

HEALTHY STRATEGIES FAMILY DOC, P.A.

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CareCloud Patient Portal Consent Form

Patient Name: \_\_\_\_\_ DOB: \_\_/\_\_/\_\_\_\_ Phone No.: \_\_\_\_\_

Patient's Unique E-mail Address\*: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

(\*Please provide a personal e-mail address to which you have consistent, frequent access; DO NOT use your workplace e-mail address. The e-mail address cannot be the same as another patient's e-mail address, i.e. your spouse's e-mail address.)

The Healthy Strategies Family Doc "patient portal" is a secure, confidential, easy to use website, administered and maintained by CareCloud. The portal uses encryption and gives 24-hour access to your medical record. Secure messages and information can only be viewed by someone entering the correct username and password to log into the Patient Portal site. We will assign you this login information upon completion of this form. Please be aware that at this time the Patient Portal is not offered for minor patients or patients who do not make their own medical decisions. From this portal you can:

- Request an appointment and receive confidential messages from your physician
• View your medical history, medications, and lab results
• View statements and payment history

Once you have reviewed, signed, and returned this form to Healthy Strategies Family Doc, you will be sent instructions for activating your Patient Portal account via e-mail. You will be asked some questions to verify your identity. You can access the Patient Portal page through our website at www.healthystrategiesfamilydoc.com or at https://community.carecloud.com.

For your ease of use and to maintain the security of your health information, you should:

- Read the Patient Portal privacy information at https://community.carecloud.com/privacy
• Advise us of any changes in your primary contact information (phone number, e-mail address)
• Use caution when communicating highly sensitive or personal information via Portal messages
• Always follow-up your inquiry in person or over the phone if a portal inquiry is not responded to within a reasonable time
• Not allow anyone else to have access to your username and password - you are responsible for the protection of your login information
• Exercise caution when accessing the Patient Portal in public areas or using unsecured connections
• The Patient Portal is intended to save you time. It should never be used in an emergency.

By signing below, I acknowledge that I have read and fully understand the terms and conditions of utilizing Healthy Strategies Family Doc's Patient Portal as outlined and described in this consent form and the online privacy statement. I have had a chance to ask questions about the Patient Portal and to receive answers. I hereby authorize Healthy Strategies Family Doc to release my health information via the Patient Portal for my personal health purposes. In order for this consent form to be valid, activation of my Patient Portal account must occur within thirty (30) days from the date of this Consent Form. I understand that I may discontinue my Patient Portal account at any time by contacting the Office Manager at (316)858-1351.

Patient Signature

Date

I choose not to participate in the Patient Portal at this time because:

- [ ] I don't have an e-mail address [ ] I don't wish to share my e-mail address
[ ] English is not my preferred language [ ] Other

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