



*Higher Standards. Greater Hope.*

### Photographic Consent

Dr. O'Brien routinely photographs her patients in order to follow their exams and results over time. All photos are digital and stored securely and are only used for medical records, treatment planning, documenting the course of treatment, and educational teaching purposes in lectures to other providers. If your photographs are used for education purposes your name and other protected health information will be redacted.

My signature below indicates that I hereby consent to my photographs being taken and used in this manner.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature (Patient or Legal Guardian)

\_\_\_\_\_  
Date