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NDFHT Patient Consent and Release For Email

We are now able to offer the use of email for communicating with you, including for:

- Appointment reminders
- Sharing routine test results
- Sending you forms for tests (labs, x-ray, ultrasound etc.)
- Giving you educational and health promotion resources
- Newsletters
- Connecting with you
- Patient satisfaction surveys
- Verifying your contact information
- Asking for health card information
- Sending you our policies
- Giving to specialists or other health care providers to contact you when we refer you

Please read to the bottom of this page and the next page to submit your consent.

If you would like to receive our emails, please update your address book to accept emails from the Nipigon District Family Health Team and don't forget to check your junk/spam folder.

There are some limits on what and when we can email you, which we will explain here.

- Email communication is not a substitute for meeting with your health care provider. Although technology is changing, the best way to share information with your health care provider is in person.
- Please tell us which email address you wish us to use. You must to keep this up-to-date and tell us of any changes to your email address.
- Email should never be used in an emergency. **If you have a medical emergency, you should call 9-1-1 or go to your nearest emergency room or health care provider immediately.**
- Email should never be used for urgent problems (where you need a response from us by a certain time). If you have an urgent issue, you should make an appointment to see your health care provider.
- We do not read our email messages 24 hours per day 7 days per week. We cannot guarantee any particular response time for an email. If you require a response to an email message, please call.
- Emails should be short. If you have a problem that is complex – please call instead.

You should not use email to tell us about sensitive health information. Please tell us if there are certain issues or types of information that you do not wish to discuss by email.

Unless you tell us otherwise, we may share your email address with specialists and other health care providers to whom we refer you so they can contact you.

There are some privacy risks in communicating by email:

- Email may not be secure. While we try to protect our emails we cannot guarantee the security and confidentiality of any email you send to or receive from us. As the message leaves Nipigon District Family Health Team it is sent across the internet and it could be intercepted and read.
- More than just your health care provider may need to read your email. Administrative staff supporting your health care provider and people providing coverage for your health care provider may also read any email you send.
- Emails may be filed on your health record depending on the content of the email message and can become a permanent part of your health record. As part of your record, emails may be shared within our team or third parties, with your consent or if we are permitted or required by law (including with other health care providers and insurance companies).
- Email is easy to forge, easy to forward (sometimes accidentally and to many people) and may exist forever.
- We recommend you give us a personal email address that only you read. We recommend that you use an email address and system that is password protected. If you give us a family email address or share your email address with anyone else, you should know that other people may also receive or read emails we send to you. If you use a work email address, your employer may have a right to archive and look at emails sent from their systems. We recommend you avoid using a work email address.
- Nipigon District Family Health Team is not responsible for information loss due to technical failures.

Nipigon District Family Health Team may choose not to deal with you by email if you are not able to follow our email rules.

Patient Agreement and Release

I have read and fully understand this consent and release form. I understand the risks associated with using email with Nipigon District Family Health Team and I accept those risks. I understand the limits set out for using email and I agree to follow those limits.

I understand if I no longer wish to communicate with Nipigon District Family Health Team by email, I will tell my health care provider or the front desk staff person.

I agree that NIPIGON DISTRICT FAMILY HEALTH TEAM (which for this agreement and release includes NIPIGON DISTRICT FAMILY HEALTH TEAM staff, agents, directors, officers, and any affiliated professional staff and their staff, agents, directors and officers) shall not be responsible for any personal injury including death, or privacy breach (outside the control of NIPIGON DISTRICT FAMILY HEALTH TEAM) or other damages as a result of my choice to communicate with NIPIGON DISTRICT FAMILY HEALTH TEAM by email and I release and hold harmless NIPIGON DISTRICT FAMILY HEALTH TEAM from any liability relating to communicating with me by email.

If I had any questions about this form, I asked those questions and agree that my questions have been answered.

I understand I have the right to have legal advice about signing this form and what it means to me and have either sought that advice or have chosen not to seek such advice.

Patient Name (and if Substitute Decision-Maker – please add your name too) (please print):

Signature:

Date: