

**Information Release Authorisation**

I (Full Name),

of (Address),

give permission for my treating medical practitioners and allied health providers to discuss and exchange details of my current injury or illness, sustained on...../...../.....and diagnosed as, ..... with appropriately authorised Department of Justice and Attorney-General (DJAG Rehab) injury management personnel.

I also give permission for any medical practitioner or allied health provider engaged by DJAG Rehab to assist with my rehabilitation or return to work, to disclose information relevant to my current injury or illness.

**Current treating medical professionals**

Name:	Address:	Phone:	Fax:

**Additional**

Yes No N/A

I give permission for WorkCover Queensland to release a complete copy of my file (including medical reports) to assist in my ongoing rehabilitation or return to work.

I consent to QSuper disclosing information (including medical reports) relevant to my current injury/illness.

I understand that information collected through this consent will be used to assist in my rehabilitation and return to work with respect to my current injury/illness and is in accordance with the DJAG Injury and Illness Management Policy.

I understand that the privacy and confidentiality of all information collected will be respected. Personal Information will only be provided to another person or body, without my consent, where authorised or required by law.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

The Department of Justice & Attorney General is collecting the information on this form for the following purposes:

- to assist in your rehabilitation or return to work; and
- for the Department to discharge its legislative, accountability, administrative, reporting, management, personnel and financial functions.

**PRIVACY STATEMENT:**

The Department is collecting your personal information to assist in the provision of workplace rehabilitation. The information obtained from the above practitioners may be provided to other medical practitioners, QSuper, WorkCover Queensland or Departmental management. It may also be provided to the Shared Service Agency, or any successor to that agency, as part of the administration and management of the rehabilitation process.