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Notice of Privacy Practices

This Notice describes how information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

Who Will Follow This Notice

The privacy Practices described in this notice will be followed by members of this healthcare team, which includes all the health care professionals, employees, medical staff, trainees, students, volunteers, and business associates of Nicholas Sherock, D.O.

Our Pledge to You

We understand that health information about you is personal. My OB/GYN is committed to protecting your health information. This Notice applies to all of the health records that identify you and the care that you receive under our providers here at my OB/GYN. We are legally required to maintain the privacy of our patients' health information, provide you with a copy of this Notice, and to follow the terms of the notice that is currently in effect.

How We Use and Disclose Health Information about You

The members of my OB/GYN healthcare team may share your health information with each other for reasons of treatment, payment, and healthcare operations. Sharing this information makes it possible for our providers and their team to care for you thoroughly and efficiently. Everyone is required to protect your health information.

You're Authorization

Except as outlined in the following pages, we will not use or disclose your health information for any reason unless you have signed form authorizing us to do so. You have the right to cancel your authorization in writing unless we have taken any action in reliance on the authorization.