

Acknowledgment

I have accessed this page because I have registered on the web site of The Virtual Center for Velo-Cardio-Facial Syndrome. I (the registrant) acknowledge that I am seeking information about velo-cardio-facial syndrome (VCFS) in order to learn about VCFS, its diagnosis, and its treatment and to share that information with others who may benefit from this information. I understand that The Virtual Center for Velo-Cardio-Facial Syndrome (the "Virtual Center," which reference includes any person acting through or on behalf of The Center) has been set up to provide information about VCFS (also known as DiGeorge syndrome, 22q11 deletion syndrome, or Shprintzen syndrome) or related disorders. The Center is willing to provide this information and will do so with my explicit understanding, agreement and acknowledgement that:

1. The Virtual Center, and any person involved in providing information through the Virtual Center, is not acting as a health care provider or giving medical advice to me, to anyone I may share information with, or to anyone whom the Virtual Center may speak pursuant to my acknowledgement. The experts at The Virtual Center may provide information directly to me, to local health care providers, and other people who are relatives or that I may know if requested to do so.
2. Information provided by the Virtual Center may be developed based on a health care history or scenario provided to the Virtual Center. The experts may provide information specific to the history that will reflect their knowledge of VCFS and their experience with the syndrome and related disorders. However, the information may not be complete if the history or information provided to the Virtual Center is not complete
3. Any information provided by the Virtual Center is not to be interpreted as a treatment plan specific to any individual, but rather as a scenario developed to address questions, and to provide information that we hope will be helpful. It must be understood that any information provided does not represent a patient-clinician relationship, nor does it imply responsibility for the care of the registrant or the subject of the registrant's inquiries. The experts at the Virtual Center act solely as sources of information that may prove helpful to you, to anyone with whom you share information, and perhaps to health care providers who are responsible for the care of the source of the registrant's inquiry. Any person who is the source of your inquiry is not a "patient" of the Virtual Center, as the Virtual Center does not provide medical advice or patient care, and any reference to a "patient" will not make that person a patient or client of the Center.
4. Since the Virtual Center does not provide patient care, it is not a covered entity under HIPAA and not bound by HIPAA. It will maintain appropriate confidentiality of all information provided, as determined by it.
5. You should not rely on the information given to you by the Virtual Center as the basis for making medical or other decisions. An individual receiving care (which the Virtual Center does not provide) and his/her family are responsible for making their own decisions in conjunction with advice provided by their physicians and caregivers.

By signing this acknowledgment, I certify that I have read it in its entirety and understand its content. If I am the parent of a minor child with VCFS, or guardian of a person with VCFS, I am signing this acknowledgement on behalf of the individual with VCFS as well.

Signature: _____

Date: _____

Print name: _____