

Third Parties Requesting an Individual's Personal Health Information

The table below outlines the process to disclose PHI to third parties.

- Where consent is required, only release the information that is specified on the consent form.
- Fees may be charged to the requestor for disclosing an individual's PHI. See [Health Information Services - Provincial Fee Schedule](#) for fee amounts.
- When a patient or designate request copies of the health record, the ROI request form and documentation of release must be provided unless there is clear indication on the document that it might cause harm. In that situation the physician must be notified and provide the Access to Information (ATI) – Provider Review Form to indicate the rationale for not disclosing.
- For more information related to processing requests for personal health information, refer to the Access and Disclosure of Personal Health Information Procedure ([SHA-07-003P4](#))

| Third Parties Requesting PHI | Consent Required from the Subject Individual | Requirements/Considerations | Legislative Reference | Fees |
|---|--|--|---|------|
| Accreditation Canada | N/A | Refer all requests to the SHA's Director, Accreditation. | | No |
| Alcohol Treatment Centres | Yes | | | No |
| Ambulance (EMS) | No | <ul style="list-style-type: none"> • Can provide identification information for the purpose of obtaining payment for the provision of services, such as: <ul style="list-style-type: none"> ○ DOB; and ○ HSN. • In emergencies, ambulance personnel are part of the care team so it is appropriate to disclose the PHI that is required to provide an authorized health service to an individual. | HIPA s. 26(2); s. (27)(4)(a); s. 27(4)(b) | No |
| Animal Protection Officers or Police Officers enforcing <i>The Animal Protection Act, 2018</i> | See Work Standard | Limited personal health information can be disclosed to Animal Protection Officers or Police Officers. See Work Standard: Disclosure of personal health information to designated Animal Protection Officers or Police Officers enforcing <i>The Animal Protection Act, 2018</i> | HIPA c.27(4)(j) | No |
| Canadian Pension Plan (CPP) | Yes | | | Yes |
| Canadian Blood Services | N/A | Refer all requests to SHA Lab Services. | | No |
| Canadian Medical Protection Association (CMPA) | Yes | Requests for a complete record must come from a CMPA lawyer. | | Yes |

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|---|--|---|---|------|
| Canadian Security Intelligence Services (CSIS) | Yes | <ul style="list-style-type: none"> • CSIS officers: <ul style="list-style-type: none"> ○ Have the authority to carry out security checks on persons who are threats to the security of Canada; and ○ Can access and obtain information contained in the health record with a valid warrant. • Notify the HIS Director and SHA Risk Management. | Canadian Security Intelligence Service Act, RSC 1985, c C-23 | No |
| Saskatchewan Cancer Agency (SCA) | No | <ul style="list-style-type: none"> • Prescribed information must be reported to the SCA so that it can carry out its functions. • Information requested by the SCA must be released within fourteen (14) days of the information being collected. • Information that arises from a professional relationship or from providing a health service who knows or has reason to believe that an individual has a reportable cancer must be disclosed. | <i>The Cancer Agency Act</i> , SS 2006 c C-1.1 <i>The Cancer Agency Regulations</i> , RRS c C-1.1 Reg 1. | No |
| Clergy/Spiritual Leader | Yes | The individual provides consent as part of the admissions process or during their stay. | | No |
| Collection Agencies | Yes | | | Yes |
| Coroners | No | <ul style="list-style-type: none"> • Coroners can only request information on deceased individuals or the mother of a stillbirth without consent. • Coroners must present their own form. • See Disclosure of Personal Health Information to Coroners Work Standard. | <i>The Coroners Act</i> s. 13(1)(b) | No |
| Court Orders | No | Specific legal authority must be confirmed in writing and approved by SHA Risk Management. | | No |
| Criminal Injuries Compensation Board of Canada | Yes | | | No |
| Educational Institutions | No | <ul style="list-style-type: none"> • Only reasonably de-identified information may be disclosed for educational purposes. • Quantity and type of information to be disclosed will be established by HIS and the SHA Privacy Office. | | No |

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|--|--|--|--|------|
| Educational Institutions (elementary and secondary schools) | Yes | | HIPA s 27(1) | No |
| Employers | Yes | | | Yes |
| Federal Government Agencies | No | <p>Access to health information may be given upon request, in writing, from a Federal Government department pertaining to an individual who is a member or former member or is eligible to receive services from^{10,11}:</p> <ul style="list-style-type: none"> • Canadian Armed Forces; • Department of National Defense; • Royal Canadian Mounted Police (RCMP); • Veterans Affairs; and • Health Canada. | <p>HIPA c. 27(4)(j)</p> <p>HIPA s. 27(4)(k)(i)</p> | No |
| Fire Departments | No | <p>Information requested by the Inspector to send to the Federal Government where the fire department was called and there are either injuries or property damage. The chart note says:</p> <ul style="list-style-type: none"> • Disclosure to (Inspector name), Inspector, (name of fire department); • 27(4)(l) of HIPA and 16(1), 17(1) and 17(2) of The Fire Prevention Act; • Patient's first and last name; • Patient's date of birth; • Patient's home address; • General description of injuries (e.g., use minor, light or severe as descriptor); and • General injury location (e.g., use hands, face, legs, etc. as descriptor). | <i>The Fire Prevention Act</i> s. 17(1), 17(2) | No |
| Florist Shops | Yes | <ul style="list-style-type: none"> • Forward calls to Admitting, Switchboard, Registration or Visitor Information. • Florists will leave flowers near the front door (e.g., switchboard or front office) and a team member will pick up the flowers and deliver them to the individual's room. | | No |
| Foundations | Yes | | | No |
| Funeral Homes | No | The Medical Certificate of Death will be given to the funeral home where the body has been released. | | No |

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|---|-----------------------|--|---|---|------|
| Health Care Professionals Within the SHA | | No | Information will be released on a need-to-know basis upon request to any allied health care professional employed by the SHA who is working with an individual during the course of the individual's treatment. For the purposes of implied consent, the request must have 2 identifiers (e.g. name, HSN, date of birth). | HIPA s. 26 | No |
| Health Management Companies | | Yes | Examples include: <ul style="list-style-type: none"> • Best Doctors; • Teledoc; and • Healthiest You. | | Yes |
| Hospitals Outside of the SHA | | No | Verbal requests can be made in emergent situations, provided that reasonable steps have been taken to ensure the identity of the requesting party. See Section 7.5 <i>Telephone Requests</i> in the <i>Disclosing PHI</i> section of this procedure. | HIPA s. 27(2)(a), s. 27(2)(b) | No |
| | | No | <ul style="list-style-type: none"> • The information is required for continuing care. • For the purposes of implied consent, the request must have 3 identifiers (e.g. HSN, date of birth, middle name, mailing address). | HIPA s. 27(2)(a), s. 27(2)(b) | No |
| Insurance Companies | | Yes | Only the information specified on the consent will be released. See Saskatchewan Government Insurance (SGI) below for SGI specific instructions. | | Yes |
| Immediate Family and Friends | | N/A | See Section 5 Third Party Requests for Access to a Client's PHI . | | No |
| Joint Medical Professional Review Committee | | No | Upon request, access to the health record may be given. | HIPA s. 27(4)(i) <i>The Saskatchewan Medical Care Insurance Act, s. 49</i> | No |
| Le | Litigation Situations | No | SHA Legal Counsel requests an individual's health record, see Sequestered Patient Charts work standard. | HIPA s. 27(4)(m) | No |

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| General | Yes | <ul style="list-style-type: none"> • Only release information that is specified in the consent. • An HIMP (or designate) must document on the chart they are present when a lawyer reviews health information instead of obtaining copies. • If a request for health information of a deceased individual is received from a lawyer, ensure that the request is accompanied by a valid consent from the nearest relative or the executor of the estate. • The Crown Prosecutor must submit a clear consent before records can be released. • Legal Aid is included under this subheading. | | Yes |
| Appeals Related to Mental Health & Addictions Services (MHAS) | No | KMP Law handles all appeals for the SHA related to <i>The Mental Health Services Act</i> and <i>The Public Guardian and Trustee Act</i> . | | No |
| Local Authority & Freedom of Information and Protection of Privacy Act (LA FOIP) | N/A | <ul style="list-style-type: none"> • Access to information requests under LA FOIP must be distinguished from requests from individuals to access their own PHI under HIPA. • Refer all requests to the SHA Privacy Office. | | N/A |
| Long Term Care (LTC) | No | <ul style="list-style-type: none"> • Examples include: <ul style="list-style-type: none"> ○ Nursing homes; and ○ Extended care. • When an individual is transferred to the LTC home pertinent health information may be released to the LTC home or extended care facility for the purposes of providing care to the individual to whom the information relates. • Other requests for information should follow the guidelines under Health Care Professionals. | HIPA s. 26, s. 27 | No |
| Media | N/A | Refer to SHA's Community Engagement and Communications department. | N/A | N/A |
| Ministry of Health | No | Registration information may be disclosed by the SHA to the Ministry of Health for the purpose of planning, delivering, evaluating or monitoring a program of the minister, SHA that relates to the provision of health services or payment for health services. | HIPA s. 28(2), s. 28(3) | No |

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| Ministry of Justice | No | Supporting documentation required using an authorized form (e.g., fiat) or judge's order. | HIPA s. 27 | No |
| Ministry of Social Services and Child and Family Requests | No | See: <ul style="list-style-type: none"> • Request for Information – Social Services Children Under Care of Ministry of Social Services Work Standard • Request for Information – Social Services Children Under Protection Investigation or Provision of Protection Services Work Standard • Request for Access to Personal Health Information – Ministry of Social Services Form | | No |
| Non-Insured Health Benefits (NIHB) Program | No | All requests must be made in writing and must clearly describe the records and information required. | HIPA c. 27(2)(a), s. 27(2)(b) | No |
| Occupational Health and Safety (OHS) Health Nurse | Yes | Consent is required unless legislative authority exists (e.g., in the event of a flu/epidemic outbreak). | | No |
| Ombudsman SK | No | <ul style="list-style-type: none"> • Requests from Ombudsman Saskatchewan must be in writing, citing the request and the legislative authority under which they are requesting the information. <ul style="list-style-type: none"> ○ The written request and the response is filed in the patient's health record. • Refer to a Privacy and Access Office or SHA Risk Management. | HIPA, s. 27(4)(l) <i>The Ombudsman Act, 2012, s. 25.</i> | No |
| First Nations Health Ombudspersons Office | Yes | <ul style="list-style-type: none"> • Requests from the First Nations Health Ombudspersons Office must be accompanied by written consent from the subject individual or their substitute decision maker. | | |
| Out of Country Insurance Companies | Yes | <ul style="list-style-type: none"> • Invoicing for the release of information is included with the invoice for the entire stay and therefore not submitted separately; <ul style="list-style-type: none"> ○ This includes when the patient is requesting the information on behalf of the insurance company. ○ If the patient is requesting two copies you can charge the patient photocopy fees for the extra copy. | | No |
| Oxygen Companies | No | Examples include: <ul style="list-style-type: none"> • Air Gas; • Vital Air; and • Prairie Oxygen. | HIPA s. 27(2)(a), s. 27(2)(b) | No |

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| Payment for Service | | No | Disclosure of PHI is authorized where it is made for the purpose of obtaining payment for the provision of services to the subject individual and is done in accordance with the SHA's policies and procedures and all ethical guidelines. | | No |
| Personal Care Home | | Yes | | | No |
| | | No ¹⁷ | Information is requested to carry out quality of care activities if: <ul style="list-style-type: none"> • The care home uses the PHI only for the purposes for which it was disclosed; • Does not make further disclosures of the information; and • Takes reasonable steps to preserve the confidentiality of the information. | HIPAA s. 27(2)(a), s. 27(2)(b) | No |
| Pharmacies | | No | <ul style="list-style-type: none"> • Information relating to clarification of an individual's HSN number, the name of the ordering physician or Medication Administration Record (MAR) can be provided to the pharmacy without client consent. • Refer all requests for additional health information to the attending physician. | HIPAA s. 27(2)(a), s. 27(2)(b) | No |
| Physicians | Attending Physicians with Privileges | No | The attending physician may direct copies of medical reports to the referring physician, surgeons, and other health care professionals involved in the treatment of the individual. | HIPAA s. 27(2)(a), s. 27(2)(b) | No |
| | Physicians' Requesting Records for Legal Purposes | N/A | When physicians are not the dictator or carbon copy recipient, refer the physician directly to Risk Management. | | N/A |
| | Physicians Access to Client Histories | No | <ul style="list-style-type: none"> • Members of the medical staff of the SHA may consult health information on a need-to-know basis as it pertains to their work. • If the individual has been admitted to a health facility/agency, previous health information will be sent to the nursing unit, as requested, or in conjunction with facility/agency policy, to aid in treatment. • A physician may not request health information for the purpose of giving information to an attorney. | HIPAA s. 26 | No |

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| | Physician's Offices | Yes (implied consent) | <ul style="list-style-type: none"> Information as it pertains to their clients may be released to the attending physician's offices. If the information is requested by telephone and verify the fax number before sending. The information is required for continuing care. Where the requesting physician is not referenced in the individual's chart, the SHA shall ask the requesting physician's office provide 3 client identifiers (e.g. HSN, date of birth, middle name, mailing address). | HIPA s. 27(2)(a), s. 27(2)(b) | No |
| | Physicians Outside the SHA | Yes (implied consent) | Where the requesting physician is not referenced in the individual's chart, the SHA shall ask the requesting physician's office provide 3 client identifiers (e.g. HSN, date of birth, middle name, mailing address), along with the client's appointment or visit date. | HIPA s. 27(2)(a), s. 27(2)(b) | No |
| Planned Parenthood | | Yes | Information is required for ongoing care. | | No |
| Police Services | Police services - General | Yes | <ul style="list-style-type: none"> Refer to the Disclosure of Personal Health Information to Police Procedure (SHA-XX-XXX). | | No |
| | Warrant to Search | No | <ul style="list-style-type: none"> Specific legal authority must be confirmed in writing and approved by SHA Risk Management. Warrants to Search do not give authority to remove the original record from the premises. Under the direct supervision of the HIS manager, OA manager, or designate, the person presenting the Warrant to Search will be given access to the information contained in the record and will receive copies of the appropriate section of the record. The Warrant to Search or authenticated copy of the warrant will become part of the health record. | | No |
| | Warrant to Search & Seize | No | <ul style="list-style-type: none"> Specific legal authority must be confirmed in writing and approved by SHA Risk Management. Warrants to Search and Seize allow a peace officer to remove the original record from the facility's premises. If the original record is removed from the premises, an exact photocopy of the record must remain at the facility. | HIPA s. 27(4)(p), s. 27(4)(m) | No |

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| Power of Attorney (POA) | Yes | <ul style="list-style-type: none"> • A POA may provide an individual with the power to act on the grantor’s behalf with respect to property, financial and personal affairs. A POA does not automatically give the individual the power to make health care decisions on behalf of the grantor where the grantor lacks capacity to do so. The document must be reviewed to see if healthcare decision making is included. In the absence of a health care directive, health care decisions on behalf of an individual without capacity are not made by their POA, but rather their SDM, as determined by <i>The Health Care Directives and Substitute Decision Makers Act</i>¹⁸. • When a POA submits a request for the release of PHI, the SHA must consider whether the person making the request is actually authorized to access the individual’s PHI, prior to releasing the PHI in accordance with the request. • Have a POA submit the request for PHI by completing the Request for Access to Personal Health Information on Behalf of a Patient Form. • Verify the individual’s identity and status as a POA (e.g., by reviewing a piece of government-issued identification and obtaining appropriate supporting information/documentation). • Review the POA to determine the scope of the POAs authority/rights. Contact SHA Risk Management for assistance. • If it is clear who the POA is, and the type of POA, the requested health information can be released as per process. • Only release information that is specified in the consent. • An HIMP (or designate) must document in the chart they are present when a lawyer reviews health information instead of obtaining copies. • If a request for health information of a deceased individual is received from a lawyer, ensure that the request is accompanied by a valid consent from the nearest relative or the executor of the estate. • The Crown Prosecutor must submit a clear consent before records can be released. • Legal Aid is included under this subheading. | | |

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| Private Health Care Professionals | Yes (implied consent) | <ul style="list-style-type: none"> • Examples include: <ul style="list-style-type: none"> ○ Physiotherapists; ○ Chiropractors; ○ Dieticians; ○ Dentists; ○ Oral Surgeons; ○ Naturopaths; ○ Hearing Plans; ○ Speech Language Pathologists; and ○ Medical Imaging. • The SHA shall ask the requesting health care professional to provide three (3) client patient identifiers (e.g. HSN, date of birth, middle name, mailing address), along with the patient's client's appointment or visit date. <p>* KMP Law handles all appeals for the SHA related to <i>The Mental Health Services Act</i> and <i>The Public Guardian and Trustee Act</i>.</p> | HIPA s. 27(2)(a), s. 27(2)(b) | No |
| Private Home Care | Yes | | | No |
| Private Investigators | Yes | | | No |
| (Police) Production Order | No | <ul style="list-style-type: none"> • HIS refers to internal procedures to process a production order. Non-acute care site can contact an acute care site HIS, in their health network, for guidance. • Where the request is for a broad scope of PHI from police or other parties, and Privacy/HIS raise concerns or make a request for a narrowed scope and are not able to reach an agreement with Police, send the production order to Risk Management to review. • HIS can continue to gather the documents while they wait for Risk Management's response. | HIPA s. 27(4)(p) | No |
| Probation Officer | Yes | | | No |

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|---|--|--|---|------|
| Professional Associations/ Regulatory Bodies | No | <ul style="list-style-type: none"> • Consult SHA Privacy and Access for assistance with disclosing PHI to health related professional bodies. • Refer to WS: Responding to a Request for Disclosure of Personal Health Information and/or Personal Information by a Professional Association • Examples of health related professional associations include: <ul style="list-style-type: none"> ○ College of Registered Nurses of Saskatchewan; and ○ Midwives Association of Saskatchewan. ○ Saskatchewan College of Pharmacy Professionals ○ College of Physicians and Surgeons of Saskatchewan ○ College of Dental Surgeons of Saskatchewan • Examples of non-health related professional associations include: <ul style="list-style-type: none"> ○ Chartered Professional Accountants Saskatchewan | HIPA s. 27(4)(h); s. 27(4)(i); s. 27 (5) | No |

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|---------------------------------------|--|--|-----------------------|------|
| Proxy/Substitute Decision Maker (SDM) | No | <ul style="list-style-type: none"> • In addition to granting the power to make health care decisions, health care directives will result in the ability of the SDM to access certain health care information of the person requiring treatment, to the extent that it is necessary for their decision to be an informed one. • The proxy/SDM is not entitled to receive the entire health record, but only what is required to make an informed decision. • In situations where Team Members receive requests for the release of PHI from individuals other than the individual, pursuant to a Power of Attorney (POA) or a health care directive, Team Members must consider whether the person making the request is actually authorized to access the individual’s PHI, prior to releasing the PHI in accordance with the request. • If the person requesting the information is a proxy, nearest relative, personal guarding, or caregiver of the individual who requires the information in order to make an informed health care decision on behalf of the individual, then: <ul style="list-style-type: none"> ○ The person submits a request for PHI by completing the Request for Access to Personal Health Information on Behalf of a Patient Form; and ○ Verify the identity of the person’s status as proxy, nearest relative, personal guardian or caregiver (e.g., by reviewing a piece of government-issued identification and obtaining appropriate supporting information/documentation). ○ If assistance is required to determine the SDM, consult SHA Risk Management. • If all of these conditions are met, the PHI required to make an informed health care decision on behalf of the subject individual may be disclosed to the requestor. • SDM decision making ends with the individual’s death and following death release would have to be approved by the Executor of the Estate. • If it is clear who the POA / SDM is, SHA Privacy & Access can provide advice to HIS/OA as to what can be disclosed. If there is a need to “interpret” POA or determine the “correct” SDM – contact Risk Management. • See Appendix F: The Health Care Directives and Substitute Health Care Decision Makers Act Decision Tree | HIPA s. 56 | Yes |

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|--|--|---|--|------|
| Public Guardian and Trustee of Saskatchewan | No | <ul style="list-style-type: none"> The request should be in writing, citing their authority to request the information. | The Public Guardian and Trustee Act s.40.7; 40.8 | No |
| Public Safety and Prevention of Fraud | Contact the Privacy Office | <ul style="list-style-type: none"> PHI may be disclosed if the SHA believes, on reasonable grounds, that the disclosure will avoid or minimize a danger to the health or safety of any person. If the disclosure is, in the opinion of the individual making the disclosure, necessary for monitoring, preventing or revealing fraudulent, abusive or dangerous use of publicly funded health services. Contact the Privacy Office for advice. | HIPA s. (27)(4)(a); s. 27(4)(b) | No |
| Quality Improvement Request | See Requirements and Considerations | <ul style="list-style-type: none"> Quality Review – Request for Personal Health Information Form. Quality Review – Request for Personal Health Information for Quality Improvement and Standards Committee Review Work Standard Only release information that is specified in the request. Requests are priority and should be completed within one week. PHI for quality assurance purposes may be accessed without consent if the information is presented to a quality team approved by SHA leadership. | | No |
| (PHI related to) Residential Schools, for the purpose of a claim | Yes | To be as supportive as possible, release the requested PHI to the individual/proxy/legal, whether the individual is alive or deceased, for the purposes of a residential school claim. | | No |
| Regulatory Bodies | | See “Professional Associations”. | | |
| Saskatchewan Advocate for Children & Youth | No | <p>Requests must be in writing, citing the request and the legislative authority under which they are requesting the information</p> <ul style="list-style-type: none"> The written request and the response is filed in the patient’s health record. If there are questions, refer to a Privacy and Access Office or SHA Risk Management. | HIPA s. 27(4)(1); <i>The Advocate for Children and Youth Act</i> s. 26, 35 | No |
| Saskatchewan Government Insurance (SGI) | Yes | <ul style="list-style-type: none"> SGI may have access to health information to enable it to carry out its functions. Only release the information related to the accident stated in the request. Send blood alcohol and drug screen, if available. | | Yes |
| Saskatchewan Tuberculosis Association | No | If the individual is under active treatment. | HIPA s. 27(2)(b) | No |

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| Study and Research | Dependent on type of research project. | <ul style="list-style-type: none">• Refer all requests to the SHA's Research department.• Applications may be initiated by HIS.• See the SHA Research Policy (SHA-02-006). | | N/A |
|---------------------------|--|--|--|-----|

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|---|-----------------|--|---|--|------|
| Subpoenas | | No | <ul style="list-style-type: none"> When staff are subpoenaed for court attendance, Risk Management must be notified. HIS departments can follow their internal processes to respond to a subpoena. OAs can consult with HIS for advice. Consult with Risk Management if there are any questions or concerns. Specific legal authority must be confirmed in writing and approved by SHA Risk Management for application for requests for records regarding a sexual assault (O'Connor application). Subpoenas issued outside of Canada must be endorsed or issued by the applicable provincial or territorial court in the location where it is being served in order for it to be enforceable. Foreign parties would need to submit a formal letter rogatory or letter of request from a court to a foreign court for judicial assistance. | | No |
| Traffic Safety Act (Saskatchewan) | | No | <ul style="list-style-type: none"> Mandatory reporting is a duty for any medical practitioner who is aware of a cognitive impairment of an individual to report to SGI. | <i>The Traffic Safety Act s. 283</i> | No |
| Tuberculosis (TB) Clinic | | N/A | Forward requests to the TB Clinic. | | N/A |
| Vaccine Injury Support Program – Public Health Agency of Canada | | Yes | | | No |
| Victim Services | | Yes | | | No |
| Vital Statistics | | No | The SHA discloses information related to births and deaths to eHealth Saskatchewan (Vital Statistics) using their form. | <i>The Vital Statistics Act, 2009 s. 21</i> | No |
| Workers Compensation Board | Saskatchewan | No | <ul style="list-style-type: none"> Specific information related to the management of the workplace injury will be released to assist WCB to carry out its functions. All requests must be made in writing¹⁹. | <i>The Workers' Compensation Act, 2013 SS 2013, c W-17.11 s. 54, s. 56</i> | No |
| | Out of Province | Yes | All requests must be made in writing. | | Yes |