**NOTICE OF PRIVACY PRACTICES**

**EFFECTIVE DATE: 7/16/2026**

**PRACTICE: PHYSICIANS URGENT CARE, PLLC**

**PRIVACY OFFICER: JODI STROCK, 615-465-0453, INFO@PUCCLINIC.COM**

## SUMMARY OF YOUR RIGHTS

• You have the right to get a copy of your medical records.

• You have the right to request corrections to your records.

• You may request confidential communications.

• You may request restrictions on certain uses and disclosures.

• You may obtain a paper copy of this Notice at any time.

• You may file a complaint if you believe your privacy rights have been violated.

## How We May Use and Disclose Your Health Information

We may use and disclose your protected health information for treatment, payment, health care operations, and other purposes permitted or required by HIPAA and applicable law. Other uses and disclosures require your written authorization unless otherwise permitted.

## Your Rights

• Inspect and obtain copies of your records.

• Request an amendment to your records.

• Receive an accounting of certain disclosures.

• Request restrictions on certain disclosures.

• Request confidential communications.

• Choose someone to act for you where legally authorized.

## Our Responsibilities

We are required by law to maintain the privacy and security of your protected health information, provide you with this Notice, comply with its terms, and notify you following a breach of unsecured PHI when required.

## Questions or Complaints

Contact our Privacy Officer at:

Jodi Strock

615-465-0453

info@pucclinic.com

You may also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights