

Salem Regional Medical Center Patient Portal Enrollment Form

The **Patient Portal** provides secure online access to portions of your **Medical Record**; and as of August 1, 2019, to **Online Bill Pay**. To begin the enrollment process **for access to your private SRMC Patient Portal account**, fill in the required information and return your completed enrollment form, along with a copy of your government-issued photo ID as directed below. If you wish someone other than yourself to access your account, you will need to complete and sign a "Proxy Authorization" form, which can be requested at the SRMC Medical Records Department, (330) 332-7536.

Please complete the following required fields for the Patient Portal enrollment information:

Patient Name: _____

Date of Birth: _____ **Last 4 Digits of Social Security #** _____

Phone Number: _____

E-mail Address: _____

(For your user account information and notification purposes only)

By signing and dating this form, I am authorizing SRMC to process my Patient Portal enrollment request and provide further enrollment instructions to be sent to the email address listed above.

Signature: _____ **Date:** _____

Parent/Guardian (if applicable): _____

(If patient is under the age of 18, a parent/guardian must be listed. If patient is an emancipated minor or other circumstances apply, please contact SRMC's Medical Records Department first at (330) 332-7536.)

Note: Verification of a patient's or patient guardian's identity by photo I.D. is required to complete enrollment.

To Return Your Completed Patient Portal Enrollment Form: Scan or take a picture of your completed enrollment form, along with a copy of your government-issued photo ID, and send the enrollment form and a copy of your ID as email attachments to **PortalEnrollment@salemregional.com**. Make sure to include your name and email address in the body of the email message. If you prefer, you can mail these same items to **SRMC Medical Records, 1995 East State St., Salem OH 44460**; or you can drop them off at the Medical Records department during normal business hours, (330) 332-7536.

Next Steps: Once your Patient Portal enrollment form has been received by SRMC's HelpDesk, you will be sent an email within 1-2 business days notifying you of the status of your Portal enrollment request and/or further enrollment information. If you have not received an email within a week of submitting your request, please contact the SRMC HelpDesk at (330) 337-4960 or via email: PortalEnrollment@salemregional.com.

OFFICE USE ONLY:

Medical Record Number: _____

Apply Patient Label Here:

ID Verified: _____ Date /Time Received: _____

Date/Time Enrollment Completed: _____ Person Completing Enrollment: _____