Patient Portal

SGCMH

Patient Portal Sign Up Information:

Main Portal Account Holder

Name _____

Address _____

Phone Number _____   SGCMH Care Provider _____

Last 4 Numbers of SSN: _____

Date of birth _____   ❑   please check here if you'd like to be on our mailing

E-mail Address _____

Signature _____

PROXY ACCESS   (Add more Family Members to your account such as spouse, children, parents)

With the consent of the patient, you can view other adult's medical records, such as your spouse or parents. To get Proxy Access, fill out the Proxy Access information below. Parents can also view medical records for their children under the age of 13 (in accordance with Missouri law).

Please list all patients you are requesting access to below. You will need to complete all of the information for each patient, **including their signature**. This information will be reviewed, and we may contact the patient to confirm permissions. In accordance with Missouri Law, all requests for proxy access to **minors over the age of 13** will automatically be denied. Existing proxy access will automatically be revoked on their thirteenth birthday. Patients may revoke proxy access at any time. Your signature consents to the release of private medical information to the proxy listed above under HIPAA laws.

Additional Patients in this Account

Patient Name	Date of Birth	Relation to Proxy	SGCMH Primary Care Physician	Patients Signature* (or parent signature if patient is less than 13)	Date

*Not required for patients under the age of 13. Initial login instructions on the Patient Portal is available at stegenevievehospital.org or you may call 573-883-7745 for specific questions. Your initial password will be sent to you via e-mail.

SGCMH offers an application programming interface (API) that allows you to download your health information to an application of your choice. For more information, please contact 573-883-4498.