

**Daniel Meyring PA-C**  
Certified Physician Assistant  
**Professional Disclosure Statement**

**Credentials**

Bachelor of Science in Physician Assistant, St. Francis University, 1998  
Certified by the National Commission on Certification of Physician Assistants - 1998 to present  
American Academy of Physician Assistants - 1996 to present  
Advanced Cardiac Life Support and Basic Life support certification - 1997 off and on to 2014  
Drug Enforcement Agency Registered - 2000 to present  
North Carolina Physician Assistant License - 2006 to present  
Natural Family Planning Medical Consultant for NaPro Technology certification - 2011 to present  
FertilityCare Practitioner for Creighton Model System - 2011 to present  
Certificate of Added Qualifications in Psychiatry - 2022 to present

**Professional Experience and Services**

My experience began as a Physician Assistant in Family medicine outpatient, inpatient, and nursing home settings from 1998 to 2005. During which time I cared for newborns to elderly. From 2006 to 2019, I worked in outpatient internal medicine. In 2011, I began to practice more integrative medicine and cared for more complex psychiatric patients in a rural NC clinic. In 2019 I began to work in outpatient psychiatry. Since then, I have attained my Certificate of Added Qualifications in Psychiatry. I offer outpatient care for those age 13 and up for the following conditions: ADHD, Anxiety disorders, OCD, Adjustment disorder, PTSD, Major Depressive Disorder with(out) psychosis, Bipolar 1 and 2 with(out) psychosis, Cyclothymic disorder, Schizophrenia, Schizoaffective disorder, Traumatic Brain Injury, Gambling, Sex/Pornography, Post-partum conditions, Women's health Hormonal imbalances (PMS, PMDD).

**CONFIDENTIALITY**

The confidentiality of your personal health information is very important to me. At LifeCare we have a team approach and confidential information may be shared with other providers on our team as necessary to ensure the best quality of care. Your personal information is confidential within the practice. I may use and disclose your personal information without authorization for the following purposes: abuse, neglect, domestic violence, or court order. As required or permitted by law, I may disclose health information about you to a state or federal agency to report suspected abuse to self or others, neglect, domestic violence, or court order. If such a report is optional, I will use my professional judgment in deciding if to make such a report. If feasible, I will inform you promptly that I have made such a disclosure. For those who have the NC State Health Plan as their health insurance, as required by law, your demographic information will be disclosed to a state agency called NC HealthConnex.

**\*\*Recording of sessions without your provider's knowledge is forbidden.**

If you are dissatisfied with any aspect of the services provided by me, please inform me so that we can address your concerns. If we cannot come to a satisfactory resolution, you may speak further with me or with Maria Lyons, Practice Administrator. If after doing so you are still dissatisfied, you may contact the NCMB at PO Box 20007, Raleigh, NC 27619-0007.

Please see "Notice of Privacy Practices" for more detailed information about confidentiality of service and records.