

## Information and Instructions

Only the patient, substitute decision maker (SDM), or authorized legal representative may make requests for access to patient personal health information. We provide access to personal health information, unless a legal exception applies. We review all health record access requests, and make every effort to respond to each request within thirty (30) days of receipt of the request.

Please complete this form and submit the completed request to the Release of Information Specialist (address below) or by email:

[relinfo@stjoes.ca](mailto:relinfo@stjoes.ca)

\* For information about our privacy protection practices visit our website at [www.stjoes.ca/privacy](http://www.stjoes.ca/privacy)

## Part A: Patient / Requestor Information

Name: \_\_\_\_\_  
First Last Initials

Address: \_\_\_\_\_  
Street Unit/Apt. # City / Province Postal Code

Telephone Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
yyyy/mm/dd

Email Address: \_\_\_\_\_

**If you are the substitute decision maker (SDM), please provide your contact information and append copies of documentation confirming your authority:**

Name: \_\_\_\_\_  
First Last Initials

Address: \_\_\_\_\_  
Street Unit/Apt. # City / Province Postal Code

Telephone Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
yyyy/mm/dd

Email Address: \_\_\_\_\_

## Part B: Access Request

Please describe what information you are looking for and include details that will help us locate your record (Example: dates, name of healthcare provider, etc. - 1500 character limit).

How would you prefer to access this information? Please indicate with a check mark.

Receive photocopies of originals     Receive records by secure email

**NOTE: All requests are subject to a \$30 processing fee and additional copying fees where applicable.**

\_\_\_\_\_  
Signature (type or sign) Printed Name Title Date (yyyy/mm/dd)

**Charlton Campus**  
 50 Charlton Ave., East,  
 Hamilton, ON, Canada L8N 4A6  
 Tel: 905.522.1155 x 33417  
 Fax: 905.521.6096

**King Campus**  
 2757 King Street East  
 Hamilton, ON, Canada L8G 5E4  
 Tel: 905.522.1155

**West 5th Campus**  
 100 West 5th Street  
 Hamilton, ON, Canada L8N 3K7  
 Tel: 905.522.1155 x 35504  
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