## Saint Luke's Health System

## Parental/Guardian Proxy Access to the mySaintLuke's Portal Record of a Minor Requirements and Procedures

Parents or legal guardians can access the portal record of their child as follows:

Child Age	Child Access	Parent/Guardian Access
0 to 11 years old	No access to online portal record Access/copies of full medical record as allowed by law (through HIM dept.)	Access to online portal record Access/copies of full medical record as allowed by law (through HIM dept.)
12 to 17 years old	Access to online portal record Access/copies of full medical record as allowed by law (through HIM dept.)	Access to limited online portal record Demographics, Allergies, Immunizations, School Forms, Messaging, Claims-Bill pay (if a guarantor)Lab/diagnostic not included Access/copies of full medical record as allowed by law (through HIM dept.) Pregnancy (excluding abortions), VD/STD, Drug or substance abuse MO St. 431.061(4)(b) KS St. 38-123b
18 years old and above	Access to online portal record Access/copies of full medical record (through HIM dept.)	No access/copies of portal record or full record without proxy or authorization form completed by adult child

Requirements for accessing my child's online portal record:

- Parent or individual requesting access must have legal authority as parent or guardian and may be required to provide appropriate documentation.
- Parental/Guardian Authorization Form (page 2) must be completed and signed for children ages 0 to 11.
- If child is 12 to 17, child can request proxy access for their parent/guardian via their online portal record.
  - Note: proxy access still does not enable the parent/guardian to see some information such as lab values pursuant to MO/KS Laws:
    - MO St. 431.061(4)(b)
    - KS St. 38-123b
- Portal accounts will be de-activated if not accessed by the parent/guardian/proxy within 3 years.
- mySaintLuke's portal is not to be used in an emergency.

Procedures for accessing my child's online record:

- Saint Luke's Health System (SLHS) will provide an activation code to create a mySaintLuke's (MSL) account to view the portal record of your child, if the parent/guardian does not already have a MSL account.
- You should receive a MSL Activation Letter with instructions on how to create a MSL account at the email address you
  have provided via an encrypted email from SLHS, within five (5) business days of receipt of a completed valid
  authorization form. If you do not receive the MSL Activation Letter within that time frame, please contact your provider's
  office or mySaintLuke's Customer Service at 844-446-5479, available 24 hours a day, seven days a week.
- Please promptly activate your account as the activation code will expire in 90 days

SLHS reserves the right to revoke online access to medical information at any time.

COMPLETE THE REQUIRED INFORMATION ON THE NEXT PAGE/BACK SIDE



## Saint Luke's Health System

## Parental/Guardian Proxy Access to the mySaintLuke's Portal Record of a Minor Parental/Guardian Authorization Form

Please enter <b>Patient's (Child)</b> information:	
Patient's Name:	Medical Record #:
Address:	Last four digits of Social Security #:
Address.	Date of Birth:
	Gender:   Male Female
Please enter Parent/Legal Guardian information:	Gender. El Mare El Femare
	Email Address:
	Last Four Digits of Social Security #:
	Date of Birth:
Phone Number:	
Relationship to child: Birth Parent Adoptive Pare	
Treatments in processing to child. In British about 1 areas.	in Begar Guardian Bouner
If Other, please specify:	
allowed by law, through the HIM department.  "I acknowledge the following (initial each):	re always allowed to access their child's full medical record as rocedures for accessing my child's medical record information
I will not share my mySaintLuke's User ID and Pa	ssword with others.
Information and alerts regarding mySaintLuke's w address is provided, information and alerts will be	rill be sent to me at the email address provided. If no email sent to me via mail at the address provided.
I agree to abide by the terms and conditions of the	mySaintLuke's site.
When my child turns 12 years old, my access to the 18 years old, my access to the mySaintLuke's acco	e mySaintLuke's account will be limited. When my child turns ount will be automatically terminated.
I certify that I am the parent or legal guardian of the m provided is correct. I hereby request access to my child	
Parent/Legal Guardian Signature:	Date: Time:
	NIC/OFFICE or A HOSPITAL REGISTRATION AREA may be emailed to proxyrequest@saintlukeskc.org
While it is unlikely, there is a possibility that unsecure email could be interested in your request by email, you are agreeing to accept these risks.	cepted and read by other parties besides the person to whom it is addressed. By

STAFF: Original-email to proxyrequest@saintlukeskc.org, fax to HIM at 816-891-6072, or interoffice mail to SLN – HIM MSL Team Copy to patient/guardian