



## FountainHillsPrimaryCare

### TELEHEALTH ACKNOWLEDGEMENT AND WAIVER

Telemedicine, or a “virtual visit,” is a consultation with one of our physicians via video conferencing. This option is convenient and allows you to be seen without coming into our office.

**Virtual visits are not for all conditions. We may be able to provide care via our telehealth platform for some of the following acute care concerns:**

- Rash
- Colds
- Some fevers
- Allergies
- Constipation, diarrhea or vomiting
- Minor traumas (lacerations, abrasions, bites)

As we cannot listen to your lungs, see into ears, or evaluate other conditions that may present physically, we cannot evaluate ear pain, significant coughs, or assess concerns that require laboratory evaluation such as urinary tract infections and strep or flu testing through the telehealth platform. It is also possible that during or after video-conferencing, we may ask you to come in for an in person sick visit if we need to perform a physical exam that reaches beyond the abilities of video conferencing.

Appointments for telehealth visits can be made by calling our office, or emailing [CareTeam@FountainHillsPC.com](mailto:CareTeam@FountainHillsPC.com)

**All fees for telemedicine services will be governed by the Direct Primary Care Membership Agreement.**

We are providing video conferencing through Doximity, a video conferencing platform that is HIPAA compliant. All data is encrypted, your sessions are anonymous, and none of your information is stored.



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### Telehealth Patient Consent Form

I understand that based on the information I have provided to my doctor, he or she has determined that a telehealth visit is appropriate and will happen by using special audiovisual equipment, and I agree to receive this health care service. This consent is valid until I provide notice to my doctor that I am revoking this consent.

I also understand that:

- I can decline the Telehealth service at any time without affecting my right to future care or treatment, and any program benefits to which I would otherwise be entitled cannot be taken away as a result of my decision not to use the Telehealth service.
- I may have to travel to see a health care practitioner in-person if I decline the Telehealth Service.
- I may have to travel to see a health care practitioner in-person if my doctor determines that an in-person visit is required to evaluate or treat the patient.
- If I decline the Telehealth service, the other options/alternatives available for me, including in-person services are available in the practice's office.
- The same confidentiality protections that apply to my other medical care also apply to the Telehealth service.
- I will have access to all medical information resulting from the Telehealth service as provided by law.
- The information from the Telehealth service (images that can be identified as mine or other medical information from the Telehealth service cannot be released to anyone else without my additional written consent.
- I will be informed of all people who will be present in the room with my doctor during my Telehealth service.
- In rare cases, information transmitted via a telemedicine platform may not be sufficient to allow for the proper diagnosis or decision making by the physician or patient.
- In very rare instances, security protocols could fail, causing a breach of privacy of personal health information.

**I have read and understand the above document in its entirety:**

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Signature of Patient or Patient Guardian

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Patient Name (please print)

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Date