



Patient information on data protection

Dear patients,

The protection of your personal data is important to us. According to the EU General Data Protection Regulation (DSGVO), we are obliged to inform you about the purpose for which our practice collects, stores or forwards data. You can also find out from the information what rights you have with regard to data protection.

1. Responsibility for data processing

Responsible for data processing:

Dr. med. C. Sadowski

Tharandter Str. 5, 01159 Dresden

Telephone: (0351) 413 5836

E-Mail: anmeldung@fidd.info

2. Purpose of data processing

Data processing is carried out based on legal requirements in order to fulfill the treatment contract between you and your doctor and the associated obligations. For this purpose, we process your personal data, in particular your health data. This includes medical history, diagnoses, treatment suggestions and findings that we or other doctors collect. For these purposes, other doctors or psychotherapists with whom you are being treated may also provide us with data (e.g. in doctor's letters).

The collection of health data is part of your treatment. If the necessary information is not provided, comprehensive treatment cannot be provided.

3. Recipient of your data

We only transfer your personal data to third parties if this is permitted by law or if you have consented to this. Recipients of your personal data can primarily be other doctors/psychotherapists, health insurance companies, the medical service of the health insurance company and medical associations.

The transmission is mainly carried out for the purpose of billing the services provided to you and to clarify medical questions and questions arising from your insurance relationship. In individual cases, data may be transmitted to other authorized recipients.

4. Storage of your data

We only keep your personal data as long as necessary to carry out the treatment. Due to legal requirements, we are obliged to store this data for at least 10 years after the treatment has been completed. Other regulations may require longer retention periods, for example 30 years for X-rays in accordance with Section 28 Paragraph 3 of the X-ray Ordinance.

5. Your rights

You have the right to receive information about your personal data. You can also request incorrect data to be corrected. Under certain conditions, you have the right to delete data, the right to restrict data processing and the right to data portability. Your data is processed on the basis of legal regulations. We only need your consent in exceptional cases. In these cases, you have the right to withdraw consent for future processing. You

also have the right to complain to the responsible data protection supervisory authority if you believe that the processing of your personal data is not taking place lawfully.

The address of the supervisory authority responsible for us is: Sächsischer Datenschutzbeauftragter, Devrientstraße 1, 01067 Dresden, Telephone: 0351/85471 101.

6. Legal basis

The legal basis for the processing of your data is Article 9 Paragraph 2 DSGVO in conjunction with Section 22 Paragraph 1 Number 1 Federal Data Protection Act. If you have any questions, please feel free to contact us.

7. Fees for unexcused absence

As an appointment practice, we hold your appointment exclusively for you. If you cannot keep your appointment, please cancel at least 24 hours before the appointment. If you do not show up for your appointment, we reserve the right to charge you a cancellation fee of 30 euros, calculated according to GOÄ, in accordance with Section 615 of the German Civil Code (BGB).

8. Data protection information about Doctolib

For optimal appointment management, we use Doctolib appointment management system. Doctolib offers us, on the one hand, a modern appointment management system and, on the other hand, our patients the opportunity to make appointments with us online on the website <https://www.doctolib.de/>. Doctolib GmbH (Mehringdamm 51, 10961 Berlin) acts as a processor for us. We use the Doctolib appointment management software for all of our patients (regardless of whether the patient has a Doctolib user account for online booking or not) to manage appointments consistently. Doctolib processes all data in accordance with all applicable data protection regulations and applies the highest security standards. To make an appointment, the following data is entered into the Doctolib appointment management system: last name, first name, date of birth, address, telephone number, email, address, family doctor, health insurance status, referring doctor, reason for visit and appointment history.

Your data will be recorded for the purposes of appointment management, as has always been the case with us. The legal basis for the processing of your data by us is Art. 6 I b) DSGVO (the treatment order that you give us), Art. 6 I a) DSGVO (consent for appointment reminders via SMS and email) and Art. 9 II h) DSGVO (the purposes of health care). Doctolib then acts as our processor (Article 28 DSGVO).

Doctolib does not forward the data to commercial providers. Doctolib is contractually obliged to maintain confidentiality in accordance with Sections 203 and 204 of the German Criminal Code. A release from the obligation of confidentiality is not necessary.

8.1 Special features of online booking

A Doctolib user account is required to book an appointment online; Doctolib's data protection information is available on the website [doctolib.de](https://www.doctolib.de). In order to reduce appointment cancellations, you will be reminded of your appointment via SMS and/or email using the Doctolib calendar system if you have booked your appointment online. If you no longer wish to receive such reminders, please let us know at any time and we will reinstate the reminders.

8.2 Consent to appointment reminders and recalls via SMS and/or email

In order to reduce appointment cancellations, we would like to remind you of your appointment via SMS and email using the Doctolib calendar system, even if you do not have a Doctolib user account. Please confirm that you agree to this with your signature. If you no longer wish to receive reminders, let us know at any time and we will reinstate the reminders.

☐ Yes, I would like to receive appointment reminders.

☐ No, I do not want to receive appointment reminders.

I would like to take part in check-ups and I would like to be reminded of all medically necessary treatments. I am also willing to take part in so-called recalls (repeated preventive examinations). If you no longer wish to receive reminders, let us know at any time and we will reinstate the reminders.

☐ Yes, I would like to receive recalls.

☐ No, I don't want to receive any recalls.

Name in block letters: _____

Date: _____

Signature: _____

Praxis für Ganzheitliche Frauenheilkunde

Dr. med. Carolin Sadowski & Dr. med. Anne Kreklau (angestellte Ärztin)

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