

PATIENT INFORMATION		
PATIENT NAME: LAST, FIRST, MIDDLE INITIAL	DATE OF BIRTH: MM/DD/YYYY	GENDER:
ADDRESS:		
CITY:	STATE/PROVINCE:	ZIP CODE:
EMAIL ADDRESS: <input type="checkbox"/> NA	HOME PHONE:	MOBILE PHONE:

*****Please select the box(es) below that best describes the patient portal access/proxy/delegate access requested***
 For all access types, the patient's chart can only be accessed through the proxy's/delegate's Patient Portal account.**

<p style="text-align: center;"><u>MINOR PATIENT (age 0-11)</u></p> <p>Access to patient age 0-11 Patient Portal record.</p> <ul style="list-style-type: none"> ❖ Individuals requesting access must have parental rights or permanent legal guardianship <p>Relationship of Proxy/Delegate to Patient is:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Parent (Photo ID Required & status documented in medical record or legal document) <input type="checkbox"/> Permanent Legal Guardian (Photo ID Required & Copy of Court Order Appointing Guardianship Required) 	<p style="text-align: center;"><u>TEEN (age 12-17)</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Adult-Teen Proxy – access to schedule appointments, will not have access to message providers or see or refill medications <p>Relationship of Proxy/Delegate to Patient is:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Parent (Photo ID Required & status documented in medical record or legal document) <input type="checkbox"/> Permanent Legal Guardian (Photo ID Required & Copy of Court Order Appointing Guardianship Required) <input type="checkbox"/> Teen Self Access (If checked, teen must sign on back), all access to own record
<p style="text-align: center;"><u>EMANCIPATED MINOR (Access for Self)</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Emancipated Minor (Copy of Court Order of Emancipation Required) 	<p style="text-align: center;"><u>ADULT PATIENT – Adult patient to any Adult (18+) Access</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Legal Guardian Access – document with Permanent Legal Guardian (Photo ID Required & Copy of Court Order Appointing Guardianship Required) all access that the patient has <input type="checkbox"/> Full Access – access to all clinical information, schedule appointments, message providers and refill medications <input type="checkbox"/> Read Only Clinical Access – only read clinical information, will not have access to messaging or scheduling features or refill medications <input type="checkbox"/> Schedule & Message Access – schedule appointments & message providers only, cannot read clinical information

PROXY/DELEGATE INFORMATION		
PROXY/DELEGATE NAME: LAST, FIRST, MIDDLE INITIAL		DATE OF BIRTH: MM/DD/YYYY
ADDRESS:		
CITY:	STATE/PROVINCE:	ZIP CODE:
EMAIL ADDRESS:	HOME PHONE:	MOBILE PHONE:



**PATIENT PORTAL ACCESS
REQUEST FORM**



1967

PATIENT LABEL

PARENT/LEGAL GUARDIAN/TEEN/EMANCIPATED MINOR ATTESTATION

By signing below, I acknowledge and agree that:

- I will be using my own My Baptist Chart account at Baptist Health to access the Patient's account.
- I will comply with the terms and conditions on the My Baptist Chart web page (located at ***My.BaptistChart.com***) and this document.
- I will keep my password confidential and not share this information with anyone.
- I have parental rights or legal guardianship rights to access this Patient's record (age 0-11).
- **I am NOT a foster parent or stepparent of this Child.**
- There are no court orders or restraining orders in effect limiting my access to this Patient's medical records and/or information.
- I will notify Baptist Health in writing immediately if my Relationship with the Patient changes (for example, if I am no longer the Legal Guardian of the Patient).
- Communications on behalf of the Patient through My Baptist Chart must be sent from the Patient's record and responses will be received in the Patient's record. My Baptist Chart e-mail alerts will be sent to the e-mail address entered under Proxy/Delegate Information.
- There are age range limitations for My Baptist Chart. These age range limitations do not affect any legal right I have to access the Patient's record by other means. Copies of the record are available to authorized requestors (subject to other Baptist Health policies) by contacting the Hospital Health Information Management Department or the front office staff at the physician's office.
- For a child age 0 to 11, the Proxy/Delegate will be granted access to the Child's My Baptist Chart. For our portal to fully comply with certain restrictions in Florida privacy laws, parents of patients 12-17 years will be granted partial access to their Child's portal account. Proxy/Delegate automatically transitions to Adult-to-Teen Access at 12 AM the day of the teen's 12th birthday, with access to scheduling appointments, messaging if parent initiated messaging, immunizations. At age 18, the Proxy/Delegate will lose access to the patient's My Baptist Chart account & will need to fill out a consent form for access.
- Teens (age 12-17) will be granted access to the My Baptist Chart unless a parent requests that the minor's access be restricted or denied.
- Removal of parental proxy/delegate access occurs when emancipated minor status is validated.

Signature of Parent/Legal Guardian/Teen/Emancipated Minor

Relationship to Patient

Date

Time

Submit Form:

1. **DELIVER PAPERWORK IN PERSON TO:** Baptist Medical Center Jacksonville, HIM Department, 800 Prudential Dr., Jacksonville, FL 32207 OR to your Baptist Health Physician Practice.
2. **MAIL FORM TO:** Baptist Medical Center Jacksonville, HIM Department, Attention Patient Portal, 800 Prudential Dr., Jacksonville, FL 32207 OR to your Physician Practice.

****Note:** This form is **ONLY** to be completed by parents, legal guardians, teens, emancipated minors or adult proxy/delegate. For Adult patients who wish to participate in the portal, you may sign up during your visit or receive an activation code on your after visit summary. This code will enable you to login and create your own user ID and password. You may access your MyChart account by logging on to **my.baptistchart.com**. If you were not issued an activation code, you can request one directly from the MyChart website.



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