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GENERAL INFORMATION

The information will acquaint you with our services and office procedures. Our goal is to provide you with useful information that will help you utilize our center.

When you call Virginia Oncology Associates: to better serve our patients, VOA has a centralized phone system. Our physicians are on-call for emergencies after hours and during the weekend.

NURSE/PHYSICIAN

All calls to our nurses are routed through the Triage Nurse.

Please leave a detailed message with your full name (including the spelling of your last name), date of birth, reason for calling, and a number where you can be reached. Every effort will be made to return your call as soon as possible, and you can expect your call to be returned the same day. If it is important that your call be returned within a certain amount of time (for example; need a call back within 2 hours), you must make that clear in your message. **If your situation requires immediate attention, do not call the office; dial 911.**

PRESCRIPTION REFILLS

Refills of prescription drugs can only be filled during regular business hours. This restriction is for your protection. We must be able to have access to your most up-to-date and complete medical records to ensure you receive appropriate medications and approvals from your physician.

IN-OFFICE DISPENSARY

We understand that undergoing treatment for your condition can be unsettling and time-consuming. In order to provide excellent service and convenience for our patients, we can dispense certain medications to you in our offices. We can also confirm your prescription benefits coverage and investigate alternative co-payment assistance resources (e.g., patient assistance programs, manufacturer-funded assistance, etc.) to better ensure you receive your medication as quickly and cost-effectively as possible. Please let us know if you have any questions about filling your prescription in our office.

SCHEDULING AND APPOINTMENTS

If you are calling to schedule an appointment, please leave a detailed message including the following information on voice mail: full name (including the spelling of the last name), date of birth of the patient, and the telephone number where you can be reached.

We will always accommodate emergencies when they occur. For this reason, it is very important to always schedule your visits so that time can be set aside for your care. Please call the office and speak with the nurse before coming in for an unscheduled visit. If you choose to come into the office without first speaking to a nurse, your situation will be assessed to determine if your needs can be taken care of the next day.

If you cannot keep a scheduled appointment, please let us know 24 hours in advance so that we can release that time for another patient. Please pay close attention to your appointment time and help us by arriving at the time designated on your appointment card.

Lab draws are scheduled 15 minutes prior to a physician or chemotherapy appointment. Please understand that in order to be respectful of those patients who do arrive at their scheduled times, late arrivals will be worked into the schedule if and as it allows. Additionally, those who arrive more than 30 minutes before their appointment will be asked to wait.

INSURANCE AND BILLING

You will be asked to provide us with your insurance coverage information at your first visit and every 6 months thereafter. A day or two prior to your appointment with our office, a registration clerk will contact you to obtain and verify your insurance information.

It is a requirement of your health insurance that co-payments be collected at each visit. We participate with most major insurance carriers. As a courtesy, claims will be filed for you. In order to ensure reimbursement, your insurance information must be kept current. Please remember that your insurance policy is a contract between you and your insurance company, and we are not a party to the contract. For your convenience, we accept Visa, MasterCard, Discover, and American Express. You will be introduced to one of our Patient Benefit Representatives, who will assist you with your financial health. You will receive monthly statements showing you an itemization of charges and payments made by you or your insurance companies. If you have questions regarding your billing, do not hesitate to contact our billing office at (757) 213-5700.

FEES FOR MEDICAL PAPERWORK

A fee will be charged for all medical paperwork, such as, but not limited to, disability forms, FMLA, etc. Please notify the front desk if medical paperwork needs to be completed.

ADDITIONAL RESOURCES

For additional information and resources, visit VirginiaCancer.com under the **FOR PATIENTS** heading, then Cancer Resources to explore the Support Groups, Community Resources (Local & National), Disease Specific Organizations, and Survivorship Information & Resources. If you have any questions, do not hesitate to ask a VOA staff member or call our offices, where we will be happy to assist you.

LANGUAGE ASSISTANCE SERVICES

Language services are available, free of charge, to patients whose primary language is not English. Please notify a VOA staff member if you need these services. See our Nondiscrimination Notice for more information.

CHILD VISITATION POLICY FOR VIRGINIA ONCOLOGY ASSOCIATES

- The purpose of this policy is to create a safe environment for patients, visitors, and staff.
- This policy falls in line with current visitation guidelines for local Sentara and Bon Secours facilities and leading national cancer centers at VCU, Duke, MD Anderson, Johns Hopkins, and Memorial Sloan Kettering.

Children under the age of 16 are not allowed in the VOA clinical areas. They are allowed to wait in the lobby with adult supervision (other than the patient).

RISK TO PATIENTS:

- Multiple routine childhood vaccinations are “live” vaccines. MMR for measles, mumps, and rubella, Varicella vaccine for chickenpox, and flu-mist for influenza are all live attenuated vaccines. A cancer patient whose immune system is weakened may have serious complications from routine infections. Any visitor who is recovering from illness or has been exposed to someone who is ill should not come into the office. Young children may not be able to recognize early symptoms of illness and may not communicate them appropriately in efforts to prevent transmission.

RISK TO CHILDREN:

- Clinical environments place younger children at increased risk of exposure to health hazards. Children are still mastering safe behavior within their community. Young children may accidentally expose themselves to biologic and chemotherapy hazards when they touch a contaminated surface and then touch their mouth, nose, or eyes.

THINGS TO CONSIDER:

- Critical lab results, reactions to medications, or new clinical findings all might lead a physician to recommend that a patient be hospitalized on an emergent basis.
- A child might witness emergency care being delivered to another patient, which the child might find upsetting.

Virginia Oncology Associates is committed to providing patients with the highest quality care. By providing protected clinical time, we afford patients the opportunity to be a full participant in their care.

TREATMENT ROOM SAFETY RULES AND REQUIREMENTS

We would like to take this opportunity to share some helpful hints and information to ensure a safe environment and provide some quick reminders while you are in the treatment area.

- Please discuss with your physician or nurse any driving restrictions you may have while actively receiving chemotherapy. This will allow time to coordinate transportation to and from your treatment appointment if needed. We require 24-hour notice if you are unable to keep your treatment appointment.
- For the consideration of all patients, please limit cell phone use while in the treatment room. While using your cell phone, please refrain from using foul language.
- Please bring your pain medications with you on your treatment day. Check with your nurse before taking them.
- To safely and comfortably treat our patients, only one visitor per patient is permitted. Please note, this is subject to change during a public health emergency.
- Give courtesy and respect to treatment staff. Refrain from any aggressive or controversial behavior. This includes patients and visitors. Inappropriate behaviors may lead to dismissal from the Practice.
- If you watch a movie or listen to music, please use earphones to limit disturbances to fellow patients. Speakerphone audio is prohibited.
- Please note, children under the age of 16 are not allowed in the treatment room at any time.
- Weapons, including but not limited to guns, knives, or electronic stunning devices, are prohibited at any of our clinics regardless of a concealed weapons permit.
- For the safety of everyone, rolling stools are for office staff only.
- Service dogs are allowed in the treatment room. We require that they be in a harness, backpack, or vest identifying the animal as a trained service dog. Please arrange with your care team before your visit.
- Treatment recliners are for patients. Please use a companion chair for your guest.
- In efforts to prevent falls and to promote safety, please always keep the walk passage clear.
- If you are here for a long treatment, you may bring your own snack or lunch.
- For your safety, you must remain in the treatment area during your entire treatment.
- Due to chemo-induced sensitivity, perfumes, colognes, and scented lotions are discouraged.
- Free wireless internet is available in the treatment room for your laptops, tablets, etc.
- Understand that for patient safety and privacy, photo taking, the use of video, or voice recording of Providers, staff, and other patients, is prohibited unless approved by your Provider in a private setting or verbal and/or written consent is obtained.
- Blankets and pillows are available, but you may also bring your own. Layered clothing is recommended.

Thanks for your participation in making the clinic and treatment area a comfortable and secure place.

Notice Informing Individuals About Nondiscrimination And Accessibility Requirements

Virginia Oncology Associates complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Virginia Oncology Associates does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Virginia Oncology Associates:

Provides free aids and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

Provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages

If you need these services, please notify a VOA staff member.

If you believe that Virginia Oncology Associates has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with Angie Camporeale, Compliance Liaison for Virginia Oncology Associates, 6251 E. Virginia Beach Blvd., Ste.200, Norfolk, VA 23502, **Phone:** (757) 213-5806, **Fax:** (757) 213- 5872, **Email:** angie.camporeale@usoncology.com. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, Angie Camporeale, Compliance Liaison for Virginia Oncology Associates is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

**U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)**

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.

INTERPRETERS AVAILABLE

You have access to interpretation services 24/7 at no personal cost to you. This chart includes languages commonly spoken in your community, additional languages are available.

English: Do you speak [language]? We will provide an interpreter at no personal cost to you.

Spanish ¿Habla español? Le proporcionaremos un intérprete sin costo alguno para usted.
Español

Vietnamese Quý vị nói được tiếng Việt không? Chúng tôi sẽ cung cấp một thông dịch viên miễn phí cho quý vị.
Tiếng Việt

French Parlez-vous français ? Nous vous fournirons gratuitement un interprète.
Français

Hmong Koj puas yog hais Lus Hmoob? Peb yuav muaj ib tug neeg txhais lus rau koj uas koj tsis tau them nqi.
Hmoob

Tagalog Nakapagsasalita ka ba ng Tagalog? Magbibigay kami ng tagasalin nang wala kang personal na babayaran.
Tagalog

Cambodian តើអ្នកនិយាយភាសាខ្មែរដែរទេ? យើងខ្ញុំនឹងផ្តល់ជូនអ្នកបកប្រែភាសាដោយឥតគិតថ្លៃផ្ទាល់ខ្លួនដល់អ្នក។
ភាសាខ្មែរ

Hindi क्या आप हिंदी बोलते हैं? हम आपके लिए बिना किसी लागत के एक दुभाशिया उपलब्ध कराएंगे।
हिन्दी

Japanese 日本語を話せますか?必要であれば日本語 無料で通訳をご用意いたします。

Amharic አማርኛ ይናገሩ? እርስዎ በግልፅ ምንም አማርኛ ወጪ ሳያውጡ እስተርጓሚ እናቀርባለን።

Ibo I na asụ Igbo? Anyị ga-ewete onye
Igbo ntapi okwu, i gaghi akwụ ugwo o bula.

Bengali আপনি কি বাংলায় কথা বলেন?
আমরা আপনাকে একজন দোভাষী
বাংলা (ইন্টারপ্রিটার) দেব যার জন্য আপনার ব্যক্তিগতভাবে অর্থব্যয় করতে হবে না।

Portuguese Fala português? Vamos facultar-lhe um intérprete, sem custos para si.
Português

Cantonese 您讲粤语吗? 我们将免费为您提供
粵語 翻译。

Mandarin 您讲普通话吗? 我们将免费为您提供
中文 翻译。

Korean 한국어를 사용하십니까?
한국어 무료로 통역 서비스를 제공해 드리겠습니다.

Arabic هل تتحدث اللغة العربية؟ سوف نوفر لك مترجمًا فورًا من دون أي تكلفة عليك.
اللغة العربية

Russian Вы говорите по-русски? Мы абсолютно
Русский бесплатно предоставим вам переводчика.

Gujarati શું તમે ગુજરાતી બોલો છો? અમે
ગુજરાતી કોઈપણ વ્યક્તિગત ખર્ચ વિના તમને અનુવાદક પ્રદાન કરીશું.

German Sprechen Sie Deutsch? Wir stellen Ihnen
Deutsch unentgeltlich einen Dolmetscher zur Verfügung.

Lao ທ່ານເວົ້າພາສາລາວບໍ? ພວກເຮົາຈະ
ພາສາລາວ ຈັດກຽມນາຍແປພາສາໃຫ້ທ່ານໂດຍບໍ່ເສຍຄ່າ.

Farsi فارسی صحبت می کنید؟ یک مترجم شفاهی
رایگان در اختیار شما قرار خواهیم داد.
فارسی

Urdu کیا آپ اردو بولتے ہیں؟ ہم آپ کو ذاتی
لاگت کے بنا ترجمان فراہم کریں گے۔
اردو

Yoruba Ìjẹ́ o n sọ èdè Yorùbá? A ó pèsè
Yoruba ògbùfọ kan lófẹ́ẹ́ fún ọ.

Kru Ñ a po Klào Win? Â a mu mù win kwa
Kru cetiyo nyí. ^Se wlijé wè sâ mu kò ε bò.

American Sign Language (ASL)



PHONE NUMBERS AND HEALTHCARE TEAM INFORMATION

OFFICE LOCATIONS

SOUTHSIDE

Brock Cancer Center
6251 E. Virginia Beach Blvd., Ste. 200
Norfolk, VA 23502
(757) 466-8683
FAX (757) 466-8892

1950 Glenn Mitchell Dr., Ste. 102
Virginia Beach, VA 23456
(757) 368-0437
FAX (757) 368-0492

3910 Bridge Rd., Ste. 400
Suffolk, VA 23435
(757) 484-0215
FAX (757) 484-6792

744 Battlefield Blvd., Ste. 200
Chesapeake, VA 23320
(757) 549-4403
FAX (757) 549-4332

2790 Godwin Blvd., Ste. 101
Suffolk, VA 23434
(757) 539-0670
FAX (757) 539-1062

PENINSULA

1051 Loftis Blvd., Ste. 100
Newport News, VA 23606
(757) 873-9400
FAX (757) 873-9420

3000 Coliseum Dr., Ste. 104
Hampton, VA 23666
(757) 827-9400
FAX (757) 827-9320

500 Sentara Cir., Ste. 203
Williamsburg, VA 23188
(757) 229-2236
FAX (757) 221-0409

NORTHEAST NC

905 Thunder Road, Ste. 250
Elizabeth City, NC 27909
(252) 331-2044
FAX (252) 331-1909

OUR TEAM

OUR CANCER CARE TEAM IS MADE UP OF BOARD-CERTIFIED AND BOARD-ELIGIBLE ONCOLOGISTS AND OTHER ONCOLOGY-TRAINED CLINICAL PROFESSIONALS WHO UNDERSTAND THE SPECIAL NEEDS OF CANCER PATIENTS AND THEIR FAMILIES.

With many years of experience caring for cancer patients, our physicians, nurses, pharmacists, counselors, and other specialists work together to provide world-class, personalized cancer care.

MEDICAL ONCOLOGY & HEMATOLOGY

Our medical oncology team plays a major role in cancer care by managing treatment plans and therapies, monitoring and evaluating progress, and collaborating on best options with other caregivers. We consult with patients on their choices and any temporary side effects they may experience during chemotherapy treatments, as well as offer medical guidance to help patients make decisions along the way.

Our hematology team has extensive experience providing high-quality patient care, research, and leading-edge treatment of blood and bone marrow disorders; for both cancer and non-cancer patients.

Thomas A. Alberico, M.D.
Cristina S. Alencar, M.D.
Burton F. Alexander, M.D.
Omer Ali, M.D.
Daniel Aruch, M.D.
Daniel Atienza, M.D.
Nino Balanchivadze, M.D.
Shanley Banaag, D.O.
Celeste Bremer, M.D.
David Z. Chang, M.D.
Scott J. Cross, M.D.
Snehal Damle, M.D.
Michael A. Danso, M.D.
Ayham Deeb, M.D.
Katherine DiNardo, M.D.
Mark T. Fleming, M.D.
Ranjit K. Goudar, M.D.
Sonia E. Hepburn, M.D.
Jared Kobulnicky, M.D.
Boon Kok, M.D.

Scott Kruger, M.D.
Michael E. Lee, M.D.
Sowjanya Naga, M.D.
Gradon Nielsen, M.D.
J. Christopher Paschold, M.D.
David M. Powell, M.D.
Christina W. Prillaman, M.D.
Gauri V. Radkar, D.O.
S. George Saman, M.D.
Julia Schaefer-Cuttillo, M.D.
Cynthia C. Sile, M.D.
Gary L. Simmons, D.O.
Kevin Sing, M.D.
Valiant Tan, M.D.
Ligeng Tian, M.D.
Graham T. Watson, M.D.
Jedrzejj "NJ" Wykretowicz, M.D.
John Xie, M.D.
Yue Zhang, M.D.
Bo Zhao, M.D.

GYNECOLOGIC ONCOLOGY

Our gynecologic oncologists specialize in cancers of the female organs. With a unique depth of experience and expertise coupled with easy access to the latest treatment options, we are able to develop and implement the best treatment plan for each patient.

Danielle Chau, M.D.
Devin Miller, M.D.
Michael E. McCollum, M.D.

Stacey J. Rogers, M.D.
Robert C. Squatrito, M.D.

NON-URGENT MEDICAL QUESTIONS

Triage nurses assist patients with questions and issues relating to cancer, medication(s), and treatment side effects:

Southside Triage Nurse Line
(757) 466-8683, option #5

Peninsula Triage Nurse Line
(757) 873-9400, option #5

EMERGENCY & AFTER HOURS

For emergencies, please dial 911. For help after hours, during the weekend, and over holidays, please page our on-call healthcare provider.

Southside - (757) 466-8683

Peninsula - (757) 594-2000

INCLEMENT WEATHER

For information on office closures or delays due to inclement weather, extended power failures, or other catastrophes that would require office closures, please call our inclement weather box:

Southside - (757) 264-4990

Peninsula - (757) 264-4994

OUR TEAM (continued)

RADIATION ONCOLOGY

Today, radiation therapy is quicker, safer, and more precise than ever before. Our radiation oncology team uses advanced treatment planning systems and state-of-the-art radiation technology to deliver internal and external radiation to cancerous cells, which helps prevent them from growing or dividing and spreading.

Chike O. Abana, M.D.

Jacob T. Hall, M.D.

Song K. Kang, M.D.

Victor Archie, M.D.

Heather Jones, M.D.

Michael L. Miller, D.O.

ADVANCED PRACTICE PROVIDERS (APP):

At Virginia Oncology Associates, physician assistants, and nurse practitioners (collectively referred to as advanced practice providers or APPs) work in all aspects of care including oncology, hematology, surgery, pain management, survivorship, palliative care, and stem cell transplant. As a part of the multidisciplinary team, they work collaboratively with doctors, nurses, and other healthcare providers in performing regular cancer screening tests, discussing treatment options, educating patients on symptoms, and helping in conducting clinical studies.

Mary Albrethsen, NP

Gladys Apuli, DNP

Christine Arbogast, FNP

Rachel Avsec, PA

Courtney Barbero, PA

Shelby Burton, PA

Kelly Byrum, PA

Kaycie Cartwright, PA

Jennifer Cashwell, FNP

Kelly Clarke, NP

Kara DeMott, PA

Cara DePanfilis, PA

Jessica Doggett, NP

Andrea Edwards, PA

Lisa Everitt, PA

Andrea Foster, PA

Aimee Gannon, PA

Carla Groshel, PA

Emily-Grace Harris, FNP

Courtney Hastings, FNP

Kimberly Heath, FNP

Lynn Kelly, PA

Rachel McBride, NP

Taylor Middleton, FNP

Susan Miller, PA

Stacy Mills, PA

Elli Mirenda, PA

Alexandra Moore, PA

Miriam New, NP

Hannah Newhall, PA

Jacqueline Oliver, DMSc, PA

Jamie Perez, PA

Grace Perry, NP

Juli Phillips, FNP

Eric Poulin, PA

Tina Pryor, FNP

Janet Reyes, PA

Erik Richardson, PA

Linda Sawyer, NP

Kathleen Sharp, PA

Amy Stinnette, PA

Kristen Taylor, PA

Angela Thompson, PA

Whitney Tobin, PA

Sapa Truong, PA

Kristin Vickers, PA

Stacey Warburton, FNP

Laura Watts, FNP

Mike Wood, PA

Alicia Yates, PA

Kelsey Zaller, NP

VIRGINIA ONCOLOGY ASSOCIATES SERVICES

WHEN FACED WITH CANCER, PATIENTS WANT THE MOST ADVANCED CARE AVAILABLE. Thanks to the dedication of our experienced physicians and staff, Virginia Oncology Associates provides unparalleled access to innovative therapies and the latest technologies based on the latest clinical evidence—right here in our community. From leading-edge diagnostic imaging and sophisticated radiation therapies to new investigational drugs through clinical trials, we offer our patients advanced and comprehensive cancer care.

To us, providing comprehensive care also means understanding that having cancer is hard on patients and their families. Our physicians and staff will do whatever it takes to make everyone more comfortable. We will spend time with our patients to make sure they understand their diagnosis and treatment options and offer educational resources and support services designed to help patients and their families understand and cope with their disease.

SERVICES OFFERED AT VIRGINIA ONCOLOGY ASSOCIATES INCLUDE:

Medical Oncology	Translational Oncology Program (TOP)
Gynecologic Oncology	Therapeutic Phlebotomy
Radiation Oncology	Genetic Testing
Hematology	Genetic Counseling
Oncology Clinical Nursing	Patient Financial Counselors
Cellular Therapy Program	Educational Resources
Clinical Studies/Research Trials	Home Care & Hospice Care - Support Referral
Bone Density	Survivorship Program
Hormone Therapy	Chemotherapy/Treatment Teaching
Immunotherapy	Social Work Support
Chemotherapy	Nutritionist
PET/CT	Palliative Care Program
Ultrasound	C.A.R.E. Clinic
Pharmacy	Multispecialty Infusion Clinic
Clinical Laboratory Services	Low-Dose Radiation Therapy for Osteoarthritis

MISSION STATEMENT

Virginia Oncology Associates is committed to improving the lives of those in our community impacted by cancer and blood diseases by providing compassionate, personalized, state-of-the-art care.

Virginia Oncology Associates embraces and promotes a culture of respectful inclusion and regard for diversity. As a practice, we aim to demonstrate core values of respect, acceptance, and service through fair and equitable treatment of our valued employees and the people we proudly serve. We intend for Virginia Oncology Associates, at all times, to be a safe and welcoming environment.

Our intention is intersectional, and through this approach, we support improvement within our staff and the broader community. We promote awareness of, and appreciation of differences among us, including race, sex, gender identity, ethnicity, national origin, documentation status, culture, sexual orientation, religion, and abilities. As a practice, we support and advocate for social justice for all.

We recognize that injustices are disproportionate and vary among different varieties of human beings in our community. Undesirable health and healthcare disparities exist among them. Virginia Oncology Associates is a proud community leader committed to providing all groups of people state-of-the-art medical care with respect, dignity, and equitable treatment for all. We look forward to working with our healthcare partners and community leaders in promoting a society that recognizes previous inequities, promotes positive change, and advocates social justice for all.

PATIENT RIGHTS AND RESPONSIBILITIES

RIGHTS

As a Patient, I have the RIGHT to:

- Full information about my rights and responsibilities as a patient at VOA.
- Choose my own physician/caregiver, and know the names, status, and experience of the staff.
- Receive an explanation of my diagnosis, benefits of treatment, alternatives, recuperation, risks, and an explanation of consequences if treatment is not pursued.
- Understand and agree to the care plan provided by my provider and the right to refuse any treatment included within the plan.
- Receive expert, professional care without discrimination, regardless of age, creed, color, religion, national origin, sexual preference, gender identity or expression, or physical or mental disability.
- Disclosure of any teaching programs, research of experimental programs in which the facility is participating.
- Participate in the development of a plan of care and in choosing an advanced directive.
- An explanation of all rules, regulations, and services provided by VOA, the days and hours of services, and provisions for possible emergency care, including telephone numbers.
- Access my personal records and obtain copies upon written request.
- Assistance with communication, including language services.
- Have one visitor sit with me during my treatment, although I realize this is subject to change based on community health-related emergencies.
- Receive a full financial explanation and payment schedule prior to beginning treatment.
- Be treated with courtesy, dignity, respect, and have my personal privacy protected.
- Be kept safe and free from abuse and/or harassment.
- Tell you about my concerns and complaints, and to receive a response without affecting the quality or delivery of care.
- Assistance and consideration in the management of pain.

RESPONSIBILITIES

As a Patient, I have the RESPONSIBILITY to:

- Disclose accurate and complete information about my physical condition, hospitalizations, medications, allergies, medical history, and related items. This includes updating the information when changes occur.
- Ask questions and tell you when I do not understand a treatment or recommendation you are considering.
- Communicate any unexpected changes in my condition and things about my care that I think might be risks.
- Follow instructions once I and the provider have agreed upon my care.
- Relay my levels of discomfort and perceived changes in my pain management to my physician.
- Arrive at all appointments at the scheduled time. Contact the office 24-48 hours in advance to reschedule appointments so that the time may be utilized for other patients.
- Provide new/changed information related to my health insurance.
- Communicate any temporary or permanent changes in my address or telephone number which might hinder contact by the staff.
- Pay my health care bills. If I am unable to pay, I will inform the appropriate staff so they can connect me to resources that may be available.
- Assist in maintaining a safe, peaceful environment.
- Treat staff with courtesy and respect and refrain from using offensive language or exhibiting aggressive behavior. This includes any family member/guest that may be present.
- To use my cell phone one time within the clinic areas for transportation needs.
- Understand and accept that failure to comply with any responsibilities may result in dismissal for the day and potential later dismissal from the practice.
- Understand that for patient safety and privacy, photo taking, the use of video, or voice recording of providers, staff, and other patients is prohibited unless approved by your provider in a private setting or verbal and/or written consent is obtained.
- Due to chemo-induced sensitivities, perfumes, colognes, and scented lotions are discouraged.

Virginia Oncology Associates

NOTICE OF PRIVACY PRACTICES

Effective Date: 9/23/13

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.

About Us

In this Notice, we use terms like “we,” “us,” “our” or “Practice” to refer to Virginia Oncology Associates, its physicians, employees, staff, and other personnel. All of the sites and locations of Virginia Oncology Associates follow the terms of this Notice and may share health information with each other for treatment, payment, or health care operations purposes and for other purposes as described in this Notice.

Purpose of this Notice

This Notice describes how we may use and disclose your health information to carry out treatment, payment, or healthcare operations and for other purposes that are permitted or required by law. This Notice also outlines our legal duties for protecting the privacy of your health information and explains your rights to have your health information protected. We will create a record of the services we provide you, and this record will include your health information. We need to maintain this information to ensure that you receive quality care and to meet certain legal requirements related to providing you care. We understand that your health information is personal, and we are committed to protecting your privacy and ensuring that your health information is not used inappropriately.

Our Responsibilities

We are required by law to maintain the privacy of your health information and to provide you notice of our legal duties and privacy practices with respect to your health information. We are also required to notify you of a breach of your unsecured health information. We will abide by the terms of this Notice.

How We May Use or Disclose Your Health Information

The following categories describe examples of the way we use and disclose health information without your written authorization:

For Treatment: We may use and disclose your health information to provide you with medical treatment or services. For example, your health information will be shared with your oncology doctor and other healthcare providers who participate in your care. We may disclose your health information to another oncologist for the purpose of a consultation. We may also disclose your health information to your primary care physician or another healthcare provider to be sure they have all the information necessary to diagnose and treat you. We may also share information through Carequality, a healthcare exchange, which is a provider portal for other providers involved in your care to have all the information necessary to diagnose and treat you.

For Payment: We may use and disclose your health information to others so they will pay us or reimburse you for your treatment. For example, a bill may be sent to you, your insurance company, or a third-party payer. The bill may contain information that identifies you, your diagnosis, and treatment or supplies used in the course of treatment. We may also tell your health plan about a treatment you are going to receive to obtain prior approval or to determine whether your health plan will cover the treatment.

For Health Care Operations: We may use and disclose your health information in order to support our business activities. These uses and disclosures are necessary to run the Practice and make sure our patients receive quality care. For example, we may use your health information for quality assessment activities, training of medical students, necessary credentialing, and for other essential activities. We may also disclose your health information to third party “business associates” that perform various services on our behalf, such as transcription, billing, and collection services. In these cases, we will enter into a written agreement with the business associate to ensure they protect the privacy of your health information.

Individuals Involved in Your Care or Payment for Your Care and Notification: If you verbally agree to the use or disclosure and in certain other situations, we will make the following uses and disclosures of your health information. We may disclose to your family, friends, and anyone else whom you identify who is involved in your medical care or who helps pay for your care, health information relevant to that person's involvement in your care or paying for your care. We may also make these disclosures after your death. We may use or disclose your information to notify or assist in notifying a family member, personal representative, or any other person responsible for your care regarding your physical location within the Practice, general condition, or death. We may also use or disclose your health information to disaster-relief organizations so that your family or other persons responsible for your care can be notified about your condition, status, and location.

We are also allowed to the extent permitted by applicable law to use and disclose your health information without your authorization for the following purposes:

As Required by Law: We may use and disclose your health information when required to do so by federal, state, or local law.

Judicial and Administrative Proceedings: If you are involved in a legal proceeding, we may disclose your health information in response to a court or administrative order. We may also release your health information in response to a subpoena, discovery request, or other lawful process by someone else involved in the dispute, but only if efforts have been made to tell you about the request or to obtain an order protecting the information requested.

Health Oversight Activities: We may use and disclose your health information to health oversight agencies for activities authorized by law. These oversight activities are necessary for the government to monitor the health care system, government benefit programs, compliance with government regulatory programs, and compliance with civil rights laws.

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NOTICE OF PRIVACY PRACTICES Continued...

Effective Date: 9/23/13

Law Enforcement: We may disclose your health information, within limitations, to law enforcement officials for several different purposes:

- To comply with a court order, warrant, subpoena, summons, or other similar process;
- To identify or locate a suspect, fugitive, material witness, or missing person;
- About the victim of a crime, if the victim agrees or we are unable to obtain the victim's agreement;
- About a death we suspect may have resulted from criminal conduct;
- About criminal conduct we believe in good faith to have occurred on our premises; and
- To report a crime not occurring on our premises, the nature of a crime, the location of a crime, and the identity, description, and location of the individual who committed the crime, in an emergency situation.

Public Health Activities: We may use and disclose your health information for public health activities, including the following:

- To prevent or control disease, injury, or disability;
- To report births or deaths;
- To report child abuse or neglect;
- Activities related to the quality, safety, or effectiveness of FDA-regulated products;
- To notify a person who may have been exposed to a communicable disease or may be at risk for contracting or spreading a disease or condition as authorized by law; and
- To notify an employer of findings concerning work-related illness or injury or general medical surveillance that the employer needs to comply with the law if you are provided notice of such disclosure.

Serious Threat to Health or Safety: If there is a serious threat to your health and safety or the health and safety of the public or another person, we may use and disclose your health information to someone able to help prevent the threat or as necessary for law enforcement authorities to identify or apprehend an individual.

Organ/Tissue Donation: If you are an organ donor, we may use and disclose your health information to organizations that handle procurement, transplantation, or banking of organs, eyes, or tissues.

Coroners, Medical Examiners, and Funeral Directors: We may use and disclose health information to a coroner or medical examiner. This disclosure may be necessary to identify a deceased person or determine the cause of death. We may also disclose health information, as necessary, to funeral directors to assist them in performing their duties.

Workers' Compensation: We may disclose your health information as authorized by and to the extent necessary to comply with laws related to workers' compensation or similar programs that provide benefits for work-related injuries or illness.

Victims of Abuse, Neglect, or Domestic Violence: We may disclose health information to the appropriate government authority if we believe a patient has been the victim of abuse, neglect, or domestic violence. We will only make this disclosure if you agree, or when required or authorized by law.

Military and Veterans Activities: If you are a member of the Armed Forces, we may disclose your health information to military command authorities. Health information about foreign military personnel may be disclosed to foreign military authorities.

National Security and Intelligence Activities: We may disclose your health information to authorized federal officials for intelligence, counterintelligence, and other national security activities authorized by law.

Protective Services for the President and Others: We may disclose your health information to authorized federal officials so they may provide protective services for the President and others, including foreign heads of state.

Inmates: If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may disclose your health information to the correctional institution or law enforcement official to assist them in providing you health care, protecting your health and safety or the health and safety of others, or for the safety of the correctional institution.

Research: We may use and disclose your health information for certain research activities without your written authorization. For example, we might use some of your health information to decide if we have enough patients to conduct a cancer research study. For certain research activities, an Institutional Review Board (IRB) or Privacy Board may approve uses and disclosures of your health information without your authorization.

Other Uses and Disclosures of Your Health Information that Require Written Authorization:

Other uses and disclosures of your health information not covered by this Notice will be made only with your written authorization. Some examples include:

- **Psychotherapy Notes:** We usually do not maintain psychotherapy notes about you. If we do, we will only use and disclose them with your written authorization except in limited situations.
- **Marketing:** We may only use and disclose your health information for marketing purposes with your written authorization. This would include making treatment communications to you when we receive a financial benefit for doing so.
- **Sale of Your Health Information:** We may sell your health information only with your written authorization.

If you authorize us to use or disclose your health information, you may revoke your authorization, in writing, at any time. If you revoke your authorization, we will no longer use or disclose your health information as specified by your revocation, except to the extent that we have taken action in reliance on your authorization.

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NOTICE OF PRIVACY PRACTICES Continued...

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Your Rights Regarding Your Health Information

You have the following rights regarding the health information we maintain about you:

Right to Request Restrictions: You have the right to request restrictions on how we use and disclose your health information for treatment, payment, or healthcare operations. **In most circumstances, we are not required to agree to your request.** If we do agree, we will comply with your request unless the information is needed to provide you emergency treatment. To request restrictions, you must make your request in writing and submit it to the Privacy Officer, VOA at 6251 E. Virginia Beach Blvd., Ste. 200, Norfolk, VA 23502. We are required to agree to a request that we restrict a disclosure made to a health plan for payment or health care operations purposes that is not otherwise required by law, if you, or someone other than the health plan on your behalf, paid for the service or item in question out-of-pocket in full.

Right to Request Confidential Communications: You have the right to request that we communicate with you in a certain manner or at a certain location regarding the services you receive from us. For example, you may ask that we only contact you at work or only by mail. To request confidential communications, you must make your request in writing and submit it to the Privacy Officer, VOA at 6251 E. Virginia Beach Blvd., Ste. 200, Norfolk, VA 23502. We will not ask you the reason for your request. We will attempt to accommodate all reasonable requests.

Right to Inspect and Copy: You have the right to inspect and copy health information that may be used to make decisions about your care. To inspect and copy your health information, you must make your request in writing by filling out the appropriate form provided by us and submitting it to the Privacy Officer, VOA at 6251 E. Virginia Beach Blvd., Ste. 200, Norfolk, VA 23502. You may request access to your medical information in a certain electronic form and format if readily producible or, if not readily producible, in a mutually agreeable electronic form and format. Further, you may request in writing that we transmit a copy of your health information to any person or entity you designate. Your written, signed request must clearly identify such designated person or entity and where you would like us to send the copy. If you request a copy of your health information, we may charge a cost-based fee for the labor, supplies, and postage required to meet your request.

We may deny your request to inspect and copy in certain very limited circumstances. If you are denied access to your health information, you may request that the denial be reviewed by a licensed healthcare professional chosen by us. The person conducting the review will not be the person who denied your request. We will comply with the outcome of the review.

Right to Amend: If you feel that your health information is incorrect or incomplete, you may request that we amend your information. You have the right to request an amendment for as long as the information is kept by or for us. To request an amendment, you must make your request in writing by filling out the appropriate form provided by us and submitting it to the Privacy Officer, VOA at 6251 E. Virginia Beach Blvd., Ste. 200, Norfolk, VA 23502.

We may deny your request for amendment. If this occurs, you will be notified of the reason for the denial and given the opportunity to file a written statement of disagreement with us that will become part of your medical record.

Right to an Accounting of Disclosures: You have the right to request an accounting of disclosures we make of your health information. Please note that certain disclosures need not be included in the accounting we provide to you.

To request an accounting of disclosures, you must make your request in writing by filling out the appropriate form provided by us and submitting it to the Privacy Officer, VOA at 6251 E. Virginia Beach Blvd. Ste. 200, Norfolk, VA 23502. Your request must state a time period which may not be longer than six years, and which may not include dates before April 14, 2003. The first accounting you request within a 12-month period will be free. For additional accountings, we may charge you for the costs of providing the accounting. We will notify you of the costs involved and give you an opportunity to withdraw or modify your request before any costs have been incurred.

Right to a Paper Copy of This Notice: You have the right to a paper copy of this Notice at any time, even if you previously agreed to receive this Notice electronically. To obtain a paper copy of this Notice, please contact the Privacy Officer, VOA at 757-466-8683. You may also obtain a paper copy of this Notice at our website, www.virginiacancer.com.

Changes to this Notice

We reserve the right to change the terms of this Notice at any time. We reserve the right to make the new Notice provisions effective for all health information we currently maintain, as well as any health information we receive in the future. If we make material or important changes to our privacy practices, we will promptly revise our Notice. We will post a copy of the current Notice in each VOA office and on our website. Each version of the Notice will have an effective date listed on the first page. Updates to this Notice are also available at our website, www.virginiacancer.com.

Complaints

If you have any questions about this Notice or would like to file a complaint about our privacy practices, please direct your inquiries to the Privacy Officer, VOA at 6251 E. Virginia Beach Blvd., Ste. 200, Norfolk, VA 23502 or 757-466-8683. You may also file a complaint with the Secretary of the Department of Health and Human Services. **You will not be retaliated against or penalized for filing a complaint.**

Questions

If you have questions about this Notice, please contact the Privacy Officer, VOA at 757-466-8683.