



Classical Homeopathy and Wellness Consultation

Kim Lane, MD 🌿 7810 Gloria Circle 🌿 Mounds View, MN 55112
O-651.348.8089 🌿 www.wellnesslane.us 🌿 F-651.203.7399

Electronic Communications Policies and Permission

Email communication is not 100% secure- know that you need a secure encrypted email for the safest most private communication. Using the patient portal at www.mypracticefusion.com will add security but be aware that this method is not guaranteed for timeliness. Medical decisions may require more information or a visit. For more urgent concerns call the office. Emails will be kept in the patient record.

- I have an encrypted email service included on my email and I choose to communicate with Wellness Lane/Dr. Lane through email *knowing the security limitations*.
- I do not have or am not sure if I have an encrypted email service but am *choosing to forgo the encryption and am aware of the lesser security of my communications by email* with Dr. Lane/Wellness Lane. I will not hold Dr. Lane or Wellness Lane liable for breach of information because of the lack of encryption of my email. I choose to communicate with Dr. Lane through email.
- I choose to communicate with Wellness Lane/Dr. Lane solely through the security of the Patient Portal knowing that *even encrypted security is not fully guaranteed*.
- I do NOT want to use any electronic communications for health care information but agree to have notification for appointment reminders through email or text.

signature print name date

Texting- this method is not secure and can be sent to a wrong party. Best advice is not to send any specific medical or personal information via text. If I choose to text I agree NOT to hold Wellness Lane nor Dr. Kim Lane liable for any content that I send or misdirect. Information sent via text including pictures can be seen by other parties and your phone company.

- I choose to use text as a method of communication with Dr. Lane/Wellness Lane knowing the insecurity of texting.
- I choose NOT to use text to communicate with Dr. Lane/Wellness Lane but am OK receiving texted reminders of appointment times.
- I choose NOT to use text to communicate with Dr. Lane/Wellness Lane and do NOT want to be sent appointment reminders by Text. I prefer email reminders.

signature date

Video visits- also are not totally Secure. I will be cognizant of the information shared. These visits are not recorded by our practice except for written documentation .



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- I choose to have video visits when unable to come to the office and realize the nature of the limited security of this visit.
- I do NOT wish to have video visits and will not agree to any such visits should they be offered as a solution for an appointment alternative. Should I agree to video visit in the future I then am aware of the security limitations of such a visit.

signature date

FOR ALL ELECTRONIC COMMUNICATION

Dr. Lane/Wellness Lane seek to provide the most secure environment for your medical information. Financial and Medical Information are password protected and stored on a private server with some information stored on password and encrypted Practice Fusion. Paper records are stored in locked files. Email is encrypted

I realize that Dr. Lane/Wellness Lane have the *right to refuse* to make decisions or conclusions based on information received from you via text, email, portal or video technology. I may be required to make an in person visit or be referred to a more appropriate place.

For more urgent needs a phone call to the office is best 651 348-8089. Patient portal and email may not be received in a timely fashion. For emergencies I agree to call 911 or my primary care provider.

By signing below I agree and have been informed of the above.

signature date

PHOTOGRAPHS FOR CASE EVALUATION

By signing below I give my permission for photographs to be taken to assist in homeopathic evaluation. These photos may not be used in any other way with out my express written permission.

I also understand that these photographs will not be stored on any cloud or in any publicly reachable domain.

Patient / Guardian signature Date