

# **PATIENT ATTACHMENT VERIFICATION**

The personal information in this form is collected by the Clinic (named below) and the health authority in which it resides and may be disclosed to the Province's Ministry of Health under the authority of the Medicare Protection Act and the Freedom of Information and Protection of Privacy Act in order to audit clinic attachments.

#### **SECTION A: PERSONAL INFORMATION**

First Name	Last Name	Personal Health Number (PHN)

# **SECTION B: CLINIC INFORMATION**

ECTION C: PRACTITIONER - PATIENT TERMS			
Clinic Name			
Practitioner Name			

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Is the Practitioner listed above your Primary Care Provider?	
◯ Yes ◯ No	
Has the Practitioner listed above had the following conversation outlining the Patient-	Practitioner relationship?
○ Yes ○ No	
Physician:	Patient:
As your primary care provider I, along with my practice team,	As my patient I ask that you:
agree to:	<ul> <li>Seek your health care from me and my team whenever</li> </ul>
<ul> <li>Provide you with safe and appropriate care</li> </ul>	possible and, in my absence, through my colleague(s)
<ul> <li>Coordinate any specialty care you may need</li> </ul>	<ul> <li>Name me as your primary care provider if you have to</li> </ul>
<ul> <li>Offer you timely access to care, to the best of my ability and as</li> </ul>	visit an emergency facility or another provider
reasonably possible in the circumstances	<ul> <li>Communicate with me honestly and openly so we can</li> </ul>
Maintain an ongoing record of your health	best address your health care needs
<ul> <li>Keep you updated on any changes to services offered at my clinic</li> </ul>	
<ul> <li>Communicate with you honestly and openly so we can best address your health care needs</li> </ul>	

# **SECTION D: AUTHORIZATION**

I hereby confirm my attachment to the Practitioner listed above.

Signature	Date Signed (YYYY / MM / DD)		

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# 7-Zip User Guide for Patients HLTH 2989 Patient Attachment Verification

This document outlines how to install and use 7-Zip to securely send the Patient Attachment Verification Form (HLTH 2989) to your clinic. 7-Zip is a free file archiver with a high compression ratio. It is used to create encrypted archive files (also known as Zip files) to ensure secure transport, and both the sender and receiver are required to install 7-Zip on a Windows workstation.

#### Benefits of Using 7-Zip:

- Your personal information will be encrypted
- The receiver only needs to enter the password once, during the extraction process

#### Installing 7-zip

- 1. Download the 7-Zip '.exe' file via the link provided above (ensure system requirements are met)
- 2. Double-click the '.exe' file and follow the installation instructions

#### **Creating an Encrypted Archive**

- 1. Right-click the file/folder that you want to archive, and under the "7-Zip" menu, click "Add to archive..."
- 2. Click "Encrypt file names"
- 3. Do NOT click "Create SFX archive" (self-extracting archive)
- 4. Under the "Encryption" section, enter a password (use a mixture of 10-15 upper/lower case letters, numbers, and special characters. Try to avoid characters that could be confused with each other like zero and O, or the number one, the letter i and the letter I).
- By default, the name of the encrypted archive will be the same as the file/folder which you are encrypting. Click on the "Archive" selection box and rename the file/folder to:"[FirstName\_LastName\_HLTH2989].7z"
- 6. Only change the ".7z" file extension if required by your clinic. To rename the file extension:
  - Right-click on the archive and click 'Rename' and change the ".7z" to "zzz"
    - If the file extension is hidden, click on the "View" tab in Windows Explorer and check-off the "File name extensions" box

Name Date modified Type Size Arthive branc	et 77		×
Archive format	at 77		
7/2ip lest - 2020-03-04	76	<ul> <li>Update mode:</li> </ul>	Add and replace files $\qquad \lor$
Open Open Open in CQuick access     Add to VLC media player's Playlist     Add to archive     Compression it       7-Zip     >     Compression it     Dictionary aize       7-Zip     >     Compression it     Dictionary aize       6 Scan with OfficeScan     Compress of areal     Add to archive     Dictionary aize       6 Scan with OfficeScan     Compress to "TZip Test - 2020-03-04.7z" and email     Matter of CPL Add to "TZip Test - 2020-03-04.7z"     Number of CPL Memory usage       1 Compress to "TZip Test - 2020-03-04.zip" and email     Memory usage     Memory usage       1 Cut     Compress to "TZip Test - 2020-03-04.zip" and email     Memory usage       1 Cut     Copy     Compress to "TZip Test - 2020-03-04.zip" and email     Memory usage       1 Cut     Copy     Compress to "TZip Test - 2020-03-04.zip" and email     Memory usage       1 Cut     Copy     Compress to "TZip Test - 2020-03-04.zip" and email     Memory usage       1 Cut     Copy     Copy     Create shortcut     Dictore stort to	n ervol	Update mode:  Path mode:  Options Option Enter passurod I376 MB I8	Add and replace files   Relative pathnames  Comparison  According to the second
Deite Rename Properties		ОК Са	ancel Help

#### Sending a 7-zip file:

- 1. Once you have printed, signed and scanned the form, zip the file as per the process above
- 2. Attach the zipped file to an email and send it to the clinic. Be sure to include "Patient Attachment Verification Form" in the email subject field.
- 3. Call your clinic with the password to the zipped file during regular business hours or you can provide the password in a voice message after hours, if your clinic permits

#### **Extracting an Encrypted Archive:**

- 1. Right-click the archive that you want to extract, under "7-Zip" menu, click "Extract Here"
- 2. You will be prompted to "Enter password" input the password provided
  - Extracted files/folders will appear in the same location as the archive file/folder

Name	Date modified Type	Size	Flapsed time:	00:00:11 Total size:	6182
Zip Test - 2020-03-04	Open	6 КВ	Remaining time:	Speed:	
	7-Zip	Open archive	Files:	3 Processed:	0
	CRC SHA	Open archive Extract files	Compression ratio:	Enter password X	U
	Some with OfficeScan     Open with     Give access to     Restore previous versions     Send to     Cut     Copy     Create chostruit	Extract Here Extract Here Extract to "7Zip Test - 2020-03-04\" Test archive Compress and email Compress on "7Zip Test - 2020-03-04.7z" and email Add to "7Zip Test - 2020-03-04.zip" Compress to "7Zip Test - 2020-03-04.zip" and email	Extracting 72/p Test - 2020-03-04\ 4. 72/p Test Image bmp	Enter password:  Show password  OK Cancel	
	Delete				
	Rename				
	Properties			Background Pause	Cancel

Questions regarding the use of 7-Zip to send the Patient Attachment Verification Form should be directed to your clinic.

Download Link <u>https://www.7-</u> zip.org/download.html

FAQ Page https://www.7-zip.org/ faq.html