

NextGen Patient Portal

Enrollment Form

FORM 101 - R170621

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.

*The email you provide here will be used for all communications from SPC's NextGen Patient Portal.

ENROLLEES

Patient Full Name

Date of Birth

1 _____

2 _____

3 _____

4 _____

5 _____

PARENT, GUARDIAN OR OTHER AUTHORIZED AGENT

First Name _____

Middle Initial _____

Last Name _____

Date of Birth _____

Address _____ **Apt #** _____

City/State/Zip _____

Phone (_____) _____

Email* _____

Relation _____

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 _____



Salem Pediatric Clinic

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