



Adressaufkleber

wird am Anmeldeschalter aufgeklebt

Declaration of consent

Information regarding data protection and declaration of consent

Your medical data is protected by the Data Protection Act. At the Medical-Radiological Institute (MRI) this mainly encompasses images and reports relating to these images. With your signature, you confirm that you agree to processing in accordance with our data protection declaration (under <https://mri-roentgen.ch/privacy-policy/> or which can be downloaded on the right via the QR code).



In particular, you agree to the following processing:

- I confirm that the MRI is authorised, until withdrawal of the consent, to request preliminary examinations and reports relating to me and to forward my examinations and reports to subsequently treating physicians and hospitals on request.
- I give my consent to the necessary information for evaluation of the service obligation and invoicing to be forwarded to my sickness / health insurance office.
- I consent to the MRI sending me personal information to my personal email address or by text message to my mobile phone number in accordance with the data privacy statement. My email address printed at the top right of the page and the mobile phone number are correct.
- The treatment, contracts and all legal relationships between the patient, physician and MRI are solely subject to Swiss material law, to the preclusion of any conflict-of-law rules. The sole place of jurisdiction is the ordinary court in Zurich.

Place, Date:	<input type="text"/>	Patient signature:	<input type="text"/>
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Declaration for the use of health-related personal data for research purposes

Research makes a significant contribution to the improvement of medical quality and thus future medical treatment. With my signature:

- I consent to my health-related personal data which originates from medical treatment or which is otherwise available being used for research purposes with strict compliance with confidentiality;
- I understand that my consent is voluntary and that I am able to refuse or revoke this at any time without providing a justification;
- I understand that my data can be used for research aid is protected by corporate, technical and organisational measures. We shall ensure that as few individuals as possible have access to your personal identifying information (name, address, date of birth, etc.). We shall encrypt your data for this purpose. This means that any data which could identify you is replaced by a code. Only individuals who have access to the code list can identify you. If we pass your data on to third parties for research purposes, this data is always encrypted or anonymised, i.e. third parties will not have access to your identity at any time.

I agree to my data being used for research purposes: <input type="checkbox"/> Yes <input type="checkbox"/> No

Place, Date:	<input type="text"/>	Patient signature:	<input type="text"/>
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