

## **Collection, Use & Disclosure of Personal Health Information**

Privacy of your personal health information is an important part of our office providing you with quality dental care. We understand the importance of protecting your personal health information. We are committed to collecting, using, and disclosing your personal health information responsibly. We also try to be as open and transparent as possible about the way we handle your personal health information. It is important to us to provide this service to our patients.

In this office, Dr. Randy Davey is the contact person for personal health information related matters.

All staff members who come in contact with your personal health 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 and/or your child;
- We only share your information with your consent;
- Storage retention and destruction of your personal health 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 the law.

Do not hesitate to discuss our policies with me or any member of our staff. Please be assured that every staff person in our office is committed to ensuring that you and or your child receive the best quality dental care.

### **How Our Office Collects, Uses & Discloses Patients' Personal Health Information**

Our office understands the importance of protecting your personal health information. To help you understand how we are doing that, we have outlined here how our office is using and disclosing your information.

This office will collect, use and disclose personal health information about you for the following purposes:

- To deliver safe and efficient patient care
- To identify and to ensure continuous high quality service
- To assess your health needs
- To provide health/dental 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 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 & billing
- To complete and submit dental claims for third party adjudication and payment
- To comply with legal and regulatory requirements, including the delivery of patient's charts and records to the Royal College of Dental Surgeons of Ontario in a timely fashion, when required, according to the provisions of 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 permit potential purchasers, practice brokers, or advisors to evaluate the dental practice
- To allow potential purchasers, practice brokers, or advisors to conduct an audit in preparation for a practice sale
- To deliver your charts and records to the dentist's insurance carrier to enable the insurance company to assess liability and quantify damages, if any
- To prepare materials for the Health Professions Appeal & Review Board (HPARB)
- To invoice for goods & services
- To process credit card payments
- To collect unpaid accounts
- To assist this office to comply with all regulatory requirements

You may withdraw your consent for use or disclosure of your personal health information at any time.

#### Patient Consent

I have reviewed the above information that explains how our office will use my/my child's personal health information, and the steps our office is taking to protect my/my child's information.

I agree that Dr. Davey & Davey Family Dentistry can collect, use & disclose personal health information about myself and/or my child as set out above in the information about the office's privacy policies.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### Email/Social Media Consent

In an effort to improve our communication with our patients, we would like to send some of our communications to you through emails, texts, or social media. To comply with the Canadian Anti-Spam Legislation (CASL) our dental office would like to have your express consent to communicate in this manner. If you decide to opt in and continue receiving emails/txts etc, please know that you may opt out at any time and withdraw your consent.

Please sign below to give us permission or cross out any part you would like to decline:

Yes, I consent to our family receiving information via emails, texts, and/or social media from Davey Family Dentistry:

Signature: \_\_\_\_\_