

IMD Solutions, Inc. Notice of Privacy Practices

Notice of Privacy Practices

Your Information. Your Rights. Our Responsibilities.

Effective Date of this Notice: April 10, 2025

This Notice of Privacy Practices (Notice) applies when IMD Solutions, Inc. is collecting, processing, holding, storing, or disclosing your individually identifiable health information that we collect as a health care provider subject to the Health Insurance Portability and Accountability Act (HIPAA) (these entities are often called

Collect and process protected health information through our IMD Solutions, Inc. GlucoGuard Product System when those Products are provided to you directly by us or by your doctor or hospital or other healthcare provider (Healthcare Provider) as a Product reimbursable (paid for by) insurance in the United States

This can include all protected information collected through the Products, but also collected and processed by IMD Solutions, Inc. through online activities and services we offer (through this and other of our websites, our online store, web surveys, newsletters, applications, email, online messaging services or channels, through our telephone customer service centers, through email or SMS/text messages, and otherwise) This Notice does not apply when we:

- Collect and process information in connection with our patient support or patient assistance programs
- Collect and process information to report adverse events or Product complaints
- Collect and process information in connection with your use of our website unrelated to your use of a Product reimbursable by insurance
- Collect and process information for any purpose other than to provide you with Products reimbursable (paid for by) insurance

Find out more about how information not subject to this Notice is used, disclosed, and your rights by visiting the IMD Solution Inc. Privacy Notice.

THIS NOTICE DESCRIBES HOW PROTECTED HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Your Rights

When it comes to your protected health information, you have certain rights. This section explains your rights and some of our responsibilities.

You have the right to:

Get a copy of your paper or electronic medical record
Ask us to correct your paper or electronic medical record
Request confidential communications
Ask us to limit the information we use or share
Get a list of those with whom we've shared your information
Get a copy of this privacy notice
Choose someone to act for you
File a complaint if you believe your privacy rights have been violated
For more information on these rights, contact us.

Your Choices

For certain protected health information, you have some choices in the way that we use and share that information. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:

Share information with your family, friends, or others involved in your care about your health care
Share information in a disaster relief situation
In some cases we never share your information unless you give us written permission, including:
For more information on these choices and how to exercise them, [contact us](#).

How We Use and Share Your Information

How do we typically use or share your health information?

We typically use or share your protected health information to:

Provide Products and services to you as part of your treatment
Run our organization
Bill for services
How else can we use or share your protected health information?
Help with public health and safety issues
Do research
Comply with the law
Work with a medical examiner or funeral director
Respond to lawsuits and legal actions
Address workers' compensation, law enforcement, and other government requests

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that compromises the privacy or security of your protected health information.

- We must follow the duties and privacy practices described in this Notice and give you a copy of it.
- We will not use or share your protected health information other than as described here unless you tell us we can in writing, which can include an electronic indication of consent. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information.

Changes to the Terms of this Notice

We can change the terms of this Notice, and the changes will apply to all protected health information we have about you. The new Notice will be available upon request and on our online websites and Products, including any online electronic source where you originally received this Notice. Please check frequently for any changes to this Notice.

Contact Us

For privacy inquiries or complaints, or to exercise any of your privacy rights, we may be contacted:

- By Email Zachary Smith at: zsmith0615@gmail.com
- Through our [privacy portal](#)
- By mail at:
IMD Solutions, Inc.
Attn: Data Privacy Officer
21163 Newport Coast Drive
Suite 576
Newport Coast, CA 92657
United States of America
privacy@imdsolutions.com
IMD Solutions, Inc., Attention: Privacy Officer, Legal Department, 21163 Newport Coast Drive, Suite 576, Newport Coast CA 92657

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