



Parental/Guardian Access to the Online Medical Record of a Child Under 13 years old

Requirements and Procedures

Parents or legal guardians can access the online medical record for their children under 13 years of age.

Requirements for accessing a child's record:

- Parent or individual requesting access must have legal guardianship rights
- Parental Authorization Form must be completed and signed
- Each parent or individual requesting access must have their own *eGuthrie* account

Please note the following age range limitations for *eGuthrie*. These age range limitations do not affect any legal right you have to access your child's record by other means. To request a paper copy of your child's record, contact your child's primary care clinic.

- If your child is **age 0-12**: You will be granted full access to your child's *eGuthrie* record.
- Once your child reaches **age 13**: You will be granted partial access to your child's *eGuthrie* record. (access to allergies & immunization records).
- To receive full access to your child age 13-17 a Guthrie Teen Proxy form must be completed and returned to your family's Guthrie caregiver
- Once your child reaches **age 18**, you will no longer have access to your child's *eGuthrie* record.

I understand that:

- I must have a *eGuthrie* account
- I must log in to *eGuthrie* with my own User ID & Password
- I must click on 'View Other Records' to access my child's medical information
- I agree to abide by the terms and conditions of the *eGuthrie* site
- When my child turns 18 years old, access will be automatically terminated

Parent/Legal Guardian access to a child's record is revoked when:

- Parent/legal guardian submits a request or revokes online
- Child turns 18 years old
- Legal Documentation

Patient's access to online medical information is revoked when all parent/legal guardian access is revoked. Guthrie reserves the right to revoke online access to medical information at any time. Communications on behalf of your child must be sent from your child's record and responses will be received in your child's record. *eGuthrie* email alerts will be sent to the email address entered in the child's record.

If you have an *eGuthrie* account, you will receive an *eGuthrie* message when access to the patient's record is available, typically 1 to 3 business days after completed authorization form is received.

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Please enter **Child's** information:

Child's Name: _____ Guthrie Medical Record #: _____
Address: _____ Last 4 digits of Social Security #: _____
Date of Birth: _____
Gender: _____ Male _____ Female

To be notified when new messages about your child's care are sent to eGuthrie, please list an email address:

Note: If no email is provided then you will not receive notifications that eGuthrie has been updated.

Please enter **Parent/Legal Guardian** information:

Parent Name: _____ Guthrie Medical Record #: _____
Address: _____ Last 4 digits of Social Security #: _____
Date of Birth: _____
Gender: _____ Male _____ Female
Former Name(s) - e.g. maiden name: _____

Relationship to child: ___ Parent ___ Legal Guardian ___ Other
If Other, please specify: _____

Please note: If you are a Guthrie patient you must activate your account prior to requesting proxy
Note: Access to child's online record is only available to Parents or individuals with legal guardianship.

I have read and understand the requirements and procedures for accessing my child's medical record information online as provided on page one of this document titled, Parental Access to the Online Medical Record of a Child Under 13 Years Old.

I certify that I am the parent or legal guardian of the child listed above and that all information I have provided is correct. I hereby request access to my child's online record.

Date

Parent/Legal Guardian Signature

Completed forms can be submitted in person or via mail to your or your family's Guthrie caregiver. For mailing addresses, please reference our Guthrie website.

Initials: _____