



TERMS OF ACCEPTANCE

I agree to keep my username and password confidential and comply at all times with Noosa Radiology's policies related to the security and privacy of electronic records. I understand my responsibility for respecting patient's privacy and protecting the confidentiality of information to which I have access, and will comply with all relevant privacy laws and codes including but not limited to, the Commonwealth Privacy Act 1988 and its amendments. I indemnify Noosa Radiology in relation to all losses, damages, actions, claims, costs or expenses which may be bought against, suffered, or incurred by Noosa Radiology as a result of my failing to comply with any of the terms set out above.

Sign: .....

Date: .....

Please Fax to 07 5440 9777. You will be issued a username & password within 7 days. To access Noosa Radiology Connect, please visit our website [www.noosaradiology.com.au](http://www.noosaradiology.com.au) & click on the link under "Referrers".