PHIA Form Correction Complaint

A person who made a request to a custodian to correct an error or omission in their personal health information may use this form to file a correction complaint. Section 66 (1) of the **Personal Health Information Act** (PHIA) states:

Where a custodian has refused the request of an individual \dots for correction under subsection 60(1), the affected individual may file a complaint with the commissioner.

You can complete and send this form to commissioner@oipc.nl.ca. You can also send your complaint by mail to the Office of the Information and Privacy Commissioner, PO Box 13004, Station A, St. John's, NL A1B 3V8, or by fax to 709-729-6500.

The Office of the Information and Privacy Commissioner (OIPC) will send a copy of this form to the custodian. In order to conduct our investigation, it may be necessary for OIPC to access and review your personal health information. If you have any questions or concerns, please contact OIPC at 709-729-6309 or toll free at 1-877-729-6309.

Date of Correction Complaint:			
I am making this complaint on behalf of:	☐ myself	☐ another person	
If you are making this complaint on behalf of "another person," please provide supporting documents authorizing you to act on their behalf.			



Section 1: Your Information			
Name			
Organization (if applicable)			
Mailing Address			
Please provide your <u>complete</u> mailing address.			
Phone Number			
Email			
Section 2: Custodian Information	nation		
Custodian Name			
Custodian File Number			
Date of Your Correction Request			
Please attach a copy of any correspondence you received from the custodian about your correction request.			
\square I have attached correspondence I received from the custodian; or			
\square I am not attaching any correspondence.			
Section 3: Reason for Com	plaint		
☐ I have a complaint about the custodian's refusal to correct my personal health information.			
☐ I made a request to correct responded.	my personal health information and the custodian has not		

Section 4: Details of Your Complaint
Section 5: Resolution or Remedy You Are Seeking

