



Affix Patient Label	
Patient Name: _____	Date of Birth: _____

**Pediatric MyChart Proxy Form**  
**Allowing Another Person to Look at Bronson MyChart Record (Ages 12-17)**  
**\*\*\*This form must be completed for any child in foster care regardless of age\*\*\***

**My / Minor Information (please print clearly and fill out all parts)**

Name (last, first, middle initial): \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Patient's Email: \_\_\_\_\_ Patient's Phone Number: \_\_\_\_\_  
 Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Proxy / Parent / Legal Guardian / Foster Parent Information (please print clearly and fill out all parts)**

Name (last, first, middle initial): \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Parent/Guardian Email: \_\_\_\_\_ Parent/Guardian Phone Number: \_\_\_\_\_  
 Check here if your address is the same as the patient.  
 Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Relationship to MINOR patient:  Parent  Legal Guardian\*  Foster Parent\*\*

I understand that:

- Starting at 12 years old proxy status must be renewed every 2 years. Proxy status will be set to a limited view until the proxy form has been updated. On the patient's 18th birthday proxy status will automatically expire.
- MyChart information comes from the computerized medical record at Bronson Hospitals and Bronson clinics. MyChart records may include psychiatric or mental health records, treatment for alcohol or drug abuse, sexually transmitted diseases, HIV/AIDS, family planning and genetic testing.
- The information may come from all the places that are listed in Bronson's Notice of Privacy Practices.
- Having a MyChart proxy does not mean that my proxy can look at all of my Bronson medical records. My proxy can only look at the information in MyChart.
- I may choose not to have a proxy at any time. At this time, I have decided on my own that I want the proxy to be able to look at MyChart
- I can change my mind and stop the proxy from looking at MyChart. There are two ways to do this:
  1. I can write a note to my doctor's office saying that I do not want the proxy to look at MyChart.
  - OR
  2. I can go to MyChart on a computer and make the change there if I have activated my personal account.
- If I let the proxy look at MyChart, it is no longer private. The proxy can make a copy of my record or can share it with other people.
- MyChart information can also be viewed by community organizations sharing Bronson's electronic health record, EPIC, that links to MyChart. See Appendix I for a full list of organizations that share information in MyChart. This means your proxy will see information from these places.

**I want Bronson Healthcare Group to grant proxy access to my MyChart account that contains my health and medical information to the parent / legal guardian / foster parent named above.**

\*If you are a legal guardian for this minor, you must provide legal documentation to be granted proxy access.

\*\*Access for foster parents will be a limited view and only be granted for 90 days or until the next court date (whichever date comes first).

Patient Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 Foster Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

It has been determined this minor patient is unable to make medical and legal decisions for themselves.

Physician Attestation: As the treating physician of the above-identified minor, my assessment is that the minor does not possess the maturity or mental capacity to provide the necessary consent to obtain and receive health care services as permitted under Michigan law.

Physician Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
 Physician Name: \_\_\_\_\_



### **Appendix I: List of Community Members**

**These Community Health Members have access to Bronson patient's charts through our electronic medical record system, Epic. The patient and proxy will be able to view additional medical information in MyChart if the patient is seen for an appointment at following health organizations:**

- Adult & Pediatric Ear, Nose and Throat
- Advanced Radiology BARS Clinic
- Bronson Advanced Cardiac Healthcare
- Cereal City Pediatrics
- Family Health Center of Kalamazoo
- Kalamazoo Anesthesiology Pain Clinic
- Kalamazoo College Student Clinic
- Kalamazoo Foot Surgery
- Paragon Advanced Vascular Surgery
- Paragon Nephrology Center of Kalamazoo
- Vision Eye Care
- West Michigan Cancer Center
- WMed Health