



Version number: 2.2

Declaration of consent to the creation of an electronic patient record by Post Sanela Health Ltd (operating organisation of the Sanela Reference Community)

Surname:										
First name:										
Date of birth:										
Sex:										
(male/female/other)										
Street:										
Post code and place of residence:										
Country:										
Email address:										
Mobile phone number:										
EPR with another reference community:		Yes	<input type="checkbox"/>		No	<input type="checkbox"/>				
Which reference community:										
		<i>The declaration of consent will take effect as soon as the necessary access authorisations have been set up on the respective EPR.</i>								
OASI-number (13 digits):			.		.		.			

I hereby consent to the registration of any data concerning my health that are relevant for treatment by the healthcare professionals providing treatment to me in my electronic patient file. The healthcare professionals authorised by me to access the file may consult any documents that are relevant for treatment in the event that they are providing treatment, and if necessary transfer these documents into their own information system. Under the Swiss Data Protection Act I have a comprehensive right to information and to obtain the correction or incorrect data. I acknowledge the GTC of Post Sanela Health AG and the information brochure concerning the EPR.

I have the right **to revoke this declaration at any time.**

Date:									
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Signature:									
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Post Sanela Health Ltd

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