

ELECTRONIC COMMUNICATION CONSENT

Our office may respond to your inquiries electronically via email and text messaging, or in real-time virtual visits (TeleDentistry). In order for us to do so, you must provide your consent, recognizing that these mediums are not a secure form of communication. There is a potential risk that your health information, and other sensitive or confidential information that may be contained in such electronic communications, may be misdirected, disclosed to or intercepted by, unauthorized third parties. We will use the minimum necessary amount of protected health information to respond to your query. As always, our office will take dental record confidentiality very seriously, and will do what we can under the circumstances to protect the information you send us.

If you wish to conduct this discussion via email, texting or by a virtual visit, please indicate your understanding and acceptance of this risk. You may withdraw your consent at any time. Alternatively, please contact our office to make other arrangements if you decide against corresponding electronically.

In regards to TeleDentistry, our dental office is using one or more of the permitted modalities for remote transmission of information to conduct limited problem focused evaluations. While entirely adequate in the vast majority of cases for such limited purposes, these evaluations may not reveal conditions that would be discovered during an office visit.

By signing below, you acknowledge this information and consent to using the above mentioned methods as a means of communication with our office.

Signature

Date

Print Your Name

Email

Mobile Number (for texting)