

## Main Street Pediatrics

17-18yo transition letter and agreement.

At 18 years, old, we ask our now legally adult patients to decide how to handle access to their Protected Health Information. Prior to 18 years, we ask our patients and families to consider the implications of these upcoming decisions.

Officially, an 18-year-old has complete confidentiality of all medical issues. We routinely change the contact phone number to the patient's number. We also will routinely defer all requests for medical records, transfer of medical records, referrals to other care providers, information regarding visits, labwork, and diagnoses, and access to any Patient Portal to the patient at 18 years of age (unless the patient specifies otherwise below).

We suggest, for ease and efficiency of access, that any 18 years or older patient allow, by initialing below, that parents can contact us and we are permitted to act on parental requests for:

All the below:

Prescription refill

Making appointments with the primary pediatrician

Immunization records

Routine medical forms

Financial arrangements and payments for services

Pertinent medical records to be sent to any specified provider in the case of an emergency during which the patient cannot reasonably authorize record transfer.

Designate if there are any exceptions to the above: \_\_\_\_\_

The patient may also indicate other specific areas of parental access below:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Considered, acknowledged and signed

\_\_\_\_\_  
Print Name and Date of Birth

\_\_\_\_\_

Other special situations:

If, because of a significant disability, it would be problematic or inappropriate for a 18-year-old patient to assume these responsibilities:

1. Parent/Legal Guardian and 18 year can agree to continue full communication by our office with parents re. all medical issues, by signing below:

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Parent/Legal Guardian

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Patient

2. Parent/Legal Guardian can, without specific patient consent, request their physician consider continuing communications with parents by signing below.

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Parent/Legal Guardian