Patient Informed Consent

Notice:

Before we begin your appointment, it is important that you understand how we will document the visit. We use a service called CareNotes to accurately capture the details of our discussion and the outcomes of your care. CareNotes allows us to focus on you without distraction, reducing manual note taking and improving the quality of care we provide.

We value your privacy and security, and the information handled through CareNotes is strictly used to enhance your care. Only you and your doctor will have access to this information, ensuring complete confidentiality. By signing this consent form, you agree to the use of CareNotes during your appointment.

Patient Consent:

I understand that CareNotes will be used during my appointment to document clinical information, and I consent to its use as described above.

Name: _____ **Date:** _____

Signature: _____