

CONFIDENTIALITY STATEMENT

It is Hospital Policy and law that all Hospital information is confidential. As a regular or temporary employee, student or volunteer of Hotel Dieu Hospital, you may handle recorded confidences between doctor and patient and/or information regarding personnel.

All Hospital records are to be treated as confidential material, to be protected for the privacy of the patient and the employee. No one is expected to read or discuss records unless his/her job so requires. Furthermore, no confidential information is to be discussed outside the Hospital

Confidentiality is the right of every patient and everyone affiliated with the Hospital. Each of us is expected to respect that right.

I HAVE READ AND UNDERSTAND THE ABOVE STATEMENT. I AGREE TO ABIDE BY THE HOSPITAL POLICY AS A CONDITION OF EMPLOYMENT, AS A STUDENT, REGULAR EMPLOYEE, TEMPORARY EMPLOYEE, OR AS A VOLUNTEER WITH HOTEL DIEU HOSPITAL.

EMPLOYEE, STUDENT OR VOLUNTEER SIGNATURE	WITNESS
DATE	DATE
To ensure our records are correct, please provide the following information:	
Name: Address:	Telephone:
Emergency Contact:	Telephone:
Status: Regular Employee Temporary Employe	ree Student Volunteer
Position:	Dept:
Reporting To:	Revised Sept/03