

Access Request Form - Ontario

PHYSICIAN SECTION:

Under Section 24 of Ontario Regulation 329/04, as the requesting health care practitioner, I authorize the patient signing below to receive a copy of the report(s) resulting from (check one or both):

the test requisition referenced below all of my subsequent test requisitions for this patient

Physician's Name (please print): _____

Physician's Billing #: _____

Physician's Signature: _____ Date: _____

PATIENT SECTION:

To help identify the correct test requisition in our system, please provide the following information.

Patient name: _____

Date of birth (dd/mm/yyyy): _____ Health card #: _____

Address where sample collected: _____

Date of visit (dd/mm/yyyy): _____

I request that the results be sent to the address below. Note that the LifeLabs logo and the name provided below will appear on the outside of the envelope.

Name on envelope: _____

Street/PO Box: _____

City & Province: _____ Postal Code: _____

For each printed report requested, LifeLabs charges a fee of **\$25.00**.

Please select your method of payment (**do not send cash**):

Credit Card: Card type (Visa, M/C, AMEX): _____

Name on card: _____

Card number: _____ Exp. date: _____

Cheque or Money Order (made payable to "LifeLabs")

The undersigned patient authorizes and consents to LifeLabs printing and mailing the requested copies of reports to the address provided above.

Signature: _____ Date: _____

Note: it may take up to thirty (30) days to process your completed request, once received.

If you require assistance or guidance in completing this form, please contact our Privacy Office by telephone at 416-675-4530 ext 2873, or by sending an e-mail to privacy@lifelabs.com

REQUESTING COPIES OF YOUR TEST RESULTS FROM LIFELABS - ONTARIO

LifeLabs is a national medical laboratory services company. Each year, we provide results from more than 50 million laboratory tests, for over 10 million patients, to nearly 20,000 physicians across three Canadian provinces.

In Ontario, the handling of Personal Health Information (PHI) is governed by the Personal Health Information Protection Act of 2004 (PHIPA). LifeLabs strives to comply with PHIPA in everything we do, particularly when disclosing PHI. However, as a *community laboratory* operating in Ontario, Section 24 of Ontario Regulation 329/04 stipulates that we may not release test results directly to patients, except at the direction of the requesting physician.

In most cases, individuals should access their laboratory test results via their physician or health care provider. Test results are more meaningful when they are explained in relation to your current health state and medical history.

To accurately capture your physician's intention, and in compliance with Section 53.1 of PHIPA (ie. - that such access requests for PHI be made in writing), LifeLabs has produced an Access Request Form to help guide and streamline the request process. A copy of the form can be found on the other side of these instructions.

FILLING OUT THE ACCESS REQUEST FORM

Once you have a copy of the Access Request Form, take these three steps in the order shown:

1. Fill in the *Patient* section as completely as you can, and sign where indicated.
2. Have the health care practitioner who requested the tests complete and sign the *Physician* section.
3. When both sections are complete, mail the form, along with your payment (*do not send cash*) to our Privacy Office at the address below.

In compliance with PHIPA, completed requests will be processed, and a response mailed out within thirty (30) days. Incomplete forms will be sent back to the requester, with a letter explaining any deficiency. Please note that for security reasons, we will neither accept requests via e-mail or fax, nor will we provide copies of test results via e-mail or fax.

Fees: as permitted by Section 54 of PHIPA, LifeLabs charges a fee of \$25 for each set of results requested.

FOR MORE INFORMATION

For more information about our privacy-related practices, please visit our website at www.lifelabs.com and click on the "Privacy" link at the bottom of the page. If you have detailed questions, please feel free to contact us by e-mail at: privacy@lifelabs.com or

by regular mail at: **LifeLabs
attn: Privacy Office
100 International Blvd.
Toronto, Ontario, M9W 6J6**

For help in acquiring additional copies of this document, please call our Customer Care Centre at any time of the day or night, by calling: **416-675-3637** or toll free at **1-877-849-3637**

TM/G/14/08

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Privacy Office

24-Sep-08