

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 <u>limited</u> 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 24 hours.**

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

COMPLETE THE REQUIRED INFORMATION ON THE NEXT PAGE/BACK SIDE

Not a Part of the Permanent Medical Record



Saint Luke's Health System

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

Please enter Patient's (Child) information:

Form fields for Patient's Name, Medical Record #, Address, Last four digits of Social Security #, Date of Birth, and Gender.

Please enter Parent/Legal Guardian information:

Form fields for Parent Name, Email Address, Address, Last Four Digits of Social Security #, Date of Birth, Phone Number, Gender, and Relationship to child.

If Other, please specify:

Note: Access to a minor child's online portal record is only available to parents or individuals with legal guardianship. Appropriate documentation of legal relationship to child must be provided when requested. SLHS can revoke access to the online portal record at any time. Parents/legal guardians are always allowed to access their child's full medical record as allowed by law, through the HIM department.

I acknowledge the following (initial each):

- Checkboxes for acknowledging requirements, not sharing ID/password, email preferences, terms and conditions, and age-related access limitations.

Parent/Legal Guardian Signature Date Time

RETURN FORM TO FRONT DESK AT ANY CLINIC/OFFICE or A HOSPITAL REGISTRATION AREA

If supporting documentation is requested it may be emailed to proxyrequest@saintlukeskc.org

While it is unlikely, there is a possibility that unsecure email could be intercepted and read by other parties besides the person to whom it is addressed. By sending your request by email, you are agreeing to accept these risks.

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