



EMAIL WAIVER

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) sets standards for protecting the rights of patients. Our practice follows the laws that grant every individual the right to the privacy and confidentiality of their health information. To comply with new HIPAA regulations effective September 23, 2013, email correspondence that contains protected health information should be sent by encrypted (secured) email. At this time our system is not yet encrypted, but there are times when it is medically necessary for us to email consulting pediatric and adult specialists or other healthcare worker from UCSF, Stanford, CPMC, and other institutions and private offices to improve our ability to provide your child with the most comprehensive and best possible advice, medical care, and treatment. We would like your permission to send emails to these consulting healthcare providers on your child's behalf.

I authorize SF Bay Pediatrics to send my child's medical information via emails in an unencrypted (unsecure) format to consulting healthcare providers. I understand that emails may contain protected health information. I further understand that unencrypted email and email attachments are not secure and may be viewed by others. I agree to hold harmless SF Bay Pediatrics, its officers, agents, employers and contract health providers from any and all liability, loss, damages, costs or expenses which are sustained, incurred, or required arising from the transmission of unencrypted e-mail correspondence and attachments.

Print Patient name(s):

---

---

---

Signature of Parent or Legal Guardian or Patient if over the age of 18 years

---

Printed Name of Signer and relationship to patient(s)

---

Date