



Sinai Hospital  
Northwest Hospital  
Carroll Hospital  
Levindale Hebrew Geriatric Center and Hospital

**MARYLAND FAITH COMMUNITY HEALTH NETWORK  
CONFIDENTIALITY AGREEMENT  
LIFEBRIDGE HEALTH, INC.**

I expressly acknowledge and agree that any and all information that I obtain as partner of LifeBridge Health, Inc. ("LifeBridge") is strictly confidential ("Confidential Information"). This applies to information I receive through patient, visitor, staff or community contact, written records, or through the use of electronic records and other computer systems/programs in use at LifeBridge, including information about the Systems and their software. I understand that Confidential Information specifically includes, but is not limited to: patient information; employee information; the password(s) issued to me; displayed and printed information; and proprietary vendor information concerning any aspect of computer Systems.

I expressly agree to treat all Confidential Information in strict confidence and to undertake the following obligations with respect to Confidential Information:

1. to access Confidential Information strictly in connection with, and for the sole purpose of, performing my assigned duties for LifeBridge;
2. not to disclose or communicate any Confidential Information to any person whatsoever, except in connection with the performance of my assigned duties;
3. not to disclose to any other person password(s) issued to me;
4. always to clear Confidential Information from my terminal screen and to sign off the computer when my tasks are completed
5. to report immediately to the LifeBridge Privacy Officer any unauthorized use, duplication, disclosure, or dissemination of Confidential Information by any person and to participate in necessary investigation;
6. When required, to dispose of printed Confidential Information appropriately.

I also understand and agree that my failure to fulfill any of the obligations set forth in this Confidentiality Agreement or my violation of any of the terms of this Agreement may result in:

1. revocation of my access;
2. appropriate legal action

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

*Caring for Our Communities Together*