



Instructions for completing this form:

To inactivate access to your health information using MyChart you must complete the following steps:

1. Complete the Inactivation Request Form
2. Mail the completed form to the following:

**The Queen's Medical Center
 MyChart Medical Records
 1301Punchbowl Street
 Honolulu, HI 96813**

Your Information: (All sections must be completed – incomplete forms will not be processed.)

Name *(last, first, middle initial)* _____

Date of Birth: _____ Phone Number: _____




Street Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____

Reason for Inactivating Account: _____

Terms:

- I understand that MyChart account will be inactivated within 5 days from receipt of inactivation request form.
- I understand that all MyChart proxy access to my account will also be inactivated.
- I understand that I will need to complete the enrollment process if I wish to re-enroll in MyChart.
- By signing below, I acknowledge that I have read and understand this MyChart Inactivation Form and I agree to its terms.


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Signature of Patient/Personal Representative **Relationship to Patient** **Date (Required)**