



CLIENT PRIVACY POLICY

Privacy Officer Name and Contact Information: Client Services Director (info@libertywomensclinic.com)

Effective Date of Notice: July 2025

We care about your privacy and are committed to protecting your health information. This Client Privacy Policy describes how your medical information may be used and disclosed and how you can access this information.

Please review it carefully.

Your Rights

- You have a right to a copy of your medical record. We will provide a copy usually within 7 days of your request.
- You can ask us to correct health information about you that you think is incorrect or incomplete. We may say “no” to your request, but we’ll tell you why in writing within 30 days.
- You can ask us to contact you in a specific way (for example, by home or office phone) or to send mail to a different address. We will say “yes” to all reasonable requests.
- You can ask for a copy of this policy at any time.
- You can file a complaint with us if you feel we have violated your privacy by contacting us using the contact information above. We will not retaliate against you for filing a complaint.

Your Choices

- You can tell us your choices about whether and what we share with your family, close friends, or others involved in your care.
- If you cannot tell us your preference, for example, if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to your health or safety.
- We will not use your information for marketing purposes without your written permission.
- We may contact you for fundraising efforts, but you can tell us not to contact you again.

Our Uses and Disclosures

- We can use your health information and share it with other professionals who are treating you. Example: Sharing your ultrasound images with a medical professional for interpreting purposes.
- We can use and share your health information to run our practice, improve your care, and contact you when necessary. We will share information about you if required by applicable state or federal laws such as workers’ compensation, law enforcement, and other government requests.
- We can share health information about you in response to a court or administrative order or in response to a subpoena, if required by law.
- However, disclosure of your CHI may be made without your consent or authorization when required by law, when necessary to avert a risk of harm to, or neglect of, you or a third person, or when other circumstances may require or reasonably warrant such disclosure.
- For uses beyond these we will ordinarily obtain your written authorization.

Our Responsibilities

- We abide by applicable state and federal laws to maintain the privacy and security of your health information.
- We will follow all applicable state and federal laws if a breach occurs that may have compromised the privacy or security of your health information.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

Changes to the Terms of this Client Privacy Policy

We can change the terms of this policy, which will apply to all information we have about you. The new policy will be available upon request in our office and on our website.

LIBERTY WOMEN'S CLINIC MINISTERS WITH THE LOVE OF CHRIST BY EMPOWERING PEOPLE TO MAKE INFORMED, LIFE-AFFIRMING DECISIONS ABOUT PREGNANCY, SEXUAL HEALTH, AND RELATIONSHIPS.

