



Physician-Patient Email Communication Consent Form (18 YEARS OR OLDER)

Risks of using email

The physician is offering an opportunity to communicate by email. This takes the form of one-way communication from physician's office to patient. Transmitting patient information poses several risks of which the patient should be aware. The patient should not agree to receive email from the physician without understanding and accepting these risks. The risks include, but are not limited to, the following:

- The privacy and security of email communication cannot be guaranteed.
- Employers and online services may have a legal right to inspect and keep emails that pass through their system.
- Email is easier to falsify than handwritten or signed hard copies. In addition, it is impossible to verify the true identity of the sender, or to ensure that only the recipient can read the email once it has been sent.
- Emails can introduce viruses into a computer system and potentially damage or disrupt the computer.
- Emails can be forwarded, intercepted, circulated, stored, or even changed without the knowledge or permission of the physician or the patient. Email senders can easily misaddress an email, resulting in it being sent to many unintended and unknown recipients.
- Email is permanent. Even after the sender and recipient have deleted their copies of the email, back-up copies may exist on a computer or in cyberspace.
- Use of email to discuss sensitive information can increase the risk of such information being disclosed to third parties.
- Email can be used as evidence in court.

Conditions of using email

The physician will use reasonable means to protect the security and confidentiality of email information sent and received. However, because of the risks outlined above, the physician cannot guarantee the security and confidentiality of outgoing email communication and cannot be held liable for improper disclosure of confidential information that is not the direct result of intentional misconduct of physician or staff. Thus, patients must consent to the use of email for communicating patient information. Consent to the use of email includes agreement with the following conditions:

- Emails to the patient concerning diagnosis or treatment may be printed in full and made part of the patient's medical record. Because they are part of the medical record, other individuals authorized to access the medical record, such as staff and billing personnel, will have access to those emails.
- The physician may forward emails internally to the physician's staff and to those involved, as necessary, for diagnosis, treatment, reimbursement, healthcare operations, and other handling. The physician may use the patient's e-mail



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address to refer the patient to specialists and other allied health professionals. The physician will not, however, forward emails to independent third parties (i.e. Insurance Companies, Lawyers) without the patient's prior written consent, except as authorized or required by law.

- Email communication is not an appropriate substitute for clinical examinations. The patient is responsible for following up on the physician's email and for scheduling appointments where warranted.
- The physician WILL NOT use email for communication regarding sensitive medical information, such as sexually transmitted disease, AIDS/HIV, mental health, developmental disability, or substance abuse.
- The physician is not responsible for information loss due to technical failures associated with the patient's email software or internet service provider.

Instructions for communication by email

To receive communication by email, the patient shall:

- Avoid using an employer's or other third party's computer
- Inform the physician of any change in the patient's email address and add the physician's e-mail address to their address book to ensure e-mails do not go to the "junk" folder.
- Take precautions to preserve the confidentiality of emails, such as using screen savers and safeguarding computer passwords.
- Withdraw consent only by written communication to the physician.
- Should the patient require immediate assistance, or if the patient's condition appears serious or rapidly worsens, the patient should not rely on email. Rather, the patient should call the physician's office for an appointment, or take other measures as appropriate, such as proceeding to the nearest Emergency Department.



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Patient acknowledgement and agreement

I acknowledge that I have read and fully understand this consent form. I understand the risks associated with the communication of email between the physician, staff, specialists, other allied health professionals, and me, and consent to the conditions outlined herein, as well as any other instructions that the physician may impose to communicate with patients by email. I hereby waive, release and discharge from any and all liability, Morningstar Family Medicine, its employees and all physicians connected in any way with me as a patient, for any complications which may arise from the use of email. I acknowledge the physician's right to, upon the provision of written notice withdraw the option of communicating through email. Any questions I may have had were answered. I understand that at this time email communication is evolving and that communication will ONLY be one-way (Dr./specialist or staff to patient)

(18 years of age and over) Note: You cannot sign a consent for someone else

PLEASE PRINT CLEARLY!

Patient's First Name:

Surname:

Patient Address:

Town:

Postal Code:

Birth Date: Day:

Month:

Year:

Patient Email:(PRINT)

Patient Signature:

Date:

Witness

Signature:

Date:.