Emergency Responders Health Center
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Patient Consent Form

Advanced Cardiac & Cancer Ultrasound Screening Initiative

PATIENT INFORMATION

Patient Full Name | *Date of Birth*

Acc No.

1. PURPOSE

The purpose of this consent form is to ensure patients at Emergency Responders Health Center (ERHC) are fully informed about the scope, benefits, limitations, financial responsibilities, and research implications when opting into the Advanced Cardiac & Cancer Ultrasound Screening Initiative (*the program*).

This consent also extends to any additional ultrasound imaging services that may arise through participation in *the program.*

Please read each section carefully. If you have any questions regarding the ultrasound screening services, please ask a member of ERHC's clinical team prior to signing.

2. ABOUT THE ADVANCED CARDIAC & CANCER ULTRASOUND SCREENING INITIATIVE

The Advanced Cardiac & Cancer Ultrasound Screening Initiative is designed to provide active-duty Fire and Police Responders with proactive ultrasound screening at no cost. This screening is intended to help identify certain cardiac-, vascular-, or cancer-related findings that may not be detected through traditional recommended screening. Exams will be performed by registered diagnostic, vascular, and echocardiography sonographers. Exams will be interpreted by Radiologists and Cardiologists board certified in their specialties. As part of *the program*, enrolled patients are eligible to receive the following imaging examinations:

ECHOCARDIOGRAPHY (ECHO)[1]	
Echo Ultrasound Imaging	Evaluates cardiac structure and function, including chamber size, ventricular wall thickness, heart valve function, and heart pump efficiency (left ventricular ejection fraction) to detect potential cardiac disease and provide baseline assessment.
GENERAL/ VASCULAR ULTRASOUND[1]	
Carotid Ultrasound Imaging	Focuses on the carotid arteries in the neck to identify early artery wall thickening (CIMT – Carotid Intimal Medial Thickness), atherosclerotic plaque, and stenosis (narrowing) that reduce blood flow and increase stroke risk
Vascular / Doppler Imaging	Evaluation of the abdominal aorta to evaluate for aneurysms (ballon-like bulge) and atherosclerosis (plaque).
Cancer Ultrasound Imaging	To evaluate for the presence of masses, complex cysts, abnormal enlargement, and other abnormalities of the thyroid gland, abdominal organs (liver, gallbladder, bile ducts, spleen, pancreas, and kidneys), pelvic organs (bladder and ovaries for females), and scrotal/testes for males.

Participation in The Advanced Cardiac & Cancer Ultrasound Screening Initiative is voluntary. This program is offered as an additional health screening opportunity for eligible members.

[1] Covered at no cost to the patient under the Advanced Cardiac & Cancer Screening Program. See Section 4a.

3. BENEFITS, RISKS, LIMITATIONS & RESULTS

Ultrasound imaging is a safe, non-invasive procedure that uses high-frequency sound waves. Screening protocols are designed to provide screening imaging and are not considered full diagnostic evaluations. A screening ultrasound may not detect every potential condition, and some findings may require additional evaluation to determine whether they are clinically significant. As with any medical screening service, there are both potential benefits and important limitations I should understand before receiving ultrasound screening services.

POTENTIAL BENEFITS

- Screening through the Advanced Cardiac & Cancer Ultrasound Screening Initiative provided at no cost to eligible patients
- Early detection of heart, vascular, cancer or additional abnormalities before symptoms develop
- Real-time, point-of-care imaging supports faster, more informed clinical decisions
- Opportunity for timely follow-up with my ERHC medical provider when indicated by findings

POTENTIAL RISKS & LIMITATIONS

- **False positives:** Screening results may flag an abnormality that is insignificant or benign. Not every finding detected will require treatment or affect overall health. Screening may discover benign, incidental findings that need further evaluation, and may cause stress or anxiety.
- **False negatives:** Screening may not detect every condition. A normal result does not guarantee the absence of disease. Screening may indicate findings that need further evaluation.
- **Image and interpretive limitations:** Body size, shape, or positioning may reduce or affect image quality. Because this is a limited screening study, radiologist and cardiologist interpretation is based only on the images obtained. Screening may be less complete than a full diagnostic ultrasound exam.
- **Additional evaluation costs:** Any follow-up diagnostic testing, imaging, laboratory testing, specialist consultation, or other medical evaluation may create out-of-pocket costs depending on my individual insurance plan.

Important Note: A Screening Finding Is Not a Diagnosis

A finding on screening ultrasound is not a diagnosis. If a concern is identified, my medical provider will discuss the clinical significance of the finding and recommend the appropriate next steps. I understand that I have the right to ask questions and to seek a second opinion before proceeding with any recommended follow-up investigation or treatment.

Results & Follow-up

I understand that results from my ultrasound are typically uploaded to the patient portal (ERHC eClinicalWorks) within roughly 5-7 business days, though timing can vary. I will have the chance to review the results with my ERHC medical provider during my scheduled Annual Wellness Exam (AWE). I understand that this review is offered as a courtesy service by ERHC for participating in this initiative and is not a standard part of the AWE.

I understand that, depending on the findings, additional testing or follow-up care may be recommended for a more definitive assessment, and that any associated out-of-pocket costs may be my responsibility.[2]

4. PATIENT FINANCIAL RESPONSIBILITIES

4a. Advanced Cardiac & Cancer Ultrasound Screening Initiative

Initial screening examinations performed under the Advanced Cardiac & Cancer Ultrasound Screening Initiative are limited screenings only (limited resting echocardiogram, general, and vascular) and are not a substitute for a complete diagnostic ultrasound. These limited screenings are provided at no direct cost to the patient, including the initial screening examination(s), equipment use, and facility.

4b. Follow-Up Care, Diagnostic Studies & Patient Responsibility

Like all screening tests, ultrasound has limitations. These limited ultrasound screenings are designed to identify potential areas of concern, not to fully evaluate them, and may not detect every medical condition. If a finding requires further review, a more comprehensive diagnostic study may be needed to determine whether it is clinically significant—and is ordered and billed separately.

Evaluation and testing resulting from an abnormal finding on the initial screening ultrasound—whether for concerning or potential findings, surveillance, or treatment—is not covered under *the program*. This includes diagnostic imaging, labs and specialist referrals. Insurance will be billed first; any remaining balance (co-pay, deductible, or co-insurance) is the patient's responsibility.

[2] Additional testing, follow-up care, and treatment are not covered under the initial screening program and are the patient's responsibility. See Section 4b.

5. DATA COLLECTION & QUALITY IMPROVEMENT PROGRAM

By participating in the Advanced Cardiac & Cancer Ultrasound Screening Initiative, I consent to ERHC collecting and securely maintaining my ultrasound screening information—including results from my cardiac, vascular, and cancer screening examinations—as part of my confidential medical record.

ERHC may also analyze this information for internal quality improvement and program evaluation, to:

- Evaluate the effectiveness and clinical value of the screening program.
- Improve screening protocols, workflows, and patient care.
- Better understand screening findings within the Fire, Police, and EMS first responder community.
- Inform decisions about the initiative's continuation and future development.
- Develop educational materials on common screening findings and preventative health strategies.

My individual medical information will remain confidential. Any summaries, reports, or educational materials developed from this program will use aggregated and/or de-identified data in accordance with HIPAA. No information that could reasonably identify me will be released without my separate written authorization, unless otherwise required by law.

Participation in this data collection does not affect my medical care. My individual results will continue to be reviewed with me and used by my medical providers to guide my care and any recommended follow-up.

6. PATIENT RIGHTS

I have the right to ask questions at any time before, during, or after my screening examination, and to receive a copy of this signed form for my records. I may discuss my results with my provider, seek a second opinion, and request access to my health information, including ultrasound images, in accordance with HIPAA regulations. I may request a copy of these results from ERHC to discuss with an outside medical provider at any time.

7. ACKNOWLEDGEMENT & PATIENT SIGNATURE

By signing below, I confirm that I have read and understood the information contained in this consent form, and I have had the opportunity to ask questions.

I confirm I understand the scope of the Advanced Cardiac & Cancer Ultrasound Screening Initiative, consent to the data collection and use described in Section 5, and understand the initial screening is covered at no cost (Section 4a).

I understand the scope, purpose, benefits, limitations, and risks of all the ultrasound screening examination(s) that I am about to receive.

I understand that I am financially responsible for any additional evaluation, testing, or treatment recommended as a result of an abnormal finding during the initial screening ultrasound(s) (Section 4b).

Patient Signature	*Date*