



Teen Patient Privacy Notice & Portal Access Information (for teenagers 13-17 years old)

What your teen needs to know about privacy when they turn 13 years old

- You will need a parent or guardian with you for regular physicals and follow-ups until you are 18 years old.
- You can have a visit WITHOUT a parent or guardian if you would like to talk about:
 - Contraception
 - Pregnancy / Reproductive Concerns
 - Drugs and/or Alcohol Use
 - Mental Health / Emotional Conditions
 - Sexually Transmitted Infections (STIs)
 - **Exceptions: We are required by law to inform your parent or guardian if you are in danger of harming yourself or others**
 - Treatment of these issues is confidential, but some non-Medicaid health insurance companies may notify a parent / guardian of the visit by mail.

What you and your teen need to know about portal access when your teen turns 13 years old

Once they turn 13 years old, the portal changes from Complete to Restricted access. A teen may be granted Complete access to their own patient portal account with their own email address. You and your teen should discuss whether the teen and parent(s) will both have **Complete** access or if your teen will have **Complete** access and the parent will continue to have **Restricted** access.

First, what is a patient portal?

A patient portal is a convenient way for a patient to access their medical information. You can view and download medical information such as your measurements, vaccine history, and lab results. You can also send non-urgent, secure messages to your medical provider. Think of the patient portal as a way to “email” your provider’s office in a secure way so that your information stays private. You can also request an appointment and medication refills.

Who can access the patient’s portal account? What is Complete vs Restricted access?

Prior to age 13, a parent is allowed to be the only person who has access to their child’s medical information. Once the patient turns 13, access is automatically changed from Complete to Restricted.

Complete access includes: Child’s Pharmacy, Sending and Receiving messages to the Provider, Upcoming Appointments, Current Medications, Growth Chart, Immunization History, Lab Results, Request a Lab, Medication Refill, or Appointment, Billing Statements, Personal Health Record, and Visit Summaries.

Restricted access includes: Sending a Message to the Provider (but will not be able to see the response), Immunization History, Request a Lab or Appointment

The teen can choose to share their Complete access with a parent or guardian, this is called **Complete Proxy access**. Alternatively, the teen can choose to be the only person who has Complete portal access, in which the parent will only have **Restricted Proxy access**. **You can change between Complete Proxy access and Restricted Proxy access at any time by updating this form.** The teen and their parent/guardian must agree on whether there is Complete or Restricted access to the teen’s portal account. If the teen and their parent/guardian do not agree on access, the portal account will stay on Restricted access for the email address we have on file. Of course, you will still have traditional access via paper.

Please feel free to ask questions at any time. We look forward to caring for your family for many years, and we appreciate your understanding of the special nature of the doctor-patient relationship during adolescence.

Sincerely,

Gateway Pediatrics



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An informed teen is a healthy teen. If you have questions about teen portal access, please let someone at our office know. If you are ready to choose, please select one of the options below.

Today's Date _____

TEEN INFORMATION

Name _____ Date of Birth _____
Cell Phone _____ Teen does not have a cell phone
Email _____ Teen does not have an email address

PARENT/GUARDIAN INFORMATION

Name _____ Date of Birth _____
Cell Phone _____
Email _____ *(email must be different than teen)*
Relationship to Patient _____

Name _____ Date of Birth _____
Cell Phone _____
Email _____ *(email must be different than teen & other parent)*
Relationship to Patient _____

Select one of the below options:

*Note: If "No Access" is selected below, the portal account for all parties will be kept as Restricted. Parents / Guardians will still have access to medical records via paper.

- Complete Access for Teen & Proxy** (Both the teen and parent/guardian(s) will have **Complete** Portal access)
Patient Signature _____
Parent/Guardian Signature _____
- Complete Access for Teen & Restricted Proxy Access for Parent** (The teen will have **Complete** Portal access and the Parent/Guardian will have **Restricted** Proxy access)
Patient Signature _____
Parent/Guardian Signature _____
- No Access** (Both the teen and parent/guardian(s) will have **Restricted** access)
Patient Signature _____
Parent/Guardian Signature _____
- Will decide at a later date** (The email that is on file will continue to have Restricted Access)