Hillcrest Internal Medicine

4060 Fourth Avenue Suite 505

San Diego, CA 92103

1 619 298 1318

1 619 298 0843 (fax)

Telemedicine Information and Consent:

The doctor is willing to offer a virtual visit to prevent you from needing to come into the office to be seen during this time of pandemic. Certain types of medical issues will require a face to face appointment, but some types of complaints can be addressed via a virtual visit. If you have access to the HEALOW app (also called our “portal) or SKYPE, we can assist with this type of appointment. We prefer to use the HEALOW app. To learn more about the HEALO app, you would sign up for our portal and then you can access the “televisit” via that app. If you prefer to use skype, you will need to have SKYPE loaded on your computer. We ask that you play with it ahead of time so you are familiar with it before the appointment. If using SKYPE, please be aware that SKYPE does not have the same privacy protection against someone accessing the video as the HEALOW medical application. If you prefer to use skype, please let the doctor know your SKYPE ID when the staff call to confirm your appointment. Please be waiting at your computer with everything on and ready when your appointment time comes. If you are using the HEALO app, have it up on your computer or on your phone at the time of the visit. Select “start visit” to get the program started and the doctor will answer your televideo call.

If it is not possible for you to have a televideo conference call and you prefer not to come into the office, the doctor may also do a phone visit with you. This will be billed as a regular visit to your insurance company

**Patient Verification & Telemedicine Consent:**

*The doctor will proceed with the televideo evaluation at the direct request of the patient. Verbal**from the patient/ surrogate to perform this voluntary* ***telemedicine evaluation*** *(including obtaining history, performing examination and reviewing data provided by the patient) is obtained at the time of the appointment. The patient/ surrogate has the* ***right to refuse*** *this evaluation. There are intrinsic risks of using video conferencing, including potential loss of confidentiality. The benefits include prevention of exposure to sick patients in the office. The patient has options to be seen in the office when deemed appropriate or to be seen at a local ER or urgent care. The video conference appointment may have the* ***potential need for subsequent face to face*** *care. There is a risk of medical inaccuracies given that our recommendations will be made based on reported data (and we must therefore assume this information is accurate). Knowing that there is a risk that this information is not reported accurately, and that the telemedicine video, audio, or data feed may be incomplete, the patient must* ***agree to proceed*** *with evaluation and holds us harmless knowing these risks. In this evaluation, we will be providing* ***recommendations only****. All laws concerning* ***confidentiality*** *and patient access to medical records and copies of medical records apply to telemedicine. The patient/ surrogate has previously received the Hillcrest Internal Medicine Notice of Privacy*