



St. Margaret's Health

St. Margaret's Hospital

SMP Health System

St. Margaret's Health Patient Portal

Portal Consent

St. Margaret's Health (SMH) MyCare Patient Portal offers the patients secure electronic access to portions of their medical record. This can be a valuable communications tool, but certain precautions should be used to minimize risks. In order to manage these risks, these terms and conditions have been established for participation.

St. Margaret's Health MyCare Patient Portal is designed to enhance continuity of care for our patients and providers. We strive to keep all of the information in your records correct and complete. If you identify any discrepancy on your record, please notify the SMH Medical Record Director immediately.

The information on the patient portal is maintained by St. Margaret's Health. For questions about this site contact St. Margaret's Health at 815-664-7200 or email at mycare@aboutsmh.org.

As a patient of St. Margaret's Health, enrolling in the SMH MyCare Patient Portal will allow you to:

- Securely message your medical provider's staff
- Review lab and other reports
- Request prescription renewals
- View appointments
- View history & discharge information

The patient portal is not intended to provide internet based diagnostic medical services. Also, the following limitations apply:

- No internet based triage and treatment requests. Diagnosis can only be made and treatment rendered after the patient schedules and sees the provider.
- Any emergent conditions should be seen by Urgent Care, Emergency Department, or by dialing 911.
- Request for narcotic pain medication will not be accepted. Request for re-fill medication not currently being prescribed by your provider will not be accepted.

The SMH MyCare Patient Portal is provided as a courtesy to our patients. While some offices charge for this convenience on an annual basis, we are focused on providing the highest level of service and health care. However, if abuse or negligent usage of patient portal is reported, we reserve the right to terminate patient portal offering, suspend user access, or modify services offered through the patient portal. If access is terminated SMH will notify you as promptly as possible.

By signing this Portal Consent, you are agreeing that you have been informed of the Terms and Conditions of the MyCare Patient Portal Program and agree to these Terms and Conditions. In addition, you accept the responsibility to keep your information confidential.

SMH understands the importance of privacy with regard to your healthcare and will strive to protect the privacy of your medical information. SMH use and disclosure of medical information is described in our Notice of Privacy Practices. You also agree not to hold St. Margaret's Health or any of its staff or providers liable for network or security infractions beyond our control. By accepting this agreement, you acknowledge that you understand these terms and agree to comply with them.





Patient Acknowledgement and Agreement:

I acknowledge that I have read and fully understand this consent form. I acknowledge that using the patient portal is entirely voluntary and will not impact the quality of care I receive from St. Margaret's Health.

SMH MyCare Terms and Agreement

- I understand that SMH MyCare is intended as a secure online source of confidential medical information. If I share my SMH MyCare ID and password with another person, that person may be able to view my health information or my child's health information, and health information about someone who has authorized me as an SMH MyCare Proxy.
- I agree that it is my responsibility to select a confidential password, to maintain my password in a secure manner, and to change my password if I believe it may have been compromised in any way.
- I understand that SMH MyCare contains selected, limited medical information from a patient's medical record and that SMH MyCare does not reflect the complete contents of the medical record. I also understand that a paper copy of the patient's medical record may be requested from the applicable provider.
- I understand that my activities within SMH MyCare may be tracked by computer audit and that entries I make may become part of the medical record.
- I understand that access to SMH MyCare is provided by St. Margaret's Health as a convenience to its patients and that SMH MyCare and/or my physician has the right to deactivate access to SMH MyCare at any time for any reason. I understand that use of SMH MyCare is voluntary and I am not required to use SMH MyCare or to authorize a SMH MyCare Proxy.
- By signing below, I acknowledge that I have read and understand this SMH MyCare Sign-Up Form and I agree to its terms. I further agree to any and all current and future terms and conditions noted on the SMH MyCare site.

I accept these Terms and Conditions:

Patient Name Printed: _____

Patient Signature: _____ Date_____

Patient Email Address: _____

Patient Birthdate: _____

Patient Sex: _____

Phone (home) _____ (Cell) _____

Medical Record Number: M_____

(For office use only)