

Eye Care Center of Lake County, Ltd (ECCLC)

Electronic Communication-Patient Portal User Agreement and Informed Consent

Name _____ Date of birth _____

Address _____ City _____ ST _____ Zip _____

Home _____ Cell _____ Email _____

Patient portal basics

Eye Care Center of Lake County, Ltd (ECCLC) understands the need for communication between health care professionals and patients. ECCLC is committed to providing patients and other authorized personnel the ability to use a secure and confidential patient portal that provides the following functionality:

1. Access to request appointments
2. Receive appointment reminders
3. Access important health information from your medical record
4. View medication lists and request prescription refills
5. Obtain educational information
6. Maintain account information (user name, password, access privileges and email address)
7. Pay your bill online
8. Secure communication with health care professional

The NextGen Patient Portal and/or DemandForce utilize technology to deliver secure communications between patients and ECCLC.

The term "patient portal" refers to the part of ECCLC's information system that provides access to patients' health information and allows for secure communication, including prescription, referral and appointment requests.

"Electronic Communication" means e-mail or text messaging with patients outside of a patient portal and/or DemandForce which are both HIPAA compliant.

Patient portal policy

The following policies and limitations apply to the use of ECCLC's patient portal and/or DemandForce:

1. Patient portal communication is not for emergency purposes. If you are having an emergency, dial 911 or go to the nearest hospital.
2. Correspondence via patient portal is supplemental to physician/patient encounters. ECCLC will not provide patient portal based diagnosis and treatment.
3. Other "electronic communication" with the health care professional, such as non-patient portal email or text messaging is prohibited.
4. Communications sent via patient portal must be courteous, respectful, appropriate, fact-based and truthful.
5. Communications should be responded to within three business days. You agree not to use this portal if you need a response sooner or on an urgent basis. If your need is urgent you must contact the practice directly.
6. You agree not to share your password with anyone and that you are solely responsible for protecting your password.
7. You agree that access to the site is provided on an "as is available" basis and that our practice cannot guarantee you will be able to access the portal at any time. Internet based communications are inherently insecure since no technology guarantees privacy or security of information sent over the internet. You agree to use caution when providing information via this portal, and acknowledge that keeping messages secure is your responsibility.

Conditions of participation:

Access to NextGen Patient Portal and DemandForce is restricted to the above-named patient. This service is optional, and we reserve the right to suspend or terminate the service and/or your access to it at any time. If the practice suspends this service, you will still have access to copies of your medical records and other health information, upon written request. The patient acknowledges that he/she agrees to comply with the ECCLC Patient Portal Policy outlined above.

- I hereby **request to enroll** in the electronic communications using Patient Portal and/or DemandForce.
- I hereby **decline to enroll** in the electronic communications using Patient Portal and/or DemandForce.

Patient's Signature: _____ Date: _____