

## Reminder to maintain confidentiality when faced with third-party enquiries

Dear SMA Member:

We are sometimes asked for details about a patient from a third-party (e.g. a diagnosis requested by an insurance agent) who may even claim to be acting on behalf of the patient. The SMA recommends that before giving such information you request a signed letter of consent to keep in your case-notes. If this signed consent is brought by the third-party and you are therefore unable to verify the signature, we recommend that the report you issue be collected personally by the patient, or mailed to the address of the patient (and not handed or mailed to the third-party).

Some members have reported being faced with very

persistent third-parties who cannot accept the above procedure. We recommend in such an instance you follow the following procedure:

- a) Politely ask for the name, address, and contact number of the third-party, and the name of the insurance company that they claim to represent.
- b) Complete the attached suggested letter to the Insurance Company, fill in the details of the phone contact above, and post. Alternatively call the SMA and we will fax you a hard copy.

In this way, the insurance agent will get the necessary professional education from his company without your need to enter into conflict directly with him.

We hope you will find this suggestion helpful.

| To: The CEO,(Insurance company)   |
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| (Address)   |
| cc: Singapore Medical Association   |
| Level 2, Alumni Medical Centre,   |
| 2 College Road, Singapore 169850  |
| Dear Sir  |
| On(Date and time) I received a phone call from(name,  |
| NRIC, address) who claims to be an agent acting for your company. He/She requested the following details  |
| (e.g. diagnosis, or full medical report) of one of my patients, of whom he claims to be acting on behalf of. In spite of explaining to him/her that I cannot release this except with a signed consent form, and    |
| except directly to the named patient, I was unable to get the understanding of the agent.   |
| May I trouble you to help explain to him/her that these are the requirements of medical confidentiality, that a doctor must ordinarily follow, when faced with any request for such medically-confidential details? |
| Thank you.  |
| (Signed)  |
| Name stamp, Date stamp, Clinic stamp.   |