

Informed Consent for MSK Health Profiles™ Testing

An MSK Health Profile is a combination of tests which measures your balance and mobility using 2 to 3 small motion capture sensors which will be affixed to your skin, using hypoallergenic tape. Testing your balance, mobility and understanding the impact your well-being has on your daily activities may provide your practitioner with information they can use in your treatment planning.

Testing Risks: Before starting each test, you will have the chance to practice the movements. If you feel you cannot perform the required movement, you may withdraw from testing at any time by telling the assessor. It is possible that you may experience mild and short-lived muscle fatigue or soreness, or skin irritation from the tape as a result of performing these tests.

Data Privacy: All test data is securely stored on a server managed by MSK Metrics for as long as your practitioner remains a customer. Your data is immediately de-identified when it is uploaded to the database for analysis. To be able to recall and compare your test results over time, your practitioner has created a secure account for you with MSK Metrics. Only your practitioner and their delegate have the authority to access your account and your specific test results. A report (an MSK Health Profile) will be generated by the test application and provided to your practitioner in an electronic format which they can either print or save to your personal health record. This report can only be generated and accessed by your practitioner.

Data Use: By consenting to this test, you are also allowing MSK Metrics to use the data that does not identify you for their research into understanding and improving MSK Health Profiles testing, and improving their service. At no time will your data be shared with any other party. If you have any questions about the security or privacy of your data you can email MSK Metrics at privacy@mskmetrics.com.

I acknowledge I have discussed, or had the opportunity to discuss, with my healthcare practitioner the nature and purpose of MSK Health Profiles testing, and the purpose of this testing in the case of my care. By signing below I agree and consent to the testing recommended by my practitioner and the release of my de-identified data for use by MSK Metrics. I intend this consent to apply to my present and any future testing.

Dated this _____ day of _____, 20__

Signature (legal Guardian)