

Diocese of Salina

FertilityCare™ Services

Acknowledgment of Privacy Practices

Your identifying health information will be kept private. This includes but is not limited to your name, contact information, and all medical information shared with your FertilityCare Practitioner. This information will not be shared with a third-party for any reason. The fact that you are a client of the Creighton Model FertilityCare System will also be kept confidential, as will all information discussed in follow-up sessions. Your health information may be discussed with other FertilityCare Practitioners with your permission, but your identifying information will be protected at all times. If you are referred to another health care professional, such as a NaProTechnology physician, your information will be released only upon your permission. If we are using Zoom for follow-up sessions, you are responsible for ensuring privacy where you access the meeting, such as using a private area, a white noise machine, and/or using headphones.

I authorize communication via e-mail/text message/Zoom/phone. (Please circle one) YES NO

Consent to Instruction in Natural Birth Regulation

I am becoming a participant in this program completely voluntarily. I have been advised that natural birth regulation, in particular the Creighton Model FertilityCare System, will be taught in this program to the exclusion of all other family planning methods.

The purpose and objectives of the program have been fully explained to me. I acknowledge that no guarantee or assurance has been made regarding the effectiveness of the method to achieve or avoid a pregnancy. I have been advised that I may contact my teacher or the Family Life Office of the Diocese of Salina, regarding any questions I may have concerning my use of this method. I have further been advised, and I understand, that I may withdraw from this program at any time I choose to do so.

Commitment/Quality Control

The only way to maintain the quality control of this system is to provide follow-up sessions to every client so that this system is the most effective it can be, regardless of whether it is your intention to avoid or achieve a pregnancy.

I have come to this session to learn about the Creighton Model FertilityCare System, which is a medical model for natural birth regulation and the medical applications of NaProTechnology. I have been informed that follow-up sessions are necessary to adequately learn the system. I understand that the effectiveness of the-system depends on accurate observations and good charting. If I choose to discontinue the follow-up sessions, I may not have learned the complete Creighton Model FertilityCare System, its application may not be as effective, and I may be asked to return my materials to the practitioner.

Client (Female)

Date

Client (Male)

Date

FertilityCare Practitioner

Date