

## J. David Lackey, M.D., Inc.

1205 Health Center Parkway, Suite 240  
Yukon, Oklahoma 73099

Fellow American College of Obstetrics and Gynecology  
Certified, American Board of Obstetrics and Gynecology

Office (405) 717-5496  
Fax (405) 717-5499

### NOTICE OF PRIVACY PRACTICES

THIS NOTICE TAKES EFFECT ON April 14, 2003 AND REMAINS IN EFFECT UNTIL REPLACED

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

#### PLEASE REVIEW IT CAREFULLY.

If you have any questions about this notice, please contact receptionist.

#### WHO WILL FOLLOW THIS NOTICE:

This notice describes our office's practices and that of:

\*Any health care professional authorized to enter information into your file or record.

\*All employees, staff and other personnel.

All these entities may share medical information with each other for treatment, payment or hospital operations purposes described in this notice.

#### OUR PLEDGE REGARDING MEDICAL INFORMATION:

We understand that medical information about you and your health is personal. We are committed to protecting medical information about you. We create a record of the care and services you receive in our practice. We need this record to provide you with the quality care and to comply with certain legal requirements. This notice applies to all of the records of your care.

This notice will tell you about the ways in which we may use and disclose medical information about you. It also describes your rights and certain obligations we have regarding the use and disclosure of medical information.

We are required by law to:

\*Make sure that medical information that identifies you is kept private:

\*Give you notice of our legal duties and privacy practices with respect to medical information about you; and

\*Follow the terms of the notice that is currently in effect.

#### HOW WE MAY USE AND DISCLOSE YOUR MEDICAL INFORMATION:

The following categories describe different ways that we use and disclose medical information. For each category of uses or disclosures we will explain what we mean. Not every use or disclosure in a category will be listed. However, all of the ways we are permitted to use and disclose information will fall into one of these categories.

**For Treatment:** We may use medical information about you to provide you with medical treatment or services. We may disclose medical information about you to doctors, nurses, technicians, medical students, or other personnel who are involved in taking care of you. Different departments of our practice also may share medical information about you in order to coordinate the different things you need, such as prescriptions, lab work and x-rays. We may also disclose medical information about you to people outside the practice who may be involved in your medical care, such as family members or others we use to provide services that are part of your care.

**For Payment:** We may use and disclose medical information about you so that the treatment and