



Maternity Centre of Hamilton  
100 Main Street W; 3<sup>rd</sup> Floor  
Hamilton Ontario  
Canada L8P 1H6  
[maternitycentre.ca](http://maternitycentre.ca)

McMaster Family Practice  
100 Main Street W; 3<sup>rd</sup> Floor  
Hamilton Ontario  
Canada L8P 1H6  
[mcmasterfamilypractice.ca](http://mcmasterfamilypractice.ca)

Stonechurch Family Health Centre  
1475 Upper Ottawa Street  
Hamilton Ontario  
Canada L8W 3J6  
[stonechurchclinic.ca](http://stonechurchclinic.ca)

## CONSENT FOR EMAIL COMMUNICATION

**\*REFERENCE ONLY\***

### Consent:

The McMaster Family Health Team (MFHT) supports the use of email communication with our patients. This form constitutes an agreement between you and the MFHT. Both the provider and patient may agree to communicate using email communications, but NEITHER party is obligated to do so. Email communications is an additional option for communication, not a replacement of traditional means of contact such as telephone, mail or in person. By providing us with your email address, you have consented to our use of the contact information.

### What we may use your email for:

- Reminding you of your appointments
- We may share your email information with other health care providers who are providing you with health care.
- We may use your email to keep you informed of your referral status when you have been referred to another health care provider.
- Upcoming programs, health promotion material, educational resources, surveys, and notices for workshops or clinics (e.g. flu shot clinic)

### Risks:

All medical communications inherently carry some degree of risk. The risks associated with the use of email communications are real and should be understood. These risks may increase further with the use of personal email accounts. These risks include, but are not limited to:

- Messages from your care provider may be seen by others using the Internet. Email communication is easy to forge, may be accidentally forwarded, and may exist indefinitely on the internet.
- Email communication messages may exist as an electronic or paper record within the clinic indefinitely.
- The clinic cannot guarantee that messages generated by email communication will be received, read or responded to within any particular period of time. **DO NOT USE EMAIL COMMUNICATIONS FOR MEDICAL EMERGENCIES AND/OR OTHER TIME-SENSITIVE MATTERS.**



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## TERMS OF USE:

- I understand that it is my responsibility to monitor email received at the indicated email address and to advise the clinic if any email address changes or should no longer be used by the clinic for email communications with myself. I understand that only the email address specified below will be used by the clinic for communication to me.
- I understand that the clinic cannot guarantee the security of email messages that I send to or receive from the clinic.
- I agree not to use email communications to relay any emergency or urgent information about myself and understand that the clinic does not guarantee the receipt or review of any email messages that I may send to the clinic.
- I understand and agree that individual care providers may make decisions about my treatment based on information I provide through email communication and that this information may form part of my health record.
- I understand that I may stop using email communications for clinical purposes at any time, at which point I will directly notify the clinic in person or in writing, of my decision to stop using email communication for these purposes. I understand that this consent remains effective unless and until it is withdrawn.

This consent form lets us know when we may use email communications with you. If at any time you decide that you no longer want us to communicate to you through email communications, please contact our clinic in person or in writing. Your care provider will do the same.