

POLICY

Compliance Officer: Lawrence P. Duca, Jr., DMD

Contact us at: Compliance Officer  
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**PATIENT'S RIGHTS:** The patients cared for in this office by professional and support personnel have the right to privacy regarding their care and treatment. This right of privacy means that the patient's diagnosis, treatments and medical records are to be viewed judiciously only by those persons required to view them in the course of either caring for the patient, appropriate billing or insurance procedures, or responding to a properly submitted request for records. The personnel in this office will not discuss the particulars of the patient or their health information among themselves except on a need to know basis or as required by the normal performance of their job. Every reasonable effort will be made to prevent unauthorized persons from having access to any patient's records or personal information. Every reasonable effort will be made to prevent access by employees to portions of the patient's information that are not pertinent to the employee's job performance. Personnel whose job description includes patient care might not have access to billing information and /or billing purposes might not have access to the entire record. Just as personnel whose job description includes patient care might not have access to billing information. The Compliance Officer in this office has the responsibility to correct any known violation and may be contacted personally, by letter, phone or e-mail. A reasonable effort will be made to correct any weakness in an ever changing system.

**PATIENT'S RESPONSIBILITY:** Patients are expected to provide accurate information regarding personal information (name, address, telephone(s), employer, insurance coverage, etc.), health related information (prior medical history, current medications, current conditions and treatment concerns, etc.) along with any updates or changes in a timely manner. Patients are expected to respect the

rights of other patients regarding privacy by bringing to our attention any deliberate or unwitting violation of privacy by an employee or anyone else whom they may be aware. Patients are expected to respect the privacy information inadvertently overheard or viewed in our office.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

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