

## Consent to Virtual Appointment

Virtual Appointments are face-to-face confidential encounters between Hastings Internal Medicine providers and patients provided through an electronic interface, such as a smart phone or web cam.

Virtual Appointments offer several benefits:

- No need to drive in to the medical office.
- Save time and money compared to regular visits.
- Increased privacy as your visit can be done from your own home or car.
- Improved access for patients with limited mobility.
- Limited evening appointments are available.

There are a few disadvantages:

- Your provider can perform only a very limited physical examination.
- Some medical problems are not suitable for Virtual Appointments.
- Not all insurances cover Virtual Appointments.

If your Virtual Appointment results in advice to go to an Urgent Care or Emergency Department, you will not be charged by Hastings Internal Medicine.

Occasionally, technical difficulties on the part of a patient or the provider may interrupt the appointment. If this occurs, both the provider and the patient agree to attempt to reestablish contact using the Doxy.me application, and if this cannot be done, reconnect by telephone.

Hastings Internal Medicine is obligated to provide a secure and private environment for the appointment, and to use software that is fully HIPAA compliant. It is the patient's obligation to ensure privacy on his or her end of the secure connection.

Your Virtual Appointment will be documented in your personal electronic health record, and will be available for your review at any In-Office appointment.

Virtual Appointments may result in specific recommendations by the provider including prescription or over-the-counter medications, lab testing or x-ray, referral to a specialist, or scheduling an in-office appointment.

Payment for Virtual Appointments is required at the time of service. If your insurance pays for your visit, your fee will be reimbursed accordingly.

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**I understand the benefits and disadvantages of Virtual Appointments and agree to the terms described above. I understand that participation in Virtual Appointments is optional, and any specific appointment will only be scheduled with my consent.**

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Signature of Patient or Legal Representative

Printed name of patient

Date