

Proxy – Access to the Online MyChart Record

Medical Records

Atlas Alliance MyChart is a secure, online patient portal that connects patients to parts of their health record at one or more of the following institutions of care: Family Health Team; Hawkesbury and District General Hospital; Renfrew Victoria Hospital; St. Francis Memorial Hospital, The Ottawa Hospital; University of Ottawa Heart Institute.

To request proxy access to a patient’s MyChart, complete this form, sign it, and provide the required copy of the driver’s licence (see below).

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PATIENT INFORMATION

Last name:	First name
Date of birth (yyyy-mm-dd)	Telephone number
Address	
Health card number	Medical record number – MRN (if known)

PROXY INFORMATION

As a proxy, you must activate your own MyChart account in order to view the requested health record.

Last name	First name
Date of birth (yyyy-mm-dd)	Telephone number
Address	
Email address (required)	

PROXY’S RELATIONSHIP TO THE PATIENT

Check the appropriate box and provide information where required.

- Parent Permanent legal guardian
- Family member – Please specify:
- Other – Please describe:

Please note that additional documents may be requested by HGH to verify your relationship to the patient.

PROXY’S DECLARATION

By signing below, I acknowledge that and agree with the following:

- I will be using my own MyChart account to access the record to which I am requesting access.
- I will keep my password confidential and not share this information with anyone.
- I must have parental rights or permanent legal guardianship rights to access a child’s record.
- If any parental or permanent legal guardianship rights change, I will notify HGH’s Health Records Department.
- I can request a paper copy of the complete health record for which I am requesting access by contacting the Health Records Department at HGH at 613-632-1111, extension 41801.

Patient’s name (print)	Patient’s signature (only if the person is over 12 years of age)	Date (yyyy-mm-dd)
Proxy’s name (print)	Proxy’s signature	Date (yyyy-mm-dd)

Return this completed form to HGH’s Health Records Department by email at mychart@hgh.ca.
Include with this form a copy of the proxy’s driver licence. This document is mandatory.
 If you have any questions about this form, call 613-632-1111, extension 41817.