

Clinic Policies

Providing the best possible medical care to patients is our priority. In order to serve you well, we follow a set of policies in compliance with the standard of practice in this province. We ask that all of our patients respect these policies. Please do not hesitate to ask if you have any questions.

* Please read and acknowledge the following by checking each item.

Patient Attachment

- I understand that I have been randomly assigned to **Dr. Linda Xuan Wang** as my family doctor and that **she generally works Tuesdays and Fridays at Maywood Medical.**
我知道我被分到 **Dr. Linda Wang** 醫生作為我的家庭醫生 而她每星期二、五在本診所工作。
- Patients are encouraged to seek health care from their family doctor at Maywood Medical whenever possible.
- Patients should identify their family doctor as their primary care provider for all health care-related correspondence when multiple providers are involved including specialist care, walk-in visits, and hospital visits.

Respect

- There is **zero tolerance** for abuse, rudeness, or threats of any kind at our clinic and will lead to immediate dismissal from the practice.
- Children are generally seen in conjunction with their caregivers up to the age of 13, after which they may choose to be seen alone. We may at times need to speak with a child on his/her own. For children able to provide consent, we can only disclose their medical issues to the caregiver if we have permission from the child.
- We observe a scent-free and smoke-free policy for the health of all those at the clinic.
- Phone calls must be taken outside the clinic.

Confidentiality

- The patient-physician relationship is important, and that includes your medical records and any information exchanged during your visit. While we use electronic medical records, your information is confidential and stored on secured servers, accessible only by health professionals and staff involved in your care. We will not discuss any matters relating to your medical visits with any other party without your consent, including family members. There are four situations where confidentiality can and must be broken:
 - Court order
 - Imminent threat to yourself, the patient
 - Imminent threat to others
 - Suspicion of child abuse (<19 years of age)

Recording

- No video or audio recording of any kind is permitted during your visit.

Consent to Transfer of Charts

- Your family doctor requires accurate and complete information of existing health records in order to provide quality care. You are providing consent to Maywood Medical to request your medical records from any hospital, clinic, laboratory, or other health care facilities when needed. Please inform your doctor should there be any exceptions.

Booking Appointments

- A typical visit is scheduled for 10 minutes, depending on the type of visit.
- Whenever possible, please describe the reason for your appointment so that the clinic can budget time appropriately.
- Longer appointment times for physical exams or procedures will be booked at your doctor's discretion.
- If you have multiple issues during a visit, your doctor may prioritize them in the allotted time and schedule another appointment in order to be able to thoroughly assess all presenting issues.

Childhood Immunizations

- The clinic may not always be stocked with routine childhood immunizations. In this situation, you will be advised to contact the closest public health unit for routine immunizations.

Follow Up on Test Results

- Our clinic does not adopt the result policy of "no news is good news". You are responsible for following up on all test results.

Opioids, Sedatives, Stimulants, and Other Controlled Substances

- There is insufficient clinical evidence that long term, escalating doses of opioid treatment is beneficial for chronic, non-cancer pain. Inappropriate use of opioid medications can lead to more harm than good. For the best quality of care, patients at our will adhere to the Opioid Treatment Agreement before starting opioid therapy.
- The College of Physicians and Surgeons of B.C. has a formal policy statement forbidding the concurrent use of opioid and sedative medications, and your doctor is legally obliged to stop one or more of these medications with a taper.
- Key components of the Opioid Treatment Agreement includes the following:
 - Opioid medications may only be prescribed to patients by a single physician.
 - Patients on opioids are subject to PharmaNet checks and random drug screens.
 - Your doctor has the right to terminate prescription of opioid medications if any part of the Agreement is breached.
- Similarly, sedatives, stimulants and other controlled substances may only be prescribed to patients by a single physician. Patients on these medications are subject to PharmaNet checks and random urine drug screens. Your doctor has the right to terminate prescription of controlled substances if the Agreement is breached.
- No opioid medications are stored in clinic premises.

Uninsured Services

- Certain services are not covered by the provincial Medical Services Plan. The fees for these services are available on our website and you will be notified of any fees before agreeing to treatment.
- Common uninsured services include:
 - Sick notes and medical certificates
 - Chart transfers
 - Missed appointments
 - Insurance reports
 - Cosmetic procedures
 - Driver's physicals
 - Cryotherapy for non-plantar and non-genital warts in adults
 - Flu shots for patients not in high risk groups
 - Medical legal letters and opinions
 - Travel advice
 - Comprehensive full physical exams
- If an outstanding account has been incurred, payment is expected before your next appointment. Depending upon appointment type, the patient may not be able to schedule future appointments until the balance has been paid.

Late or Missed Appointments

- There are many other patients waiting for appointments. Failure to cancel or reschedule will result in charged fees. After three 'no shows' we reserve the right not to schedule another appointment.
- Late appointments – If you are more than 20 minutes late, you may be asked to re-book your appointment.

Ending the Therapeutic Relationship

- Unfortunately, sometimes there is a breakdown in trust between you and your physician. This may occur because of the following reasons:
 - Recurrent "no-show" appointments with our office, other specialist offices, or testing centres without adequate reason or prior notification.
 - Repeat refusal to comply with treatment advice.
 - Any form of abuse, rudeness, or threats by you towards any other patient, staff, physician, or their family.
 - Non-compliance with clinic policies.
- If there is an end to your relationship with your physician, the following policies are in place:
 - You will be formally notified by a written statement of the end of the patient-physician relationship.
 - We will provide you up to three weeks of emergency medical services from the date of the letter, but will not include elective care. After this period is over, we will no longer provide medical services to you.
 - We encourage you to seek a new family physician as soon as possible. We can provide you with information on how to seek a new family physician.
 - When you have had the chance to see your new physician, please have him/her contact our office so that we can provide your new physician with a summary of your care while you were a patient at our clinic.

PharmaNet Search

- You consent to having your doctor search your past medication prescription history on PharmaNet (the provincial prescription medication database) as the need arises.

Receiving Email Communication

- You consent to receiving clinic notices by email, including requisitions, screening test reminders, and flu clinics. There is a small and inherent risk to email communication. Emails from our clinic will not contain any medical information beyond the minimum necessary.

Medical Learners

- Your doctor may provide medical education for medical students or residents in the clinic. Your doctor will ask for consent before you are seen by a learner.
- The medical learner will always review the encounter with your doctor, and the patient may also request to see the doctor afterwards.
- Though we hope you understand the importance of medical education, you may decline to see the medical learner, and this will not affect your care in any way.

By signing below, you indicate that you have had an opportunity to discuss the clinic policies, and you understand and agree to the policies.

signature

Print name: _____

Date: _____

Appendix - Online Booking Policies

We encourage you to use online booking available on our website. Please peruse the policy terms below which you will be asked to confirm when booking online:

- I hereby confirm that the above information is true and correct and that the Health Card Number is current and valid.
- By supplying my home/cell phone number, email address and any other personal information, I authorize Maywood Medical to use my personal information to contact me with respect to appointment times, referral notices, result information, appointment reminders, and other limited information. I am also aware it is my responsibility to keep my contact information current.
- Please note, our clinic does not adopt the result policy of “no news is good news”. I acknowledge that I am responsible for following up on all test results.
- I acknowledge that I am responsible for the payment of all charges for any treatment that may not be paid or covered by my provincial health care plan or insurance, ie. insurance forms, driver's physicals, sick notes, employment and sports physicals and transfer of records.
- I hereby acknowledge that the medical or other healthcare treatment received by myself from Maywood Medical and any of its physicians will be provided in the province or territory of British Columbia, and that courts of British Columbia all have the exclusive jurisdiction to hear any complaint, demand, claim, proceeding or cause of action, whatsoever arising from or in connection with that medical or other healthcare and treatment, or from any other aspect of the relationship between the physician and myself.
- I also agree that any and all disputes arising from or in connection with that relationship, including any disputes arising under or in connection with this agreement, shall be governed by and construed accordance with the laws of the province or territory of British Columbia (other than conflict of laws rules) and the laws of Canada applicable therein.
- I authorize this medical practice to access my health information recorded elsewhere – including Pharmanet Medication Profile – for the purpose of providing care and treatment. This consent will continue until I revoke it in writing.

Risks of using electronic communication

The Physician will use reasonable means to protect the security and confidentiality of information sent and received using the Services (“Services” is defined in the attached Consent to use electronic communications). However, because of the risks outlined below, the Physician cannot guarantee the security and confidentiality of electronic communications:

- Use of electronic communications to discuss sensitive information can increase the risk of such information being disclosed to third parties.
- Despite reasonable efforts to protect the privacy and security of electronic communication, it is not possible to completely secure the information.
- Employers and online services may have a legal right to inspect and keep electronic communications that pass through their system.
- Electronic communications can introduce malware into a computer system, and potentially damage or disrupt the computer, networks, and security settings.
- Electronic communications can be forwarded, intercepted, circulated, stored, or even changed without the knowledge or permission of the Physician or the patient.
- Even after the sender and recipient have deleted copies of electronic communications, back-up copies may exist on a computer system.
- Electronic communications may be disclosed in accordance with a duty to report or a court order.
- Videoconferencing using services such as Skype or FaceTime may be more open to interception than other forms of videoconferencing.
- Email, text messages, and instant messages can more easily be misdirected, resulting in increased risk of being received by unintended and unknown recipients.
- Email, text messages, and instant messages can be easier to falsify than handwritten or signed hard copies. It is not feasible to verify the true identity of the sender, or to ensure that only the recipient can read the message once it has been sent.

Conditions of using the Services

- While the Physician will attempt to review and respond in a timely fashion to your electronic communication, the Physician cannot guarantee that all electronic communications will be reviewed and responded to within any specific period of time. The Services will not be used for medical emergencies or other time-sensitive matters.
- If your electronic communication requires or invites a response from the Physician and you have not received a response within a reasonable time period, it is your responsibility to follow up to determine whether the intended recipient received the electronic communication and when the recipient will respond.
- Electronic communication is not an appropriate substitute for in-person or over-the-telephone communication or clinical examinations, where appropriate, or for attending the Emergency Department when needed. You are responsible for following up on the Physician's electronic communication and for scheduling appointments where warranted.
- Electronic communications concerning diagnosis or treatment may be printed or transcribed in full and made part of your medical record. Other individuals authorized to access the medical record, such as staff and billing personnel, may have access to those communications.
- The Physician may forward electronic communications to staff and those involved in the delivery and administration of your care. The Physician might use one or more of the Services to communicate with those involved in your care. The Physician will not forward electronic communications to third parties, including family members, without your prior written consent, except as authorized or required by law.
- You and the Physician will not use the Services to communicate sensitive medical information.
- You agree to inform the Physician of any types of information you do not want sent via the Services, in addition to those set out above. You can add to or modify the above list at any time by notifying the Physician in writing.
- The Physician is not responsible for information loss due to technical failures associated with your software or internet service provider.

Instructions for communication using the Services. To communicate using the Services, you must:

- Reasonably limit or avoid using an employer's or other third party's computer.
- Inform the Physician of any changes in the patient's email address, mobile phone number, or other account information necessary to communicate via the Services.
- Review all electronic communications to ensure they are clear and that all relevant information is provided before sending to the physician.
- Take precautions to preserve the confidentiality of electronic communications, such as using screen savers and safeguarding computer passwords.
- Withdraw consent only by phone, email, or written communication to the Physician.
- If you require immediate assistance, or if your condition appears serious or rapidly worsens, you should not rely on the Services. Rather, you should call the Physician's office or take other measures as appropriate, such as going to the nearest Emergency Department