

# Health Architects SA

Health-Worx Medical Centre  
B200 Cresta Centre  
Weltevreden Road  
Cresta  
Randburg  
2194

## CONSENT TO TELEHEALTH CONSULTATION

June 16 2022

### Overview

1. To receive a telehealth consult from Health Architects SA (“HASA”), by means of electronic media, preferably. Google Meet (Healthcare)



2. If for some reason, the Google Meet (Healthcare) service is not available then, the patient agrees to use an alternative electronic medium such as Zoom or Microsoft Teams.

3. It is specifically agreed that private medical data will only be shared over the Google Meet (Healthcare) app or a similar medium that is compliant with the provisions of the PoPi Act

4. 2. There is no subscription required when using the electronic platforms mentioned above, such as costs for the Applications (“Apps”) used, but I understand that I will carry my own costs of any infrastructure and/or running costs associated with such service being rendered e.g. the data used, the

telephone and/or computer, etc.

5. That this platform will be used to render healthcare services to me, and that the usual consent processes (required from me in writing) will be followed (i.e. I will be informed of my health status, as well as the benefits, risks and implications of the care). I understand that I can opt out of receiving care, at any stage,

6. To make an appointment prior to each contact where Telehealth will be provided. Please contact us on 731 1027, [stevejm@jhiphysio.com](mailto:stevejm@jhiphysio.com), or WhatsApp on 0713023300.
7. That ("HASA") reserves the right to NOT consult over (or reply to) e-mail, WhatsApp chat, SMS.
8. You will be informed of any applicable billing prior to the session.
9. To reduce the risk of missed appointments or last- minute cancellations, the usual cancellation/missed appointment fee will apply (you have signed accordingly in your original Programme Participant agreement contract at the first appt). That document will apply in full, except for the interim measures detailed here.
10. I understand that the Practitioner will take notes during the Telehealth session. The session may be recorded as a video or audio file and in this case the transcript will be attached to my Electronic Patient Record.
11. Your Practitioner will devote his/her full attention to the session.
12. That the service may have limitations relating to technology, such as data- and internet failures (e.g. dropped calls or bad reception). I understand that I am responsible for a secure and stable connection as far as possible.
13. To dress appropriately for the Telehealth interaction, I will devote my full attention to the session, and not do anything else, e.g. receive phone calls, answer SMS's, reply to WhatsApp messages, read emails, cook, care for children or the likes.
14. That, although the HASA will adhere to the existing rules relating to confidentiality
15. I understand that I must take the necessary precautions at home to ensure my confidentiality during telehealth service provision, and, where I wish for another person to be present during the Telehealth engagement, I will forward a written and signed consent for that person's presence, clearly indicating the person's details, the date(s) and time(s) of the consultation(s);
16. The link attached can be used to get more information about Telehealth, its benefits and implications  
<https://www.jennyhague.com/forum/members-discussion-forum/what-is-telehealth-and-what-does-it-mean-for-you>