

The “Electronic Health Record Access” Consent Form

What is it?

- A consent form that simply gives the _____, the right to help you find health requirement information from the Missouri State health information databases.

Why does the _____, want this consent?

- To help you more easily find your child’s required health information; such as immunizations, blood test results, or the date of his/her last physical or dental exam.

What will the health information be used for?

- To help you meet the health requirements needed to enroll your child in the _____.

Where will this information be kept?

- The information will be placed in your child’s confidential file.

Who will see my child’s information?

- No one except approved _____ staff.

If I don’t sign this, can I still enroll my child in Head Start?

- Yes, we just won’t be able to help you more easily find some of your child’s health information.

What if I decide I do not want to let you get the health information anymore?

- Please give us a letter saying you don’t want us to get the health information any more. Please be sure to sign and date the letter.

Other questions? Please feel free to ask.