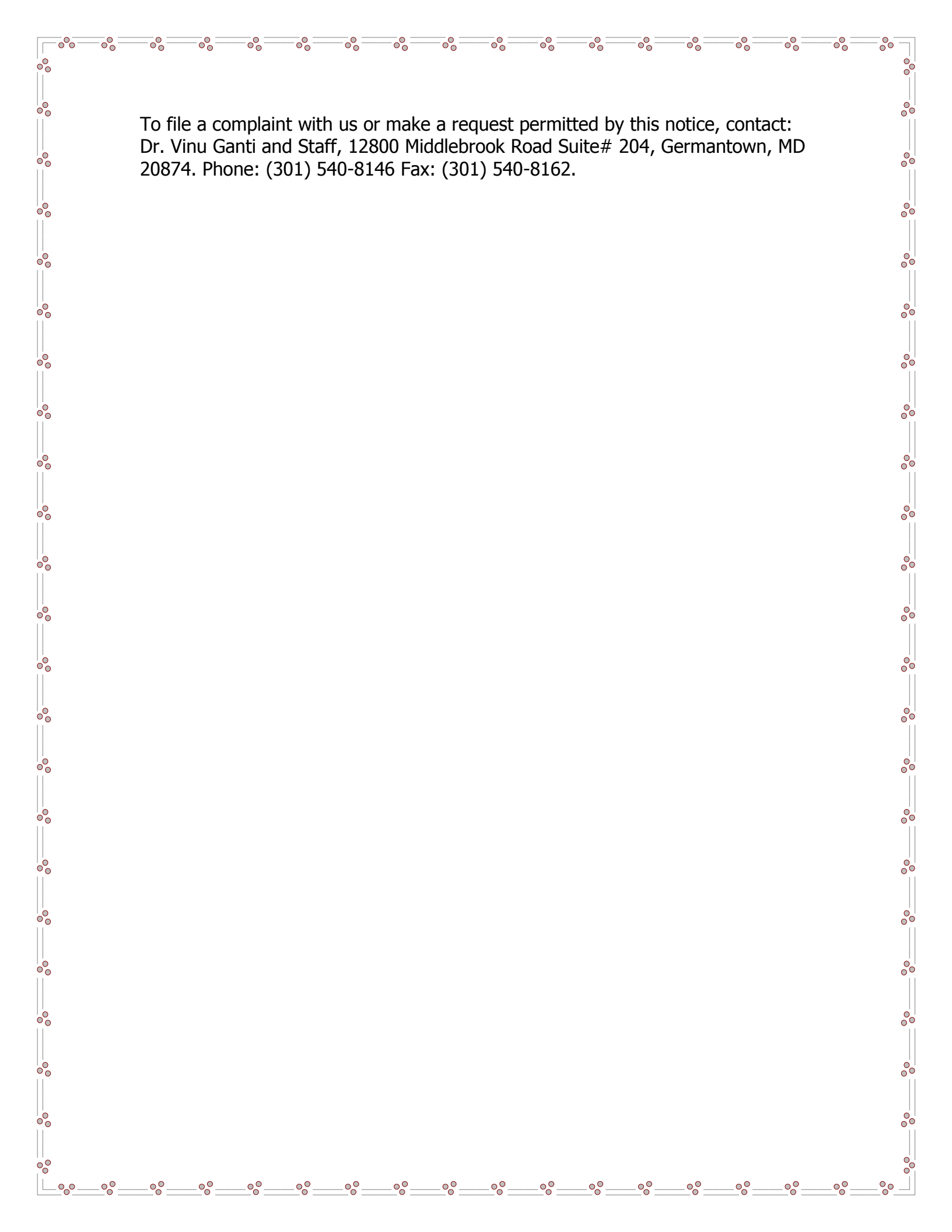
Under certain circumstances, you may request that we tell you about your health information in a certain way or at a certain location. For example, you may ask that we contact you only at work or at home. We will accommodate all reasonable requests, as determined by our office.

- Paper copy of notice

You are entitled to receive a paper copy of our Notice of Privacy Practices. You may ask us to give you a copy of this notice at this time.

Complaints

If you believe we have violated the terms of this notice, you may file a complaint with us, or the Secretary of the Department of Health and Human Services. You will not be penalized for filing a complaint. To file a complaint with the Secretary, please notify one of our receptionists of your request.



To file a complaint with us or make a request permitted by this notice, contact:
Dr. Vinu Ganti and Staff, 12800 Middlebrook Road Suite# 204, Germantown, MD
20874. Phone: (301) 540-8146 Fax: (301) 540-8162.