

Registration and Security Agreement for Access to Mercy Radiology PACS



Mercy Radiology needs to ensure that access to its medical imaging data is restricted to only those authorized to view it for the purposes of medical diagnosis and treatment. In addition to the requirements of privacy legislation we also want to ensure that our networks and information systems are kept as safe as possible from the risk of viruses and other unauthorized entry. Patient privacy is paramount to us so with this in mind we will offer you external access to patient images and reports only and not to worksheets or other documents which may contain details given in confidence to the practice during an examination.

Access levels are in place to ensure the privacy and safety of patients, staff and referrers. When we respond to you with your access details we will inform you of any restrictions associated with your user details.

REGISTRATION DETAILS:

ORGANISATION: _____

NAME: First: _____ Last: _____

POSITION/ROLE: _____ **NZMC:** _____

PHONE: _____ **EMAIL:** _____

CONTACT ADDRESS: _____

CURRENT USERNAME: _____

INDIVIDUAL RULES AND RESPONSIBILITIES FOR MERCY RADIOLOGY PACS USERS

- I understand that unauthorised use of the Mercy Radiology PACS and Inteleviewer applications or access by unauthorised persons is prohibited. I will act responsibly and do all I can to ensure the security of the Mercy Radiology PACS system.
- I understand that my user details, password, access method, and network connection are confidential and must be used solely for the purpose of accessing medical imaging data for the diagnosis and/or treatment of those under my medical care.
- I will at all times, secure and protect my user details, password, access method, and network connection.
- I will not allow others to gain access with my user details, or vice versa I will not utilise another user's details for access. I will not keep a written or electronic copy of my access details or password to ensure confidentiality.
- I will at no time request or obtain access to a patient that is not under my medical care.
- I understand that use of Mercy Radiology's PACS and Inteleviewer systems must be used in compliance with governing laws including (without limitation) the New Zealand Medical Association's Code of Ethics, Health (Retention of Health Information) Regulations 1996 and the Health Information Privacy Code 1994.
- I understand that Mercy Radiology exclude any liability relating to my use of PACS & Inteleviewer, including availability.
- I understand that Mercy Radiology will undertake audits of the systems use, and I grant my consent for this.
- I acknowledge that failure to comply with the above requirements will result in my access being withdrawn.

I have read, understand, and agree to abide by the rules & security responsibilities of Mercy Radiology PACS access outlined above;

Signature: _____

Date: _____

Once completed please return to:

Mercy Radiology, P O Box 9056, Newmarket, Auckland 1149

Mercy Radiology use only:

Username:

Password:

Approved by: