



Greenwoods™

Dental & Surgical Centres

★ **693 McPhillips Street, Winnipeg, Manitoba R2X 2H6** (204) 774-7774 Fax (204) 633-1143

249½ Henderson Highway, Winnipeg, Manitoba R2L 1M3 (204) 775-7775 Fax (204) 667-6229

246 Portage Avenue, Winnipeg, Manitoba R3C 0B1 (204) 779-7779 Fax (204) 594-5768

1531 Pembina Highway, Winnipeg, Manitoba R3T 2E5 (204) 221-2221 Fax (204) 504-5111

1462 Regent Avenue West, Winnipeg, Manitoba R2C 3A8 COMING SOON

1128 Richards Street, Vancouver, BC V6B 3E6 (604) 566-7666 Fax (604) 566-7660

PERSONAL INFORMATION CONSENT FORM

We are committed to protecting the privacy of our patients' personal information and to utilizing all personal information in a responsible and professional manner. This document summarizes some of the personal information that we collect, use and disclose. In addition to the circumstances described in this form, we also collect, use and disclose personal information when permitted or required by law.

We collect information from our patients such as names, home addresses, employer address, home and work telephone numbers, and email addresses. (Collectively referred to as "contact information"). Contact information is collected and used for the following purposes:

- To open & update patient files.
- To invoice patients for dental services, to process credit card payment, or to collect unpaid accounts.
- To process claims for payment or reimbursement from third-party health benefit providers and insurance companies.
- To send reminders to patients concerning the need for further dental examinations or treatment.
- To send patients informational material about our dental practice.
- To send referral to specialist and other providers for further follow up treatment if required or advised.

Contact information is disclosed to third party health benefit providers and insurance companies where the patient has submitted a claim for reimbursement or payment of all or part of the cost of dental treatment or has asked us to submit a claim on the patients behalf.

Financial information may be collected in order to make arrangements for the payment of dental services.

We collect information from our patients of their health history, family health history, physical conditions, and dental treatments. (Collectively referred to as "medical information") Patients' medical information is collected and used for the purpose of diagnosing dental conditions and providing dental treatment.

Patients' Medical information is disclosed:

- To third party health benefit providers and insurance companies where the patient has submitted a claim for reimbursement or payment of all or part of the cost of dental treatment or has asked us to submit a claim on their behalf.
- To other dentists and dental specialist, where we are seeking a second opinion and the patient has consented to us obtaining the second opinion.
- To other health care professionals such as physicians if the patient, with their consent, has been referred by us to the other health care professional for a second opinion or treatment.

If we are ever considering selling all or part of our dental practice, qualified potential purchasers may be granted access as part of the due diligence process to patient information in order to verify information important to the potential sale. If this occurs we will take steps to ensure that the prospective purchaser safeguards all personal information.

Dentists are regulated by the Manitoba Dental Association which may inspect our records and interview our staff as part of its regulatory activities in the public interest.

I consent to the collection, use and disclosure of my personal information as set above.

PRINT NAME

SIGNATURE

DATE