

We now have a patient portal.

The following information is very important so that the office can give you the best experience in using the portal and our email notification system.

Primary email for the family: _____

Primary cell phone for the family: _____

Communication Preferences:

By allowing us to use your email, you are able to use the patient portal and confirm appointments online through your email. Cell phone notifications will be a message by our automated system or the staff – voice messages will be left if option is available.

Appointment confirmations	<input type="checkbox"/> email	<input type="checkbox"/> cell phone	<input type="checkbox"/> both
Test Results	<input type="checkbox"/> email	<input type="checkbox"/> cell phone	<input type="checkbox"/> both
Health Maintenance Reminders	<input type="checkbox"/> email	<input type="checkbox"/> cell phone	<input type="checkbox"/> both
Patient Education	<input type="checkbox"/> email	<input type="checkbox"/> cell phone	<input type="checkbox"/> both
Messages	<input type="checkbox"/> email	<input type="checkbox"/> cell phone	<input type="checkbox"/> both

Messages through the patient portal only gives notification by email that a message is available.

Please remember that we do our best to remind you of appointments but it is still your responsibility – please write it down.

Our new Electronic Health Record system allows a photo of your child to be stored as an extra method of identification. I am the parent or legal guardian and grant WeeCare for Kids my permission to use my child's photograph in this system - _____

Signature

Our new system now allows the office electronic prescriptions for non-controlled substance medications. Please provide your preferred pharmacy.

Primary pharmacy choice: _____

Secondary pharmacy choice: _____

The above information was given today by:

Print Name

Signature

Office use: Account(s) _____