



YOUR HEALTH INFORMATION AND OUR PRIVACY POLICY

In accordance with the Privacy Act 2000

Our practice respects your right to privacy. We realise that it is important that you understand the purpose for which we collect details about your health, as well as how this information is used at our practice and to whom this information might be disclosed.

The policy of our practice is to follow these procedures:

1. The information collected on this form will be used for the purpose of providing treatment to you. Personal information such as your name, address and health insurance details will be used for the purpose of addressing accounts to you, as well as processing payments and writing to you about any issues affecting your treatment.
2. We may disclose your health information to other health care professionals, or require it from them if, in our judgement, that is necessary in the context of your treatment. In this event, disclosure of your personal details will be minimized wherever possible.
3. We may also use parts of your health information for research purposes, in study groups or at seminars as this may provide benefit to you and other patients. Should this occur, your personal identity will not be disclosed without your consent to do so.
4. Your patient history, treatment records, x-rays and any other materials relevant to your treatment will be kept here. You may inspect or request copies of your treatment records at any time, or seek an explanation from the dentist. If you want copies, a fee will apply. If you request an explanation of your records or a written summary, a consultation fee or other charge may apply.
5. If any information we have about you is inaccurate, you may ask us to alter our records accordingly.
6. Should you experience a medical emergency while attending our practice, our clinicians reserve the right to call an ambulance for you if we believe the situation warrants this. Whether you consent to travel by ambulance to Coffs Harbour Base Hospital will then be at your discretion.
7. Photographs and xrays taken during your appointment will be stored as a record of your care and may be used for educational purposes in lectures, advertising, demonstrations and professional publications (dental magazines and journals). In these circumstances your name and other identifying information will be kept confidential. These images are commonly used in communicating with laboratories involved with your treatment when fabricating crowns, veneers, bridges and dentures. Laboratory records will contain your name.

You can otherwise rest assured that your health information will be treated with the utmost confidentiality. Disclosure of sensitive information will not be made to any person not involved in either your treatment or the administration of this practice without your prior written consent. If you have any queries or concerns about our handling of your health information, please do not hesitate to raise these concerns with our practice.

Otherwise, please sign this form as confirmation that you have read and understood our privacy policy and consent to the use of your information in this way.

Print Name:

Signature:

Date: