

# Chapel Hill Psychiatric Associates, PA

## CONSENT TO USE ELECTRONIC COMMUNICATIONS

Patient name: \_\_\_\_\_

Patient address: \_\_\_\_\_

Patient home phone: \_\_\_\_\_

Patient mobile phone: \_\_\_\_\_

Patient email (if applicable): \_\_\_\_\_

Other account information required to communicate electronically (if applicable):  
\_\_\_\_\_

CHPA has offered to communicate using the following means of electronic communication:

- Email (appointment reminders only) (not encrypted)
- Email (clinical information) (encrypted if using ProtonMail.)
- Videoconferencing
- Text messaging
- Other (specify): \_\_\_\_\_

### PATIENT ACKNOWLEDGMENT AND AGREEMENT:

- I acknowledge that I have read and fully understand the risks, limitations, conditions of use, and instructions for use of the selected electronic communication services more fully described in the Appendix to this consent form.
- I accept the risks and consent to the selected forms of electronic communication.
- I agree to follow the instructions outlined in the Appendix.
- I understand that CHPA recommends that email communication be conducted using the encryption platform ProtonMail, but that I may, at my own risk, choose to use an unencrypted email program. (Information on ProtonMail is available on the CHPA website: [www.chapelhillpa.com](http://www.chapelhillpa.com).)
- I understand that using any other email program may leave my information at risk and that CHPA does not accept liability for disclosures that may occur if I choose to use an unencrypted email system.
- I acknowledge that I may, at any time, withdraw the option of communicating electronically upon providing written notice to CHPA.
- CHPA reserves the right to restrict or discontinue electronic communication without notice.
- Any questions I had have been answered.

Patient signature: \_\_\_\_\_

Date: \_\_\_\_\_

Witness signature: \_\_\_\_\_

Date: \_\_\_\_\_

610 Jones Ferry Road Suite 208  
Carrboro, NC 27510-6113

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## APPENDIX

### Risks of using electronic communication

CHPA will use reasonable means to protect the security and confidentiality of information sent and/or received using the electronic communication options you have selected. However, because of the risks outlined below, CHPA cannot guarantee the security and confidentiality of electronic communication. (Information on ProtonMail is available on the CHPA website: [www.chapelhillpa.com](http://www.chapelhillpa.com).)

- Use of electronic communication to discuss sensitive information can increase the risk of such information being disclosed to third parties.
- Despite reasonable efforts to protect the privacy and security of electronic communication, it is not possible to completely secure the information. (Cellphones may be lost, computers may be stolen or illegally accessed.)
- Employers and online services may have a legal right to inspect and keep electronic communications that pass through their system.
- Electronic communications can introduce malware into a computer system, and potentially damage or disrupt the computer, networks, and security settings.
- Electronic communications can be forwarded, intercepted, circulated, stored, or even changed without the knowledge or permission of CHPA or the patient.
- Even after the sender and recipient have deleted copies of electronic communications, back-up copies often exist on a computer system.
- Electronic communications may be disclosed in accordance with a duty to report or a court order.

### Conditions for using electronic communication with CHPA:

- While CHPA will attempt to review and respond in a timely fashion to your electronic communication, CHPA does not guarantee that any given electronic communication will be reviewed and responded to within any specific period of time.
- Email and text communication is monitored less frequently than voicemail and should NEVER be used for urgent or time sensitive matters. If the situation is urgent, you should call or go to the nearest Emergency Department.
- Electronic communication is not an appropriate substitute for in-person or over-the-telephone communication, where appropriate, or for going to the Emergency Department when needed. You are responsible for following up on CHPA's electronic communication and for scheduling appointments where warranted.
- Electronic communications concerning diagnosis or treatment will be entered into your record either as a direct copy or as a summary such as occurs with phone communication.
- CHPA personnel may forward electronic communications to staff and those involved in the delivery and administration of your care. They will not forward electronic communications to third parties, including family members, without your prior written consent, except as authorized or required by law.
- You agree to inform CHPA in writing of any request to limit electronic communication between CHPA and you.
- CHPA is not responsible for information loss due to technical failures associated with your software or internet service provider.

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