



Please complete developmental screenings prior to your child’s appointment in the patient portal. Patients over the age of 11 years are encouraged to have their own access to complete their own age-appropriate screenings.

Patient First Name	Patient Last Name	Birthdate	Patient Email Address

List all persons approved for portal access (Ex. Mom, Dad, stepparent etc.)

First Name	Last Name	Relationship	Email	Texting Number	Portal notifications
					<input type="checkbox"/> Text <input type="checkbox"/> Email
					<input type="checkbox"/> Text <input type="checkbox"/> Email
					<input type="checkbox"/> Text <input type="checkbox"/> Email

Once your account is created, you will receive an e-mail with a temporary password that is active for 1 week. You will need to sign into the portal to complete your account set-up. Be sure to verify that your name appears correctly and that the names of the patients you have requested access to appear on the screen.

Please be aware that when a patient turns 18, the record for that patient automatically becomes private. After the patient is 18, he or she may grant permission to a parent or guardian to have access to the portal by adding them to the portal enrollment form. This permission can be revoked at any time at the request of the patient or at the discretion of the physician.

**Please note that messages sent through the portal will only be checked during normal business hours
Monday – Friday 8am – 5pm.**

Signature: _____

Date: _____

I hereby avow that I am the authorized legal guardian for the aforementioned patients and give permission for Pearland Pediatrics and Sports Medicine to enroll them in the patient portal.

Please allow 48 hours to receive your e-mail from our office containing your temporary password to access the portal.