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PRIVACY ACT NOTICE

Our most important responsibility to our patients is the safekeeping of nonpublic personal (confidential) information that entrusted on us and using the information in a responsible manner.

We are informing all our patients the safeguarding of nonpublic personal information.

Sharing Information to Your Dental Insurance

We will not share information about you, other than identification and transaction to your dental insurance, which we permitted to share unless we have informed you in disclosure or agreements, that we have been authorized to do so in connection with a particular transaction.

Sharing Information with Other Parties

We will not share your nonpublic personal information with any company except as required or permitted by law.

This means, for example, that we can disclose your nonpublic personal information:

- To collection agencies (a final letter will be sent to you first informing of the action)
- To dental insurance in order to process the claim of the treatment rendered
- To respond to a court order or judicial process
- To a third party, with whom you specifically authorize us to share information
- When getting previous X-rays from your previous dentist
- When transferring your records and X-rays taken from our office to your new dental provider we will require an authorization letter and a minimal fee may be charged to your account.
- When speaking to other healthcare providers directly affecting your treatment

I give my consent to send a recall postcard, email, or text for appointment reminders.

Patient or Guardian Signature

Date

I also give permission to the following person(s) as noted to discuss my treatment/ and or account information with your office:

_____ Relationship to patient_____