

**DRS. JOHNSON & JOHNSON
EYEWORCS**

Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW PROTECTED MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GAIN ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

1. DRS. JOHNSON & JOHNSON is permitted to make uses and disclosures of protected health information for treatment, payment and health care operations, as described in the following examples:
 - a. For treatment – (examples: treatment of your eyes and related conditions)
 - b. For payment – (examples: for submitting claims to you Health Care Plan)
 - c. For health care operations – (examples: Quality assurance audits)
2. DRS. JOHNSON & JOHNSON is permitted or required, under specific circumstances, to use or disclose protected health information without the individual's written authorization.
3. Other uses and disclosures will be made only with the Individual's written authorization, and the individual may revoke such authorization.
4. DRS. JOHNSON & JOHNSON may contact the individual to provide appointment reminders or information about treatment alternatives or other health-related benefits and services that may be of interest to the individual or patient.
5. The individual has the following rights regarding protected health information:
 - a. The right to request restrictions on certain uses and disclosures of protected health information. DRS. JOHNSON & JOHNSON is not required to agree to a requested restriction, however.
 - b. The right to receive confidential communications of protected health information, as applicable.
 - c. The right to inspect and copy protected health information, as provided in the Privacy Regulation.
 - d. The right to amend protected health information, as provided in the Privacy Regulation.
 - e. The right to receive an accounting of disclosures of protected health information.
 - f. The right to obtain a paper copy of the Notice from the covered entity upon request. This right extends to an individual who has agreed to receive the Notice electronically.
6. DRS. JOHNSON & JOHNSON is required by law to maintain the privacy of protected health information and to provide individuals with notice of its legal duties and Privacy practices with respect to protected health information.
7. DRS. JOHNSON & JOHNSON is required to abide by the terms of the Notice currently in effect.
8. DRS. JOHNSON & JOHNSON reserves the right to change the terms of this Notice. The new Notice provisions will be effective for all protected health information that it maintains.

9. DRS. JOHNSON & JOHNSON will provide individuals or patients with a revised Notice by issuing it at your next visit.
10. Individuals may complain to DRS. JOHNSON & JOHNSON and to the Secretary of the Department of Health and Human Services, without fear of retaliation by the organization, if they believe their privacy rights have been violated.
11. DRS. JOHNSON & JOHNSON's contact person for matters relating to complaints is:

Dr. Richard G. Johnson

(910) 738.6464

2800 N. Elm Street

Lumberton, NC 28358

12. This Notice is first in effect on April 14, 2003

I hereby acknowledge that I have received a copy of DRS. JOHNSON & JOHNSON's Notice of Privacy Practices.

Patient Signature (or Guardian Signature if minor)

Print Patient's Name

Date: _____