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**PattersonsEyecare.com**

## **Patient Consent for Electronic Communication & Registration for Online Prescriptions and Appointments**

\*I understand that my contact details will be used solely in relation to healthcare services offered by the practice, and you can choose to opt out of the services at any time by contacting us at the phone number above.

\*E-mails will be used to provide updates on new developments at the practice, and the use of text messaging to send patients reminders about the details of their next appointment.

\*I acknowledge that appointment reminders by text are an additional service and that these may not take place on all / or on any occasion, and that the responsibility of attending appointments or cancelling them still rests with me.

\*I understand that the content of an e-mail may be read by someone other than me if I share an email address or have provided a work place e-mail address.

\*I understand that the content of a text message may be read by someone other than me if I lose, leave my phone lying around or share a mobile phone.

\*I understand that the practice does not share mobile phone contact details with any external organisation.

\*I understand e-mail and text communications will never be used for urgent communications or contain personal and confidential information.

\*I agree to advise the practice if my mobile number changes or if this is no longer in my possession.