



E-Visit/TeleHealth Consents

NEVER REQUEST AN ELECTRONIC VISIT FOR AN URGENT MEDICAL PROBLEM.

An electronic or e-visit is an alternative designed to efficiently respond to routine, non-complex medical problems. (Examples might include: a cold or sinus infection, a mild stomach virus, follow-up of a stable chronic condition).

An e-visit is not designed for complex or non-routine medical care, especially problems that might require the relating of extensive history information or a thorough physical exam. E-visits are only offered to established patients and you agree that during the visit you are representing yourself and not another person.

E-visits are not billed by our practice to any insurer, as they are usually considered a non-covered service. The patient is always responsible for our typical e-visit charges. Our standard e-visit charge is \$50. Follow-up e-visits may be at a reduced rate.

Requests for e-visits must be confirmed and scheduled by our office prior to the e-visit. Prior to the visit you may be asked to complete certain medical questionnaires. Sometimes, after reviewing your information, or during the e-visit it may be determined that your problem is too complex for an e-visit session. In that case our office will schedule you for a traditional office visit and your e-visit fee will be applied to the patient balance related to your office visit or refunded per our practice's billing policy.

Communication during an e-visit may be exchanged via teleconference, landline phone, cellular phone and online chat. These methods are by their very nature not as secure as a face-to-face encounter. By requesting an e-visit you acknowledge that personal health information will be communicated in a manner that is subject to hacking and other malicious behavior.

As with any medical service, decision, or treatment, there are risks; and, an e-visit is no different. Because this visit is electronic and not in person, you acknowledge that the risk may be greater than a traditional office visit, and by requesting the visit you agree to accept the outcome-even if it is undesirable. In addition you agree to abide by our office's routine policies including any policy related to litigation.

Please click NEXT to go to the next form. You will sign at the end, after the last form.