

Notice of Privacy Practices

Effective Date: July 23, 2025

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

Our Responsibilities

HeartWise Imaging, LLC is required by law to maintain the privacy and security of your protected health information (PHI). We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.

Your Rights

- You can ask to see or get a copy of your medical record
- You can ask us to correct your medical record
- You can request confidential communications
- You can ask us to limit what we use or share
- You can get a list of those with whom we've shared information
- You can choose someone to act for you
- You can file a complaint if you feel your rights are violated

Our Uses and Disclosures

We typically use or share your health information in the following ways:

- To treat you
- To run our organization
- To bill for your services

We may also share information for public health and safety issues, comply with the law, respond to organ and tissue donation requests, work with a medical examiner, address workers' compensation, law enforcement, and other government requests, or respond to lawsuits and legal actions.

Contact Us

If you have any questions about this notice or your rights, please contact us:

HeartWise Imaging, LLC

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