

Lincoln Pediatric Associates Patient Portal Authorization Form

Patient Name: _____ DOB: _____

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Patient Name: _____ DOB: _____

Parent or Legal Guardian: _____ (please print)

Email Address: _____ (please use personal email)

What is a Patient Portal?

Lincoln Pediatrics is offering the use of a secure web portal as a way to view personal appointment and health information and communicate with the staff. This information is encrypted and is available only to you by the use of your own personal password protected portal website. Some of the features offered with this service include:

- Email reminders of upcoming scheduled appointments
- Confirm, cancel or request to reschedule appointments
- Request a referral or medication refill
- View health summary information on your child's electronic chart
- View and print immunization records
- View lab results
- Send requests to staff to update health summary information
- View demographic/insurance information and send requests for staff to update

How to sign up for the portal:

Once we have this signed form on record, we will send you a secure link to set up your account. You will be asked for the child's last name, gender, date of birth and zip code to register. You will be given a user name and then be asked to choose your password.

The Patient Portal is not intended for the following:

- No diagnosis or treatment is offered by portal email. Diagnosis and treatment can only be offered after the patient is seen by a physician
- No emergency communications or services. In an emergency, please go to the nearest emergency room or dial 911

Conditions of Participation in the Patient Portal:

We will continue to take every precaution to protect the privacy of your family's health care information. Access to this web portal is an optional service that we provide. Access may be revoked if this privilege is abused in any way.

By signing this form and consenting to use the portal you agree to:

- **Not** transmit any electronic information that violates the rights or privacy of any party.
- **Not** use the web portal in any way that would violate local, state or federal laws.
- **Not** transmit materials that are obscene, abusive, slanderous or otherwise likely to result in harm to others.
- **Not** intentionally distribute viruses or take any other action that could compromise the security of our computer system.

Parent/Guardian signature:

Date: _____