# My Health Record Data Breach Incident Register and Log Template

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| **Description of suspected or actual Data Breach** | **Date & Time** | **Cause** | **Type of Information Involved** | **Healthcare Consumers Affected** | **Action Taken**  i.e. Date system operator notified, and other action taken. | **Name and Contact Details of Staff Member Handling Breach** | **Any other relevant information** |
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