## Patient Privacy Consent Form

Privacy of your personal information is an important part of our office protocol to provide you with quality dental care. We understand the importance of protecting your personal information. We are committed to collecting, using and disclosing your personal information responsibly. We also try to be as open and transparent as possible about the way we handle your personal information. It is important to us to provide this service to our patients. In this office, **Dr. Neeraj Pershad** acts as the Privacy Information Officer. All staff members who come in contact with your personal information are aware of the sensitive nature of the information that you have disclosed to us. They are all trained in the appropriate uses and protection of your information.

Attached to this consent form, we have outlined what our office is doing to ensure that:

- only necessary information is collected about you;
- we only share your information with your consent;
- storage, retention and destruction of your personal information complies with existing legislation, and privacy protection protocols;
- · Our privacy protocols comply with privacy legislation, standards of our regulatory body, the Royal College of Dental Surgeons of Ontario, and Federal law.

## How Our Office Collects, Uses and Discloses Patients' Personal Information

- to deliver safe and efficient patient care
- to identify and to ensure continuous high quality service
- to assess your health needs
- to provide safe health care
- to advise you of treatment options
- to enable us to contact you
- to establish and maintain communication with you
- to offer and provide treatment, care and services in relationship to the oral and maxillofacial complex and dental care generally
- to communicate with other treating health-care providers, including physicians, specialists and general dentists who are the referring dentists and/or peripheral dentists
- · to allow us to maintain communication and contact with you to distribute health-care information and to book and confirm appointments
- · to allow us to efficiently follow-up for treatment, care and billing
- for teaching and demonstrating purposes on an anonymous basis
- to complete and submit dental claims for third party adjudication and payment
- to comply with legal and regulatory requirements, including the delivery of patients' charts and records to the Royal College of Dental Surgeons of Ontario in a timely fashion, when required, according to the provisions of the Regulated Health Professions Act
- to comply with agreements/undertakings entered into voluntarily by the member with the Royal College of Dental Surgeons of Ontario, including the delivery and/or review of patients' charts and records to the College in a timely fashion for regulatory and monitoring purposes
- to prepare materials for the Health Professions Appeal and Review Board (HP ARB)
- to invoice for goods and services
- to process payments
- to assist this office to comply with all regulatory requirements
- to comply generally with the law

Dr. Pershad will attempt to answer any questions or concerns that you might have. If you do have a concern and/or wish to make a complaint to us about our privacy practices, including asking questions about the contents of your charts or records, you must make your request in writing. Please send it to our office's Privacy Information Officer by surface mail. Our Privacy Information Officer will promptly acknowledge receipt of your complaint in writing and will insure that it is investigated thoroughly. You will be provided with a formal decision in writing and the reasons for the decision. If you are dissatisfied with the decision, you may seek further information from the Privacy Commissioner of Canada. We have included all the necessary contact information listed below.

## Privacy Commissioner of Canada, 112 Kent Street, Ottawa, On. KIA IH3 Phone: 613 995-8210 Toll Free: 1 800 282-1376

Our privacy policies and procedures comply with federal legislation called the Personal Information Protection and Electronic Documents Act (PIPEDA). This very complex law does provide for some exceptions to the privacy principles that are too detailed to outline here. Our Privacy Code sets out this dental office's commitment to protecting your private health and personal information. It is available on request by asking any of our office staff.

By signing the consent section of this Patient Consent Form, you have agreed that you have given your informed consent to the collection, use and/or disclosure of your personal information for the purposes that are listed. If a new purpose arises for the use and/or disclosure of your personal information, we will seek your approval in advance.

Your information may be accessed by regulatory authorities under the terms of the *Regulated Health Professions Act* (RHPA) for the purposes of the Royal College of Dental Surgeons of Ontario fulfilling its mandate under the RHPA. Our office will not under any conditions supply anyone with your confidential medical history. In the event this kind of a request is made, we will forward the information directly to you for review, and for your specific consent.

When unusual requests are received, we will contact you for permission to release such information. We may also advise you if such a release is inappropriate. You may withdraw your consent for use or disclosure of your personal information, and we will explain the ramifications of that decision, and the process.

## **Patient Consent**

		1	y personal information, and the steps your office is taking to protect my information. I ime. I agree that <b>Dr. Neeraj Pershad</b> can collect, use and disclose personal information
about		as set out above in the information a	bout this office's privacy policies.
(.	Patient Name)		
Signature		Print Name	
Date		Signature of Witness	-