



Email Policy Agreement

I agree that the Bancroft Family Health Team (BFHT) and I will communicate by email for medical matters, I agree that I have read and agree to the below conditions and terms:

- Any emails sent by me or to me by the BFHT and its staff will be confidential. I acknowledge that any email I send to the BFHT may be read by any staff as it relates to their usual duties.
- All emails will be a permanent part of my patient file.
- I recognize that email sent to me can be read by other people if I were to leave my email open on shared or public computers. I will protect my own email, and will not hold the BFHT responsible if confidential information is made public through my own negligence. I will not hold the BFHT liable for information lost due to technical failures beyond the control of the BFHT.
- I understand that the BFHT and its staff will take reasonable means to protect the security of all patient emails.
- I will not use email for time sensitive matters. If it is an urgent medical matter, I will call 911 or go to the closest hospital emergency department available. I will not email for urgent matters and I acknowledge that replies to my emails may take a week.
- I will acknowledge receipt of all emails received from the BFHT.
- Please put the nature of your email in the subject line, for example "questions" or "medication requests".
- The BFHT will not divulge your email address to any other person or institution.
- I will not divulge the BFHT email address to any other person or institution.
- I will always put my name and phone number in all emails.
- I will inform the BFHT staff if my emails address changes.

Patient NAME: _____ Patient SIGNATURE: _____

Patient Email: _____

Staff NAME: _____ Staff SIGNATURE: _____

Date: _____

Office telephone: 613-332-1565