

IMPORTANT:

The information below is required by the government for EHR (Electronic Health Records).

By filling out this information you will allow us to set you up a Patient Portal in our system. In this portal you will be able to review Clinical Care Summaries about your visits with Dr Rhodes. You will receive an email for every visit you have. Open the email and follow the directions. If you wish to not view your records at that time, you can delete the email.

If you need further information on how to activate your Patient Portal, we have instructions available for you!

Verification Question:

**** Once setting up your portal, you will be asked the question you check, and must provide the answer that you put below. ****

Please check one of the following questions, and answer below.

- What is the name of your favorite pet?
- What city were you born in?
- What high school did you attend?
- What is your favorite movie?
- What is your mother's maiden name?
- What street did you grow up on?
- What was the make of your first car?
- When is your anniversary?
- What is your favorite color?

Verification Answer to the chosen question: _____

Email Address: _____

Signature: _____

Date: _____