



thoughtscape NP
PSYCHIATRY

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Thoughtscape NP in Psychiatry



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PUBLIC POLICY

Notice of Privacy Practices

Your information, choices, and rights

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.

Effective October 24, 2026. This notice applies to the records maintained by Jeffrey Panko, PMHNP-BC, through thoughtscape NP Psychiatry. Privacy contact: Jeffrey Panko, PMHNP-BC, 646-549-4694; JMPankoNP@thoughtscapeNP.com. Established patients may submit requests through the secure portal or ask how to send a written request.

Our responsibilities

We are required to protect the privacy and security of protected health information, provide this notice, and follow the notice currently in effect. We will notify you as required by law if a breach compromises your information. We use appropriate safeguards and limit information when the law requires it.

Your rights

- See or obtain your records. Ask for electronic or paper copies of records used to make decisions about your care. Copies are free, including copies sent to another provider or a third party at your direction. Our usual target is five business days, with urgent treatment requests prioritized. We follow any shorter applicable deadline; New York generally requires an opportunity to inspect records within ten days of a written request. HIPAA generally allows up to thirty days for an access request, with only a permitted written extension. Some information, such as separately maintained psychotherapy notes, may be excluded. If access is denied, we explain the basis and any review rights.
- Request a correction. Ask in writing to amend inaccurate or incomplete information. If we deny the request, we will explain why in writing, generally within sixty days, and explain how to submit a statement of disagreement. Any legally permitted extension will be explained.
- Request confidential communication. Tell us a safe phone number, address, or other reasonable way to contact you. We will accommodate reasonable requests.
- Ask to limit sharing. You may request restrictions on uses or disclosures for treatment, payment, or operations. We do not have to accept every request. If you pay in full out of pocket for a service and request that we not disclose that service to your health plan for payment or operations, we will honor the restriction unless disclosure is required by law.
- Request an accounting. You may request a list of certain disclosures during the previous six years. Disclosures for treatment, payment, operations, and certain other permitted purposes are excluded. One accounting in a twelve-month period is free; any permitted charge for an additional accounting will be explained in advance.
- Get a copy of this notice. You may request a paper copy even if you received it electronically. The current notice is available on the practice website and on request.
- Use a personal representative. Someone with legal authority may exercise your rights to the extent of that authority. We verify the authority and follow applicable exceptions.
- Make a complaint. Contact the privacy contact above or the U.S. Department of Health and Human Services Office for Civil Rights at hhs.gov/hipaa/filing-a-complaint, 1-877-696-6775, or 200 Independence Avenue, S.W., Washington, D.C. 20201. We will not retaliate against you.

Routine uses and disclosures

Subject to applicable privacy protections, information may be used or shared to provide treatment, coordinate with treating clinicians, prescribe or arrange tests; obtain payment, check benefits, submit claims, or respond to a health plan; operate the practice, maintain records, review quality, and support secure systems; and contact you about appointments, treatment alternatives, or relevant health services. Business associates must protect information under applicable agreements. For example, a treating clinician may receive relevant information to coordinate your care, or a billing service may receive information needed for a claim.

Your choices and written permission

You may tell us what can be shared with family, friends, or others involved in your care or payment. When you cannot express a preference, professional judgment may support a limited disclosure in your best interest where the law permits. Disaster-relief disclosures may also be permitted. Stronger state or federal protections still apply.

Most sharing of separately maintained psychotherapy notes, marketing uses requiring authorization, and sales of protected health information require written authorization. Uses not otherwise permitted by this notice and law also require authorization. You may revoke an authorization in writing, except to the extent we already acted in reliance on it or another legal exception applies. If we contact you for fundraising, you may opt out. Before any fundraising communication using information protected by 42 CFR Part 2, we will give clear advance notice and a choice about receiving it.

Other disclosures allowed or required by law

When the applicable legal conditions are met, information may be disclosed for public health; medication or product safety; required abuse, neglect, or domestic-violence reporting; preventing or lessening a serious threat; legally authorized research; health oversight; workers' compensation; organ donation; coroners, medical examiners, or funeral directors; certain government functions; and legally permitted law-enforcement purposes. We may disclose information as required by law, including to HHS for compliance review, or in response to lawful legal process when all applicable requirements are satisfied. A request or subpoena alone does not remove special protections.

Sensitive records and stronger protections

We follow New York or federal law when it provides stronger protection. This may include HIV-related information, certain mental health records, substance use disorder records, and separately maintained psychotherapy notes. General treatment consent or acknowledgment of this notice does not replace a specific authorization required by law.

If we hold substance use disorder records protected by 42 CFR Part 2, we cannot use or disclose those records in civil, criminal, administrative, or legislative investigations or proceedings against you without your written consent or a qualifying court order and subpoena. Other Part 2 requirements continue to apply. This notice is not permission to disclose those records.

Changes to this notice

We may revise this notice and apply the revised practices to information already maintained, as allowed by law. The current notice, with its effective date, will be available on request and on our website.