

Canyon Diabetes & Endocrinology

Notice of Privacy Practices

This notice explains how Canyon Diabetes & Endocrinology may use and share your health information, and how you can access it. This document is effective as of October 1, 2025. Protected Health Information (PHI) is information about you, including demographic details, that identifies you and relates to your past, present, or future health and care. We are required by law to protect this information and to follow the practices described here. We may change this notice at any time, and the updated version will apply to all records we maintain.

Uses and Disclosures of Your Health Information

With your consent, we may use and disclose your PHI for treatment, payment, and healthcare operations. This means we may share information with other providers or specialists involved in your care, use it to bill you or your insurance, or support our daily operations such as scheduling, quality improvement, or contacting you about appointments. We may also work with trusted third parties, such as billing services, who are required to safeguard your information. In some cases, we may send you information about treatment options or services that may be of interest to you.

Other uses of your PHI will only happen with your written authorization, which you may revoke at any time. In certain cases, we may share information without your consent, such as when required by law, in emergencies, or when you are unable to communicate and disclosure is determined to be in your best interest. We may also share information with family or others involved in your care unless you object.

Situations Where Disclosure May Be Required

We may use or disclose your information without consent in specific circumstances. These include reporting abuse or neglect, public health reporting, oversight by government agencies, compliance with court orders, law enforcement needs, and FDA reporting related to product safety. Your PHI may also be used to prevent a serious threat to health or safety, to comply with workers' compensation laws, or if you are in custody and information is necessary for your care.

Your Rights

You have important rights regarding your health information. You have the right to see and obtain a copy of your medical record, with some legal exceptions. You may request corrections if you believe information is wrong, and if denied, you can add a statement of disagreement to

your record. You may request restrictions on how your information is used or shared, though we may not always be able to agree. You may also request that we contact you in a specific way, such as by mail only. You have the right to receive a list of certain disclosures we have made outside of treatment, payment, or operations, and you may request a paper copy of this notice at any time, even if you previously received it electronically.

Our Responsibilities

Canyon Diabetes & Endocrinology is required by law to protect your health information and notify you promptly if a breach occurs. We will not use or disclose your information for purposes not described in this notice unless you give written permission.

Complaints

If you believe your privacy rights have been violated, you may file a complaint with Canyon Diabetes & Endocrinology or with the U.S. Department of Health & Human Services. We will not retaliate against you for filing a complaint.

Patient Acknowledgement & Signature

I acknowledge that I have received Canyon Diabetes & Endocrinology's Notice of Privacy Practices.

Patient Name: _____

Patient/Guardian Signature: _____

If signed by Parent/Guardian, print name and relationship:

Date: _____