



Pediatric Health Care Associates P.C.

MyChart Adult Proxy Access Consent Form



This form is to be used to give MyChart access to parents/legal guardians of patients over the age of 18

PART I- TO BE COMPLETED BY PATIENT

Demographics

Patient Last Name _____ First Name _____ MI _____

Patient Date of Birth _____

Patients with a MyChart account may allow another person (such as a parent or legal guardian) to access their MyChart account. This is called proxy access. This form allows the person listed below to access your MyChart account.

Name of Individual _____

Relationship to Patient _____

Date of Birth of Individual Requesting Access _____

Email Address _____

My Chart Adult Proxy Access Terms and Conditions

Getting MyChart Access

I understand that:

- I am allowing *Pediatric Health Care Associates P.C.* to use MyChart to share limited medical information with my proxy
- Giving MyChart proxy access is voluntary and I do not have to give proxy access
- It may take up to 10 business days for my MyChart account to become available to my proxy
- My proxy must follow the MyChart Terms and Conditions listed in Part II of this document

Types of Access

I understand that:

- My proxy will be given MyChart Adult Proxy Access. This type of access gives a proxy a MyChart account for a patient over 18 years old.
- With this account my proxy can:
 - Review, make or cancel appointments
 - View portions of my medical record such as allergies, medications, histories, immunizations, growth charts, problem lists and recent visit information
 - Receive certain lab results

- Communicate with providers via secure messaging regarding health concerns
- Request prescription refills
- Pay bills
- Access links to other sites that will provide health information

Cancelling MyChart Access

I understand that:

- ***Pediatric Health Care Associates P.C. may cancel MyChart access if my proxy does not follow these Terms and Conditions***
- Access to MyChart is provided by *Pediatric Health Care Associates P.C.* as a convenience. *Pediatric Health Care Associates P.C.* has the right to turn off access to MyChart at any time, for any reason
- **I may cancel this consent and turn off MyChart proxy access at any time by giving a written request to *Pediatric Health Care Associates P.C.***
- I know I cannot withdraw information that *Pediatric Health Care Associates P.C.* had shared before I told *Pediatric Health Care Associates P.C.* to stop

Consent

By signing below I agree that I understand the terms and conditions for a giving a MyChart proxy account.

I understand that this approval will end in 12 months. I know that I may cancel the MyChart proxy account sooner by sending a written letter to *Pediatric Health Care Associates P.C.*. Once I am no longer a patient of *Pediatric Health Care Associates P.C.* my proxy will not be able to use their MyChart account.

Patient Signature

Date

PART II- TO BE COMPLETED BY PROXY

I understand that the patient listed above has asked to give me proxy access to their MyChart account.

My Chart Adult Proxy Access Terms and Conditions

Note: All references below to 'patient' are for the patient listed above.

Getting MyChart Access

I understand that:

- **I am allowing *Pediatric Health Care Associates P.C.* to share limited medical information about the patient through MyChart. This information is for my personal use**
- Using MyChart is voluntary and I do not have to use MyChart
- It may take up to 10 business days for my MyChart account to become available to me
- **MyChart does not contain all of the medical record for the patient**
- The medical information provided on MyChart should not be used to replace proper medical attention

- MyChart may not be available to me all the time. This may be because of system failures, back-up procedures, maintenance, or other causes. *Pediatric Health Care Associates P.C.* does not promise that I will be able to access MyChart at any particular time
- **When MyChart is not available I will use other methods (e.g., telephone) to contact *Pediatric Health Care Associates P.C.***

Types of Access

I understand that:

- I will be given MyChart Adult Proxy Access. This type of access gives parents/ legal guardians a MyChart account for a patient over 18.

MyChart Adolescent Proxy Access Services

I understand that:

- **MyChart should NEVER be used for emergency or urgent health care matters**
- *Pediatric Health Care Associates P.C.* will respond to all communications I send through MyChart within two business days
- With this account I can:
 - Review, make or cancel appointments
 - View portions of the patient's medical record such as allergies, medications, histories, immunizations, growth charts, problem lists and recent visit information
 - Receive certain lab results
 - Communicate with providers via secure messaging regarding health concerns
 - Request prescription refills
 - Pay bills
 - Access links to other sites that will provide health information

MyChart Messages and Communications

I understand that:

- **MyChart should NEVER be used for emergency or urgent health care matters**
- *Pediatric Health Care Associates P.C.* will respond to all communications I send through MyChart within two business days
- If a provider is out of the office or cannot reply to my message, my message may be sent to another *Pediatric Health Care Associates P.C.* provider
- Contents of any message may be stored in the patient's medical record
- ***Pediatric Health Care Associates P.C.* may send me messages through MyChart and I will monitor and respond to these messages**
- All messages sent to *Pediatric Health Care Associates P.C.* through MyChart will be about the healthcare of the patient. Using MyChart to ask for advice for friends or family members is not allowed

E-mail Privacy

I understand that:

- **I must give *Pediatric Health Care Associates P.C.* a valid email address**
- **I will tell *Pediatric Health Care Associates P.C.* about any changes to my email address**
- I will be sent an email when there is new information on MyChart. No medical or personal health information will be in the email

Web Site Links

I understand that:

- MyChart may have links to medical Web sites not managed by *Pediatric Health Care Associates P.C.*
- These Web site link(s) are for informational purposes only
- *Pediatric Health Care Associates P.C.* does not endorse any of these web sites
- *Pediatric Health Care Associates P.C.* has not verified the accuracy of the information on these Web sites
- I should not rely on any of the information found on these Web sites for treatment or diagnosis

Security and Confidentiality

I understand that:

- Federal and Massachusetts laws govern the confidentiality of medical information
- *Pediatric Health Care Associates P.C.* follows the *Pediatric Health Care Associates P.C.* MyChart Policy and Procedure
- *Pediatric Health Care Associates P.C.* has strict standards for employees to keep patient information confidential
- *Pediatric Health Care Associates P.C.* limits the patient health information employees can view based on their role
- The information on MyChart has the same amount of confidentiality as all other medical records kept by *Pediatric Health Care Associates P.C.*. I can get a copy *Pediatric Health Care Associates P.C.*'s privacy statement and Notice of Privacy Practices for more information
- **I am required to create a unique User ID and password**
- **I agree to keep this User ID and password confidential.** I know that anyone with access to my User ID and password can view the patient's health information. They will be able to add to the patient's health information and message *Pediatric Health Care Associates P.C.* as if they are me
- **I should change my MyChart password often**
- *Pediatric Health Care Associates P.C.* is not responsible for damages that may come from a breach of confidentiality that is caused by me sharing or losing my password
- Every time I log into MyChart my User ID is logged in an audit trail
- *Pediatric Health Care Associates P.C.* has set up the following security features:
 - Encryption: *Pediatric Health Care Associates P.C.* uses 128-bit Secure Socket Layer to encrypt the communication from my web browser to *Pediatric Health Care Associates P.C.*'s secure web server
 - Dedicated web server for MyChart: *Pediatric Health Care Associates P.C.* separates the web server and electronic medical record machines. In the unlikely event that *Pediatric Health Care Associates P.C.*'s server is compromised, no health information would be exposed since it is not saved on the web server. Patient information is stored only in the electronic medical record, behind a firewall
 - No Caching on the client side: Temporary caching of data in the browser is allowed to improve user experience but does not allow a follow-on user to view pages that had previously been viewed while using MyChart
 - Firewall: Personal health information is stored in the secure electronic medical record, protected from the Internet by a firewall
 - Session Timeout: After a period of inactivity, the logon session will time out
 - Monitoring: *Pediatric Health Care Associates P.C.* monitors the web server for evidence of break-in attempts and applies the latest security fixes as they become available

Cancelling MyChart Access

I understand that:

- ***Pediatric Health Care Associates P.C.* may cancel my access if I do not follow these Terms and Conditions**
- Access to MyChart is provided by *Pediatric Health Care Associates P.C.* as a convenience. *Pediatric Health Care Associates P.C.* has the right to turn off access to MyChart at any time, for any reason
- **I may cancel this consent and turn off my MyChart account at any time by giving a written request to *Pediatric Health Care Associates P.C.***
- **The patient may cancel this consent and turn off MyChart proxy access at any time by giving a written request to *Pediatric Health Care Associates P.C.***
- I know I cannot withdraw information that *Pediatric Health Care Associates P.C.* had shared before I told *Pediatric Health Care Associates P.C.* to stop
- **If my access to MyChart is cancelled I will use other communication methods (e.g., telephone) to access *Pediatric Health Care Associates P.C.***

Consent

I understand that this approval will end after the time decided by the patient above. I know that I may cancel my MyChart account sooner by sending a written letter to *Pediatric Health Care Associates P.C.*. Once the patient is no longer a patient of *Pediatric Health Care Associates P.C.* I will not be able to use my MyChart account.

By signing below I agree that I understand the terms and conditions for a MyChart account.

Proxy Signature

Date