Bliss Dental of Euless

Email and Text Messaging Informed Consent

- 1. Using electronic transmission of patient information by email and/or text messaging has several risks that patients should consider prior to authorizing the use of email and/or text messaging as email and/or text messaging may not be secure and/or encrypted. These include, but are not limited to, the following risks:
 - i) Email and text messages can be circulated, forwarded, stored electronically and on paper, and broadcast to unintended recipients.
 - ii) Senders can easily misaddress an email/text message and send information to an undesired recipient.
 - iii) Backup copies of emails and text messages may exist even after the sender/recipient has deleted their copy.
 - iv) Employers and Online Services (email or telephone provider) have the right to inspect emails/text messages sent through their systems. Email and text messages can be intercepted, altered, forwarded or used without authorization or detection.
 - v) Email and text messages can/may be used as evidence in court.
 - vi) Email and text messages may not be secure and therefore it is possible that the confidentiality of such communications may be breached by a third party. Conditions for the use of email and text messages cannot be guaranteed, but reasonable means will be used to maintain security and confidentiality of email and text information sent and received. Bliss Dental of Euless is not liable for improper disclosure of confidential information that is not caused by Bliss Dental of Euless intentional misconduct.
- 2. Email and text messaging is not appropriate for urgent or emergency situations. *Bliss Dental of Euless* and its representatives cannot guarantee that any email and/or text will be read and responded to within any particular period of time.
- 3. Email and text messages should be concise. The patient/parent/legal guardian should call the office to discuss complex or sensitive situations and/or to schedule any appointments.
- 4. All email and text messages will be printed and filed into the patient's dental/medical record. The Provider and its representatives will not forward patient/parent/legal guardian's emails and/or text messages without their written consent, except as authorized by law. Patient/parents/legal guardians should not use email or text messages for communication of sensitive medical information. The Provider and its representatives are not liable for breaches of confidentiality caused by the patient/parent/legal guardian or any third party. It is the patient/parent/legal guardian's responsibility to follow up with email and/or text messages and/or the scheduling of appointments if warranted. Bliss Dental of Euless and its representatives are not responsible for any fees incurred as a result of any/all electronic transmissions.

I acknowledge that I have read and fully understand this consent form. I understand the risks associated with the communication of email and/or text messages between *Bliss Dental of Euless* and me, and consent to the conditions and instructions outlined in this document.

| Patient Name: | | |
|---|---------------------|--|
| Email Address to be used for all electronic tran | nsmissions: | |
| <u>Cell Phone Number</u> to be used for all text mess | age communications: | |
| Signature: | Date: | |
| (If Under 18) Name of Parent/Legal Guardian: | | |
| Relationshin: | | |