

Campbell Family Practice and Internal Medicine Associates

PATIENT PORTAL CONSENT FORM

Campbell Family Practice and Internal Medicine Associates offers secure viewing and communication as a service to patients who wish to view parts of their records and communicate with our staff and physicians. Secure messaging can be a valuable communications tool, but has certain risks. In order to manage these risks we need to impose some conditions of participation. This form is intended to show that you have been informed of these risks and the conditions of participation, and that you accept the risks and agree to the conditions of participation.

The Link to access the Patient Portal is: <https://health.eclinicalworks.com/CampbellFamily>

How the Secure Patient Portal Works

A secure web portal is a kind of webpage that uses encryption to keep unauthorized persons from reading communications, information, or attachments. Secure messages and information can only be read by someone who knows the right password or pass-phrase to log in to the portal site. Because the connection channel between your computer and the Web site uses secure sockets layer technology you can read or view information on your computer, but it is still encrypted in transmission between the Web site and your computer.

Protecting Your Private Health Information and Risks

This method of communication and viewing prevents unauthorized parties from being able to access or read messages while they are in transmission. No transmission system is perfect and we will do our best to maintain electronic security. However, keeping messages secure depends on two additional factors: the secure message must reach the correct email address, and only the correct individual (or someone authorized by that individual) must be able to get access to it. Only you can make sure these two factors are present. We need you to make sure we have your correct email address and are informed if it ever changes. You also need to keep track of who has access to your email account so that only you, or someone you authorize, can see the messages you receive from us. If you pick up secure messages from a web site, you need to keep unauthorized individuals from learning your password. If you think someone has learned your password, you should promptly go to the web site and change it.

Patient Acknowledgement and Agreement

I acknowledge that I have read and fully understand this consent form and the Policies and Procedures Regarding the Patient Portal that appears at log in. I understand the risks associated with online communications between my physician and me, and consent to the conditions outlined herein. In addition, I agree to follow the instructions set forth herein and including the policies and procedures as set forth in the log in screen, as well as any other instructions that my physician may impose to communicate with patients via online communications. All of my questions have been answered and I understand and concur with the information provided in the answers.

I have read and understand the use of the Patient Portal:

- I understand that the Patient Portal will allow me the opportunity to:
 - update my demographic / medical information
 - review my labs, diagnostic tests and Office Visit Summary
 - request appointments, referrals and refills
- I understand that this site **will not** be used to ask medical advice or questions regarding my care.
- I understand that it is **my responsibility** to make a follow-up appointment 7-10 following my test, with my medical provider to discuss results.
- I understand that the Patient Portal **may not** publish all labs and diagnostic tests pertaining to my care.

PRINT

Name: _____ / _____ / _____
Last, First Middle Initial Date of Birth

Cell #: _____ Email: _____
Confirm

Signature: _____ Email: _____