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PENNSYLVANIA SPECIALTY PATHOLOGY

MEDICAL LABORATORY

CLIENT SERVICES MANUAL

2301 Harrisburg Pike, Suite 201

Lancaster, PA, 17601

Phone: 717-393-7771

Fax: 717-393-7328

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GENERAL INFORMATION

Laboratory Description

PSP Laboratory is a comprehensive diagnostic facility located at 2301 Harrisburg Pike, Suite 201, Lancaster PA 17601. It is staffed by pathologists, medical technologists, and support personnel. PSP is currently in operation Monday through Friday, 6:30 AM TO 6:30 PM.

Statement of Services

PSP Laboratory provides the following services to our clients:

- Courier Services
- Specimen supplies
- Specimen testing
- On-line ordering and result retrieval
- Report Delivery
- EMR interfaces

COURIER SERVICES

PSP Laboratory provides courier services for laboratory testing from physician offices and other client lab sites. Specimens are generally picked up several times a day and delivered to the PSP Laboratory for processing. Specific courier times will be arranged with each laboratory client.

TURNAROUND TIME

PSP is committed to providing the most expedient turnaround time possible to improve diagnosis and treatment. We consider that laboratory services are part of the patient care continuum and the needs of the patient are paramount. PSP defines turnaround time as the analytic test time (the time from which a specimen is received at the testing location to the time of result.) Turnaround time is monitored continuously.

STAFF

Under the direction of the Director of Laboratories, day to day operational activities of lab sections are planned, organized and controlled by section supervisors. The supervisor is responsible for controlling and maintaining systems and procedures for test requisition, processing and reporting.

ADMINISTRATIVE

Fabien K. Baksh, M.D., Director of Laboratories
Shashi Baksh, M.D., Director of Dermatopathology

SUPPLIES

Specimen collection supplies are delivered to clients when requested. Please fill out a supply requisition and fax it to (717)-393-7328 or call (717)-393-7771.

COURIER SERVICE

Scheduled and STAT courier service is available. From initial call for pick up to notification of results, our turnaround time is dependent on pickup distance from the PSP Laboratory.

REPORTS

PSP laboratory is computerized using AP Easy LIS.

Outpatient reports contain:

Patient demographic information:

- Name
- Patient ID#
- Date of Birth
- Physician Full name
- Age
- Gender
- Home phone number

Order/specimen processing information:

- Date specimen collected
- Date specimen resulted

Test result data:

- Reference ranges
- Flagging of abnormal test results

Results can be viewed by our web portal available via a link from our web site (www.psppath.com). PSP clients are able to print results via online access on their PC. Results are specific to location. Hard copy of reports can also be faxed upon resulting, depending on client's request. Interfaces with client EMR systems can be built.

Hard copy patient reports can also be delivered to referring physicians' offices and other client ordering locations.

QUALITY CONTROL

High quality standards are maintained at PSP Laboratory through the selection of qualified personnel, continued inspection and re-accreditation of our facilities by professional and governmental organizations, and strict adherence to internal and external quality assurance programs. Laboratory operations are directed by our Director of Laboratories, who is Board Certified in both Clinical and Anatomic pathology.

Quality Assurance

External and internal quality assurance programs are currently maintained by our laboratory. These programs monitor both the quality of laboratory results (accuracy and precision) and the quality of service (specimen handling and results reporting). External programs such as CAP Laboratory Improvement Programs are subscribed to by the PSP Laboratory. Internal programs include participation in Quality Assurance initiated at the laboratory level, blind submission of duplicate samples, quality control sample analysis, data review, and preventative maintenance programs. Patient result reporting is currently provided by our Laboratory Information System (LIS). Computer-generated hard copy reports are provided to our external clients on a daily basis. The LIS also provides: on-line results retention for rapid result retrieval, computer to analyzer interface for uploading and downloading of test information, delta-checking for previous vs current results and review of verification, computer billing, specialized management reports, and result reporting via telecommunications.

Quality Control

All laboratory sections have detailed procedure manuals outlining procedures and principles, normal ranges and result-reporting protocols. These manuals are constantly reviewed and updated by supervisory personnel and the pathologist. In addition, all sections of the laboratory are equipped with "back-up" equipment and/or methodologies to ensure that there is no disruption in service. Quality control materials (i.e. low abnormal, normal, high abnormal specimens) are analyzed with every test run. Quality control results must be within the established normal ranges before patient results are considered acceptable.

Results Reporting

After results have been checked and verified the report will be available either via hard copy, fax, email or our web portal via secured connection for viewing/printing. All critical results are telephoned to the patient's physician office or client (if applicable) and documented on the lab result.

ORDERING TESTS

Paper Requisitions

Lab requisitions will be provided to clients. In-services are provided to office staff to ensure proper use of the requisitions and can be scheduled through our office. Clients are required to fill in the following information on the requisition:

- Patient's full name, address, date of birth, sex
- Full name, address, phone number of ordering physician or office staff. Medicaid patients require provider's signature.
- Insurance information (attach copy of insurance card)
- Test (s) to be performed

Add-On Tests

All additional testing must be faxed to the laboratory. A form for use can be provided by calling the main laboratory.

SPECIMENS

Labeling

All specimens must be clearly labeled and include:

- Patient's last name, First name
- Date of birth
- Date and Time of Collection
- Collectors Initials

Specimen Transport

All specimens should be accompanied by a complete patient requisition placed in the outer sleeve of the leak-proof, zip-lock biohazard specimen bag that will be provided by PSP. One bag for each patient is necessary.

- Do no staple specimen bags together.
- Please ensure that specimen containers for urine and stool are sealed correctly and tightly to deter from leakage during transportation.
- Specimen transportation requirements vary, please refer to the alphabetical Test Listing in this manual.

SPECIMEN REJECTION CRITERIA

Pre-analytical specimen integrity is extremely important to the final result reported by PSP. All specimen requirements as noted in the individual sections of this manual should be strictly followed. A Laboratory Tech will notify the physician's office if a specimen will be rejected and subsequently not tested.

To ensure patient and employee safety, specimens falling into any of the categories listed below will not be accepted by the laboratory for examination:

- Unlabeled specimens
- Improperly collected specimens (as defined below)
- Specimens showing gross evidence of contamination
- Situations that make the identity of the sample unreliable
- Identification on requisition does not match the specimen identification

Additionally specific criteria are in place for selected sections of the laboratory:

- All specimens must have the date and time of collection.
- There must be adequate specimen for tests ordered.
- Specimens which require delivery on ice, but which arrive at room temperature.
- Non-sterile specimens which should be sterile collections

- Special Circumstances:
  - Specimens are required to have two forms of identification (e.g. Name, DOB); if only one form of identification is provided the office will be contacted for verification of the patient's identity.
  - Specimens with significant leakage outside of container may be rejected.

Synovial Fluid – Criteria for Rejection

- Synovial fluid samples collected in tubes without anticoagulant or anticoagulated with lithium heparin.
  - Synovial fluid samples >4 hours post collection.
  - Specimen must be refrigerated immediately after collection and PSP contacted for courier pick up.

Histology Collection and Handling

Purpose:

To provide Pennsylvania Specialty Pathology's clients with specific instructions on proper specimen collection and handling.

Procedure:

Routine Surgical Biopsies

Depending on specimen size and fixation, sections are usually available for the pathologist to report on the day following receipt of the specimen. It should be noted that some tissue diagnoses may require elaborate special staining or further sectioning of the tissue, which may delay the report. For urgent histopathology reports, clinicians are requested to indicate this or to discuss the case with the pathologist at the time the specimen is submitted.

All surgically removed tissue from patients should be sent to Pennsylvania Specialty Pathology for examination and report. A request form must accompany all specimens detailing patient name, date of birth, any clinical diagnosis, relevant history and operative findings. Also include any special requests on the requisition. The specimen container must also include at least 2 identifiers such as patient name and specimen site.

All biopsies and tissues except for the specimens requiring special procedures (see below) should be placed into 10% neutral buffered formalin containers provided by the laboratory immediately after removal. When a culture is required, fresh tissue without formalin is required and should be immediately sent with a requisition to the laboratory. Proper identification of the specimen is also required.

Special Procedures

Frozen Sections should be scheduled no less than 24 hours in advance to avoid any delays, but preferably 2 weeks in advance. When scheduling the frozen, patient name, date, time of surgery and pertinent clinical information is required. If the frozen is to be cancelled, please call 717.393.7771. For emergency frozen sections, please notify the laboratory as soon as possible to allow for equipment preparation and travel.

Lymph Nodes for suspected lymphoma should be submitted in the fresh state or on saline moistened gauze. Pennsylvania Specialty Pathology should be notified for a stat courier pick up. It is recommended that to ensure specimen viability for flow cytometry, lymph node samples not be procured on Fridays. The specimen should be kept refrigerated until a courier arrives.

Direct Immunofluorescence specimens should be submitted in Michele's transport media. This may be obtained by calling the laboratory at 717.393.7771.

Fine Needle Aspirations must be scheduled in advance to include patient name, specimen procurement site and office location.

Culture/Nail Culture specimens must be submitted in the fresh state. Do NOT place in formalin.

Bone Marrow specimens for routine histology may be submitted in 10% Neutral Buffered Formalin. If Flow Cytometry is needed the specimen or a portion of the specimen must be placed in RPMI. This media may be obtained by calling PSP.

Provided Supplies:

- 10% NBF containers
- Biohazard specimen bags
- Requisitions
- Courier Log Sheets
- Specimen Lockbox upon request
- Transport Media as needed

Courier Service:

All specimens will be received and accounted for by a designated courier as follows:

- Patient name and number of specimens will be recorded on the courier receipt logsheet by the submitting office.
- PSP courier will cross check the number of specimens on the log with the number of specimens received in the biohazard bag.
- Additionally, the courier will verify that patient's name on specimen containers match that on the log.
- Courier will sign receipt log after verifying that all specimens are received.
- Specimens will be placed in a closed insulated transport bag which will not be opened until returned to the laboratory.
- Upon return to the laboratory, the specimens will again be checked against the receipt log.
- Any discrepancies will be immediately resolved with the physician's office.
- Receipt logs will be maintained for 2 years.
- All fresh specimens received fresh will be *immediately* transported to PSP.

Rejection Criteria:

- Specimens that are unlabeled.
- Not labeled with two patient identifiers on the container.
- Unaccompanied by an inadequately completed requisition form and/or discrepant information.
- Left unfixed or unrefrigerated for an extended period.
- Received in a container/bag with a contaminated outside surface.

CYTOLOGY SPECIMEN COLLECTION & SUBMISSION

PRINCIPLE:

Cytology specimens must meet all specimen collection criteria for processing.

SPECIMEN COLLECTION/SUBMISSION OF SAMPLES:

1. Specimen is collected and submitted from a physician or other persons authorized by law.

2. Patient name is written legibly on slide or specimen container and on the test requisition. Requisition must accompany specimen.

3. If a verbal request for cytology is received (predominantly non-gyn specimens), a written authorization/request must be received within 24 hours. The date/time and clinician giving the verbal request AND the date/time written request is received and both documented in the gross description section of the report. Specimen results are not issued until a written request is received.

4. Patient name on requisition matches name written on specimen container.

5. Liquid specimen is received in a sealed container placed inside a plastic bag.

6. Plastic slides are not acceptable as specimen washes off during staining. These cases are returned to physician.

7. Slides that have broken in transit are processed unless broken beyond repair, i.e., broken into more than four pieces or with a significant portion of the smear missing.

PROCEDURE:

If a specimen does not meet all of the above criteria, it will not be processed. A Cytology Quality Control Notice listing the criteria not met will be returned to ordering clinician along with the specimen.

Rejection Criteria:

- Specimens that are unlabeled.
- Not labeled with two patient identifiers on the container.
- Unaccompanied by an inadequate requisition form or discrepant information.

- Left unfixed or unrefrigerated for an extended period such that cellular validity will be compromised.
- Received in a container/bag with a contaminated outside surface.

Cytology Specimen Acceptance

PRINCIPLE:

All Cytology specimens for pap smears must be accompanied by a Cytology Request, giving the name and location of patient, age, date specimen was taken, the last menstrual period, clinical diagnosis, and previous and present treatment (i.e., hormone therapy, radiation, surgery), and physician's name. All of this information is required by the pathologist and/or cytotechnologist to give an accurate and meaningful interpretation of his/her findings.

SPECIMEN COLLECTION/SUBMISSION OF SAMPLES:

The following information should be included:

a. Age/date of birth

b. LMP (last menstrual period)

c. Surgery (type and date), i.e., hysterectomy, 1994

d. Contraceptive type - BC pills, IUD

e. Therapy (type and dates)

Hormonal-Chemotherapy-Previous Irradiation

f. Pregnancy, if so, number of months

g. Postpartum, if so, number of weeks or date of delivery.

h. Any previous pap smears "not within normal limits".

MATERIALS NEEDED:

1. Coplin jar with 95% alcohol, or fixative spray (preferred). Both are available from PSP for conventional smears.
2. ThinPrep pap smear vials, spatula, endocervical brooms or brushes. These kits are available upon request from the Pennsylvania Specialty Pathology.

3. Soft (No.2) pencil and pen. Use pencil to label each slide with patient's name before applying specimen or fixative. Be sure to apply smear to labeled side of slide if a conventional smear is performed.
4. As soon as smears are made, they must be fixed while still wet with spray fixative or placed immediately into Coplin jar of 95% alcohol. Each slide must be labeled with the patient's name, and placed in a slide folder for prompt delivery to the Laboratory.

PAPANICOLAOU TECHNIQUE

PATIENT PREPARATION:

Preferably the woman should be tested two weeks after the first day of her last menstrual period and definitely not when she is menstruating. Women should not use vaginal medication, vaginal contraceptives, or douches during the 48 hours prior to the appointment. Intercourse is not recommended for 24 hours before the examination. Smears should be taken before pelvic examination.

SPECIMEN COLLECTION:

Water may be used to lubricate and warm the speculum; however, lubricant jellies should not be used.

It is important to obtain a smear that is not obscured by blood, mucus, or inflammatory exudate. The cervix should **NOT** be cleaned by washing with saline as it may result in a relatively acellular smear.

An optimal cervical specimen includes sampling of the squamous and columnar epithelium, encompassing in particular the transformation zone where the majority of cervical neoplasia arise.

1. Visually inspect the cervix for abnormalities. (If an elevated ulcerated, necrotic, or exudate-covered lesion is observed, arrangements should be made for biopsy following cytology sampling).
2. Bruch/Spatula Combination: Sample ectocervix with a plastic spatula. Rinse spatula in the PreservCyt Solution vial by swirling vigorously 10 times. Discard collection device. Sample the endocervix with an endocervical brush. Rinse the brush in the PreservCyt Solution by rotating the device in the solution 10 times while pushing against the PreservCyt vial wall. Swirl the brush vigorously to further release material. Discard the collection device.
3. Broom Collection: Obtain a sample from the cervix using a broom device. Rinse the collection device into a PreservCyt Solution vial by pushing the brush into the bottom of the vial 10 times, forcing the bristles to bend apart to release the cervical material. As a final step, twirl the brush between the thumb and forefinger vigorously to further release cellular material. Discard the collection device

SPECIAL HANDLING PROCEDURES:

1. Hormonal Evaluation: Samples for hormonal evaluation should be obtained separately using a spatula to gently scrape the epithelium from the upper third of

the lateral vaginal wall. The separate slide should be labeled as to site. The requisition should indicate a request for hormonal evaluation and provide relevant patient information.

2. Vaginal Pool Sample: The blunt end of a spatula may be used to collect mucus from the posterior vaginal fornix. The "vaginal pool" sample may fortuitously collect abnormal cells from the upper genital tract and is sometimes obtained in peri- or post-menopausal women.

Additional Testing:

The same thin prep vial can be used for the following additional tests if requested:

1. High risk HPV
2. HPV types 16 and 18
3. CT/GC
4. HSV I & II
5. Group B Strep
6. Cystic Fibrosis

Cerebrospinal Fluids

PRINCIPLE:

To detect malignant cells from cerebrospinal fluid. To detect certain types of fungus.

NOTE: Collection of specimen is performed by the physician.

PROCEDURE:

Collection of Specimen

1. Clean tube with cap or rubber stopper is labeled. The full name of the patient, location and doctor's name is included.
2. The specimen is collected in a tube and tightly capped.
3. A PROPERLY COMPLETED REQUEST FORM INCLUDING A BRIEF HISTORY AND PROVISIONAL DIAGNOSIS MUST ACCOMPANY THE TUBE. (THIS IS MANDATORY).
4. Transport immediately to the Cytology Laboratory.

NOTE: If immediate transportation of the specimen is difficult, the specimen should be placed in the refrigerator to prevent cellular degeneration. Saccomanno preservative may be added, however, please note that other laboratory departments cannot use a specimen with Saccommano preservative in it.

PROCEDURE:

Processing of Specimen

1. Because of the limited cellularity and volume of most specimens, cerebrospinal fluid should be processed by cytospin techniques.

Effusions

PRINCIPLE:

To determine malignant cells from effusions (fluids).

NOTE: Removal of effusion or fluid is performed by the physician.

PROCEDURE:

Collection of Specimen

1. Provide a clean container with stopper or lid. The container or 50ml centrifuge tubes are labeled properly with the following information: patient's name, location, physician and date.
2. Aspirated fluid (effusion) is placed in a container with or without anticoagulant. Without anticoagulant is the preferred method, but if anticoagulant is added, mark the container with type of anticoagulant used.
3. Specimen should be transported to the Cytology Laboratory immediately to prevent cellular degeneration.
   NOTE: If immediate transportation of the specimen is not possible, the specimen should be placed in refrigerator. Do Not Freeze.
4. Properly filled out request form with a provisional diagnosis and short history of the patient must accompany specimen. (This is mandatory)
5. Slides are microscopically reviewed and submitted to a pathologist for final evaluation.
6. If specimen is very thick or bloody, preparation may be done by the pull-apart method as done with sputum.

Fine Needle Aspirations

Technique:

Aspirated material may contain enough blood and/or liquid to allow smearing of the material. The collected material is placed towards the middle of the glass slide. An additional slide is placed face down on collected material and pulled backwards spreading the material evenly between the slides allowing the specimen to be stained and evaluated.

Submission:

1. Submit 4 well –prepared smears and a cell block from each sampled location.
2. Label 2 slides for Diff-Quik, 1 slide for H&E and 1 slide for Papanicolaou.
3. For Diff0Quik preparation, the slides must be allowed to dry completely before staining (may use a small blow dryer). Stain the 2 slides for Diff-Quik on site to assess the adequacy of cellularity and smear preparation. If the sample appears inadequate, the location should be sampled again. However, if multiple attempts are made and all yield poor cellularity, then a tissue biopsy may prove more beneficial.
4. Place the slides for H&E and Papanicolaou immediately into 95% alcohol to fix the cells or spray with fixative.
5. Rinse the syringes in transport medium (CytoLyt) to obtain as many cells as possible for a cell block.

Staining:

Tips: a) Do not over-stain smears. b) Change the staining solutions regularly to avoid contamination. c) Filter the stains before a procedure. d) Make sure that the smears are completely dry before staining.

1. Place smears in Diff-Quik Solutions 1, 2 and 3 for 10 dips each.
2. Mount with Aqueous mounting medium.
3. Give to Cytotechnologist for evaluation.

Sputum Cytology

PRINCIPLE:

To detect malignant cells, viral inclusion bodies and certain fungal diseases.

NOTE:

Deep cough, early morning specimen is best. Three specimens collected on consecutive days yield the highest accuracy.

PROCEDURE:

Collection of Specimen

1. Collect specimen early in the morning before breakfast.
2. Rinse mouth several times before collection of specimen.
3. Instruct patient to cough deeply and expectorate directly into plastic container.
   NOTE: For patients with scanty sputum, it may take 15-30 of intermittent coughing before an adequate sample can be obtained.

   In selected cases where little or no sputum can be produced, an induced specimen may be obtained by use of a heat aerosol.

   (Obvious saliva or postnasal drip are not satisfactory for cytology).

4. Sputum – collect sample directly into CytoLyt solution.
5. Brushings – deposit the collection brush directly in pre-filled CytoLyt solution tube.
6. Washings/Lavages – 30 ml of CytoLyt solution.
7. Send immediately to the Cytology Laboratory with a short history or clinical impression which is very important to cytologic examination.

Urine

PRINCIPLE:

To find malignant cells or cytomegalic inclusion bodies.

PROCEDURE:

Collection of Specimen

1. Have the patient void in a specimen container. (Sterile or non-sterile).
2. Label the base (not the lid) of the container including patient's full name, date, location, and physician's name.
3. Send immediately to Cytology Laboratory along with completed cytology requisition.

NOTE:
a. Refrigerate specimen until it can be delivered to the Lab.
b. A 24-hour urine specimen is not suitable for Cytology.

Preparation of Specimen

Routinely, urine specimens are of limited cellularity and are processed by cytospin or ThinPrep technique.

HIPPA NOTICE OF PRIVACY PRACTICES

Effective Date: March 26, 2013

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.

This Notice is provided to you pursuant to the Health Insurance Portability and Accessibility Act of 1996 and its implementation regulations ("HIPAA"). It is designed to tell you how we may, under federal law, use or disclose your Health Information. It has been updated to the HITECH Omnibus Rule requirements.

I. Your Rights.
You have the right to request restrictions on the uses and disclosures of your Health Information. However, we are not required to comply with all requests. You are allowed to restrict transmittal of health care charges to your insurance carrier if you pay for those services, in full, by other means.

You have the right to receive your Health Information through confidential means and in a manner that is reasonably convenient for you and us.

You have the right to inspect and copy your Health Information. You may request your records in digital format and have your records sent digitally to another provider with written authorization.

You have a right to request that we amend your Health Information that is incorrect or incomplete. We are not required to change your Health Information and will provide you with information about our denial and how you can disagree with the denial.

You have a right to receive an accounting of disclosures of your Health Information made by us, except that we do not have to account for disclosures: authorized by you; made for treatment, payment, health care operations; provided to you; provided in response to an Authorization; made in order to notify and communicate with approved family members; and/or for certain government functions, to name a few.

You have been provided with a paper copy of this Notice of Privacy Practices. If you would like to have a more detailed explanation of these rights or if you would like to exercise one or more of these rights, please contact our HIPAA Compliance Officer at (717)393-7771.

II. **We May Use or Disclose Your Health Information for Purposes of Treatment, Payment or Healthcare Operations without Obtaining Your Prior Authorization and Here is One Example of Each**:

We may provide your Health Information to other health care professionals — including doctors, nurses and technicians — for purposes of providing you with care.

Our billing department may access your information — and send relevant parts to insurance companies to allow us to be paid for the services we render to you.

We may access or send your information to our attorneys or accountants in the event we need the information in order to address one of our own business functions. Our attorneys and accountants are required to maintain

confidentiality when they receive patient information.

III. We May Also Use or Disclose Your Health Information Under Certain Circumstances without Obtaining Your Prior Authorization. However, in general, we will attempt to ensure that you have been made aware of the use or disclosure of your Health Information prior to providing it to another person. Some instances where we may need to disclose information include but are not limited to:

To Notify and/or Communicate with Your Family. We will only communicate with family members that we are authorized to communicate with based on your completion of the Authorization to Disclose Health Information to Family and Friends form.

As Required By Law.

For Health Oversight Activities. We may use or disclose your Health Information to health oversight agencies during the course of audits, investigations, certification and other proceedings.

In Response to Civil Subpoenas or for Judicial Administrative Proceedings. We may use or disclose your Health Information, as directed, in the course of any civil administrative or judicial proceeding.
To Law Enforcement Personnel. We may use or disclose your Health Information to a law enforcement official to comply with a court order or grand jury subpoena and other law enforcement purposes.

For Purposes of Organ Donation. We may use or disclose your Health Information for purposes of communicating to organizations involved in procuring, banking or transplanting organs and tissues.

For Worker's Compensation. We may use or disclose your Health Information as necessary to comply with worker's compensation laws.

IV. For All Other Circumstances, We May Only Use or Disclose Your Health Information After You Have Signed an Authorization. If you authorize us to use or disclose your Health Information for another purpose, you may revoke your authorization in writing at any time.

Fundraising. Should our practice use patient information for fund raising we will inform individuals that they have the right to opt out of fundraising solicitations and explain that process. You do have the capability to opt back in should with written notice.

• Marketing. Should our practice use patient information for marketing purposes we will first obtain your written authorization and fully explain the uses and disclosures of PHI for marketing purposes, and disclosures that constitute a sale of PHI require will require a separate written authorization.

• Use or Disclosure of Psychotherapy Notes. *Written a*uthorization is required if our practice intends to use or disclose psychotherapy notes.

• Breach Notice. All patients will be informed if there is a breach, as defined by federal rules, of their unsecured protected health information as required by the HIPAA regulations.

Right to Request Restrictions for Disclosures Related to Self-Payment. Our practice is required to comply with a request not to disclose health information to a health plan for treatment when the individual has paid in full out-of-pocket for a health care item or service and signed our "Do Not File Insurance Form".

V. You Should Be Advised that We May Also Use or Disclose Your Health Information for the Following Purposes:

Appointment Reminders. We may use your Health Information in order to contact you to provide appointment reminders or to give information about other treatments or health-related benefits and services that may be of interest to you.

Change of Ownership. In the event that our Business is sold or merged with another organization, your Health Information/record will become the property of the new owner.

Electronic Exchange. Your information may be shared with other providers, labs and radiology groups through our EMR/EHR system as listed below:

1) (PROVIDER TO LIST)
2) (PROVIDER TO LIST)

VI. Our Duties.
We are required by law to maintain the privacy of your Health Information and to provide you with a copy of this Notice.

We are also required to abide by the terms of this Notice.

We reserve the right to amend this Notice at any time in the future and to make the new Notice provisions applicable to all your Health Information — even if it was created prior to the change in the Notice. If any such amendment is made that materially changes this Notice, we will send you another copy.

VII. Complaints to our Practice and the Government.
You may make complaints to our HIPAA Privacy Officer or the Security of the Department of Health and Human Services ("DHHS") if you believe your rights have been violated.

We will review all complaints in a professional manner and keep you informed of your rights as our patient.

We promise not to retaliate against you for any complaint you make about our privacy practices.

VIII. Contact Information.
You may contact us about our privacy practices or file a complaint by calling our Privacy Officer: Leigh York at 717-393-7771.

You may contact the DHHS at: The U.S. Department of Health and Human Services, 200 Independence Avenue, S. W., Washington, D.C. 20201, Telephone: 202-619-0257, Toll Free: 1-877-696-6775