



Registered Nurses Association of the Northwest Territories and Nunavut

Box 2757 Yellowknife, NT X1A 2R1

Telephone: (867) 873-2745 / Fax (867) 873-2336

Registration: info@mantnu.ca General: ea@mantnu.ca Website: www.rnantnu.ca

FORMAL COMPLAINT FORM

Subject of Complaint: (if multiple subjects fill out separate form for each):

Nurse's Name:

Location of incident:

Are you lodging this complaint as an employer?

If yes identify the health authority.

Your Name:

Phone Number:

Email Address:

Mailing Address:

Signature:

Date Signed:

Date(s) of Incident if known

Actions of Nurse/Description of Incident

Please note a complaint may be dismissed by the Chairpersons of the Professional Conduct Committee if the complaint is determined to be frivolous, vexatious, or is conduct not pertaining to the Nursing Profession Act.

Supporting Evidence

The following information is *optional* for submission of complaint.

Please do not send confidential patient information or any information that may violate an individual’s right to privacy.

The Director of Professional Conduct will make formal requests for any information needed during the investigation. At this stage we simply want to know what material could/should be requested.

Witnesses (Attach separate sheet if needed):

Witness Name	Contact information including Phone # or Patient Identifier

Documentation (Attach separate sheet if needed):

Document Title e.g. Internal Investigation, ER Record, Inpatient Chart, Transport Record, or Narcotic Record.	Date of Document and/or Identifier

Print and complete both pages. Please fax or send scanned document via email. Follow up with original to office in person or by mail to

Executive Director

Registered Nurses Association of the Northwest Territories and Nunavut

PO Box 2757

Yellowknife, NT

X1A 2R1

Phone 867-873-2745

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Email: ed@rnantnu.ca

Website: www.rnantnu.ca

The Director of Professional Conduct will contact you to discuss the matter more fully.