

NOTICE OF PRIVACY

June 2010

This notice describes how medical information about you may be used and disclosed. Please review it carefully. If you have any questions, please contact the Athletic Trainer at the address or telephone number at the bottom of this Notice.

Athletic Training Rooms International (ATRI) provides health care services to amateur and student-athletes in partnership with physicians and other professionals and organizations. The information privacy practices in this Notice will be followed by ATRI and all employed associates, staff and volunteers. In addition, we are a clinically integrated care setting, and we have many doctors and other providers giving care to amateur and student-athletes. For your convenience, ATRI is giving one Notice of Privacy Practices to each amateur and student-athlete, instead of notices from multiple physicians and caregivers. This Notice serves as the notice required under Federal law to be given to the amateur and student-athletes by ATRI, all members of our medical staff and all other health care professionals who treat you at any of our medical facilities. The health care providers covered by this “organized health care arrangement” (“OHCA”) will share protected health information with each other, as necessary to carry out your treatment, payment for treatment, and health care operations relating to the OHCA. This arrangement does not mean that the persons participating in the OHCA are involved in a joint business arrangement, or that they are responsible for the acts of one another.

As an amateur athlete or student-athlete, you have the right to privacy concerning your medical plan of care. Medical record information and your relationship with your medical staff are considered private. Your diagnosis and course of treatment are available only to those directly involved with your care. We create a record of the care and services you receive to provide quality care and to comply with legal requirements. This Notice applies to all of the records of different policies or notices regarding the doctor’s use and disclosure of your medical information created in the doctor’s office. We are required by law to keep the medical information about you private, give you this Notice of our legal duties and privacy practices with respect to medical information about you and follow the terms of the Notice that is currently in effect.

ATRI may use and disclose medical information about you for **treatment** (such as sending medical information about you to a specialist as part of a referral); **to obtain payment for treatment** (such as sending billing information to your insurance company); and **to support our health care operations** (such as comparing patient data to improve treatment methods). ATRI may disclose medical information and/or **participation status to athletic coaches and strength and conditioning coaches for your health and safety**. ATRI may disclose information to university administrators and academic counselors to **support your academic progress**. ATRI may release information to **sports information staff and members of the media regarding your participation status**.

Regarding your medical information, you have the right to look at or get a copy of medical information that we use to make decisions about your care. You have the right to a list of those instances where we have disclosed medical information about you, other than for treatment, payment, health care operations or where you specifically authorized a disclosure. You may request, in writing, that we do not use or disclose medical information about you for specific cases or circumstances.

ATRI reserves the right to change this Notice at any time. Changes will apply to medical information we already hold, as well as new information we receive after the change occurs. If we change the Notice, we will post the new Notice on the ATRI website www.atrisportsmed.com. You can receive a copy of the current Notice at any time. The effective date is listed just below the title above. You will be asked to acknowledge in writing your receipt of this Notice on the Assumption of Risk and Injury Liability Waiver Form. If you have any questions regarding your privacy rights, you may contact the Athletic Trainer at this address: PO Box 671, Grand Island, NY, 14072, or call (716) 773-1282.