

SG PEDIATRICS
1455 S. Lapeer Rd., Suite 134
Lake Orion, MI 48360
(248)683-3385 Fax (248)690-7389

Consent to Use and Disclose Protected Health Information

Use and disclosure of Your Child’s Protected Health Information

Your child’s protected health information will be used by SG Pediatrics or disclosed to others for the purpose of treatment, obtaining payment, or supporting the day-to-day health care operations of the practice.

We may share relevant health information—such as immunization records or care plans—with these institutions **upon request**, unless we have **written instructions from a parent or legal guardian restricting this communication**. If you prefer that we do **not** share your child’s medical information with schools or daycares, please provide us with a written statement indicating your preference.

Notice of Privacy Practices

SG Pediatrics is required to provide you a notice that describes how information about you may be used and disclosed. Additionally, we must provide you information on how you may get access to this information. These policies and practices are defined in the “Notice of Privacy Policies and Practices” brochure provided to you. **PLEASE REVIEW IT CAREFULLY.**

Requesting a Restriction on the Use or Disclosure of Your child’s Information

You may request a restriction on the use or disclosure of your protected health information. SG Pediatrics may or may not agree to restrict the use or disclosure of your protected health information (see authorization).

If SG Pediatrics agrees to your request, the restriction will be binding on the practice. Use or disclosure of protected health information in violation of an agreed upon restriction will be a violation of the federal privacy standards.

Revocation of Consent

You may revoke this consent to the use and disclosure of your protected health information. You must revoke this consent in writing. Any use or disclosure that has already occurred prior to the date on which your revocation of consent is received will not be affected.

Reservation of Right to Change Privacy Practices

SG Pediatrics reserves the right to modify the privacy practices outlined in the notice. I understand that SG Pediatrics will notify me of these changes via the method I have authorized or upon my next appointment.