

Agreement to Consent for facilitating Medical, Health And Wellbeing Services

By becoming a Member or Provider of Zarcare, I consent to facilitating online healthcare and wellness services provided by Zarcare, including recording, storing, and maintaining relevant notes and information. These records may encompass but are not limited to, medical history, symptoms, diagnoses, treatment plans, lifestyle advice and any other relevant details necessary for the provision of healthcare and wellness services.

I understand that the recorded notes and information will be handled with appropriate safeguards to protect my privacy and comply with applicable laws and regulations regarding data protection and patient confidentiality. I acknowledge that while reasonable efforts will be made to ensure the security of the information, no data transmission over the Internet can be guaranteed as entirely secure.

I also acknowledge my right to access, review, and request correction or deletion of my recorded information in accordance with applicable privacy laws and Zarcare's [terms and conditions](#).

Furthermore, I confirm my understanding of the [terms and conditions](#) related to online healthcare and wellness services, including recording notes and information, and I willingly provide my consent for these activities to occur.

In addition, I consent to receive marketing communications and messages from Zarcare for the purpose of information dissemination, updates, and relevant promotions. I understand that I may opt out of these communications at any time by following the provided instructions.

As a Zarcare member or provider, you may expect the following benefits:

- Improved access to or provision of medical care by enabling member and provider to remain at a remote site while the healthcare or wellness member obtains treatment, assistance test results or consults with a provider at their respective location.
- More efficient medical, health and wellness evaluation and management
- Obtaining the expertise of a distant specialist

As with any health and medical procedure, online consultations have potential risks. These risks include, but may not be limited to:

- In rare cases, information transmitted may not be enough (e.g. poor resolution of images) to allow for appropriate medical decision-making by the physician and consultant(s);
- Delays in medical evaluation and treatment could occur due to deficiencies or failures of the equipment or technology;

- In infrequent instances, security protocols could fail, causing a breach of privacy of personal medical information;
- In rare cases, a lack of access to complete medical records may result in adverse drug interactions or allergic reactions or other judgment errors;

BY ACCEPTING THE CONTENT OF THIS CONSENT AGREEMENT, I ATTEST TO AND UNDERSTAND THE FOLLOWING:

1. I understand that the laws that protect the privacy and the confidentiality of medical information also apply to Zarcare and that no information obtained in the use of Zarcare which identifies me will be disclosed to researchers or other entities without my consent.
2. I understand that I have the right to withhold or withdraw my consent to the use of Zarcare during my care at any time without affecting my right to future care or treatment.
3. I understand that I have the right to inspect all information obtained and recorded during an online consultation and may receive copies of this information for a reasonable fee.
4. I understand that various alternative healthcare and wellness service methods may be available to me and that I may choose one or more at any time.
5. I understand that online consultations may involve electronic communication of my personal and medical information to other providers in other locations, including out of the current province in which I reside.
6. I understand that it is my duty to inform my chosen provider of electronic interactions regarding the care that I may have with other healthcare and wellness providers.
7. I understand that I may expect the anticipated benefits from the use of Zarcare to connect to a provider for my care but that no results can be guaranteed or assured.
8. I hereby indemnify and hold Zarcare harmless against any loss, damage, liability, expense or claim (direct or indirect) which may incur as a result of any act or omission whatsoever by Zarcare, including the advice, diagnoses and treatment by the provider.

Provider and Member Consent

I affirm that I have read, understood, and agreed to the [terms and conditions](#) regarding facilitating online healthcare and wellness services, recording notes and information, and receiving marketing communications from Zarcare. Therefore, I agree to the [terms and conditions](#) and hereby give my informed consent as a user of Zarcare, to have Zarcare facilitate medical, health, and wellness online consultations at my own risk.