SOUTHERN PHILIPPINES MEDICAL CENTER

J.P. Laurel Ave., Bajada, Davao City

USER'S ACCOUNT REGISTRATION FORM

Date :		
lame of Employee :		
ob Function :	License No	o. :
Department /Ward:		
Employee's Signature :		
ummary of Request (type of system	n / access permission)	
approved by :		
	Nurse/Chief Resident)	
legistered by : (Print Name / Signat	Remar :ure / Date)	ks :
PMC-F-IHOM-07	Effectivity : January 1. 2016	Rev. 1
SPMC-F-IHOM-07	Effectivity : January 1, 2016	Rev. 1
SOUTHE J.	Effectivity: January 1, 2016 RN PHILIPPINES MEDICAL CENTER P. Laurel Ave., Bajada, Davao City R'S ACCOUNT REGISTRATION FORM	Rev. 1
SOUTHE J. <u>USE</u>	RN PHILIPPINES MEDICAL CENTER P. Laurel Ave., Bajada, Davao City	Rev. 1
SOUTHE J. <u>USE</u> Date:	RN PHILIPPINES MEDICAL CENTER P. Laurel Ave., Bajada, Davao City R'S ACCOUNT REGISTRATION FORM	Rev. 1
SOUTHE J. USE Date: J. USE	RN PHILIPPINES MEDICAL CENTER P. Laurel Ave., Bajada, Davao City R'S ACCOUNT REGISTRATION FORM	
SOUTHE J. USE Date: Jame of Employee: Ob Function:	RN PHILIPPINES MEDICAL CENTER P. Laurel Ave., Bajada, Davao City R'S ACCOUNT REGISTRATION FORM License No.	
SOUTHE J. USE Date: Name of Employee: Ob Function: Department /Ward:	RN PHILIPPINES MEDICAL CENTER P. Laurel Ave., Bajada, Davao City R'S ACCOUNT REGISTRATION FORM License No.	
SOUTHE J. USE Date: Name of Employee: Ob Function: Department /Ward: Employee's Signature: Summary of Request (type of system	RN PHILIPPINES MEDICAL CENTER P. Laurel Ave., Bajada, Davao City R'S ACCOUNT REGISTRATION FORM License No.	D. :
SOUTHE J. USE Date: J. USE Date: Department of Employee: Department /Ward: Employee's Signature: J. USE USE USE USE USE USE USE US	RN PHILIPPINES MEDICAL CENTER P. Laurel Ave., Bajada, Davao City R'S ACCOUNT REGISTRATION FORM License No.	D. :
SOUTHE J. USE Date: Name of Employee: Ob Function: Department /Ward: Employee's Signature: Summary of Request (type of system	RN PHILIPPINES MEDICAL CENTER P. Laurel Ave., Bajada, Davao City R'S ACCOUNT REGISTRATION FORM License No. n / access permission) Nurse/Chief Resident)	D. :

SPMC-F-IHOM-07 Effectivity: January 1, 2016 Rev. 1

Confidentiality Clause:

Hospital System confidentiality is a fundamental concern of the SPMC. In such case, all kinds of hospital information / data must at all times be protected, as I declare:

- That I am bound by the common duty law of confidence;
- That it is my duty to protect the Hospital System confidentiality as imposed by the SPMC;
- That I must hold in strict confidentiality all the information relating to SPMC including its patients and its employees;
- In the event of any violation of the provision of this Confidentiality Clause, I shall be subjected to Administrative proceedings or Criminal Charges, whichever may be applicable;
- That in case of retirement, resignation or any form of separation from SPMC, I will be required to have a clearance with the IHOMP.

Confidentiality Clause:

HIS confidentiality is a fundamental concern of the SPMC. In such case, all kinds of hospital information / data must at all times be protected, as I declare :

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