

Patient Portal & Communication Preferences

Moukdad Medical offers a secure online patient portal where you can view visit summaries, lab results and communicate with your care team.

Please complete this form so we can set up or confirm your access and respect your communication preferences.

Patient Name: _____

Date of Birth: _____

Portal Enrollment

- ☐ I already have a Moukdad Medical portal account.
- ☐ Please send me an invitation to enroll using the email below.
- ☐ I prefer not to use the portal at this time.

Email for Portal Access: _____

Test Results & Communication

- ☐ I am comfortable receiving results and messages through the secure patient portal.
- ☐ I prefer to discuss results directly with my provider before viewing them online.
- ☐ Please notify me by phone when new results are available.

Electronic Communication Acknowledgment

I understand that the patient portal is a secure system intended for routine, non-urgent communication.

For emergencies, I will call 911 or go to the nearest emergency department.

I understand that Moukdad Medical may use my phone number, email or patient portal to send appointment reminders, follow-ups and billing information.

Patient Signature: _____

Date: _____