



Chesapeake Bay ENT

Scott Saffold, MD

Beverly Patterson, ENT Practitioner

Notice of Patient Information Practices – 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 read it carefully. The privacy of your personal information is important. We want you to understand our privacy practices and procedures.

Legal Duty

Chesapeake Bay ENT is required by law to protect the privacy of your personal health information, provide this notice about information practices and follow the information practices that are described herein.

Information We Collect

We collect information about you and your family as part of our registration process, during the course of your care and from other health care entities you utilize such as hospitals, laboratories, other physicians, imaging facilities and your insurance company. This personal information includes items such as your name, address, phone number, birth date, social security number, employer, health history and insurance policy and coverage information. During the course of treatment, we will collect health information regarding diagnosis, treatment plans, progress and any test results.

Uses and Disclosures of Health Information

Chesapeake Bay ENT uses your personal health information primarily for treatment; obtaining payment for treatment; conducting internal administrative activities and evaluation the quality of care that we provide. For example, we will share our findings with your primary care or referring physician, send your diagnosis and treatment information to your insurance plan or review your record internally to review the care provided. Chesapeake Bay ENT may also use your personal health information to contact you to provide appointment reminders, or information about treatment alternatives or other health benefits that could be of interest to you.

Chesapeake Bay ENT may also use or disclose your personal health information without prior authorization for public health purposes, for auditing purposes and for emergencies. We also provide information when required by law. In any other situation, Chesapeake Bay ENT policy is to obtain your written authorization before disclosing your personal health information. If you provide us with a written authorization to release your information for any reason, you may later revoke that authorization to stop future disclosures at any time.

Patient's Individual Rights

You have the right to review or obtain a copy of your personal health information at anytime. You have the right to request that we correct any inaccurate or incomplete information in you records. You also have the right to request a list of instances where we have disclosed your personal health information for reasons other than treatment, payment or other related administrative purposes.

You may also request in writing that we not use or disclose your personal health information for treatment, payment and administrative purposes except when specifically authorized by you, when required by law or in emergency circumstances. Chesapeake Bay ENT will consider all such requests on a case-by-case basis, but the practice is not legally required to accept them.

You have the right to receive a copy of this privacy policy. CBENT occasionally reviews its privacy policy and reserves the right to amend it. When amended, the revised policy will be available in our office.

Concerns and Complaints

If you are concerned that Chesapeake Bay ENT may have violated your privacy rights or if you disagree with any decisions we have made regarding access or disclosure of your personal health information, please contact our Privacy Officer at the address listed below. You may also send a written complaint to the US Department of Health and Human Services. This notice was published and becomes effective on April 1, 2003.

Detra Saffold, Office Administrator
Privacy Officer
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