



OAK Pediatrics

Notice of Privacy Practices

1. Introduction

This Notice of Privacy Practices (NPP) describes how OAK Pediatrics may use and disclose your protected health information (PHI) to carry out treatment, payment, or healthcare operations and for other purposes permitted or required by law. It also describes your rights to access and control your protected health information.

2. Our Responsibilities

- **Legal Duty:** We are required by law to maintain the privacy of your health information and to provide you with this notice of our legal duties and privacy practices.
- **Compliance:** We will comply with the terms of this notice. We reserve the right to change our privacy practices and apply the changes to all health information we maintain. Any material changes to this notice will be provided to you.

3. Uses and Disclosures of Health Information

We may use and disclose your health information for the following purposes:

3.1 Treatment

- We may use and disclose your health information to provide, coordinate, or manage your healthcare and related services. This includes communication with other healthcare providers regarding your treatment.

3.2 Payment

- We may use and disclose your health information to bill and receive payment for the services you receive from us.

3.3 Healthcare Operations

- We may use and disclose your health information for operational purposes. These uses and disclosures are necessary to run our practice and ensure that all of our patients receive quality care.

3.4 Other Permitted and Required Uses and Disclosures

- We may use or disclose your health information in certain situations as required by law or for other purposes permitted by law, including but not limited to:
 - Public health activities
 - Health oversight activities



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- Judicial and administrative proceedings
- Law enforcement purposes
- Research purposes (under certain conditions)
- To avert a serious threat to health or safety
- Military and veterans activities
- National security and intelligence activities
- Workers' compensation

4. Your Rights

You have the following rights regarding your health information:

4.1 Right to Inspect and Copy

- You have the right to inspect and obtain a copy of your health information, with certain exceptions. Requests must be made in writing.

4.2 Right to Amend

- If you feel that the health information, we have about you is incorrect or incomplete, you may request an amendment. Requests must be made in writing and provide a reason supporting the request.

4.3 Right to an Accounting of Disclosures

- You have the right to request an accounting of certain disclosures of your health information made by us.

4.4 Right to Request Restrictions

- You have the right to request restrictions on the use or disclosure of your health information. We are not required to agree to these restrictions, but if we do, we will comply with your request unless the information is needed to provide you emergency treatment.

4.5 Right to Request Confidential Communications

- You have the right to request that we communicate with you about medical matters in a certain way or at a certain location.

4.6 Right to a Paper Copy of This Notice

- You have the right to a paper copy of this notice, even if you have agreed to receive the notice electronically.

5. Complaints



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If you believe your privacy rights have been violated, you can file a complaint with us. All complaints must be submitted in writing. We will not retaliate against you for filing a complaint.

6. Contact Information

For more information about this notice or to exercise any of your rights, please contact:

OAK Pediatrics
198 Littleton Rd Suite 204
Westford, MA 01886
P: 978-746-6382

7. Acknowledgment of Receipt of This Notice

We will request that you sign an acknowledgment form indicating that you have received this notice. This acknowledgment will be filed with your medical record.

By understanding and respecting your rights regarding your health information, we aim to provide you with the highest level of service and care.