

Contact details. Personal data protection.

SURNAME		NAME	
Date of birth	Address		
Phone number for communication	Skype	<input type="checkbox"/>	I do not want to be called
Email for communication with the clinic		<input type="checkbox"/>	I do not want to receive emails
Your personal data is processed by the Gynera Medical Clinic, according to the registration with the National Supervisory Authority for Personal Data Processing no. 19963, for the sole purpose of providing medical services. You may exercise the right of access, intervention, erasure and portability under the conditions provided by Romanian Law 677/2001 and European Regulation GDPR 679/2016, by a written and dated request sent to the Gynera Medical Clinic. Details on www.gynera.ro			
I give permission for processing my personal data, for the purpose of providing medical services, according to regulations <input type="checkbox"/> Yes <input type="checkbox"/> No			
Other person who can have access to my medical data	Relationship	Phone number	Email
*			
I give permission that information about my medical situation and conditions to be provided to this person*. This is my wish and I freely and knowingly agree that this person have access to my medical record. (according to Romanian Law OMS 1410/2016) Signature _____			
I revoke the access to my personal medical data to Mrs./Mr. _____ Date _____ Signature _____			

Informed consent to examination and non-invasive / minimal-invasive procedures

Full and correct personal information, clinical examination and most of the investigations below are necessary to evaluate the patient and to elaborate diagnosis and the personalized treatment plan.
 Medical examination involves physical examination of the patient and evaluation of vital signs.
 Ultrasound scan is a non-invasive and non-risky investigation that allows visualisation of internal organs.
 Collection of genital secretions is a non-invasive investigation performed with a special swab or brush. May be followed by spotting.
 Blood collection and injectable medication may cause incidents or temporary side effects: pain, hematoma, dizziness, vein injury, rupture of the needle. Very rare, despite precautions, severe and potentially lethal complications may occur: gas or fat embolism, infections, allergic reactions to medication.
 Biological samples are transferred to internal or external lab, processed and eliminated according to regulations. Do not hesitate to ask the personnel if you need more information regarding the nature, scope, benefits, risks, consequences and alternatives of these medical services, as well as the risks of refusing them. Please find detailed informations about personnel and procedures on www.gynera.ro
 I freely give my informed consent to: _____
 Comments: _____

General examination	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Genital examination	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
General ultrasound scan	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Genital, transvaginal / obstetric ultrasound scan	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Blood collection by venipuncture and processing of blood	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Collection and processing of genital secretions and urine	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Semen collection and processing <input type="checkbox"/> Not applicable	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Administration of oxygen or medication - local / injectable / i.v.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

I have been provided with clear information, I understand and I give my informed consent to the confirmed medical services.
 I understand that I have the right to be informed or to refuse information about my diagnostic, prognostic or medical situation.
 I understand that I have the right to a second medical opinion. Signature _____

Information about rules and internal policies

Medical activities require an adequate environment and utilization of sensitive equipments. Please do not use mobile phones in the clinic or keep them in silent mode. Free access of patients is permitted at ground floor and first floor. In restricted area, patients are allowed only accompanied by personnel.

Medical reports and test results are confidential. They can be obtained only by patient in person or according to this consent. Results of investigations are discussed only with the doctor, during consultation. Medical record is an internal document with restricted access, only to authorized personnel. As reproductive treatment involves multiple medical procedures spread on a long period of time, medical report of investigations, monitoring and interventions is provided at the end of procedures, or in circumstances that require collaboration with other doctors or authorities.

Copies of medical documents may be released at written request, within 2 working days, according to OMS 1410/2016.

If you want to revoke this consent or change some options, you need to fill a new patient agreement form.

Date _____ Signature _____ Gynera representative _____