Please note that for all types of proxy access, the patient’s chart will be accessed through the proxy’s MyChart account. Instructions on how to create or request a MyChart account are available online at: https://mychart.utmb.edu.

Please check one of the boxes below that best describes the proxy access requested.

### Adult-Adult (Access to another adult’s MyChart record)
The patient must sign this form to provide authorization for release of medical information. Authorization for proxy access to an adult patient’s account is valid until revoked by the patient.

### Adult-Child (Access to your minor child’s MyChart record)
Please note the following age range limitations for MyChart. These age range limitations do not affect any legal right you have to access your child’s record by other means. To request a paper copy of your child’s record, contact the UTMB Health HIM department.

- If your child is age 0-13: You will be granted full access to your child’s MyChart record.
- If your child is age 14-17: You will be granted partial access to your child’s MyChart record (e.g., appointment scheduling, immunizations, messaging).

Once your child reaches age 18, you will no longer have access to your child’s MyChart record.

### Legal Guardian – Documentation Required. If you are the legal guardian or if you have a durable power of attorney for healthcare with regard to the patient, then this request MUST be accompanied by a copy of legal paperwork verifying your authority to have access to the patient’s medical information.

Select the option below that best describes the guardianship:

Legal Guardian (court order) _____________
Power of Attorney for Health care (activation) _____________
Other ________________
By signing this proxy request, I understand that I am giving my permission for UTMB Health to disclose my protected health information (PHI) through MyChart to my proxy. Information includes, but is not limited to: health summary, current problem list, current medications, lab results, appointment information. A comprehensive list of information available through MyChart is available at: <<live hyperlink>>.

The information available to my proxy may include information relating to: (1) Acquired immunodeficiency syndrome (AIDS) or human immunodeficiency virus (HIV) infection, (2) treatment for drug or alcohol abuse, (3) sexually transmitted diseases, or (4) mental or behavioral health or psychiatric care.

This proxy request is effective until my MyChart account is inactivated or proxy access is revoked and includes records that were created or existing on or before the date this form was signed, as well as records that are created after the date this form is signed.

I understand that I may revoke proxy access at any time: 1) through changing MyChart Family Access Settings or 2) notifying UTMB Health in writing to the Health Information Management Department, 301 University Blvd, Galveston, Texas 77555-0782 or by fax at 409.772.5101 of my intent to revoke an individual’s proxy access.

I understand that such a revocation will not have any effect on any information already released to my proxy.

If neither federal nor Texas privacy law apply to the recipient of the information, I understand that the information disclosed pursuant to this authorization may be re-disclosed by the recipient and no longer protected by federal or Texas privacy laws.

Proxy request is voluntary and I may refuse to sign this form. I understand that I am not required to sign this Authorization Form in exchange for the receiving treatment from UTMB Health.

Any documents, if any, I have provided to support of my right to access the patient’s protected health information, are true and correct copies and are the most recent documents related to this matter. When my legal authority to act on behalf of the patient has been inactivated, revoked, terminated, or expired, I must immediately notify UTMB Health in writing of the change in authority and mail it to the Health Information Management Department, 301 University Blvd, Galveston, Texas 77555-0782 or by fax at 409.772.5101.