

## PATIENT CONSENT TO COLLECT & DISCLOSE 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 we will collect information that is necessary to properly advise and treat you. This may include:

Full medical history	Family medical history	Genetic information
Contact details	Medicare/Private health fund details	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 GP's and specialists
- Other health care providers, such as physiotherapists, dentist, nurses
- Hospitals and Day Surgery Units.

Our practice staff and the medical practitioners may participate in this 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 express consent.

### USE & DISCLOSURE

With your consent, the practice staff will use and disclose your information for purposes such as:

- Account keeping and billing purposes
- Referral to another medical practitioner or health care provider
- Sending of specimens, such as blood samples for analysis
- Referral to a hospital for treatment and/or advice
- Advice on treatment advice
- The management of our practice
- Quality assurance, practice accreditation and complaint handling
- To meet obligations of notification to our medical defence organisations or insurers
- To prevent or lessen a serious threat to an individuals life, health or safety and
- Where legally required to do so, such as producing court records, notification of diagnosis of certain diseases.

### 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 serious threat to life or health
- There is a legal impediment to access, or Your request is frivolous
- 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: and
- In the interests of national security

We ask that your request be in writing. There is a small charge for printing costs and 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. We will not erase the original record.

### CONSENT

I provide my consent for **Bunbury Orthopaedic & Sports Surgery (Dr Harry Stock and Dr Allen Chong)** to collect, use and disclose my personal information as outlined above. I understand that I am entitled to access my own health records except where access would be denied as outlined above. I understand that I may withdraw consent as to use and disclosure of my personal information (except when legal obligations must be met)

PATIENT NAME: \_\_\_\_\_

WITNESSED BY: \_\_\_\_\_

SIGNED: \_\_\_\_\_  
(patient)

DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_.