

## Confidentiality & Privacy

UAM STUDENT HEALTH SERVICES IS REQUIRED BY LAW TO MAINTAIN THE PRIVACY OF PROTECTED HEALTH INFORMATION AND TO PROVIDE YOU WITH THIS NOTICE OF OUR DUTIES AND PRIVACY PRACTICES WITH RESPECT TO PROTECTED HEALTH INFORMATION. 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. YOU MAY REQUEST A COPY OF THIS NOTICE. OTHER USES AND DISCLOSURES WILL BE MADE ONLY WITH YOUR WRITTEN AUTHORIZATION.

We will use your health information for treatment. Information obtained by your healthcare provider is recorded in your chart to determine the course of treatment that will work best for you. Your healthcare team members record the actions they took and their observations. No medical information or advice is given via e-mail for security reasons.

We will use your health information for regular operations. We may use information from your health record to assess the care and outcomes in your case and others like it. This information is used in an effort to continually improve the effectiveness of the healthcare and the service that we provide.

We may contact you to provide appointment reminders, reminders of needed follow-up care, or missed appointments.

We may disclose health information relative to adverse effects of food, medications, supplements, products, or product defects to the FDA.

We may disclose health information to public health or legal authorities charged with preventing or controlling disease, injury, or disability, as required by law.

We may disclose health information for law enforcement purposes as required by law or in response to a valid subpoena.

We may disclose health information to the Vice Chancellor of Student Affairs if we feel that you pose a significant threat of danger or physical harm to yourself or to other members of the UAM community.

UAM Student Health Services has the right to change their notices and practices. You will be given a copy of any change when you come to Student Health Services.

You have the right to inspect and copy protected health information. You also have the right to receive an accounting of disclosures of protected health information.

You have the right to request restrictions or amend how your health information may be used to carry out treatment or healthcare operations.

Student Health Services does not have to agree to the restrictions requested. The consent may be revoked in writing, except to the extent that Student Health Services has already taken action in reliance thereon.

If you believe your privacy rights have been violated, you can file a complaint with the Director of Student Health Services, the Vice Chancellor of Student Affairs, or with the Secretary of Health and Human Services.

**Release Form** (click to fill out and print form)