



Online Patient Portal Consent

In our ongoing efforts to improve the quality of care that Acadia Total Health provides; we are pleased to offer the availability of our Patient Portal. The Patient Portal is a **secure**, web-based system that allows you to review certain aspects of your medical record and securely communicate with us between visits for **NON-EMERGENT** reasons.

Please select one of the following options regarding the patient portal:

Portal Acceptance

I have read and understand the above and authorize ACADIA TOTAL HEALTH to **activate** my patient portal account using the email address listed below. I understand that it is my responsibility to safeguard the email address and my Patient Portal passwords in order to maintain the security and privacy of my personal health information. I also understand that ACADIA TOTAL HEALTH will use the Patient Portal as a means of communicating with me when appropriate. I further understand that the Patient Portal is not to be used for urgent medical needs, nor does it replace the need for me to keep my regular appointments with my doctor:

Patient Name: _____ Date: _____

Email address: _____

**** Upon acceptance, you will receive an activation email with more specific portal access information****

Portal Decline

I have read and understand the above information and choose to decline the use of the Patient Portal at this time.

Patient Name: _____ Date: _____