

Email Informed Consent

At Binghamton Gynecology and Fertility & The Endometriosis Center we utilize email as a way to enhance communication with our patients. Please review the email guidelines, the benefits, and risks associated with the use of email.

- **Addressing the message:** On the ‘subject’ line of your email be sure to note what member of our office staff or the health care provider you are directing your message to.
 - For example: If you have a question from your last appointment with Lisa Mullins, put “Lisa Mullins” in the subject of the email.
- **Signing the message:** Please include your full name in the text of your email because many email addresses are in the form of nicknames.
- **E-mail content:** For your protection, if you have an emergency or time sensitive issue, highly sensitive information, or in situations in which a response is delayed (e.g. office staff or health care provider is away) please call the office directly at (607) 797.7070 or local emergency services (if necessary). In effort to best meet your needs, we discouraged the use email as a substitute for an office visit.
- **Privacy:** Only the addressee will read incoming email messages. We have taken measures to ensure privacy of incoming email however; your message may be shared with office staff as needed.
- **Medical Records:** A copy of email messages are printed and added to your permanent medical record. We also recommend you keep a copy of all email messages and responses.

There are many benefits to using email, such as: the information you need without a phone call. There are also risks to using email such as (but not limited to): privacy, misaddressed messages, email sent to an employer’s email system could legally be read by the employer, and messages being read from using shared email accounts.

Is your email: (check one)

Confidential. Please check this box if we can send confidential information to you using your email.

Read by other people that would prevent us from sending test results and answers to your questions.

Please **CLEARLY** print your email address:

_____@_____
 I have reviewed the risks, benefits, and appropriate guidelines email communication. Email will be used to (but not limited to): enhanced patient and health care provider communication, announcement of upcoming events, practice information, and practice newsletters.

Signature

Date

Date of Birth

Print Name

Parent/Guardian Signature (if under 18)

FOR OFFICE USE ONLY: Circle all diagnosis/ topics that apply

Infertility

General Gyn

Endometriosis

Polycystic Ovarian Syndrome (PCOS)