

Privacy Policy/Consent to collect



In order to provide quality chiropractic care it is necessary for us to collect patient information and sometimes disclose this information to relevant medical and allied health personnel. Roar Chiropractic's privacy policy has been created to protect patients privacy in compliance with current legislation, in particular the Australian national privacy principles (NPP).

Information Collection

We will collect personal information that is needed in order to treat you such as past medical history, contact details, medical history of importance in your family, Ethnicity, genetic information, medicare details, private health fund details, personal bank details (if required) and patient identifying data.

In some instances information about you may be collected from 3rd party sources such as hospitals, surgery units, specialists, other medical professionals and other allied health professionals.

The collection of your information may be collected by any of our practice staff members (practitioners or receptionists). In emergency situations we may need to collect personal information from relatives or other sources where we are unable to obtain your prior consent.

Use & Disclosure

With your consent, Roar Chiropractic will use and disclose your information for purposes such as: Referral to another allied health provider or for further diagnostic test such as x-rays or other diagnostic test. Billing and account keeping processes within the clinic, referral to a hospital for treatment options, quality assurance, practice accreditation and complaint handling, To meet our obligations of notification to our medical defence organizations or insurers, to prevent or lessen a serious threat to an individual's life, health or safety, and where legally required to do so, such as producing record to court, mandatory reporting of child abuse or the, notification of diagnosis of certain communicable diseases.

Access

You are entitled to access your own health record at any time convenient to both yourself and the practice. Access can be denied where: To provide access would create a serious threat to life or health, There is a legal impediment to access or if your request is frivolous, 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 interest of national security. Request are to be written to the clinic and may attract a processing fee. You are entitled to correct any information you dispute but we will not erase the original copy.

Consent

I provide my consent for the Roar Chiropractic staff 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 my consent as to use and disclosure of my personal information (except when legal obligations must be met).

I am aware that a \$40 fee can occur (at the discretion of the clinic director) if an appointment is cancelled without 4 hours prior notice.

