

Revoking Proxy Access to MyChart

This form allows a competent adult to revoke proxy privileges from another individual, who currently has online access to the Patient's MyChart record.

Patient's Information – please confirm

Patient name (*last, first, middle initial*) _____ Date of Birth _____

Social Security Number (*last 4 digits only*) _____ Email Address _____

Street Address _____ City _____ State _____ Zip _____

Home Phone Number _____ Cell Phone Number _____

Proxy Name(s) _____

I understand that MyChart is intended as a secure online source of confidential medical AND billing information about me and choose to remove the person named above as my MyChart Proxy. Once confirmed, the individual(s) above will no longer have access to my health information contained in MyChart.

I understand that access to MyChart is provided by Baylor College of Medicine (BCM) as a convenience and that BCM has the right to deactivate access to MyChart at any time for any reason.

I understand that it may take *3 business days* from the date of receipt of written notice for BCM to terminate the person's access to my MyChart account.

_____ Date _____

Signature of Patient

Upon completion of this form, please return it and a **photo ID** of the adult patient to the front desk if you are in one of our offices. Otherwise please return these forms via:

Email	mychart@bcm.edu
Fax	713-798-3477
Mail	Baylor College of Medicine c/o Release of Information Patient Resource Center Two Greenway Plaza Suite 900 Houston, TX 77046