



Surgical Wound Care
— ASSOCIATES —

Health Information Exchange Program

Surgical Wound Care Associates, PLLC participates in the Health Information Exchange (HIE) program to increase collaboration with other healthcare practitioners to provide better care for patients. This program allows for the safe exchange of clinical patient information such as office notes, testing, laboratory results, etc. to help all practitioners provide accurate care/treatment in a timely manner and minimize redundant testing with extra expenses.

I _____ give permission for Surgical Wound Care Associates, PLLC to participate on
(First and Last Name)
my behalf with the Health Information Exchange (HIE) program including Care Quality and Common Well.

Signature _____ Date _____