



www.ihgwny.com



716-662-7008



3671 Southwestern Boulevard Suites
101 & 213, Orchard Park, NY 14127



Patient Consent for use of Digital Scribe

Dear Respected Patient,

At Inspired Health Group, we are committed to providing the compassionate, personalized, effective and efficient care. As part of this commitment, we are continually looking for ways to enhance our services. We would like to inform you about a new digital scribe technology that we are using during patient visits to allow your provider to give you their undivided attention during your visit.

What is a digital scribe?

A digital scribe is a form of ambient Artificial Intelligence (AI). It listens to spoken conversations between you and your healthcare provider in the exam room and generates a draft of clinical notes for your provider to consider for placement into your medical record. It is a helpful tool used by many medical practices to reduce the amount of time providers spend taking notes during a patient exam.

How will this affect you?

Using this technology during your visit will allow your provider to spend more time focusing on you by reducing the amount of time they need to be on a computer documenting your visit. You will not notice or interact with the digital scribe directly. During your visit, it will be working in the background through your provider's computer or phone to turn spoken word between you and your care provider into a medical note. After you leave, your care provider will review and edit the generated notes for accuracy. These generated notes need to be approved by your provider before they permanently enter your medical record.



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Privacy:

The digital scribe tool we have chosen to work with adheres strictly to Health Insurance Portability and Accountability Act (HIPAA) compliance guidelines to ensure your data is secured and protected. Only the healthcare professionals involved in your care will have access to these notes. The audio information collected by this tool is stored within a protected cloud-based platform, and not on our providers' devices directly, and is deleted within 30 days. Your participation is completely voluntary

If you agree to use this digital scribe tool during your visits, please sign and date the form below. Even if you voluntarily agree, you can opt out at any time during your visit by telling your provider to stop using the digital scribe.

For more information:

If you have any questions or would like more information about the digital scribe tool IHG providers use and its responsibilities as a covered entity under HIPAA, please speak to the care team member at the front desk or email info@ihgwny.com.

Patient Consent:

I have read and understand the information provided in this consent form. I have had the opportunity to ask questions, and any concerns have been addressed to my satisfaction. By signing below, I voluntarily consent to the use of digital scribe technology in the creation of my/my child's medical records at Inspired Health Group.

Signature

Date



info@ihgwny.com



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