

Notice of Privacy Practices

Sunshine Physical Therapy PC

6408 Grovedale Drive, Suite 203

Alexandria, VA 22310

Telephone: (703)-313-0044

Fax: (703)-313-0081

We are committed to protecting health information about you. We create a record of the care and services you receive through us. We need this record to provide quality of care and to comply with all state requirements. We are required by law to make your health information private and give you this notice. We may disclose your information to allow oversight for the quality of care, and to allow workers' compensation claims, to comply with a court order. You have the right to get a copy of your record with a written consent. You may also request certain restrictions.

We may disclose your information to health insurance companies or third party payers to submit a claim on your behalf, we may disclose your information to your lawyer if necessary.

I, _____ read and understand the privacy practices.

Signature

Date