## PATIENT CONSENT FORM

Privacy of your personal information is an important part of our clinic. We understand the importance of protecting your personal information while providing you with quality naturopathic care. We are committed to collecting, using and disclosing your personal information responsibly. All staff members who come in contact with your personal information are aware of the sensitive nature of the information that you have disclosed to us. They are trained in the appropriate use and protection of your information.

Our privacy policy outlines what our clinic is doing to ensure that:

- only necessary information is collected about you;
- your information will not be shared without your consent; and
- storage, retention and destruction of your personal information complies with existing legislation and privacy protection protocols in accordance with the privacy legislation and standards of our regulatory body, the Board of Directors of Drugless Therapy Naturopathy.

The collection, use and disclosure of your information by this clinic will be made for the following purposes:

- to assess your health concerns
- to provide health care, advise you of treatment options, and follow-up accordingly
- to establish and maintain contact with you, including newsletters and information mailings
- to remind you of upcoming appointments
- to communicate with other treating health-care providers
- to collect payment for goods and services, including invoicing, credit card payments, and collecting on unpaid accounts
- to comply with legal and regulatory requirements of our regulatory body, the Board of Directors of Drugless Therapy Naturopathy, acting under the authority of the *Drugless Practitioners Act*
- to allow potential purchasers, practice brokers or advisors to conduct an audit in preparation for a practice sale

By signing the consent section of this Patien	t Consent Form, I agree that I have given my	y informed consent to the collection, use					
and/or disclosure of my personal information	or disclosure of my personal information as outlined above. I have reviewed the above information that explains how your						
clinic will use my personal information, and	the steps your clinic is taking to protect my	information. I agree that Dr. Scott					
Woodworth, ND can collect, use and discle	ose personal information about me as set out	above in the information about the					
clinic's privacy policies.							
Signature	Print name	Date					

Naturopathic medicine is a unique and comprehensive approach to improving health and treating illness. Focusing on prevention and using natural substances and treatments, Naturopathic Doctors (NDs) support and stimulate the body's ability to heal itself. NDs are trained to diagnose using physical, laboratory, and symptom-based assessments. The primary goal of naturopathic treatment is to address the cause of illness, rather than simply treat or suppress symptoms.