

## DATA RECONCILIATION FORM

### PERSONAL DATA REQUIRED FOR MEDICAL DOCUMENTATION

Created BHC ID Nr: \_\_\_\_\_

Name: \_\_\_\_\_

Mother's name: \_\_\_\_\_

Address: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Social security number:  
(in the case of Hungarian citizens) \_\_\_\_\_

Type of ID:  
(in the case of foreign citizens) \_\_\_\_\_

Registration number of ID:  
(in the case of foreign citizens) \_\_\_\_\_

### CONTACT DETAILS (their processing is carried out exclusively on the basis of the Data Protection Notice)

E-mail: \_\_\_\_\_

Landline phone / mobile: \_\_\_\_\_

Please check the box for the preferred mode of receiving your documents and test findings constituting medical information (if they are issued at a later date)

- ☐ I will download them in electronic form from online customer service page, should this download be not available please send it attached to a password protected e-mail.
- ☐ I will collect them in person and only require notification about completion of the document
- ☐ An authorized representative will collect them, and I only require notification about completion of the document

We would like to inform you that the Buda Health Center will issue an E-invoice for the service fee, which will be sent to your contact e-mail address.

### Get first hand information about our promotions, news and prevention advice!

With your consent, Buda Health Center will send you newsletters to the email address provided by you with specialised materials and information documents related to the healthcare services provided by Buda Health Center.

Please mark with an X which newsletter types you would like to subscribe to!

- ☐ I hereby consent to receiving **general newsletters** from Buda Health Center to the e-mail address provided by me. This consent is valid until withdrawal of consent.
- ☐ I hereby consent to receiving **exclusive newsletters (providing specialized, professional information)** from Buda Health Center to the e-mail address provided by me. This consent is valid until withdrawal of consent.



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

Signature: \_\_\_\_\_

## INFORMATION NOTICE - PROCESSING OF PERSONAL DATA

| DATA CONTROLLER                                                                                          | DATA PROTECTION OFFICERS                                                      |
|----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| Budai Egészségközpont Zrt. (BHC)<br>Represented by:<br>Dr. Csernavölgyi István - chief executive officer | Dr. Kéri Ádám, Dr. Kéri Szonja, Dr. Kéri Tamás<br>Main contact: Dr. Kéri Ádám |
| 1126 Budapest, Királyhágó u. 1-3.                                                                        | 1281 Budapest, Pf.12.                                                         |
| Cg.: 01-10-141707<br>www.bhc.hu<br>dpo@bhc.hu                                                            | adam.keri.office@icloud.com                                                   |

### LEGAL BASIS OF PROCESSING

The legal basis for data processing of personal data on this "Data Reconciliation Form" is compliance with legal obligation related to the medical service provided by BHC (e.g.: documentation requirements, contact data for the purpose of receiving medical documents or establishing contact) and in some cases the performance of a health care service contract (asking for a quotation, making an appointment before the examination). In some emergency cases, the legal basis is vital interest (emergency contacts).

Legal basis for newsletters is your consent. Your consent is free and anytime revocable regarding all types of newsletters or any of them individually. The Data Protection Notice on our web page introduces the differences between the special categories of newsletters. Should you have any questions due to language barriers, do not hesitate to contact us.

The data controller may also contact you with a customer satisfaction survey. What satisfaction surveys are concerned, the legal basis is the legitimate interest of the service provider and clients. The legitimate interest is the provision of quality health care services, and the identification and remedy of quality problems.

Processing of special categories of personal data is relying on Art.9 (2)(h), which is medical exception.

### RIGHTS OF DATA SUBJECTS

You are entitled to the following rights: right to information, right of access (including the right to a copy), right to portability (if the legal basis is consent or contract), right to rectification and erasure, right to restriction of processing, right to object and the right to legal remedy. The Hungarian Data Protection Authority can be reached here: (Nemzeti Adatvédelmi és Információszabadság Hatóság, 1363 Budapest, Pf.9., [www.naih.hu](http://www.naih.hu), [ugyfelszolgalat@naih.hu](mailto:ugyfelszolgalat@naih.hu)). You are also entitled to turn to the competent court.

Please read our detailed Data Protection Notice on our web page (<https://www.bhc.hu>) or contact our data protection officer.