

CONFIDENTIALITY STATEMENT

All patient Protected Health Information (PHI, which includes patient medical and financial information), employee records, financial and operating data of Puget Sound Christian Clinic (PSCC), and any other information of a private or sensitive nature is considered confidential. Confidential information shall not be used or disclosed unless specific permission to do so has been obtained and granted by the privacy officer or designee. Applicable federal and state laws shall be followed to seek patient permission for any use or disclosure of PHI. Examples of inappropriate disclosures include:

- Discussing or revealing confidential information to friends or family members.
- Discussing or revealing confidential information to other coworkers or employees without a legitimate need to know.
- The disclosure of patient's presence in the office, hospital, or other medical facility, without the patient's consent, to an unauthorized party without a legitimate need to know and that may indicate the nature of the illness and jeopardize confidentiality.

The unauthorized disclosure of confidential information can subject an individual and PSCC to liability. Disclosure of confidential information to unauthorized persons, or unauthorized access to, or misuse, theft, destruction, alteration, or sabotage of such information, may result in your immediate removal from the premises and/or PSCC, and may lead to legal action and/or a duty for you to mitigate damages.

CONFIDENTIALITY AGREEMENT

I hereby acknowledge, by my signature below, that I understand that patient PHI and other confidential or proprietary information of PSCC, which I may see or hear or otherwise gain knowledge of in the course of my visit/work with PSCC, is to be kept confidential, and this confidentiality is a condition of my privileged work/visit with PSCC. This information shall not be used or disclosed to anyone unless specifically authorized by PSCC. The unauthorized use or disclosure of patient PHI is grounds for: immediate removal from the premises; revocation of all future visiting/working privileges; legal action; and/or a duty to mitigate damages.

Printed Name: _____

Signature: _____ **Date:** _____