



## Virtual Health Patient Consent Form

Virtual Health lets healthcare providers care for you, even when you cannot see them in person. The providers use the Internet and other technology to conduct a patient session.

We are a HIPAA-compliant organization. Keeping your information safe is very important to us. Only authorized people can access your health data. All others are locked out. No recordings of Virtual Health sessions are made.

Before you can have a Virtual Health session, your provider will decide if your health needs can be addressed this way. The final decision to participate in Virtual Health sessions is ultimately your decision as the patient. You can include other people such as a spouse, partner, parent, or another family member in your Virtual Health session

You are not allowed to make any recordings of your session.

### Your Virtual Health Session

During your Virtual Health session:

- You may be asked to confirm the state you are in and the state where you live. You may also need to show a photo ID.
- If the patient is a minor child, the Virtual Health provider will explain to the parent how a Virtual Health exam is different from an in-person session. He or she will also explain if a complete evaluation of the child is possible.
- The provider may talk to you about your health history, exams, x-rays, and other tests. Other providers may take part in this discussion.
- A visual and/or partial physical exam may take place. This may happen with video, audio, and/or other technology tools. Healthcare staff may be in the room with you to help with the exam.
- With your knowledge the provider may take photos.

All laws about the privacy of your health information and medical records apply to Virtual Health. These laws also apply to the video, audio, and photo files that are made and stored.

### Risks and Common Problems

Technology can make getting health care easy, but there can also be problems:

- If there is an equipment or Internet problem, your diagnosis or treatment could be delayed.
- Although we have security measures in place, there could be a possible risk to technology that could include unauthorized access to your chart. If this happens, you will be informed.
- If there is a technology problem, it would be outside the control of your doctor and the telemedicine provider.
- Without a hands-on exam, it may be hard to diagnose your problem.

### Participation in Virtual Health Sessions in Public Locations

If you have a public Virtual Health session or are using public Wi-Fi, you must agree that:

- You are doing so at your own risk.
- There may be unforeseen problems, and your protected health information may be accidentally shared.
- The session is voluntary.
- You can withdraw at any time.
- You will sign a HIPAA release form.
- This agreement applies to each public Virtual Health session you may have with your provider at Boice Willis Clinic.

### More Facts

A main goal of Virtual Health is to make sure that you get good, personal health care.

Virtual Health providers must follow the same rules for prescribing drugs just as they would for an office visit

Having a Virtual Health session is your choice. You can stop the session at any time. You can limit the physical exam.

You will be told about all staff who will take part in the session. You can ask that any of these people leave the room to stop them from seeing or hearing the session. It is up to you to make sure the setting for your session is private. It should only include people who you are willing to share health information with. Your Virtual Health provider can ask that people with you leave the room to make sure your session is private.

Your session may end before all problems are known or treated. It is up to you to get more care if your health problem does not go away.

### Financial Responsibility

By signing this form, you acknowledge your responsibility for any cost associated with **Virtual Health Services**. Most insurers will cover professional services, equipment, testing, and other services rendered by our providers to you or one of your dependents, but there may be copays, coinsurance, or deductible costs based on your insurance policy. While Boice Willis Clinic will check your benefits and estimate your costs, we cannot guarantee coverage by or benefits of your insurance.

Boice Willis Clinic will file an insurance claim for services rendered by Boice Willis Clinic providers. You or your guardian is responsible for all financial costs that are not covered by insurance.

This agreement must be signed before continuing with Virtual Health Services, equipment, testing, or other services provided by Boice Willis Clinic licensed providers. It will be kept on file.

### Patient Acknowledgment

This form gives you facts about and risks of Virtual Health sessions. By signing this form, you agree that you have read, understand, agree with these terms and

- are signing this consent voluntarily,
- have been able to ask questions about Virtual Health sessions, and all questions have been answered,
- understand no guarantees have been made about success or outcome,
- agree to take part in a Virtual Health session and understand you can withdraw at any time,
- agree the provider can withdraw consent to use Virtual Health based on the patient,
- have signed general consent to be treated as well as other required consents or I consent to be treated.
- agree to be fully open and fully disclose all health and other information,
- are alone or will give the names of those present in the session,
- agree to call 911 in the event of an emergency or if your provider asks you to,
- understand that you may not make recordings of the sessions,
- understand your financial responsibilities
- are authorizing Boice Willis Clinic to contact insurers and that insurance benefits will be paid to Boice-Willis Clinic

I have received a copy of the Boice-Willis Clinic Notice of Privacy Practices.

I agree to receive Short Messaging Service (SMS Text) messages from Boice-Willis Clinic. I may withdraw my consent at any time by notifying Boice-Willis Clinic in writing.

Print Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Signature: \_\_\_\_\_ Last 4 of SSN: \_\_\_\_\_

# COVID - 19 TESTING



**You have been tested for COVID-19 and you must now be ISOLATED until the test results are returned. When you receive your test result you will be instructed if you need to remain in isolation.**

## WHAT DOES IT MEAN FOR ME TO GO INTO ISOLATION?



**Stay at home** unless you need medical care. If you need to go to the doctor, make sure you **call ahead** so they can prepare for your arrival.

Do not use public transportation like buses, taxis, or ride-sharing apps to get to the doctor.



Wash your hands and do not share common items like towels, dishes, or glasses.



Do not allow visitors -- try **calling** loved ones or **video chatting** with them instead.



Do not cook or touch food for other people.



Stay away from other people in your home.

Try to spend most of your time in a specific room that others do not enter.



Clean 'high touch' surfaces like doorknobs and light switches daily.



Use a different bathroom from everyone else. If you only have one bathroom make sure to wipe down all surfaces after use.



Do not touch your pets while you're sick. If you do need to care for them, wear a face mask and wash your hands before and after.



Stay at least **6 feet away from other people**. If that's not possible, you should wear a mask.



Wash clothes and bedding using the warm or hot water then dry them completely. Wear disposable gloves while handling dirty laundry. Wash your hands with soap and water or hand sanitizer when you're done.

## COVID-19 TEST What's next...

You should:



Stay at home unless you are in need of medical care. Please do not avoid emergency care.



Your COVID-19 test has been sent to Lab Corp to be processed.



Your test results will be returned within 24-48 hours.

All results are delivered through the Healow App.

## TELEHEALTH



Telehealth visits are very important to give you your results, discuss how you are doing, and discuss ending your isolation and return to work.



Visit our website at [boice-willis.com](http://boice-willis.com) and electronically sign a consent form. The purpose of this form is to obtain your consent to participate in a Telehealth consultation to discuss your test results. There is also helpful instructions on what to expect scheduling your Telehealth visit.



Please know these visits are billed through your insurance company.

## WHAT SYMPTOMS DO I CHECK FOR? WHEN SHOULD I CALL MY HEALTHCARE PROVIDER?

Now that you are in **isolation** and if you start to have **emergency warning signs**, **CALL 911**.

### Emergency warning signs include:

- **Trouble breathing**
- **Pain or pressure in the chest**
- **New confusion or can't wake up**
- **Bluish lips or face**

*\* This list is not a complete list. Please call your doctor or nurse for any other symptoms that are severe or worrisome.*

The decision to stop home isolation should be made with the assistance of your healthcare provider who may consult with state and local health departments. Decisions on duration of home contact may change as more information is learned about the virus.



[www.boice-willis.com](http://www.boice-willis.com)

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## **Infection Prevention Recommendations for Individuals Confirmed to have, or Being Evaluated for, 2019 Novel Coronavirus (COVID-19) Infection Who Receive Care at Home**

Individuals who are confirmed to have, or are being evaluated for, COVID-19 should follow the prevention steps below until a healthcare provider or local or state health department says they can return to normal activities.

### **Stay home except to get medical care**

You should restrict activities outside your home, except for getting medical care. Do not go to work, school, or public areas, and do not use public transportation or taxis.

### **Call ahead before visiting your doctor**

Before your medical appointment, call the healthcare provider and tell them that you have, or are being evaluated for, COVID-19 infection. This will help the healthcare provider's office take steps to keep other people from getting infected. Ask your healthcare provider to call the local or state health department.

### **Monitor your symptoms**

Seek prompt medical attention if your illness is worsening (e.g., difficulty breathing). **Before** going to your medical appointment, call the healthcare provider and tell them that you have, or are being evaluated for, COVID-19 infection. Ask your healthcare provider to call the local or state health department.

### **Wear a facemask**

You should wear a facemask that covers your nose and mouth when you are in the same room with other people and when you visit a healthcare provider. People who live with or visit you should also wear a facemask while they are in the same room with you.

### **Separate yourself from other people in your home**

As much as possible, you should stay in a different room from other people in your home. Also, you should use a separate bathroom, if available.

### **Avoid sharing household items**

You should not share dishes, drinking glasses, cups, eating utensils, towels, bedding, or other items with other people in your home. After using these items, you should wash them thoroughly with soap and water.

### **Cover your coughs and sneezes**

Cover your mouth and nose with a tissue when you cough or sneeze, or you can cough or sneeze into your sleeve. Throw used tissues in a lined trash can, and immediately wash your hands with soap and water for at least 20 seconds or use an alcohol-based hand rub.

### **Wash your hands**

Wash your hands often and thoroughly with soap and water for at least 20 seconds. You can use an alcohol-based hand sanitizer if soap and water are not available and if your hands are not visibly dirty. Avoid touching your eyes, nose, and mouth with unwashed hands.



## **Prevention Steps for Caregivers and Household Members of Individuals Confirmed to have, or Being Evaluated for, COVID-19 Infection Being Cared for in the Home**

If you live with, or provide care at home for, a person confirmed to have, or being evaluated for, COVID-19 infection please follow these guidelines to prevent infection:

### **Follow healthcare provider's instructions**

Make sure that you understand and can help the patient follow any healthcare provider instructions for all care.

### **Provide for the patient's basic needs**

You should help the patient with basic needs in the home and provide support for getting groceries, prescriptions, and other personal needs.

### **Monitor the patient's symptoms**

If they are getting sicker, call his or her medical provider and tell them that the patient has, or is being evaluated for, COVID-19 infection. This will help the healthcare provider's office take steps to keep other people from getting infected. Ask the healthcare provider to call the local or state health department.

### **Limit the number of people who have contact with the patient**

- ☐ If possible, have **only one caregiver** for the patient.
- ☐ Other household members should stay in another home or place of residence. If this is not possible, they should stay in another room, or be separated from the patient as much as possible. Use a separate bathroom, if available.
- ☐ **Restrict visitors** who do not have an essential need to be in the home.

### **Keep older adults, very young children, and other sick people away from the patient**

Keep older adults, very young children, and those who have compromised immune systems or chronic health conditions away from the patient. This includes people with chronic heart, lung, or kidney conditions, diabetes, and cancer.

### **Ensure good ventilation**

Make sure that shared spaces in the home have good air flow, such as from an air conditioner or an opened window, weather permitting.

### **Wash your hands often**

- ☐ **Wash your hands often and thoroughly with soap and water for at least 20 seconds.** You can use an alcohol-based hand sanitizer if soap and water are not available and if your hands are not visibly dirty.
- ☐ Avoid touching your eyes, nose, and mouth with unwashed hands.
- ☐ **Use disposable paper towels** to dry your hands. If not available, use dedicated cloth towels and replace them when they become wet.

### **Wear a facemask and gloves**

- ☐ **Wear a disposable facemask** at all times in the room **and gloves** when you touch or have contact with the patient's blood, body fluids, and/or secretions or excretions, such as sweat, saliva, sputum, nasal mucus, vomit, urine, or feces. Ensure the mask fits over your nose and mouth tightly, and do not touch it during use.
- ☐ Throw out disposable facemasks and gloves after using them. **Do not reuse.**
- ☐ **Wash your hands immediately** after removing your facemask and gloves.
- ☐ If your personal clothing becomes contaminated, carefully remove clothing and launder. **Wash your hands** after handling contaminated clothing.
- ☐ Place all used disposable facemasks, gloves, and other waste in a lined container before disposing them with other household waste.
- ☐ **Remove gloves and wash your hands** immediately after handling these items.

### **Do not share dishes, glasses, or other household items with the patient**

- ☐ Avoid sharing household items. You should not share dishes, drinking glasses, cups, eating utensils, towels, bedding, or other items with a patient who is confirmed to have, or being evaluated for, COVID-19 infection.
- ☐ After the person uses these items, you should wash them thoroughly with soap and water.

### **Wash laundry thoroughly**

- ☐ Immediately remove and wash clothes or bedding that have blood, body fluids, and/or secretions or excretions, such as sweat, saliva, sputum, nasal mucus, vomit, urine, or feces, on them.
- ☐ **Wear gloves** when handling laundry from the patient.
- ☐ Read and follow directions on labels of laundry or clothing items and detergent. In general, wash and dry with the warmest temperatures recommended on the label.

### **Clean all areas the individual has used often**

- ☐ **Clean all touchable surfaces**, such as counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables, every day. Also, clean any surfaces that may have blood, body fluids, and/or secretions or excretions on them.
- ☐ **Wear gloves** when cleaning surfaces the patient has come in contact with.
- ☐ Use a **diluted bleach solution** (e.g., dilute bleach with 1 part bleach and 10 parts water) or a household disinfectant with a label that says **EPA-registered for coronaviruses**. To make a bleach solution at home, add 1 tablespoon of bleach to 1 quart (4 cups) of water. For a larger supply, add ¼ cup of bleach to 1 gallon (16 cups) of water.
- ☐ Read labels of cleaning products and follow recommendations provided on product labels. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves or eye protection and making sure you have good ventilation during use of the product.
- ☐ **Remove gloves and wash hands** immediately after cleaning.

### **Monitor yourself for signs and symptoms of illness**

Caregivers and household members are considered close contacts, should monitor their health, and will be asked to limit movement outside of the home to the extent possible. Follow the monitoring steps for close contacts listed on the symptom monitoring form.

- ☐ If you have additional questions, contact your local health department or call the epidemiologist on call at 919-733-3419 (available 24/7).
- ☐ This guidance is subject to change. For the most up-to-date guidance from CDC, please refer to their website: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html>