

ELECTRONIC HEALTH SERVICES USER AGREEMENT

The City of Espoo Health Services provides its clients with e-health services through the Internet and the Health file. Health file is individual for each client and requires the client's identification before the service can be used. Identification takes place online with personal bank login details of the following banks: Aktia, Handelsbanken, Nordea, Pohjola, Danske Bank, S-Pankki, LähiTapiola and Ålandsbanken.

Communication through the e-service uses a secure connection where messages are encrypted and no unauthorized person can read, copy or modify them. The client is responsible for retaining their own bank login information. If the login details are exposed to third parties, the client must notify the Health Centre immediately in order to close the Health file.

The Health Centre does not charge the client for the electronic services.

Use of the services requires an agreement between the client and the City of Espoo Health Centre. The agreement is open-ended. The client may terminate the agreement at any time by contacting the Health Centre. The agreement will be terminated automatically when the client's customer relationship with the City of Espoo Health Centre stops due to moving to a new region. If the Health Centre detects intentional abuse in the use of the electronic service, the client's right to use the service may be denied.

E-health services

The content of the Health File is following:

1. Health Information

Summary page provides the client with the information of their permanent diagnosis, regular medication and the treatment and examinations documented on the Health Centre's patient records. The file also contains the Health Centre worker's interpretations and potential treatment instructions for any laboratory examinations that have been carried out for the client after opening of the Health File Service

Plan of care includes the information of the goals of the treatment, details of self-care, medication and follow-up treatments.

Vaccinations page lists all the vaccinations documented in the Espoo electronic patient record system since 2003.

2. Question and Answer Service

The client can send short questions regarding their plan of care to their own Health Centre team that includes a doctor and a nurse and read the received answers. The client's questions will be answered within three working days. The Health Centre team can also send a message to the client through this service. **All messages are saved in the Health Centre's patient record system.**

3. Antiko

Patients with anticoagulant treatment will see their INR-values and the instructions for the medication (Marevan) dosage.

4. Contact details

On this page the client can update their mobile phone number.

Automatic text message reminders

The client will receive an automated message to their mobile phone once there is a new message or laboratory test results in their Health File.

This eService is **not** meant for

- treating acute illnesses or conditions
- complicated problems with multiple questions
- booking appointments.

I wish to enter into an agreement regarding the use of electronic health care services in the manner described on this agreement. I have read the agreement and fully understand its content.

As a part of the e-services, the Health Centre may send me information about the use of health services, for example, reminders about appointments or notifications about messages received in my Health file.

Name: _____

Personal identity number: _____

Mobile phone number: _____

Place and date: _____

Client's signature: _____

Fill out the agreement, sign it and take it to the patient office of your Health Centre. Processing of the agreement will take 8-14 days. You will get an automated text message to your cell phone once the service has been activated.

Please fill out the required information on the pages 4 and 5

Vitamins, herbal medication or other self-care products you use	The dosage you take per day	How long have you been using the product?

PERMANENT DIAGNOSIS INFORMATION

My physician has diagnosed me with the following medical conditions:

Illness or condition	When were you diagnosed?	Where was the primary treatment given?	When was the last time you received treatment for