such alternate communications will be handled. I may not require an explanation from you as to the basis of your request as a condition of providing communications on a confidential basis.

C. The Right to Inspect and Receive a Copy of Your PHI. In most cases, you have the right to inspect and receive a copy of the PHI that I have on you, but you must make the request to inspect and receive a copy of such information in writing. If I don't have your PHI but I know who does, I will tell you how to get it. I will respond to your request within 30 days of receiving your written request, In certain situations, I may deny your request. If I do, I will tell you, in writing, my reasons for the denial and explain your right to have my denial reviewed.

D. The Right to Receive a List of the Disclosures I
Have Made. You have the right to receive a list of
instances in which I have disclosed your PHI. The list
will not include disclosures made for my treatment,
payment, or health care operations; disclosures made
to you; disclosures you authorized; disclosures
incident to a use of disclosure permitted or required by
federal privacy rule; disclosures made for national
security or intelligence; disclosures made to
correctional institutions or law enforcement personnel;
or disclosures made before April 14, 2003.
I will respond to your request for an accounting of
disclosures within 60 days of receiving such a request.

The list I will give you will include disclosures am in the last six years unless you request a shorter time. The list will include the date the disclosure was made to whom the PHI was disclosed, a description of the information disclosed, and the reason for the disclosure. I will provide the list to you at no charge, but if you make more than one request in the same year I may charge you a reasonable cost-based fee for each additional request.

E. The Right to Amend Your PHI. If you believe there is a mistake in your PHI or that a piece of important information is missing, you have the right to request that I correct the existing information or add the missing information. You must provide the request and your reason for the request in writing. I will respond within 60 days of receiving your request to correct or update your PHI. I may deny your request in writing if the PHI is (I) correct or complete, (ii) not created by me, (iii) not allowed to be disclosed, or (iv) not part of my records. My written denial will state the reasons for the denial and explain your right to file a written statement of disagreement with the denial. If you don't file one, you have the right to request that your request and my denial be attached to all future disclosures of your PHI. If I approve your request, I will make the change to your PHI, tell you

about the change to your PHI.

F. The Right to Receive a Paper Copy of this

Notice. You have the right to receive a paper copy of this notice.

that have done it, and tell others that need to know

HOW TO COMPLAIN ABOUT OUR PRIVACY PRACTICES

If you think that I may have violated your privacy rights, or you disagree with a decision I made about access to your PHI, you may file a complaint with the person listed below. You may also send a written complaint to the Secretary of the Department of Health and Human Services at 200 Independence Avenue S.W., Washington D.C. 20201/ I will take no retaliatory action against you if you file a complaint about my privacy practices.

PERSON TO CONTACT FOR INFORMATION ABOUT THIS NOTICE OR TO COMPLAIN ABOUT MY PRIVACY PRACTICES

If you have any questions about this notice or any complaints about my privacy practices, or would like to know how to file a complaint with the Secretary of the Department of Health and Human Services, please contact me at:

Karyn M. Sandburg, Ph.D. 14751 Plaza Drive, Suite F Tustin, CA 92780 (714) 665-4343

EFFECTIVE DATE OF THIS NOTICE This notice went into effect on April 14, 2003.