 YOUR PRIVACY

 For proper treatment it is necessary that I, as your treating homeopath, create a file.  This is also a legal obligation imposed by the WGBO.  Your file contains notes about your state of health and information about the examinations and treatments carried out.

 The file also contains information that is necessary for your treatment and that I, after your explicit permission, or you have requested from another healthcare provider, for example from the general practitioner.

 I do my best to ensure your privacy.  This means, among other things, that I:

 handle your personal and medical data with care;

 ensure that unauthorized persons do not have access to your data.

 As your treating homeopath, I have sole access to the data in your file.

 I have a legal duty of confidentiality (professional secrecy).

 The data from your file can also be used for the following purposes:

 to inform other care providers, for example when the treatment has been completed or when a referral is made to another practitioner.  This only happens with your explicit consent;

 for the use of observation, in my absence;

 for the anonymized use during peer review, after your explicit consent;

 a small part of the data from your file is used for the financial administration, so that I can draw up an invoice;

 the financial overview that my accountant uses for annual tax returns and financial reports only contains your last name.

 If, for another reason, I want to use your data, I will first inform you and explicitly ask for your permission.

 The data in the patient file will be kept for 20 years (as required by law on treatment agreements).

 PRIVACY ON THE CARE NOTE

 The care bill you receive contains the information requested by the health insurer, so that you can declare this bill to your health insurer:

 your name, address and place of residence;

 your date of birth;

 the date of the treatment;

 a short description of the treatment, 'homeopathic consultation';

 the cost of the consultation.

 Signed for seen and agreed

 Name

 Signature                                                                         Date and place

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