



Program Document No.: 12010.00		Subject: MFR Documentation Standards / PCR Completion		Type: Policy	
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Replaces:	None	Revision Date 04:	March 24, 2010		
Signature of Director, EHS Provincial Programs: 			Signature of Senior Manager, EHS MFR Services: 		

1.0 Purpose:

- 1.1 To ensure the control of patient care information and records are administered in a confidential and uniform manner.

2.0 Procedure:

- 2.1 EHS has an obligation to protect a patient's rights to privacy and therefore must not disclose any personal health information to third parties without the patient's expressed consent (in writing) or as required by a court order to do so.
- 2.2 All requests for patient care information must be forwarded in writing to:
Director, EHS Provincial Programs
237 Brownlow Avenue, Suite 160
Dartmouth, NS B3B 2C5
- 2.3 All media information requests regarding calls or patients are to be forwarded to EHS via the Medical Communications Centre.
- 2.4 MFRs are responsible to secure all Patient Care Records. All Patient Care Records must remain in a secure area out of the public eye, prior to their final submission to:
EHS MFR Services
239 Brownlow Avenue, Suite 300
Dartmouth, NS B3B 2B2
- 2.5 Discussion regarding a patient's personal health information shall not take place in the presence of persons not entitled to such information or in public places (i.e. coffee shops, workplaces, etc.).
- 2.6 The Chief/MFR Coordinator or delegate will send the completed Patient Care Records to EHS MFR Services on a regular (i.e. monthly) basis.



AGENCY NAME: _____

Confidentiality is not something to take lightly. Releasing information, whether Patient Care Reports, your own personal notes, or even just discussing personal information about a patient, is a violation of the patient’s right to privacy. EHS is obligated to ensure those rights are protected at all levels of patient care and contact.

Please review **Program Document No. 12010.00: MFR Documentation Standards/CPR Completion** and sign below as having read and understood this policy as it relates to patient confidentiality.

<i>Name (please print clearly)</i>	<i>EHS MFR Reg #</i>	<i>Signature</i>

Submit completed form to
EHS MFR Services
239 Brownlow Avenue, Suite 300
Dartmouth, NS B3B 2B2
Fax: (902) 832-8602