

Registered User Only nsert Q Fever Register lumber	

Australian Q Fever Register

PO Box 1278 Toowoomba QLD 4350

Personal Details and Consent Form

The Australian Q Fever Register is owned by the Australian Meat Processor Corporation (AMPC). Its purpose is to assist organisations to determine the Q Fever immune status of an individual, to prevent unnecessary testing, and to minimise the risk of exposing susceptible individuals to the organism in the workplace. To be included on the Register, you must complete and sign this consent form. Please do not leave any blank spaces - all the information is required. Give the completed form to your employer to register your details or send it to the Australian QFever Register with a copy of your medical evidence that confirms your Q Fever Status.

Personal Details	Ple	ase print clearl	y - (Leg	al nam	e only, as s	howr	on b	irth cei	tificate or	passport)	
Gender	□ N	□ Male □ Female			Phone number						
Name											
	Give	n Name	Other Na	Other Names Family Name							
Date of Birth			Postal Address								
	Day month year			Street number, name, PO Box, RMB, Flat number, etc							
Town/Suburb			State		Postcoo		Country				
Identification											
Security Question If you telephone the register	. vou	☐ Mother's ma	r's maiden name (her name before she was married)?								
will be asked this question to confirm your identity. Tick one of these four questions that		□ Town where you were born?□ Town where your spouse was bo				ANSWER					
nobody else is likely to know answer to.	☐ Your first pet's name?				Write	the Answ	er to the q	uestion you tick	red here.		
Type of Job		Please tick onl	y one b	ox that	best describ	es yo	ur intei	nded jo	b.		
☐ Work in a meat proce	Work in a meat processing plant				☐ Work with livestock or wildlife						
☐ Contractor or visitor t	o a me	eat processing plant			□ Othe	er					
Name of employer of	or Inc	dustry Group									
Previous Screenin	g / V	accination									
□ I believe I have p	revic	ously been tested	d and/or	vaccin	ated for Q fe	ever					
Screening location and / or name of GP								ximate	Date	1	
understand that: Information on the with Q fever. Nobody can accordence read the information and information.	ess i orma dersta	my personal det tion on the bac and the informat	ails on t k of thi ion on tl	he Reg s page his form	ister without for more de and I herel	my petails	ermiss before sent to	ion. signir the inc	ng this form	m.	
Signed:						Da	ate:	1	1		
*A Q-FEVER C	4 D D	CANINOT DE L	COLLED	IINII EG	e Tule EO	DM IC	. = 1 11 1	V COM	IDI ETED A	AND CIONET	

Do Not send the information page (page 2 of this document) to the Register. It is for you to read.

Information page for Personal Details and Consent form (do not send this page to the Register)

I understand that:

- The information that may be included on the register is: Name; Date of birth; Address; Type of job; Date of any Q Fever Vaccination administered; Date and results of any Q Fever tests performed; Date of laboratory confirmation of any diagnosis of Q Fever disease.
- 2) I will be issued with a Q Fever card which includes my Name; Date of Birth; Q Fever Register Number; Q Fever Immune status and the date the card was issued. I will also receive a copy of the information held by the Register and have an opportunity to correct any errors.
- 3) Employers (meat processors) will be able to access my personal information held by the Register for the purpose of confirming my immune status.
 - Employers can only access my information if they know my name, date of birth and Register Number.
 - Employers can only find my Register Number if
 - i) I tell them, or
 - ii) They electronically submit the information in this consent form to the Register using the Internet.
- 4) If I have been previously tested or vaccinated, my employer or doctor may contact the site at which the screening/vaccination took place and request copies of my relevant medical records.
- 5) The information on this form will be either submitted to the Register by my current employer (after which this signed original consent form will be lodged with the Register) or mailed by me directly to the Register. Information may be submitted, and my details accessed, over the Internet. Secure connections and passwords ensure that only authorised employers are able to submit information to or access information from the Register.
- 6) If I wish to know what details are recorded in the Register, my Register Number, to request a replacement Q Fever card, or correct errors in the Register, I may call the Q Fever Register Help-Line, and identify myself using my name, date of birth, and answering the Security Question selected on this form. I must supply appropriate documentation in order to make any changes or corrections to the Register data.
- 7) A copy of my Q Fever screening test results and Q Fever vaccination certificates will be sent to the Register and kept securely. No unauthorised person will have access to these documents.
- 8) I may request for my details to be permanently removed from the Register at any time by ringing the Register Help-Line.
- 9) Summary information including the total number of people in the Register that have been tested, vaccinated or diagnosed may be released publicly for the purpose of monitoring the disease, but such information will not contain the names or details of individual persons.
- 10) Information in the Register may be used for the purpose of research into Q fever, subject to clearance by an Ethics Committee. Researchers may then be provided with personal information allowing them to contact me for further information, if I have indicated on the form that I consent to being contacted for research purposes. Researchers may not disclose personal identifying information without my consent.
- 11) My personal information will not be released or sold for any commercial or marketing purpose. No information will be released to any government authorities except in the following circumstances:
 - where a government authority acts as a registered screening and vaccination service provider, or
 - where there are reasonable grounds to believe that disclosure is necessary to prevent a threat to life or health.

For more information contact the Q Fever Register Help-Line or visit the Q Fever Register Web site:

Australian Q Fever Register Help-Line: 1300 QFEVER (1300 733 837)

Or: **07 4688 2610**

Fax number: 07 4688 2699

Australian Q Fever Register Web site: http://www.qfever.org

Postal Address: Australian Q Fever Register

PO Box 1278, Toowoomba QLD 4350

Information for Employers and Medical Practitioners:

Please give a copy of this form to all employees / clients involved in Q Fever screening and vaccination programs, along with a copy of the "Fact Sheet - Q Fever and the Australian Q Fever Register", and invite them to participate in the Register. Note that a signed consent form is required for submission of information to the Register, along with evidence of testing and vaccination status. More information is available on the web site or by contacting the Register Help-Line.

Detailed instructions for how to submit completed paperwork to the Register can be found on the Register web site or by calling the Register Help-Line.