

This consent authorizes MultiCare Health System and its affiliated health care providers (all referenced here as "MHS") to communicate with me using open internet email channels. The specific email address that I am currently using is noted below. However, this consent allows MHS to communicate with me using any email address that I provide to MHS, and/or any email address that I send communications to MHS from.

I understand that MHS offers "MyChart", a secure encrypted communications tool where I can access portions of my medical record. I agree to establish a MyChart account (offered at no cost to all patients at <https://mychart.multicare.org/mymulticare/>). Confidential patient information should ordinarily only be exchanged through MyChart or other secure communication devices. Open email exchanges should generally be limited to communications that do not contain sensitive patient information.

I authorize MHS to notify me of appointments by email appointment reminders. And I authorize MHS to share information about its programs and services offered in the community, including programs or services specific to me, using email communications. I may also receive patient surveys, promotional offers or information about MHS charities and fundraising programs.

I understand that I can "opt out" of the use of email as a means of communication by sending an email to MHS at marketing@multicare.org or by calling 253.403.1261. I understand that some messages already scheduled for delivery may be sent after I opt out, and I authorize MHS up to ten business days to fully process my opt-out request.

Some risks of using email are outlined on the reverse of this consent form, a copy of which has been provided to me. Additional risks of using open email can also be found at MHS' website <http://www.multicare.org/patient-privacy/>.

I have read and understand the risks of using email and agree that email messages may include protected health information about me or the patient named below (if I am signing as the patient's representative).

Patient Name:	Patient Date of Birth:	Medical Record Number:
Current Email Address:		
Print Name if Other Than Patient:	Signature	Date:
IF SIGNED BY A PERSON OTHER THAN THE PATIENT, PRINT NAME AND PROVIDE REASON AND RELATIONSHIP TO PATIENT HERE:		

Patient Identification - Write in or attach patient label

Name:

MRN #:

CSN #:

Age / Sex:

**PATIENT CONSENT TO ALLOW
EMAIL CORRESPONDENCE**

MultiCare 



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SOME RISKS OF USING EMAIL

Email is inherently unsecure unless it is fully encrypted requiring the use of strong authentication and password protection. Most email does not meet those standards. Among the many risks of using email to communicate sensitive medical information:

- Email can be forwarded, printed, and stored in numerous paper and electronic forms and be received by many intended and unintended recipients without my knowledge or agreement.
- Emails may be sent to the wrong address by any sender or receiver.
- Email is easier to forge than handwritten or signed papers.
- Copies of email may exist even after the sender or the receiver has deleted his or her copy.
- Email service providers have a right to archive and inspect emails sent through their systems.
- Email can be intercepted, altered, forwarded, or used without detection or authorization.
- Email can spread computer viruses.
- Email delivery is not guaranteed.
- Email can be used for Phishing. Phishing is a technique of obtaining sensitive personal information from individuals by pretending to be a trusted sender.

The use of open internet email channels is not secure or encrypted – meaning that messages between could potentially be viewed by unauthorized persons who might intercept or read those emails.

MHS and its providers may not monitor my emails, or may not even receive them.

Email is not an appropriate method for sharing urgent or emergent information.

MHS will never ask for personal identifying information or other sensitive information using open email. Such information might include date of birth, mother's maiden name, social security numbers, or other personal identifying information.