



## Garden Pediatrics Patient Communication Portal



The Garden Pediatrics Patient Portal is a web-based platform where limited patient records can be accessed. This portal also allows for parents/patients to send a message to the practice. Options of who to send messages to are your assigned care team (MD or PNP and their administrative medical assistant, and administrative scribe) or to the front office for general questions and appointment requests. You can also request medication refills, view exit notes, view lab results (which are released with associated appointments), and view past information.

**The Portal is not for immediate or urgent communication as team members will access the portal when time allows. It is also not meant to replace medical advice which should be given during a visit.**

### Registration Instructions:

- Go to our website and click the Patient Portal icon (purple cross)
  - o This will be located on the right-hand corner
- Once on the Patient Portal, **select "Let's Get Started"**
  - o This will be location on the right-hand side under "Need an account?"
- **Enter an email address and password**
- Find the section titled "Tell us a little bit about yourself"
  - o **Enter your own information**  
*\*\* If you are 18 years old or older then this will be your own information*
- Navigate to the section titled "My practice gave me a PIN for"
  - o **Select "A child"**  
*\*\*If you are 18 years old or older and registering yourself, select "Myself" instead*
- **Fill out your child's information** (or your own if 18yrs old or older)
  - o Then **agree** to the terms and conditions
- **Select continue** and go onto the next page
  - o **Enter your child's birthday and PIN** (or your own if 18yrs old or older)
- After entering this information, you can either
  - o **Add another child, if you have their PIN**
  - o Or **select "CREATE MY ACCOUNT"**

### General Notes:

- The portal is not a chat function in that it is not immediate
  - o Portal messaging is most like email
- Expect response within 2 full business days but may take longer depending on message load
- The portal does not serve as an appointment. You may be asked to schedule an appointment
- Some insurances may be billed for work that is done through the portal

*By signing this form, I am giving my consent for the HIPAA compliant patient portal. I am aware that my insurance may be billed for the work that is done through the patient portal that was initiated by me. I acknowledge all notes made on this document.*

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Patient name(s)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date