



CONSENT FOR DISCLOSURE OF PERSONAL HEALTH INFORMATION

Disclosure – is the exposure of personal health information to a separate entity, not a division or branch of the trustee in custody or control of that information. An example of disclosure includes the permitted release of patient information to a third-party by the Saskatchewan Health Authority (SHA).

Authorization:	
I, _____, hereby authorize the _____ (Full name of individual, guardian, or legal representative) (Program/Facility)	
to release the following specified health information to _____ (Person/Company/Agency authorized to receive health information)	
Relationship to patient (if not the patient): _____	
Authorizer's Telephone Number: Home (____) _____ - _____ Cell (____) _____ - _____	

Whose Information is Being Requested?	
First and Last Name (as appears on health card)	
Health Services Number (province of issue included)	Date of Birth (dd-mmm-yyyy)

Personal Health Information Requested <i>(If possible, please provide dates and locations where services are provided):</i>

Address of Person/Company/Agency Authorized to Receive Health Information:	
Address: _____	Town/City: _____
Province/State: _____	Country: _____ Postal or Zip Code: _____
Telephone Number: (____) _____ - _____	Fax Number: (____) _____ - _____

You will be contacted within **30 days** of the receipt of request. If the information is available you will be charged a processing fee in accordance with health information management policy, or a **\$20.00** fee for examining records with an SHA representative.

Check if you are requesting a waiver of fees due to a financial hardship.

(Printed Name of applicant)

(Signature of applicant)

(Date)

- Receive copies of originals
- Pick up only
- Fax
- Mail to address above
- Examine originals with an SHA representative *(appointment required)*

Please refer to the Access Guidelines for appropriate facility mailing address.

For administrative use only:	
Received by: _____	Date received: _____
Verify: <input type="checkbox"/> Government issued identification <input type="checkbox"/> Permission to contact by telephone <input type="checkbox"/> Permission to leave message at above telephone number	
Fees waived: _____	Approved by: _____



Authorization for the Release/Disclosure of Information

- Enter your first and last name (as the patient, guardian or legal representative).
- Specify the specific program or facility you are authorizing to release the information.
- Specify the person, company or agency you are authorizing to receive the health information.
- Enter the telephone number at which you (the authorizer) may be contacted during business hours.

Whose Information is Being Requested?

- Enter the last name and first name of the patient (as it appears on the Health Card).
- Enter the Health Services Number and date of birth of the patient.

Personal Health Information Requested

Please be as specific as possible in completing this part of the form. This will assist the Saskatchewan Health Authority in responding to your request accurately, completely and quickly.

- List the precise records or information you are requesting (e.g.: records relating to an outpatient visit).
- Provide the name of the facility that provided the health services (e.g.: Saskatoon City Hospital).
- Specify the time period when the patient received health services (this will allow staff to retrieve records relating to those services).
- Identify the clinic, program or area that provided the services (e.g.: Emergency; Immunization; Social Work Services).

Address of Person/Company/Agency Authorized to Receive Health Information

- Indicate the complete mailing address and contact information of the person, company or agency you wish to receive the information.
- Indicate how the health information should be delivered or picked up.
- *Sign and date your request.*

Authorization

When you make a request for health information, you will be asked to provide proof of your identity before the records are provided to you.

If you are a Legal Guardian or Medical Decision Maker, you will be asked to provide evidence of your authority to exercise that power (e.g.: guardianship order; proxy; power of attorney specific to medical decision-making; excerpts from a will naming you as executor and the date and signature of the will).

Payment

All requests for health information are subject to a processing fee in accordance with health information management policy, or a **\$20.00** fee for examining records with an SHA representative. You may request a waiver of fees for reason of financial hardship.

Submission of Request

Submit your request by delivering in person, mailing or faxing to the facility you are making the request to. In order to assist you, a facilities contact list is provided below. Please contact the location where you received health services. If your request involves more than one location, you will only be subject to a single processing fee.

Please label envelope "Attn: Health Records/Release of Information"

Arcola Health Centre
607 Prairie Avenue, Box 419
Arcola, SK S0C 0G0
Phone: 306-455-2771

Assiniboia Union Hospital
501 - 6th Avenue, Box 1120
Assiniboia, SK S0H 0B0
Phone: 306-642-9414

Biggar and District Health Centre
501 - 1st Avenue West, Box 130
Biggar, SK S0K 0M0
Phone: 306-948-3323, ext. 2725

Broadview Union Hospital
901 Nina Street
Broadview, SK S0G 0K0
Phone: 306-696-5500

Canora Hospital
1219 Main Street, Box 749
Canora, SK S0A 0L0
Phone: 306-563-1268

Davidson Health Centre
900 Government Road, Box 758
Davidson, SK S0G 1A0
Phone: 306-567-2801

Esterhazy - St. Anthony's Hospital
216 Ancona Street, Box 280
Esterhazy, SK S0A 0X0
Phone: 306-745-3973

Estevan - St. Joseph's Hospital
1176 Nicholson Road
Estevan, SK S4A 0H3
Phone: 306-637-2452

**Fort Qu'Appelle - All Nations' Healing
Hospital**
450 - 8th Street, Box 300
Fort Qu'Appelle, SK S0G 1S0
Phone: 306-332-5611

Gravelbourg - St. Joseph's Hospital
Box 810
Gravelbourg, SK S0H 1X0
Phone: 306-648-3185

**Herbert and District Integrated Health
Facility**
405 Herbert Avenue
Herbert, SK S0H 2A0
Phone: 306-784-2466, ext. 1

Hudson Bay Health Care Facility
614 Prince Street, Box 940
Hudson Bay, SK S0E 0Y0
Phone: 306-865-5600

Humboldt District Health Complex
515 - 14th Avenue, Box 10
Humboldt, SK S0K 2A0
Phone: 306-682-8195

**Ile a La Crosse - St. Joseph's Hospital
and Health Centre**
Box 630
Ile a La Crosse, SK S0M 1C0
Phone: 306-833-2016

Indian Head Union Hospital
300 Hospital Street, Box 340
Indian Head, SK S0G 2K0
Phone: 306-695-4000

Kamsack Hospital and Nursing Home
341 Stewart Street, Box 429
Kamsack, SK S0A 1S0
P: 306-542-1963

Kelvington and Area Hospital
701 - 6th Avenue West, Box 70
Kelvington, SK S0A 1W0
Phone: 306-327-5500

Kerrobert and District Health Centre
115 Manitoba Avenue, Box 320
Kerrobert, SK S0L 1R0
Phone: 306-834-2646, ext. 2800

Kindersley and District Health Centre
1003 - 1st Street West
Kindersley, SK S0L 1S2
Phone: 306-463-1000, ext. 2517

Kipling Integrated Health Centre
906 Industrial Drive, Box 420
Kipling, SK S0G 2S0
Phone: 306-736-5501

La Loche Health Centre and Hospital
Bag Service 1
La Loche, SK S0M 1G0
Phone: 306-822-3200

La Ronge Health Centre
227 Blacklund Street, Box 6000
La Ronge, SK S0J 1L0
Phone: 306-425-4828

Lanigan Union Hospital
36 Downing Drive East, Box 609
Lanigan, SK S0K 2M0
Phone: 306-365-1400

**Leader and District Integrated
Healthcare Facility**
400 - 1st Street West
Leader, SK S0N 1H0
Phone: 306-628-5513

Lloydminster Hospital
3820 - 43rd Avenue
Lloydminster, SK S9V 1Y5
Phone: 306-820-6000

Maidstone Health Complex
214 - 5th Avenue East, Box 160
Maidstone, SK S0M 1M0
Phone: 306-893-2622

**Maple Creek Southwest Integrated
Healthcare Facility**
102 - 5th Avenue West
Maple Creek, SK S0N 1N0
Phone: 306-662-5802

**Meadow Lake - Northwest Health
Facility**
#1-711 Centre Street
Meadow Lake, SK S9X 1E6
Phone: 306-236-1500

Melfort Hospital
510 Broadway Avenue, Box 1480
Melfort, SK S0E 1A0
Phone: 306-752-8700

Melville - St. Peter's Hospital
200 Heritage Drive, Box 1810
Melville, SK S0A 2P0
Phone: 306-728-9226

**Moose Jaw - Dr. F.H. Wigmore
Regional Hospital**
55 Diefenbaker Drive
Moose Jaw, SK S6J 0C2
Phone: 306-694-0289

**Moosomin - Southeast Integrated
Care Centre**
601 Wright Road, Box 1470
Moosomin, SK S0G 3N0
Phone: 306-435-6252

Nipawin Hospital
800 - 6th Street East, Box 389
Nipawin, SK S0E 1E0
Phone: 306-862-6100

North Battleford - Battlefords Mental Health Centre
1092 – 107th Street
North Battleford, SK S9A 1Z1
Phone: 306-446-6500

North Battleford - Battlefords Union Hospital
1092 - 107th Street
North Battleford, SK S9A 1Z1
Phone: 306-446-6600

North Battleford - Saskatchewan Hospital
Box 39
North Battleford, SK S9A 2X8
Phone: 306-446-6800

Outlook and District Health Centre
500 Semple Street, Box 369
Outlook, SK S0L 2N0
Phone: 306-867-8676, ext. 201

Porcupine Carragana Hospital
207 Elm Street, Box 520
Porcupine Plain, SK S0E 1H0
Phone: 306-278-2151

Preeceville & District Health Centre
712 - 7th Street North East, Box 469
Preeceville, SK S0A 3B0
Phone: 306-547-2102

Prince Albert - Victoria Hospital
1200 - 24th Street West
Prince Albert, SK S6V 5T4
Phone: 306-765-6073

Redvers Health Centre
18 Eichhorst Street, Box 30
Redvers, SK S0C 2H0
Phone: 306-452-3553

Regina - General Hospital
1440 - 14th Avenue
Regina, SK S4P 0W5
Phone: 306-766-4899, Option 2

Regina - Pasqua Hospital
4101 Dewdney Avenue
Regina, SK S4T 1A5
Phone: 306-766-2306

Regina - Wascana Rehabilitation Centre
2180 - 23rd Avenue
Regina, SK S4S 0A5
Phone: 306-766-5657

Rosetown and District Health Centre
409 - Highway 4 North, Box 850
Rosetown, SK S0L 2V0
Phone: 306-882-2672, ext. 2222

Rosthern Hospital
2016 - 2nd Street, Box 309
Rosthern, SK S0K 3R0
Phone: 306-232-4811

Saskatoon - Royal University and Jim Pattison Children's Hospitals
Royal University Hospital
103 Hospital Drive
Saskatoon, SK S7N 0W8
Phone: 306-655-1722

Saskatoon - St. Paul's Hospital
1702 - 20th Street
Saskatoon, SK S7M 0Z9
Phone: 306-655-5216

Saskatoon City Hospital
701 Queen Street
Saskatoon, SK S7K 0M7
Phone: 306-655-8351

Shaunavon Hospital & Care Center
660 - 4th Street East, Box 789
Shaunavon, SK S0N 2M0
Phone: 306-297-1957

Shellbrook - Parkland Integrated Health Centre
#100 Dr. J.L. Spencer Drive, Box 70
Shellbrook, SK S0K 3R0
Phone: 306-747-2603

Swift Current - Cypress Regional Hospital
429 - 4th Avenue North East
Swift Current, SK S9H 2J9
Phone: 306-778-9480

Tisdale Hospital
2010 - 110th Avenue West, Box 1630
Tisdale, SK S0E 1T0
Phone: 306-873-6500

Turtleford - Riverside Health Complex
1st Street South, Box 10
Turtleford, SK S0M 2Y0
Phone: 306-845-2195

Unity and District Health Centre
Airport Road, Box 741
Unity, SK S0K 4L0
Phone: 306-228-2666, ext. 2965

Wadena Hospital
433 - 5th Street North East, Box 10
Wadena, SK S0A 4J0
Phone: 306-338-9928

Watrous District Health Complex
702 - 4th Street East, Box 130
Watrous, SK S0K 4T0
Phone: 306-946-1200

Weyburn General Hospital
201 - 1st Avenue North East
Weyburn, SK S4H 0N1
Phone: 306-842-8417

Wolseley Memorial Integrated Care Centre
801 Ouimet Street, Box 458
Wolseley, SK S0G 5H0
Phone: 306-698-4440

Wynyard Hospital
300 - 10th Street East, Box 670
Wynyard, SK S0A 4T0
Phone: 306-554-2586

Yorkton Regional Health Centre
270 Bradbrooke Drive
Yorkton, SK S3N 2K6
Phone: 306-786-0435