St George Private Hospital Nuclear Medicine

Online Images and Report Access Registration Form

To obtain a login and password for electronic image download, please fill in the following details:

Surname Name: _____   First Name: _____

Provider Number: _____   Phone Number: _____

Email address: _____

Practice address: _____

If you are one of the doctors at a medical centre and would like to review all of the images of the patients referred by your medical centre, a **group/medical centre login and password** can also be arranged. Please fill in the following section with all of the medical doctors' details.

Practice Address: _____

Practice email address: _____

Phone Number: _____   Fax Number: _____

Surname	First Name	Provider Number

Please return by FAX to: (02) 9598 5494.

Once we receive this form, we will email you a direct link to our online PACS with your login name and password.

If there is any enquiry, please do not hesitate to contact Phoebe on (02) 9598 5488. Thank you.

Privacy and Confidentiality Agreement for St George Private Nuclear Medicine Online PACS Access

As part of my role I am required to understand and agree to the following:

1. I will only access information I need to undertake my role.
2. I will not misuse, disclose, copy, release, sell, alter or destroy any confidential information unless it is part of my role.
3. I will only use shared passwords and login names in authorized situations.
4. I will protect the privacy of St. George Private Nuclear Medicine patients and employees.
5. I am responsible for my use or misuse of confidential information.

By signing this, I/we agree that I/we have read, understand and comply with this agreement:

Printed Name: _____

Organization: _____

Provider No.: _____

Email: _____

Phone No: _____

Fax No.: _____

Signature: _____   Date: _____