



PRIVACY NOTICE

This notice describes how private health information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

Health Services provided within the Wellness Center is required by law to ensure the right of privacy to each person under its care.

Each time you utilize Health Services, a record of your visit is made. This record contains information necessary to your treatment such as: allergies, medications, symptoms, treatment, and continuing plan of care. Your health care providers rely on this information to provide you with appropriate health care. The information in your health record is private, as is any information that can identify an individual, and there are state and federal laws to protect this privacy. This is called your PROTECTED HEALTH INFORMATION (PHI).

This Privacy Notice is posted in the Health Center lobby. You may obtain a copy at the reception desk.

How your information will be used

We will use your PHI for treatment purposes. Our physician, nurse practitioner, nurse and clerical staff involved in your care will have access to your PHI. This is necessary to ensure that your care can be continued appropriately by any practitioner you see.

If we refer you to an outside physician, lab, or x-ray, certain information pertaining to your care will be communicated or sent with you so that appropriate care can be given.

The phone number you provide will be the primary point of communication with you, second to your SMCM email address.

Access to your Private Medical Information

You have the right to see your private health information (PHI). You will need to make an appointment for that purpose. (Upon your request, you must be given an appointment within 10 working days). A member of our staff must be present whenever you have the original medical record. You have the right to have any or all of your medical record copied.

You may allow anyone to see your medical record by giving us written permission stating who is to see what specific (or general) information. We cannot disclose your personal health information to your parents, or anyone else, without your permission. This permission, called a Release of Information, must be in writing and contain the date, your Social Security number, what information is to be released, and your signature.

By law, certain medical conditions must be reported to the State Health Department, law enforcement officers or regulatory officials. These include certain illnesses, injuries, domestic violence and information necessary to avert a serious threat to the health and/or safety of you or others. Courts and/or attorneys may receive medical information in accordance with a valid subpoena.

We must also report positive communicable diseases and 'Return-to-Learn' protocols to the following on-campus offices if applicable: Residential Life, Office of Student Support Services, and Athletics.

Patient's rights

You have the right to request a restriction on certain uses and disclosures of your information. For example, you may ask that the information of an accident you had not be disclosed to a family member, or friend. Any request for a restriction must be in writing. We are not necessarily required to agree to your request. If we agree; we will comply with your request unless the information is needed to provide you with emergency treatment.

You may request an amendment to your health record. This request must be in writing. If we deny the request, we must provide an explanation and allow you to provide a statement of disagreement that will become part of your medical record.

You may request an accounting of disclosures of your health information.

Our duties to you

We will exercise diligence to avoid being overheard when discussing your PHI. All records will be kept in a secure location.

We are required to abide by the terms of this notice. If you are concerned that we may have violated your privacy rights, or if you disagree with a decision we made about your health information you may file a complaint in writing with the Executive Director of the Wellness Center, Ethel Chance Hall, St. Mary's College of Maryland, or with the Office for Civil Rights, U.S. Department of Human Services. There will be no retaliation for filing a complaint with the Executive Director or with the Office for Civil Rights which is listed below.

U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Room 509F H14H Building
Washington, D.C. 20201