



Patient Informed Consent

Notice:

Before we begin your consultation, we would like to inform you about the tools we use. To efficiently capture the details of your consultation and its outcomes, our clinicians use a digital note-taking platform. This tool ensures our focus stays on your care rather than on administrative tasks, enhancing your overall experience. Your consent is essential for us to use this tool during your visit. Please be assured that your information will be treated with utmost care, strictly for the purpose of delivering better healthcare.

Patient Informed Consent Agreement:

I hereby give my consent for the use of Letters during my consultation.
I understand that this tool helps my clinician efficiently document our conversation to enhance the quality of my care.

Clinician Name: _____

Date: _____

Signature: _____

Patient Name: _____

Date: _____

Signature: _____