

Patient Name: _____



Privacy Policy

Privacy of your personal information is an important part of Downtown Core Chiropractic Centre (the "Centre") providing you with quality health care. We understand the importance of protecting your personal information. We are committed to the collection, use, and disclosure of your personal information in a responsible manner. We attempt to be as open as possible about the way we handle your personal information. This is an important service we provide to our patients.

The Privacy Information Officers for Downtown Core Chiropractic Centre are:

Dr. Doris Mertins and Dr. Darcie Sinclair
Downtown Core Chiropractic Centre
Royal Bank Plaza, North Tower PO Box 134, 200 Bay Street, Toronto, ON M5J 2J3
Telephone: 416-368-4858
Fax: 416-368-9305
Email: info@downtowncore.ca

All Centre staff members who come in contact with your personal information are aware of the sensitivity of the information that you have disclosed to us. The staff is trained in the appropriate uses and protection of your information. We will ensure that:

- only necessary information is collected about you
- we only share information with your consent
- collection, use, storage, and destruction of your personal information complies with existing legislation, privacy protection protocols, and the standards of our regulatory body, the College of Chiropractors of Ontario and the law

Please do not hesitate to discuss our policies with Doctors Mertins or Sinclair or any one of our staff.

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

We understand the importance of protecting your personal information. To help you understand how we are doing that, we have outlined here how the Centre is using and disclosing your information.

The Centre will collect, use and disclose information about you for the following purposes:

- to deliver safe and efficient health care
- to ensure high quality service
- to assess your health care needs
- to advise you of your treatment options
- to provide you with health care
- to enable us to contact you (including for marketing purposes), including by E-mail, telephone or regular mail
- to establish and maintain communication with you
- to communicate with other treating health-care providers
- to allow us to maintain communication 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
- to complete and submit claims for third party adjudication, pre-approval when necessary, and payment including but not limited to the Ministry of Health and Long Term Care, Workers' Safety and Insurance Board, the insurance provider particular to your individual case
- to comply with legal and regulatory requirements, including the delivery of patient records to the College of Chiropractors of Ontario in a timely fashion, when required, according to the provisions of the *Regulated Health Professions Act*

Dr Doris Mertins ___ **Dr Darcie Sinclair** ___ **Dr Roberta Da Re** ___

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- to comply with the College of Chiropractors of Ontario Peer Review Program which assures protection of the public, through the development of programs to assist in establishing, maintaining and improving the base line standards of knowledge, skill and competency of College of Chiropractors of Ontario members
- to permit potential purchasers, practice brokers or advisors to evaluate and/or audit the chiropractic and acupuncture practice in preparation for a practice sale
- to allow potential purchasers to purchase and the successful purchaser use your personal information but only in connection with the sale of the Centre's practice or goodwill/files
- to deliver your charts and records to the chiropractor's insurance carrier to enable this carrier to assess liability and quantify damages, if any
- to invoice for goods and services
- to process credit card, debit and cheque payments
- to assist the centre to comply with all regulatory requirements
- to comply generally with the law

The Centre's website www.downtowncore.ca provides information about our services. Our Internet servers may passively and automatically collect certain information about website visitors' traffic patterns, which may be linked to their Internet Protocol (IP) addresses (which are unique Internet "addresses" assigned to all Internet users by their Internet Service Providers). Server logs may record statistical information, such as visitors' IP addresses, type of operating systems, time and duration of visit, pages requested, and identify categories of visitors by items such as domains and browser types. These statistics are generally collected and used on an aggregate basis.

Our website may make use of cookies. Cookies are small text files offered to your computer by servers in order to keep track of your browser as you navigate the website. Cookies may be stored on your hard drive in which case they remain on your hard drive until deleted, or in temporary memory in which case they are deleted when you shut down your browser or turn off your computer. We may use cookies to record session information, such as your browsing habits and past activity, to enable us to provide you with improved services such as customized Web page content. You can disable cookies using your Internet browser's settings. Please consult your browser's help function for information on how to disable cookies. Note that if you disable cookies, certain features of our website may not function properly.

By signing the consent section of our Patient Consent Form, you will have agreed that you have given your informed consent to the collection, use, storage and/or disclosure of your personal information for the listed purposes.

We reserve the right to modify or change this Privacy Policy or the privacy practices set out in this Policy from time to time. If the Centre makes a material change, this Privacy Policy will be updated accordingly and the revised version will be posted on our website in a timely manner.

Our office will not under any conditions supply anyone with your confidential medical history. In the event that this kind of a request is made, we will forward the information directly to you for review and your specific consent. You may withdraw your consent for use and/or disclosure of your personal information at any time and we will explain the ramifications of that decision, and the process.

PATIENT CONSENT

I have reviewed the Privacy Policy and understand how the Centre will use my personal information, and the steps the Centre is taking to protect my personal information. I consent to the collection, use and disclosure of my personal information for the purposes described in your Privacy Policy, as amended from time to time.

I have been advised that the Privacy Policy, as amended from time to time, is also available at the Clinic's website www.downtowncore.ca and is also available for review at the Clinic's office during normal business hours.

Signature _____ Print Name _____

Date _____ Witness _____

Dr Doris Mertins ___ **Dr Darcie Sinclair** ___ **Dr Roberta Da Re** ___