



My St. Jude

About *My St. Jude*

My St. Jude is an online site where you can view, but not change, parts of your (your child's) medical health record.

Security

My St. Jude is a secure website. Your (your child's) information is protected.

View medical record

At *My St. Jude*, you can view your (your child's): most lab results, selected documents, allergies, problem list, and inpatient discharge instructions.

View schedule and request schedule changes

At *My St. Jude*, you can view upcoming appointments and send requests to the St. Jude scheduler to set, change, or cancel appointments.

Update personal information

My St. Jude allows you to see your (your child's) personal information such as address, phone number, and insurance. You can send a request to the Patient Registration staff to update this information.

Voluntary

You are not required to sign up for *My St. Jude*. Your (your child's) treatment will not be affected if you choose not to take part.

Who can sign up?

- For a patient younger than 18 years, an account can be requested by an emancipated minor, or a legally-authorized representative (those who have legal authority to make health care decisions on behalf of the child).
- Patients 18 years or older can request their own accounts. Also, these people can request accounts: conservators (people appointed by the court to provide partial or full supervision, protection, and assistance), surrogates and those with a Power of Attorney for Health Care Decisions.
- When a child turns 18, existing accounts for parents, legal guardians, or others are closed.
- Accounts can only be set up for those already listed in the St. Jude system. Only 2 accounts per patient may be set up.

How to sign up

Sign up by filling out the form on the last page of this brochure. **Tear off the form** and turn it into a Patient Registration staff member or your patient representative. You can also place it in one of the *My St. Jude* boxes located in your clinic area or mail it to the following address: St. Jude Children's Research Hospital, Patient Registration, Mail Stop 114, 262 Danny Thomas Place, Memphis, TN 38105. If you have more than one (1) child as a patient, a separate form is required for each patient. More forms can be downloaded at www.stjude.org/mystjude.

Creating an account

Within 5 business days you should receive an email invitation. Follow the steps in the email invitation and you're on your way to using *My St. Jude*. After receiving the email invitation, you will have up to 30 days to log in and register at *My St. Jude* before the invitation expires. If the invitation expires and you still want to take part, a new form must be filled out and turned in.

Sharing your account

When you share information from *My St. Jude* with another person, you are accepting responsibility for giving that person access to what could be sensitive information.

Emergencies

My St. Jude should never be used for urgent matters. The St. Jude staff will answer your messages as soon as reasonably possible during standard St. Jude business hours. **For all urgent matters that you believe may affect your (your child's) health or well-being, you should, without delay, contact St. Jude by phone or go to the nearest hospital emergency department or dial 911.**

Help with *My St. Jude*

- If you have questions about filling out the form, talk to a Patient Registration staff member or the patient representative in your clinic.
- If you don't receive an email invitation within 5 days of turning in the completed form, call Patient Registration at 901-595-3836.
- After receiving the email invitation, if you have trouble accessing the link or logging in to create your account, please call Cerner Consumer Support at 1-877-621-8014.
- For questions about medical record information, please talk to your St. Jude health care team.

Sign up for My St. Jude

Sign up by filling out the following form. **Tear off the form**, and turn it into a Patient Registration staff member or your patient representative. You can also place it in one of the *My St. Jude* boxes located in your clinic area or mail it to the following address:

St. Jude Children's Research Hospital, Patient Registration, Mailstop 114, 262 Danny Thomas Place, Memphis, TN 38105.

For office use only— place patient label here

If you have more than one child as a patient, a separate form is required for each patient. More forms can be downloaded at www.stjude.org/mystjude.

Please print clearly.

Patient Last Name:	First Name:	Middle Name:
Patient Date of Birth (mm/dd/yyyy):		Age:
Patient Home Address: Street		
City, State, Zip Code, Country		
Patient MRN:	Primary Clinic:	

If patient recently turned 18 and wants to continue *My St. Jude*, check here.

Accounts can only be created for: emancipated minors; parents with legal custody; legal guardians; patients who are 18 years or older; conservators; surrogates; those with a Power of Attorney for Health Care Decisions for patients who are 18 or older; and for people who are already listed in the St. Jude system.

1. Account owner

Relationship to patient (mark one choice): Patient Parent with legal custody Legal Guardian, Conservator Surrogate Power of Attorney for Health Care Decisions

Last Name:	First Name:	Middle Name:
Email address	Phone number () -	
4-digit PIN number	(You'll need this PIN for logging into <i>My St. Jude</i> the first time.)	

With my signature below, I certify that I have the legal authority to sign up for a *My St. Jude* account. The information I have given is truthful and correct to the best of my knowledge. I give my consent to be sent an invitation to *My St. Jude*.

Signature: _____ Date: _____ Time: _____

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Comments: _____

Information verified and entered by: _____ Date: _____ Time: _____

Form continues on the back page.

*Tear here *Submit form. Keep front page of brochure for reference.

2. Account owner

Relationship to patient (mark one choice): Patient Parent with legal custody Legal Guardian,
 Conservator Surrogate Power of Attorney for Health Care Decisions

Last Name:				First Name:				Middle Name:			
Email address						Phone number () -					
4-digit PIN number						(You'll need this PIN for logging into <i>My St. Jude</i> the first time.)					

With my signature below, I certify that I have the legal authority to sign up for a *My St. Jude* account. The information I have given is truthful and correct to the best of my knowledge. I give my consent to be sent an invitation to *My St. Jude*.

Signature: _____ Date: _____ Time: _____

For Office Use Only

Comments: _____

Information verified and entered by: _____ Date: _____ Time: _____



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▼ Tear here ▼ Submit form. Keep front page of brochure for reference.