

Office Name: Knoxville Chiropractic Clinic

Office Address: 115 E. Main St. Knoxville, IA 50318-2525

Patient Messaging Consent

By supplying my home phone number, mobile phone number, email address, and any other personal contact information, I authorize my health care provider to employ a third-party automated outreach and messaging system to use my personal information, the name of my care provider, the time and place of my schedule appointment(s), and other limited information, for the purpose of notifying me of a pending appointment, a missed appointment, overdue wellness exam, or other communications.

I also authorize my healthcare provider to disclose to third parties, who may intercept these messages, limited protected health information (PHI) regarding my healthcare events.

I consent to receiving multiple messages per day from the automated outreach and messaging system, when necessary.

Patient Cell Phone Number

Patient Name

Date

Patient Signature