

Dear Parents and Guardians,

As you may know, Fenwick utilizes a medical records system called Magnus Health SMR (Student Medical Record). As this is a web-based system, you will have continuous access to your child's health record as well as the ability to make updates when needed. You will also have the option to access the account after your child graduates.

**CURRENT FENWICK PARENTS**, you will continue to use the same user name and password for the duration of your time at Fenwick, any new freshmen students will show up in your current Magnus Account.

**ATTENTION ATHLETES:** Students who are in a sport will need all forms in the Magnus/Blackbaud system by **June 10th**. Sports Physicals are good for 1 year. **Students are subject to exclusion if forms are not in by the deadline.**

**STUDENTS IN ALL GRADES** we ask that you enter the health information required within your Magnus Health SMR account for each child attending Fenwick **no later than July 1st**. **Students are subject to exclusion from school and activities if the July 1st dead line is not meet.**

Timely submission of health information and other forms is vital so that preparations can be made prior to the first day of school and/or practice. You will receive weekly reminders as long as there are outstanding items in your account. Please reserve 20 to 30 minutes per child, depending on particular circumstances. The good news is that you will not have to repeat this work next year: the data is securely stored, so going forward you will simply provide updates to the record as needed.

**To access your Magnus Health SMR Account:**

Current Fenwick parents may access your Magnus account at any time using your current user name and password, if you have forgotten or misplaced your password please email [dpape@fenwickfriars.com](mailto:dpape@fenwickfriars.com) or [kmonty@fenwickfriars.com](mailto:kmonty@fenwickfriars.com) and we will send your user name and password. **NEW Fenwick Parents** will receive an email **from Magnus/Blackbaud**, providing your username/password to access your child(ren)'s Magnus Health SMR account(s).

**Questions or Problems?**

If you are having difficulty navigating the Magnus system, entering data online, or downloading the hardcopy coversheets and forms, or if you have any other questions, please contact customer support at **Magnus Health SMR** by phone at **877.461.6831** or by email at **service@magnushealthportal.com**.

**IF YOU ARE HAVING ANY DIFFICULTIES OR DO NOT HAVE A WAY TO UPLOAD YOUR DOCUMENTS, YOU MAY FAX OR MAIL YOUR FORMS TO MAGNUS.**

**PLEASE DO NOT SEND FORMS TO FENWICK, WE ARE UNABLE TO UPLOAD THE FORMS FOR YOU. E-MAILING ANY MEDICAL INFORMATION FROM UNSECURED ACCOUNTS IS A VIOLATION OF HIPAA AND FERPA LAWS.**

If you find that you are having technical difficulties, check the encryption update tester: <http://testtls.mymagnus.com/> and please use the following url: <https://secure.magnushealthportal.com/public/version.jsf> and send the resulting information to Magnus Help Desk.

**Also, please feel free to consult the Magnus Health page for Parents: <http://magnushealth.com/parents/> and Privacy and Security page at [www.magnushealth.com/privacy-and-security/](http://www.magnushealth.com/privacy-and-security/)**

Here is a checklist of things that should be entered into Magnus:

### **FRESHMAN AND TRANSFER STUDENTS**

- **Birth Certificate**
- **Over-the-counter and Prescription Medication Form, is called the Authorization of Medication** (Optional). We will need 1 form per medication.
- **State of Illinois Certificate of Child Health Examination** (please be sure to fill in the entire top portion of the 2<sup>nd</sup> page labeled HEALTH HISTORY, sign and date)
- **Immunizations form** (Incoming Freshmen/Transfer Students)
- **Health Office and Athletic Participation Consent Forms-** All consents are for all students.
- **Asthma Action Plan Form-** if applicable
- **Food Allergy Action Plan Form-** if applicable
- **Diabetes Action Plan Form-** if applicable
- **Seizure Action Plan Form-** if applicable

**If Action Plans have medication prescribed, we will need an over the Counter and Prescription form for each Medication. (Authorization of Medication form)-1 form per medication**

*If Inhalers, EpiPen's and/ or medications are to be stored in the health office, it is imperative that the Health Office has it by the first day of school.*

*Please let the Health Office know the expiration dates if the Inhalers or EpiPen's are stored in the student's backpack only.*

## **CURRENT STUDENT ENTERING THE 10<sup>th</sup> and 11<sup>th</sup> GRADE (sophomores and juniors)**

- **Over-the-counter and Prescription Medication Form, this form is called Authorization of Medication (Optional).** We will need 1 per medication.
- **IHSA Sports Physical Form-** only if your child will be playing a sport  
Please upload this form to Magnus and **DO NOT** turn into your child's coach
- **Health Office and Athletic Participation Consent Forms-** All consents are for all students
- **Asthma Action Plan Form-** if applicable
- **Food Allergy Action Plan Form-** if applicable
- **Diabetes Action Plan Form-** if applicable
- **Seizure Action Plan Form-** if applicable

**If Action Plans have medication prescribed, we will need an over the Counter and Prescription form for each Medication. (Authorization of Medication form)-1 form per medication**

*If Inhalers, EpiPen's and/ or medications are to be stored in the health office, it is imperative that the Health Office has it by the first day of school.*

*Please let the Health office know the expiration Dates if the Inhalers or EpiPen's are stored in the student's backpack only.*

## **CURRENT STUDENTS ENTERING THE 12<sup>th</sup> GRADE (Seniors)**

- **Over-the-counter and Prescription Medication Form, this form is called Authorization of Medication (Optional)** – you will need 1 form per medication.
- **Immunization form** -seniors must have documentation of meningitis immunizations. **You will be subject to exclusion if the meningitis documentation is not in by the deadline.**

- **IHSA Sports Physical Form**- only if your child will be playing a sport  
Please upload this form to Magnus and **DO NOT** turn into your child's coach
- **Athletic Participation Consent Forms**- All consents are for all students.
- **Asthma Action Plan Form, a copy/picture of the inhaler prescription label and an Authorization of medication for inhaler or Self- Administration form**- if applicable
- **Food Allergy Action Plan Form and an Authorization of Medication form for each Medication on the action plan.**- if applicable
- **Diabetes Action Plan Form**- if applicable
- **Seizure Action Plan Form**- if applicable
- **If Action Plans have medication prescribed, we will need an over the Counter and Prescription form for each Medication. (Authorization of Medication form)-1 form per medication**

*If Inhalers, EpiPen's and/ or medications are to be stored in the health office, it is imperative that the Health Office has it by the first day of school.*

*Please let the Health office know the expiration Dates if the Inhalers or EpiPen's are stored in the student's backpack only.*

We have provided information below in regards to Data security at Magnus. It provides additional background information, as well as online resources about the product. Please stay tuned for more details over the spring and summer.

[Privacy and Security Throwsheet](#)

<https://info.magnushealth.com/privacy-and-security-information?utmcampaign>

**Sincerely,**

**Donna Abruzzo Pape, R.N. and Kathleen Monty, CNA      708-386-0127 ext. 170**