



1740 South Street, Suite 300, Philadelphia, PA 19146  
TEL: 215-732-0876  
FAX: 215-732-1812  
WEBSITE: [www.phaadultmedicine.com](http://www.phaadultmedicine.com)  
Download: [Healow App](#) for Patient Portal

## FORM 6 : PHA-Adult Medicine Patient Portal Use Consent

PHA-ADULT MEDICINE IS OFFERING SECURE WEB ACCESS TO YOUR MEDICAL RECORDS.

By using this patient portal, you will be able contact our office while maintaining your privacy and confidentiality. You will be able to do such things as request prescription refills, request and cancel appointments, send and receive messages, check labs and x-ray results and update certain medical information such as medication, drug allergies, family history, hospitalization, social and medical history.

1. In order to use the patient portal, you must attest that you have read and understood the contents of this consent form. A receipt of this form will be automatically filed in your chart.
2. The patient portal will be offered to you free of charge. We reserve the right to change this at any time but will notify you if this is the case.
3. We reserve the right to suspend or terminate the patient portal at any time for any reason. We will notify you if this will occur.
4. You can terminate participation at any time by notifying us in writing.
5. The patient portal should NOT be used to request emergency visits or for emergency medical advice. For medical emergency issues, please call 911 to be taken to the emergency room. If you have an urgent medical issue you must contact the office by dialing 215-732-0876.
6. It is your responsibility to protect your PASSWORD and USER ID from unauthorized individuals.
7. If your access is compromised, please notify the office immediately.
8. To use the service, you must present a valid email address and keep us updated with any changes.
9. Emails sent to you will be a generic message with a link to our website [www.phaadultmedicine.com](http://www.phaadultmedicine.com). From there you can access the patient portal for more specific information.
10. Please check your junk email to ensure that our mail is not going to junk. If it is going to junk email, you should configure your email client to accept messages from us.
11. You must not use any other means of electronic communication to the office except by this secure patient portal.
12. It is our goal to respond to your non-urgent messages within 24 hours and no later than 3 business days.



Text PHA to 55469

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13. Messages left after 12 noon on Friday through Monday morning will be considered received on Monday morning.
14. You agree to not hold PHA-Adult Medicine physicians or staff responsible for any network infractions beyond our control.
15. If you have any issues with the Patient Portal, please submit a general message to the office manager (upper left corner of patient portal).
16. Thank you for choosing us as your primary care providers.