

# Protected Personal Information Practices

This notice describes how personal information about you including medical information may be used and disclosed and how you can get access to this information. **When it comes to your protected personal information, you have certain rights.** This section explains your rights and some of our responsibilities to help you. Please review it carefully.

## You have the right to:

- Request and receive a summary of your patient record which typically includes pregnancy test results, ultrasound summaries, and information regarding participation in educational classes (parenting classes, pregnancy classes, fatherhood classes etc.) and material services received.
- You can ask Pregnancy Resources not to use or share certain health information, or information regarding class participation and received material services.
  - We are not required to agree to your request, and we may say “no” if it would affect your care or violate mandated reporter requirements.
- For Pregnancy Test appointments, on the day of your appointment you can request and receive a copy of your pregnancy test results.
- For class participants, on the day of your class you can request and receive a statement of participation letter validating the name, and general content information of the specific class that was completed.
- Get a list of those with whom Pregnancy Resources has shared your information.
- Ask Pregnancy Resources to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
  - We will say “yes” to all reasonable requests.
- Get a copy of this privacy notice

## Our Responsibilities

Every effort will be made to keep your personal information private and confidential.

Pregnancy Resources will let you know promptly if a breach occurs that may have compromised the privacy or security of your health information or personal identifiable information.

Pregnancy Resources will share information about you if state or federal laws require it, including with State Attorneys General or the Department of Health and Human Services.

With your signed consent:

- Pregnancy Resources will share your pregnancy test results and ultrasound report (if an ultrasound is provided) with your specified medical provider free of charge.
- Pregnancy Resources will share education participation with local agencies that you specifically approve free of charge .
- Pregnancy Resources will provide a copy or a summary of your health and patient information, usually within 30 days of your request for a \$10 fee.

## Our Uses and Disclosures

We may use and share your detailed information as we:

Provide limited medical care/education  
Help with public health and safety issues  
Report suspected abuse, neglect, or domestic violence  
Report a serious threat to anyone’s health or safety

Run our organization  
Do research & statistical reporting  
Comply with the law  
Respond to lawsuits or legal actions

Pregnancy Resources can share health information about you in response to a court or administrative order, or in response to a subpoena.