

**AZ Dental Center
Dr. Zaliya Akbasheva
1619 Grant Ave, Suite 23
Philadelphia, PA 19115
215-673-4940**

NOTICE OF PRIVACY PRACTICES

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.

Our commitment here at AZ Dental Center is to serve our patients with professionalism and caring, being sure at all times to protect the privacy of all Protected Health Information.

During the course of serving your interests, it may become necessary to share information with other Health Care Providers or Business Associates. The following are examples of instances where information may be shared:

- During treatment, we may find it necessary to acquire laboratory analysis
- For payment purposes, we may use the services of a billing service.
- During health care operations, we may need a second opinion.
- School/camp nurses may need to inquire us regarding your child's dental status.
- Pharmacies may require additional information when filling prescriptions.

We here at AZ Dental Center are committed to obeying all Federal, State and Local Laws and regulations regarding Privacy Practices. If any uses or disclosures other than the ones listed above are necessary, the information will be released, only with the written authorization of the individual in question. The written authorization, as provided for the law, may be revoked at any time by the individual.

If you have questions or comments regarding your Protected Health Information, feel free to contact our Compliance Officer, Dr. Zaliya Akbasheva at (215) 673-4940.

I have read and understand the above Notice of Privacy Practices.

Signed _____
(Patient/Parent or Legal Guardian)

Date _____