

PATIENT PORTAL APPLICATION INFORMED CONSENT & USER AGREEMENT

Purpose of this Form

Columbus Public Health offers a secure way for its patients to view certain parts of their electronic health record. It also offers a way to communicate with Columbus Public Health (CPH) providers and office staff. While secure messaging can improve communication, it has certain risks. In order to control these risks, there are some rules for using this program (called conditions of participation). The purpose of this is to document that you have been told of these risks and conditions of participation, that you accept the risks, and that you agree to the conditions of participation. It is also to document that you have been told of the Practice's Patient Portal Policies and Procedures and that they may change from time to time.

How the Patient Portal Works

A secure web portal is a kind of webpage that converts text to a computer code to keep unauthorized persons from reading communications, information or attachments. Secure messages and information can only be read by someone who knows the correct password to log in to the portal site.

Getting Started

You will receive an email that has a link to the Portal's website. Click on the "Sign Up" button to activate portal account. You will need to enter your zip code and date of birth when asked in order to complete this step. Then create a username, password, enter phone number, select a location and answer secret question. A confirmation e-mail will then be sent to notify you that you are now enrolled with direct link to patient portal.

Please review Notice of Privacy Policy, fill out Patient Registration Form and sign the Consent form asked on the portal.



Protecting Your Private Health Information and Risks

This method of communication prevents unauthorized persons from being able to access or read messages while they are being sent (in transmission). However, keeping messages secure depends on two important things: the secure message must go to the correct email address and only the correct person (or someone authorized by that person) must be able to access it. Only you can make sure these two things happen. Please make sure we have your correct email address and are that you tell us if that email 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.

Conditions of Participating in the Patient Portal

Access to this secure web portal is an optional service and we may suspend or end your participation at any time and for any reason. If we do suspend or end this service, we will notify you as quickly as possible.

By signing page two, you acknowledge that you have read and agree to comply with the Practice's Patient Portal Policies and Procedures, which have been given to you. If you do not understand or do not agree to comply with or do not consent to our policies or procedures, please do not sign this form. If you have any questions or need more information, please let us know before signing the form.