

**Sugarland Med Ped Clinic**  
**3533 Towncenter Blvd Suite 100**  
**Sugarland Texas 77479**

If you have a health issue to be diagnosed and treated, use the portal to schedule an appointment unless it is an emergency. In that event, follow the guidance above.

Sugarland Med Ped Clinic, P.A provides this patient portal as courtesy for our patients and does not charge a service fee. If, however, patients misuse the portal, we reserve the right to terminate those patients' access or otherwise modify the services offered through the portal.

INSTRUCTIONS. Once you have signed this PATIENT PORTAL Informed Consent and User Agreement, you must provide us your EMAIL ADDRESS. Upon receipt of your Email Address, we will provide instructions as to how access the portal.

Patient Informed Consent and Agreement. The undersigned has read and understands this Patient Portal Informed Consent and Agreement Form. Understanding that some risks exist with use of this patient portal, I agree to the conditions specified and consent to the use of my individually identifiable health information in this manner. I also consent to any instructions that my physician or other clinician may impose for Patient Portal communications.

Printed Name of Patient \_\_\_\_\_

Date of Birth \_\_\_\_\_

Parent/Guardian Signature if Necessary \_\_\_\_\_

Date Signed \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_