



Power of attorney to act on behalf of a person

With this power of attorney, a person with legal capacity can authorize another person with legal capacity to take on behalf of someone in social and health care (at first HUS Peijas hospital and Vantaa social and health services) including electronical services. Maisa is a client portal, where the client and patient data for social and health care are integrated to one entity. An electronic authorization is needed for acting on behalf of someone as well as for the client and patient data in social and health care, even if you just handle matters in one of them. One person can be authorized with one power of attorney.

First name	Last name	Personal identity code
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I assign following person to act on behalf of me

First name	Last name	Personal identity code
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E-mail	Telephone number
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The extension of the power of attorney I give

Full rights: My authorized person can act on behalf of me in the same extent as I and she/he see the same information in Vantaa social services client data file and the healthcare patient registry as well as HUS patient registry as myself.

Booking of appointments and messages: My authorized person can make appointments, cancel made appointments, send messages concerning me to a professional or fill in forms for me on my behalf. I do not necessarily see all messages my authorized person sends. I am aware of, that my authorized person can see information on appointment bookings, including the reason for the appointment. The authorized person does not however have access to see my other client and patient data.

Only read-only access: My authorized person can see all my client and patient data but cannot send messages or forms to professionals and cannot book appointments on my behalf.

I give the person mentioned above the following rights to act on behalf of me

Full rights

Booking of appointments and messages

Only read-only access

I am aware of, that I can withdraw the power of attorney when I want by notifying it in writing (for instance the Maisa cancellation form or a freely written message to the social and health care service unit.

The power of attorney is handled within six working days.

Place

Signature of authorizer

Time

clarification

Telephone number