



SJMS.ORG
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SALINA, KS 67402-5020
785-823-7231
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NOTICE OF PRIVACY PRACTICES

This notice describes how medical information about your student may be used and disclosed and how you can get access to that information.

Please review it carefully.

If you have any questions about this notice please contact:

Business Office
PO Box 5020
Salina, Kansas 67402
785-823-7231

Effective June 1, 2008

St. John's Military School is required by law (HIPAA) to safeguard the information we learn about our students through the course of treatment. To insure the best care, relevant treatment information may be discussed among professional staff, including supervisors, caregivers and referral sources. Also, those involved in the payment of care or when a serious threat to the health and/or safety of others is involved. Disclosure would be limited to those able to prevent the threat.

HIPAA requires that we provide you with a Notice of Privacy Practices. By choosing to access our services, you are giving consent for St. John's Military School to disclose the minimum necessary protected health information to a third party as deemed necessary.

Our promise to you

Your student's information is important and confidential. Our ethics and policies require that all medical information be held in strict confidence.

I understand that by signing this document, I confirm receipt of the Notice of Privacy Practices for St. John's Military School (above).

I understand that a copy of this document will be kept in my cadet's personal medical chart for the duration of the current school year.

Parent's / Legal Guardian's Signature _____

Parent's / Guardian's Name (Printed) _____ Date _____

Cadet Name _____

Relationship to Cadet _____