

Child Proxy Authorization Form

Minor Patient Information	
Patient Name:	DOB:
Phone:	
Street Address:	
City, State, Zip:	

Proxy Information	
Proxy Name:	DOB:
LEGAL SEX: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Unknown <input type="checkbox"/> X	
Phone:	Email:
Street Address:	
City, State, Zip:	
Relationship to Patient: <input type="checkbox"/> Parent <input type="checkbox"/> Legal Guardian	

The UConn Health MyChart Terms and Conditions are available at:

<https://mychart.uconn.edu/mychart/Authentication/Login?mode=stdfile&option=termsandconditions>

- If the patient named above is under 13 years old, then the Proxy will have full access to the patient's MyChart account until it automatically transitions to limited access at the patient age of 13.
- If the patient is 13 to 18 years old, then the Proxy will have limited access to the patient's MyChart account until it automatically terminates at the patient age of 18.
 - Limited access will not allow the Proxy to view any clinical information other than immunization records.
 - Patients in this age group can have their own MyChart account and can choose to grant full access to a parent or legal guardian Proxy by completing the UConn Health Teen Full Proxy Access Authorization Form.

By signing and submitting this form, I acknowledge that I have read and understand UConn Health's MyChart Terms and Conditions, and I acknowledge that I am authorized to access the protected health information of this patient as the patient's parent or legal guardian. I certify that my right to access the patient's protected health information has not been modified in any manner by any court of law other than those rights represented in any supporting legal documentation I am providing, which are true, most recent, and correct copies related to this matter.

Parent/Legal Guardian Signature: _____ Date: _____

For proxy activation, email completed form and supporting legal documentation, e.g., birth certificate, adoption or other court records, birth records, to MyChartProxyHIM@uchc.edu.

