



**Preventive Women's Health
Gynecology & Infertility, PLC**

Mark WM Doering, M.D.

Gynecology • Infertility
Endometriosis • Menopause
LEEP • Hysteroscopy
Laparoscopy • Colposcopy
Endometrial Ablation

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PATIENT'S PERSONAL HOME E-MAIL ADDRESS

Dear Patient:

In an effort to control overhead costs (stamps and envelopes), we would like to use E-mail for office communications. These communications would include abnormal test results, information pertaining to your health care and reminders for you to call the office to schedule yearly appointments (basically what we are already sending patients via US postal services.)

We can only use your **home** E-mail that you use for personal correspondence. We cannot use your work E-mail address that you use for business matters at your place of employment because of HIPAA compliance issues.

By signing this form you are giving us permission to send you office related E-mail pertaining to your health care. Thank-you

Patient Name

Signature

E-mail Address

Date


