



**CONFIDENTIALITY AGREEMENT FOR INDIVIDUALS WHO MAY  
HAVE ACCESS TO PROTECTED INFORMATION WHILE  
CONDUCTING BUSINESS AT TMC**

Information about TMC patients, TMC employees or TMC business from any source and in any form is confidential (“Confidential Information”). In my time at TMC, I may have access to or receive Confidential Information, including overhearing it.

I agree that:

- I will protect the privacy and confidentiality of Confidential Information.
- I will not disclose, copy, sell, modify or discard any Confidential Information unless it is a necessary and legitimate part of my activity at TMC to do so. If it is a necessary and legitimate part of my activity, I will perform these tasks with utmost care to preserve confidentiality.
- I will limit my access to only the minimum of Confidential Information needed for my activity at TMC, and I will use Confidential Information only for the purpose for which I was permitted access to it.
- If I possess any Confidential Information in record form when my time at TMC ends, I will return the information to TMC or destroy it immediately.
- I will not share any Confidential Information even after my time at TMC is ended.
- I am aware that my access to Confidential Information may be audited.
- If I have a computer password or other access code at TMC, I will keep it confidential, and I will not use anyone else’s password or access code.
- I understand that if I fail to comply with this Agreement, I may be subject to legal or other sanctions.

By signing this Confidentiality Agreement, I confirm that I have read and understood it, and I will comply with it.

\_\_\_\_\_  
*Printed Name*

\_\_\_\_\_  
*Relation to TMC (e.g., student, sales rep.)*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*TMC Campus/Department*

\_\_\_\_\_  
*Date*