

AI TRANSCRIPTION CONSENT

Your clinician may use an AI medical scribe to help prepare accurate consultation notes while keeping their attention.

Patient Name	_____	Date of birth	_____
Date	_____	Clinician	_____

HOW IT WORKS

The tool listens during your consultation and creates a draft clinical note. Your clinician reviews and approves the note before it becomes part of your medical record. The tool supports - but does not replace - your clinician's professional judgement.

HEIDI • Helps document your consultation by capturing only what is needed for accurate medical records. • Once the notes are generated and saved after the consultation, the audio recording is immediately deleted. Audio recordings are never retained. • Data is processed and stored in Australia. Data is de-identified, encrypted and not used for secondary purposes.	LYREBIRD HEALTH • Helps your clinician record relevant details and transfer the resulting text to your electronic medical record. • Once the notes are generated and saved after the consultation, the audio recording is immediately deleted. Audio recordings are never retained. • Transcription occurs in Australia; content is encrypted and accessible to your clinician.
Heidi and Lyrebird both have the capability to be used as standalone web-based applications or integrated directly into your Practice Management Software (PMS). It is a discretion of the clinician how to use it. As a standalone system, the AI scribe does not record or extract any patient details. When integrated, however, it automatically recognises and extracts these details to safely generate and sync clinical notes.	

YOUR CHOICE AND PRIVACY

- You can ask questions before deciding.
- You may decline or withdraw consent at any time without affecting the care you receive.
- Only information relevant to clinical documentation is intended to be captured.
- Tell your clinician if there is anything you do not want included in the transcription.

PLEASE TICK ONE	
☐	I CONSENT to my clinician using Heidi or Lyrebird Health to assist with documenting my consultation.
☐	I DO NOT CONSENT to AI transcription being used during my consultation.

PATIENT ACKNOWLEDGEMENT

I have read and understood the information above, had the opportunity to ask questions, and understand that I can change my decision at any time.

Patient/ representative name	_____
Signature	_____
Date	_____
If signed by a representative, relationship to patient	_____