## **AUTHORIZATION AND CONSENT TO PARTICIPATE IN TELEMEDICINE CONSULTATION**

The purpose of this form is to obtain your consent to participate in a telemedicine consultation with any of our RACE physicians.

**Purpose and Benefits.** The purpose of this service is to use telemedicine to enable patients to still receive health services even while staying at home during the enhanced community quarantine, except for serious conditions, emergencies, or to avail of COVID-19-related health services as per standing protocols.

## **Nature of Telemedicine Consultation: During the telemedicine consultation:**

- a) Details of you and/or the patient's medical history, examinations, x-rays, and tests will be collected and discussed with other health professionals through the use of interactive video, audio and telecommunications technology if needed.
- b) Physical examination of you or the patient may take place.
- c) Nonmedical technical personnel may be present in the telemedicine studio to aid in video transmission, if needed.
- d) Video, audio, and/or digital photo may be recorded during the telemedicine consultation visit.

**Medical Information and Records.** All existing laws regarding your access to medical information and copies of your medical records apply to this telemedicine consultation. Additionally, dissemination of any patient-identifiable images or information from this telemedicine interaction to researchers or other entities shall not occur without your consent, unless authorized by existing law, policies and guidelines on privacy and data protection.

**Confidentiality.** Reasonable and appropriate efforts have been made to eliminate any confidentiality risks associated with the telemedicine consultation. All existing law, policies and guidelines on privacy and data protection apply to information disclosed during this telemedicine consultation.

**Risks and Consequences.** The telemedicine consultation will be similar to a routine medical office visit, except interactive video technology will allow you to communicate with a physician at a distance. At first you may find it difficult or uncomfortable to communicate using video images. The use of video technology to deliver healthcare and educational services a new technology and may not be equivalent to direct patient to physician contact. Following the telemedicine consultation, your physician may recommend a visit to a health facility for further evaluation.

**Rights.** You may withhold or withdraw consent to the telemedicine consultation at any time without affecting your right of future care or treatment, or risking the loss or withdrawal of any program benefits to which you would otherwise be entitled. You have the option to consult with the physician in person if you travel to his or her location.

Financial Agreement. You and/or your insurance company will not be billed for this visit.