



Carondelet. Be well.

Patient name _____

DOB _____

Due to patient privacy issues, we are not able to enroll minors in the patient portal.

In general, the HIPAA privacy rule gives individuals the right to restriction on uses and disclosures of their protected health information (PHI). The individual is also provided the right to request confidential communications or that a communication of PHI is made by alternative means, such as sending correspondence to the individual's office instead of the individual's home. Carondelet will make a reasonable attempt to communicate with patient according to the patient's request below.

I wish to be contacted by Carondelet in the following manner:

(Please use numbers 1 through 3 to indicate how we should attempt to contact you first, second, etc.)

___ Phone Call _____ (Home/Work/Cell Number) or _____ (Home/Work/Cell Number)

___ OK to leave message with detailed information

___ OK to leave message with the following person: _____ Relationship _____

___ Printed Letter: _____ (Address)

___ Online Patient Portal (see information below)

Preferred Pharmacy _____ Location _____

Would you like to communicate with Carondelet on-line?

At mycarondelethealth.org you can!

We can help you sign up today. All we need is your e-mail address and your zip code.

Benefits:

- | | |
|---|---|
| <ul style="list-style-type: none"> • Request appointments • See your health record: medications, allergies, immunizations, health issues • Send messages to your doctor's office • Send your health record to another doctor's office | <ul style="list-style-type: none"> • Pay your bill • Review and submit updates to your address, phone, and date of birth, insurance • Read document summarizing your doctor's visit • Secure and encrypted site |
|---|---|

I'm already enrolled

Yes, here is my e-mail address _____
Zip code _____ will be used as the answer to your challenge question.

No, I'm not interested at this time.

Signature

Date