FORM 101 - R201028

NextGen Patient Portal Enrollment Form

Salem Pediatric Clinic's NextGen[®] Patient Portal is an internet portal linking patients and providers through a secure web interface accessible through the SPC website.

Enrolling allows you to request immunization records and schedule check-up appointments. Enrolling for this service is optional.

To enroll, please fill out this form and return it to the receptionist at SPC's front desk.

An introductory email will be sent to you with instructions on how to log on to the Patient Portal via the SPC website.

Within 5-7 days, you will receive a welcome letter and a security token number which is required to access the NextGen Patient Portal and complete the registration process.

Do not use the Patient Portal for urgent medical needs. Please call our office at 503-362-2481.

*The email you provide here will be

NextGen Patient Portal.

used for all communications from SPC's

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Patient Full Name	Date of Birtl
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ARENT, GUARDIAN OR OTHER AUTHOR	IZED AGENT
First Name	
First Name	
First Name Middle Initial Last Name	
First Name Middle Initial Last Name Date of Birth	
PARENT, GUARDIAN OR OTHER AUTHOR First Name Middle Initial Last Name Date of Birth Address City/State/Zip	Apt # _
First Name Middle Initial Last Name Date of Birth Address	Apt # _
First Name	Apt #

USE OF THE NEXTGEN PATIENT PORTAL MAY INCLUDE CONFIDENTIAL INFORMATION, AND MAY ONLY BE USED BY THE ENROLLEE OR AUTHORIZED AGENT WHOSE SIGNATURE IS ON THIS FORM. IF THE USER OF THE PATIENT PORTAL IS NOT THE INTENDED ENROLLEE, OR HIS/HER AUTHORIZED AGENT, THE READER IS HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF ANY INFORMATION IS PROHIBITED. IF YOU HAVE RECEIVED ANY INFORMATION IN ERROR, PLEASE NOTIFY SPC IMMEDIATELY. I CERTIFY BY MY SIGNATURE THAT THE INFORMATION PROVIDED ABOVE IS CORRECT, AND IS FOR MY OWN ACCOUNT AND/OR THE ACCOUNT I AM FINANCIALLY RESPONSIBLE FOR.

Signature ____

Date _



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