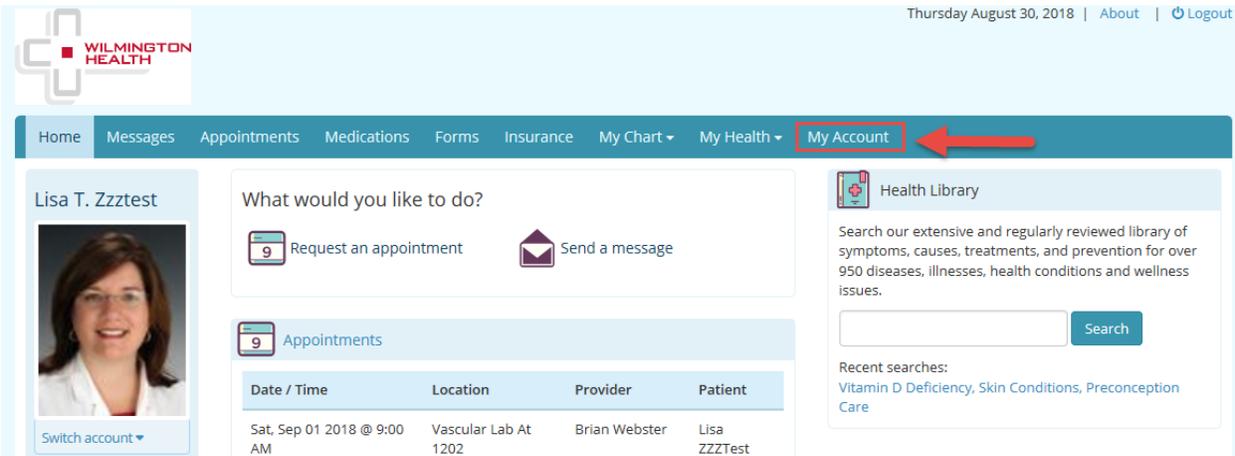


## Adding a Proxy (patients over 18 years old)

The patient can establish Proxy access from their patient portal page.

-Click on **My Account** tab



The screenshot shows the Wilmington Health patient portal interface. At the top right, the date is Thursday August 30, 2018, with links for About and Logout. The navigation bar includes Home, Messages, Appointments, Medications, Forms, Insurance, My Chart, My Health, and My Account. The 'My Account' tab is highlighted with a red box and a red arrow pointing to it. Below the navigation bar, the user's name 'Lisa T. Zzztest' is displayed next to a profile picture. A 'Switch account' link is visible below the profile picture. The main content area is divided into three sections: 'What would you like to do?' with options for 'Request an appointment' and 'Send a message'; 'Appointments' with a table listing an appointment for 'Sat, Sep 01 2018 @ 9:00 AM' at 'Vascular Lab At 1202' by 'Brian Webster' for 'Lisa ZZZTest'; and 'Health Library' with a search bar and a 'Search' button. Recent searches listed include 'Vitamin D Deficiency', 'Skin Conditions', and 'Preconception Care'.

- Find **Associated Accounts** section
- Click the **Add a Proxy Account** link
- Enter in **First Name** and **Last Name**
- Enter **Gender**
- Enter **Date of Birth**
- Enter **Cell Phone**
- Enter **Email**
- Enter **Relationship**
- Optional – **End Date**



Associated accounts

Patient can add a Proxy by clicking the "Add a Proxy Account" link.



[Add a proxy account](#)

[Add a child or dependent account](#)

### Proxy Authorization Form ✕

Proxy authorization allows you to grant permission to an individual who is 18 years of age or older to securely communicate on your behalf. In order for a proxy to obtain access, you must complete the Proxy Authorization Form.

You can terminate proxy access via written or online request, or you can revoke access within your online account. To only allow access for a specific time range, you may enter an effective date in the field provided below.

#### Proxy Information

First Name	<input type="text"/>	Last Name	<input type="text"/>
Gender	<input checked="" type="radio"/> Male <input type="radio"/> Female		
Date of Birth	<input type="text" value="Month"/> <input type="text" value="Day"/> <input type="text" value="Year"/>		
Cell Phone	<input type="text"/>	This number will be used for account security. Message and data rates may apply.	
Email	<input type="text"/>		
Relationship	<input type="text" value="- Select -"/> <input type="text"/>		
End Date	<input type="text"/>	OPTIONAL	



I have read and understood the Authorization Individual Acceptance [Terms and Conditions](#) for allowing access to my online account information and agree to abide by these requirements. I certify that all the information I have provided is correct. I hereby request access for my online account.



Cancel

Submit

When the patient clicks the **Submit** button, the Proxy user will receive an email to accept and verify the proxy access.

### Patient Portal Proxy Invitation Inbox ✕

**no-reply@patientportal.net**

to whicpp+lisa ▾

Hi Mry Doe,  
Lisa ZZZTest has granted you access to his/her patient health record.

To accept this request, please click on link below:

<https://patientportal.intelichart.com/login/patient/registration/registerproxy/228142108253253245209145137096057182201128009077>

To reject this request, please click on the link below: <https://patientportal.intelichart.com/login/patient/account/declin-proxyrequest/22814210>

If the proxy is not a patient of Wilmington Health, they will be asked to complete the Registration form below:

"Lisa ZZZTest" has granted you access to their patient health record. Please complete the registration process to get access to viewing patients' lab results, allow you to set up appointments, pay bills and more.

### Almost finished...

Do you already have a Patient Portal account?  Yes  No

Email

Password  Hide

Passwords must be at least 8 characters long.

DateOfBirth

Security Question

For your protection, this will help us verify your identity in the future.

Security Answer

I have read and agree to the [Terms & Conditions](#).

### Registration Successful ✕

#### Registration was Successful!

Please confirm that this is your email address.

**whicpp+lisah@gmail.com**

### Authorization for Release of Medical Information ✕

You have been granted access to view and/or update the patient record of "Lisa ZZZTest". In order for us to verify your identity, please select the cell phone carrier associated to the number ending in XXX-XXX-6732.

I do NOT want access to Lisa ZZZTest's patient record.

Cell Carrier

The number above will be used for account security only.  
Message and data rates may apply.

or close

Home Messages Medications Forms Insurance My Chart My Health My Account

Mry Doe



Switch account ▾

- Add to homepage
- View my account
- Download my chart

## Welcome to the Patient Portal

You have access to protected patient information.  
In order to view the patient's full profile use the "Switch Account" link under the user photo.  
If you are a patient at a participating practice or facility you may [enter your PIN here](#).

### 9 Appointments

Date / Time	Location	Provider	Patient
No upcoming appointments to display.			

### Health Library

Search our extensive and regularly reviewed library of symptoms, causes, treatments, and prevention for over 950 diseases, illnesses, health conditions and wellness issues.

The Proxy user can access the Patient Portal account for the person they are a proxy for from the **Switch Account** link on their Patient Portal page.

