

# DECLARATION OF STATUS TO ACCESS RECORDS OF INCAPABLE MINORS/ADULTS OR DECEASED CLIENTS

Patient Name (last) \_\_\_\_\_  
 (first) \_\_\_\_\_  
 DOB (dd/mm/yyyy) \_\_\_\_\_  
 PHN \_\_\_\_\_ MRN \_\_\_\_\_  
 Account/Visit # \_\_\_\_\_

(To be submitted with Authorization for Release of Information)

- Please check the appropriate box below to indicate what authority you have to act on behalf of the client.
- You must be the highest ranking individual shown on the list and **proof of status must be provided**.
- Please note that if any dispute exists, or there is confusion about status, we must deny access. Applicants may appeal our decision with the Office of the Information & Privacy Commissioner.
- This form is not required if the request for records is made under the Coroner's Act; the Child, Family and Community Services Act; or other statute.

## HIERARCHY OF AUTHORIZATION

### Complete if adult client is incapable of exercising their information rights

- Personal Representative (Committee of Person)
- Personal Representative (Committee of Estate)
- Litigation Guardian (see [Supreme Court Civil Rules](#))
- Representative with legal authority (Representation Agreement)
- Spouse (including common law and/or same sex partner residing with the client in a marriage like relationship)
- Adult Child of Client
- Parent of Client
- Adult Brother or Sister of Client
- Other adult relation of Client other than by marriage (Specify) \_\_\_\_\_
- Other adult immediately related to Client by marriage (Specify) \_\_\_\_\_

### Complete if client is under the age of 19 years and does not have the ability to consent

- Parent with whom the child primarily resides
- Parent with whom the child does not reside with but has guardianship
- Legal Guardian granted by Court Order or Separation Agreement

### Complete if client is deceased

#### Clients under the age of 19 years

- Executor or Administrator of Estate
- Parent with whom the child primarily resided
- Parent with whom the child did not reside with but had guardianship (defined in the [Family Law Act](#))
- Legal Guardian granted by Court Order or Separation Agreement

#### Adults

- Executor or Administrator of Estate
- Personal Representative (Committee of Person)
- Personal Representative (Committee of Estate)
- Representative with legal authority (Representation Agreement)
- Spouse (including common law and / or same sex partner residing with the client in a marriage like relationship)
- Adult Child of Client
- Parent of Client
- Adult Brother or Sister of Client
- Other adult relation of Client other than by marriage (Specify) \_\_\_\_\_
- Other adult immediately related to Client by marriage (Specify) \_\_\_\_\_

Permanent part of the health record

Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Date (day/month/year) \_\_\_\_\_ Signature \_\_\_\_\_