



Revocation declaration by a legal representative for the electronic patient record at Post Sanela Health Ltd (Operator organisation of the Sanela reference community)

Information about the patient for whom the legal representative will revoke the patient record:

Surname*:

First name*:

Date of birth*:

Gender*:
(male/female/other)

Street:

Postcode and place of residence*:

Country*:

OASI number (13 digits)*:

Details of the legal representative:

Surname*:

First name*:

Date of birth*:

Gender*:
(male/female/other)

Street:

Postcode and place of residence*:

Country*:

Email address*:

Mobile phone number*:

*Required field



I hereby revoke the consent for the electronic patient record held by Post Sanela Health Ltd (operator organisation of the Sanela reference community) for the patient mentioned.

Revocation of the EPR leads to the deletion of all documents in the EPR, but not to the deletion of the original documents in the practice and the clinic information systems of the healthcare institutions. We recommend that you download and save all documents before revoking your consent.

A new EPR can be set up again at any time after the revocation. A new patient identification number will be assigned. The new EPR will not contain any documents when it is set up.

The revocation declaration is kept for 10 years.

Confirmation by the legal representative

- I hereby confirm that I am authorised to act as the representative of the patient mentioned above.

Date:

Signature of legal representative:

Required documents:

- Representative certification (family register, decision on guardianship, support, etc.)
- Copy of patient's ID

Send to: Post Sanela Health Ltd, Sanela reference community, Pfingstweidstrasse 60b, 8005 Zurich

To be completed by central services of the reference community:

Revocation received on (date and time):

Documents checked:

Revocation carried out (PADM, date, signature):

Letter to patient with confirmation of revocation: