

PATIENT PORTAL USER AGREEMENT

We are pleased to provide a Patient Portal in partnership with our electronic medical records provider. The Patient Portal is designed to enhance patient/guardian – physician communication. All users must be established by a previous office visit.

We strive to keep all of the information in your records correct and complete. By signing this agreement, you agree to notify us of any discrepancy you discover in your medical records. Additionally, by using the Patient Portal, you agree to provide factual and correct information.

The Patient Portal provides access to the following services:

- Update patient demographics
- Request appointments (non-urgent)
- Request prescription refills
- View visit summaries and test results
- Send messages to clinical or billing staff

The Patient Portal is not intended to provide internet based diagnostic medical services. Patient portals are not for urgent issues. If your need is time-sensitive or urgent you should still call our office.

The following limitations apply:

- No internet based triage and treatment requests. Diagnosis can only be made and treatment rendered after the patient is SEEN by the physician.
- No emergent communication or services. Any emergent conditions should be handled by calling the office directly, going to an urgent care clinic or emergency room or calling 911 should the emergency be life threatening.
- No requests for new prescriptions or refills for conditions for which you are not being treated by our clinic will be accepted.
- It may take 72 hours to receive a response to an email request. If you do not receive a response within 72 hours you should contact the office at (205) 333-8222.
- If you lose your password or username, you may request a new one through the web portal or by calling the office and providing valid identification.
- Always remember to log out and close your browser when you are finished accessing password protected Patient Portal services. This prevents someone else from accessing your personal information. **YOU SHOULD NEVER USE A PUBLIC COMPUTER TO ACCESS THE PATIENT PORTAL.**

This Patient Portal is provided as a courtesy to our patients. While some offices charge for this convenience on an annual basis, we are focused on providing the highest level of service and health care. However, if abuse or negligent usage of the Patient Portal persists, we reserve the right, at our discretion, to terminate Patient Portal offering, suspend user access and/or modify services available through the Patient Portal.

The Patient Portal is provided in partnership with Medfusion and DavLong, our Electronic Health Records (EHR) vendors, using Medinformatix, our EHR software. The data is HIPAA compliant with high level encryption that exceeds the HIPAA standards. While we believe that the data is safe and secure, it does not guarantee against unforeseen adverse events.

Please read our HIPAA policy for information on how private health information is used in our office. All patients should have signed a HIPAA agreement form. If you do not recall having signed a HIPAA agreement or need to reacquaint with the HIPAA policy, we will be happy to provide you with a copy.

Once you have signed the Patient Portal User Agreement and have provided our office with a legitimate email address that is secure, you will be sent a link to create the portal account. The site may be accessed in two ways:

1. Directly by going to this URL: <https://www.medfusion.net/tuscaloosapeds-24722/portal/#/user/login>
2. Our website: www.tuscaloosapeds.com and clicking on the Patient Portal tab.

Patient Acknowledgement and Agreement:

I acknowledge that I have read and fully understand this consent form. I have been given risks and benefits of the Patient Portal and understand the risks associated with online communications between my physician and myself, and consent to the conditions outlined herein. I acknowledge that using the Patient Portal is entirely voluntary and will not impact the quality of care I receive should I decide against using the Patient Portal. In addition, I agree to adhere to the policies set forth herein, as well as any other instructions or guidelines that my physician may impose for online communications. I have been given an opportunity to ask questions related to this agreement and all of my questions have been answered to my satisfaction.

Patient Name Date of Birth

Parent/Guardian Signature Date

Secure/Private Email (This should not be a work email)