

**CARE EVERYWHERE HEALTHIX
HEALTH INFORMATION EXCHANGE, CARE EVERYWHERE
AND HEALTHIX CONSENT FORM**

, connect.med.nyu.edu/ (— HIE),
NYU Langone (— Care Everywhere),
, HIE. , Care Everywhere , / HIE
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In this Consent Form, you can choose whether to allow the health care providers listed on the NYU Langone Health System Health Information Exchange (“HIE”) website <http://health-connect.med.nyu.edu/> (“HIE Participants”) and non-NYU Langone health providers who may request access to your medical records for purposes of current treatment (“Care Everywhere Providers”) to obtain access to your medical records through a computer network operated by the HIE. In order for a Care Everywhere Provider to know that information may be available through the HIE, you must tell them that you were/are a patient of an HIE Participant and that such information may be available

HIE Healthix

«Better Information Means Better Care» («
www.ehealth4ny.org.

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Print Name of Patient

Patient's Date of Birth

Date

Signature of Patient or Patient's Legal

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HIE: <http://health>

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