



A quick guide on how to register for a MyChart<sup>™</sup> account.

**Step 1** – Click on the link provided to you in your email or you may also copy paste the URL: <u>https://www.mychart.ca/pages/registration/siteSelection.cfm</u> directly into your web browser. This link will take you to the MyChart<sup>™</sup> registration web page.

**Step 2** – Please enter the required information on the patient information screen. Only numeric values are required for the health card number (**no version code**).

Please note the PIN information has been provided to you in a separate email. The PIN is valid for 60 days after it has been issued. You may copy and paste the PIN directly from your email into the field or type it in manually. Once you have entered all the information accurately, click **'Next'**.

PATIENT INFORMATION	* Required fields
FIRST NAME <sup>+</sup>	
LAST NAME*	
DATE OF BIRTH*	GENDER
YYYY-MM-DD	Select 🗸
ONTARIO HEALTH CARD NUMBER *	HOSPITAL REGISTRATION PIN*
САРТСНА	Finding the code hard to read?
8227	GET A NEW CODE
TYPE THE CAPTCHA CODE SHOWN	
	?

NEXT

**Step 4** – This screen allows you to enter detailed information including your username and password. After you have entered all the information accurately, please carefully read the user agreement at the bottom of the screen and when you're ready click on 'I AGREE WITH THE TERMS OF USE' and click 'Submit'.

ATIENT INFORMATION		* Required fie
IRST NAME	MIDDLE INITIAL	EMAIL ADDRESS
AST NAME '		RE-TYPE EMAIL ADDRESS
IREET *		PICK A USERNAME*
ITV:		CREATE & DASSWORDY
		(?
DUNTRY .		CREATE A PASSWORD'
Canada	22	
ROVINCE .		Password standards
Ontario	2	1. Must contain a minimum of 8 characters 2. Must contain at least 1 upper case and 1 lower case letter 3. Must contain at least 0 one numeric character
USIALCODE		<ol> <li>Must contain a cleast one number consecutive characters from your user account name</li> </ol>
HONE NUMBER		SECURITY QUESTION
1-416-555-5555		Select V
AY PHONE NUMBER	EXT	SECURITY ANSWER 1
1-416-555-5555		
		NEWS AND ANNOUNCEMENTS?
		* YES NO
		SURVEYS AND REQUESTS FOR FEEDBACK?
REVIEW THE TERMS OF USE		
MyChart User Agreement 1. Acceptance It is important that you read all the following tern Health Sciences Centre ("Sunnybrook"), which and conditions under which you may access ar limitation, articles, text, photographs, images, ill Portal, you are indicating your acceptance to b use the Portal. Sunnybrook may revise this Agr revised terms.	ns and conditions carefully. This Terms o is owner and operator of the MyChart w id use the Portal and all written and othe ustrations, audio clips, video clips, comp e bound by the terms and conditions of t eement at any time without notice. Use o	f Use Agreement ("Agreement") is a legal agreement between you and Sunnybrook ebsite ("Portal") and its participating partners (refer to Appendix A). It states the terms ir materials displayed or made available through the Portal, including, without uter software, and links to third party sites ("Content"). By accessing and using the e Agreement. If you do not accept these terms and conditions, you must not access or if the Portal after such changes are posted will signify your acceptance of these

**Step 5** – Once the registration has been successfully completed, you will receive a confirmation message on your screen. Please proceed to sign in to your MyChart<sup>TM</sup> account with your secure username and password.



For technical support please contact our support staff via email: <u>lakeridgehealth@mychart.ca</u> or call: **1-833-221-2202** 

Please note, the contact information provided above is only for technical support. Please do not share any personal health information in the email or voice message. If you have any questions about test results, contact your healthcare provider directly.

You are able to close your MyChart<sup>™</sup> account at any time without any impact to your care. Please contact our support email or phone line.