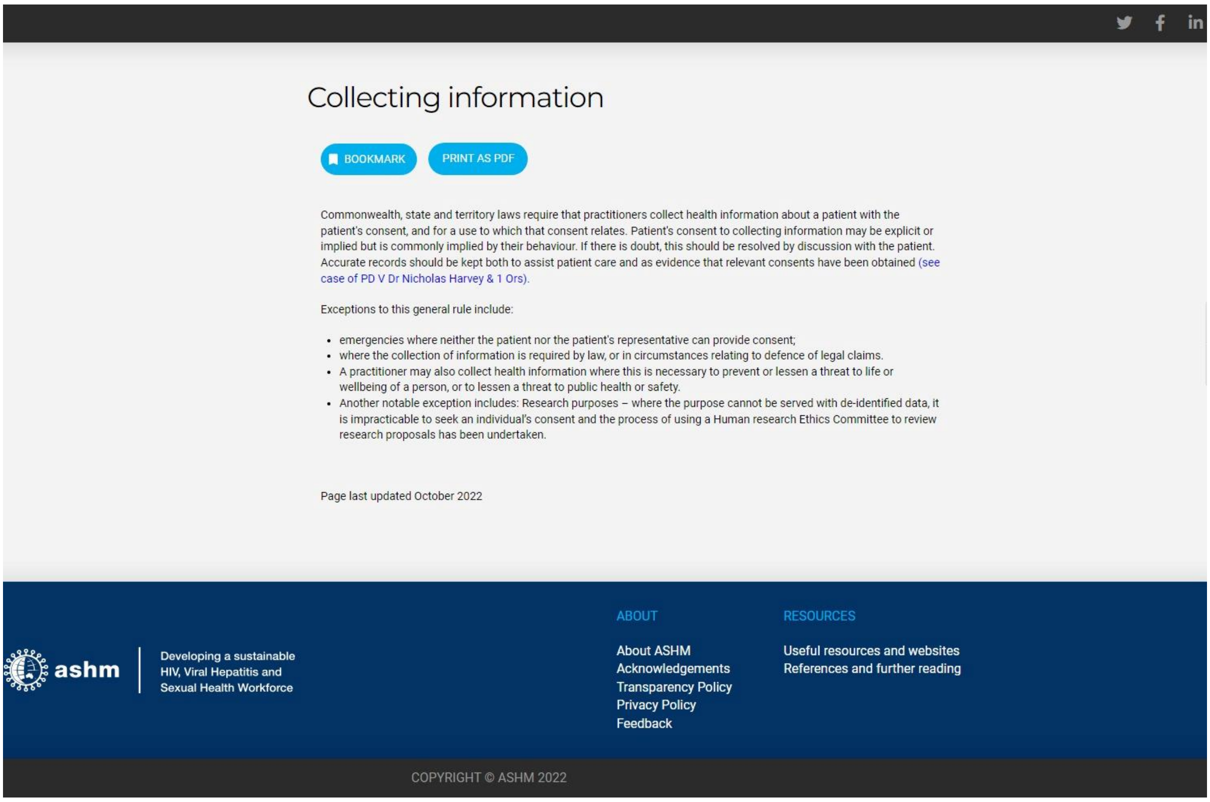

Collecting information

Commonwealth, state and territory laws require that practitioners collect health information about a patient with the patient's consent, and for a use to which that consent relates. Patient's consent to collecting information may be explicit or implied but is commonly implied by their behaviour. If there is doubt, this should be resolved by discussion with the patient. Accurate records should be kept both to assist patient care and as evidence that relevant consents have been obtained (see case of PD V Dr Nicholas Harvey & 1 Ors).

Exceptions to this general rule include:

- emergencies where neither the patient nor the patient's representative can provide consent;
- where the collection of information is required by law, or in circumstances relating to defence of legal claims.
- A practitioner may also collect health information where this is necessary to prevent or lessen a threat to life or wellbeing of a person, or to lessen a threat to public health or safety.
- Another notable exception includes: Research purposes – where the purpose cannot be served with de-identified data, it is impracticable to seek an individual's consent and the process of using a Human research Ethics Committee to review research proposals has been undertaken.

Page last updated October 2022