CARE AGREEMENT

This form contains facts you should know about your health care at UW Medicine and from Children's University Medical Group, University of Washington Dentists and Oral Surgeons, and Seattle Cancer Care Alliance. If there is any part of this form that is unclear you can ask questions about it. At the bottom of the form there is a place for you to sign your name so that we know you have read this form (or had it read to you) and agree to receive health care from us.

UW Medicine includes:

- Harborview Medical Center and Clinics
- Northwest Hospital & Medical Center and Clinics
- University of Washington Medical Center and Clinics
- Airlift Northwest
- UW Medicine Neighborhood Clinics
- UW Physicians Sports Medicine Clinic
- Husky Health Primary Care Center,
- Summit Cardiology, and
- UW Physicians

Your health care team consists of medical doctors, doctors in training (residents and fellows), nurses, other health care professionals, and students of the health sciences. They will work together to diagnose and treat you. You will have an attending physician. This is the doctor who has primary responsibility for your care.

Photographs, videotapes, or other images of you may be used to keep a record of your care and treatment (including surgery). These images may become part of your medical record.

SIGNATURE

By signing below, it shows that you have read this document and agree to receive health care from UW Medicine. If there is any part of this form that is unclear, be sure to ask questions about it.

SIGNATURE (Patient or person authorized to give authorization)		PRINT NAME	DATE		
IF SIGNED BY PERSON	OTHER THAN PATIE	NT, SPECIFY SURROGATE'S	RELATIONSHIP TO PAT	TENT:	
☐ GUARDIAN	ARDIAN HEALTH CARE POWER OF ATTORNEY			☐ PARENT	
☐ HUSBAND/WIFE	HUSBAND/WIFE			☐ ADULT BROTHER/SISTER	
L					
PT.NO	UW Medicine Harborview Medical Center – UW Medical Center Northwest Hospital & Medical Center – University of Washington Physicians Seattle, Washington			hysicians	
 NAME		CARE AGREEMENT			
Place EPIC Label	Vithin Box I				

UH0051 REV JAN 2025

WHITE - MEDICAL RECORD

YELLOW - PATIENT