



## Dr Ken Tan

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### Privacy Act 1988 Patient Consent for Collection and Disclosure of Information

**The Privacy Act 1988 requires medical practitioners to obtain consent from their patients to collect, use and disclose that patient's personal information.**

#### COLLECTION

This means that we will collect information that is necessary to properly advise and treat you. Such necessary information may include:

- Full medical history
- Family medical history
- Ethnicity
- Contact details
- Medicare and/or private health fund details
- Genetic information
- Billing/account details

The information will normally be collected directly from you. There may be occasions when we will need to obtain information from other sources, for example:

- Other medical practitioners, such as former GPs and specialists
- Other health care providers, such as physiotherapists, psychologists, pharmacists, dentists, nurses
- Hospitals and Day Surgery Units
- Medicare and Private Health Funds

Both my staff and I may participate in the collection of this information. In emergency situations we may need to collect personal information from relatives or other sources where we are unable to obtain your prior consent.

#### USE AND DISCLOSURE

**With your consent**, your information will be used and disclosed for purposes such as:

- Account-keeping and billing purposes of this practice
- Referral to another medical practitioner or health care provider
- Sending of specimens, such as blood samples or pap smears for analysis
- Referral to a hospital for treatment and/or advice
- Advice on treatment options
- The management of our practice
- Quality assurance, including development of a database for surveillance of treatment of outcomes, practice accreditation and complaint handling
- To meet our obligations of notification to our medical defence organisation or insurer
- To prevent or lessen a serious threat to an individual's life, health or safety where legally required to do so, such as producing records to court, mandatory reporting of child abuse or the notification of diagnosis of certain communicable diseases.
- If I have a My Health Record, it may be accessed during my treatment by registered healthcare practitioners at the practice

#### ACCESS

You are entitled to access your own health records at any time convenient to both yourself and the practice.

- Access can be denied where:
  - To provide access would create a serious threat to life or health
  - There is a legal impediment to access
  - The access would unreasonably impact on the privacy of another
  - The information relates to anticipated or actual legal proceedings and you would not be entitled to access the information in those proceedings
  - In the interests of national security

We ask that, where possible, your request be in writing. We may impose a charge for photocopying or for staff time involved in processing your request. Where you dispute the accuracy of the information we have recorded you are entitled to correct that information. It is our practice policy that we will take all steps to record all of your corrections and place them with your file but will not erase the original record.

#### CONSENT

I, \_\_\_\_\_ consent for Dr Ken Tan and staff to collect, use and disclose my personal information as outlined above. I consent for Dr Ken Tan and staff to share health information collected by the practice with my referring Doctor and/or other Doctors or specialists involved in my care.

**I have a My Health Record Yes / No Upload my results/reports to My Health Record Yes / No (please circle)**

I understand that I am entitled to access my own health records. I understand that I may withdraw my consent as to the use and disclosure of my personal information (except when legal obligations must be met).

Patient signature: \_\_\_\_\_ Date: \_\_\_\_\_

**I consent to have a secondary contact who is able to make enquiries/changes in regard to scheduling and accounting matters:**

**Name of contact:** \_\_\_\_\_ **Patient signature:** \_\_\_\_\_

**I understand that I can withdraw consent for this contact person at any stage of my care at Canberra Obstetric.**