

MYCHART PATIENT INSTRUCTIONS TELEMEDICINE ENCOUNTERS

DESCRIPTION/BACKGROUND

Telemedicine encounters with clinicians require patients to have an active email address. The link for the Video Visit will live in your MyChart account and will also be sent to your email address.

If you do not get the email (usually it takes less than a minute to arrive) have the scheduler double-check the email address and try to resend.

The Service Desk (484-580-1080) takes patient calls and can walk you through the process but try calling your office they can help walk you through this on the first call.

YOUR WORKFLOW

TELEMEDICINE ENCOUNTERS USING MYCHART

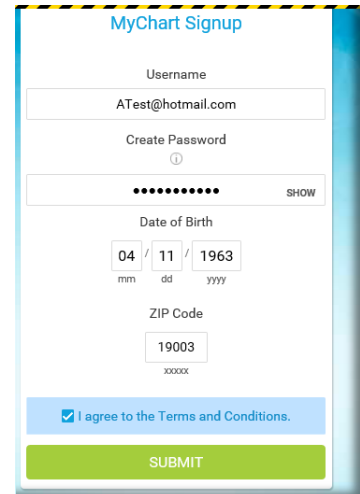
1. You will receive an email link to complete registration for MyChart and to complete eCheck In process

donotreply@mlhs.... **Activate your My Main Line Health Chart account!**

Click on Sign Up for my Main Line Health Chart

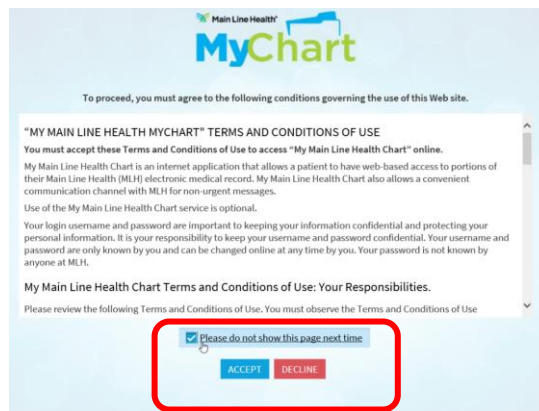
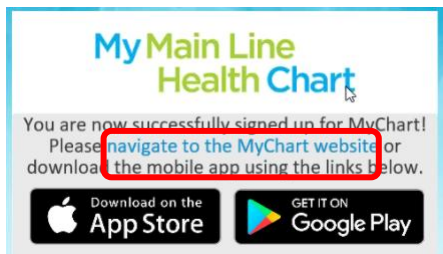
SIGN UP FOR MY MAIN LINE HEALTH CHART

1. You must create a password, fill in your date of birth and zip code. You also must check the box to agree to the **Terms and Conditions**.



The image shows a screenshot of the MyChart Signup form. It includes fields for Username (ATest@hotmail.com), Create Password (with a strength indicator and a SHOW button), Date of Birth (04 / 11 / 1963), and ZIP Code (19003). There is a checkbox for "I agree to the Terms and Conditions." and a green SUBMIT button at the bottom.


2. Once successfully signed up, you can continue to the MyChart website by clicking on "Navigate to the MyChart website" **OR** download the app for Apple or Android devices. If continuing to the website, accept the terms and conditions once again.




- You will have the opportunity to confirm email and text notifications.

Confirm Your Notification Settings

Please take a moment to confirm your notification settings.



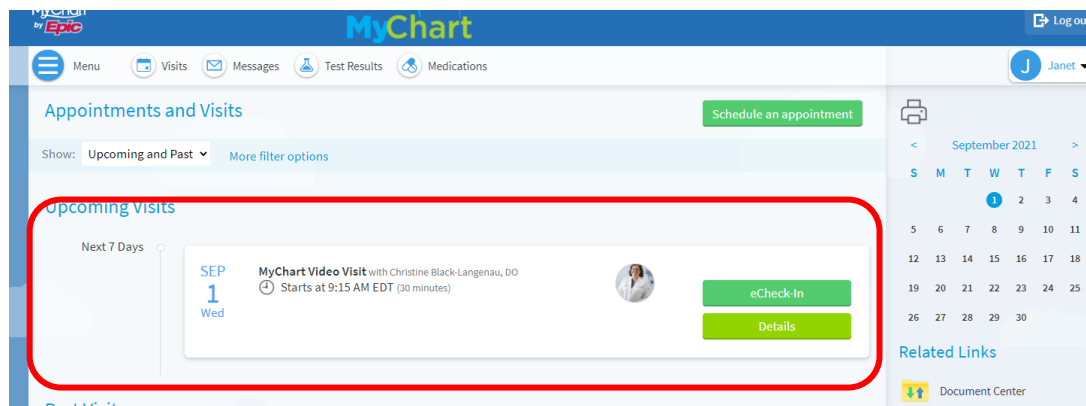


All email notifications are active.

☐ Enable All Text Notifications

*For text message alerts, message and data rates may apply.

- On the **Appointment Details**, take note of the **eCheckin** section and Click on that function to prepare for your upcoming appointment. You **MUST** complete the ECheck-in 1-7 days prior to that appointment date.



- During the **eCheck-In** process, you will verify your personal information, medications, allergies, health issues, travel history, any questionnaires, and consent form for the visit.

eCheck-In

Personal Info Medications Allergies Health Issues Sign Documents Travel History Questionnaires

Verify Your Personal Information

Contact Information

123 Red IN
ARDMORE PA 19003
Going somewhere for a while?
[Add a Temporary Address](#)

215-789-1234
Not entered
Not entered
epic@epic.com

Details About Me

Preferred Name
Not entered
Sex Assigned at Birth
Not entered
Marital Status
Married
Religion
Not entered

Gender Identity
Not entered
Sexual Orientation
Not entered
Language
English

☒ This information is correct

EDIT **EDIT**

NEXT **FINISH LATER**

Personal Info – will be reflected and if you need to make any changes and/or update, use the Edit button

- once completed click in box by This information is correct
- Then click on “Next” to move to next section

Personal Info Medications Allergies Health Issues Sign Documents Travel History Questionnaires

Current Medications

Please review your medications and verify that the list is up to date. **Call 911 if you have an emergency.**

You have no medications on file.

+ ADD A MEDICATION

Medications You Asked to Be Added

Medications will not be added until your provider reviews them in a future visit.

LOSARTAN-HYDROCHLOROTHIAZIDE
ORAL
[Learn more](#)
Started taking on May 1, 2020

Remove

Select a Pharmacy for This Visit

You have no pharmacies on file.

+ Add a pharmacy

☒ This information is correct

BACK **NEXT** **FINISH LATER**

Current Medications

- enter your medication information by clicking on Add A Medication and answer associated questions
- enter your Pharmacy information by clicking on Add a Pharmacy
- once completed, click in box to indicate This information is correct

Click Next to move to next section

Allergies – enter your allergy information

- Enter your information by clicking on Add An Allergy
- Once completed, click on the box to indicate This information is correct
- Click Next to move the next section

The screenshot shows the 'eCheck-In' interface for the 'Allergies' section. At the top, a progress bar highlights 'Allergies' among other sections: Personal Info, Medications, Allergies, Health Issues, Sign Documents, and Travel History. Below the progress bar, a message states: 'Please review your allergies and verify that the list is up to date. Call 911 if you have an emergency.' A large grey box indicates 'You have no allergies on file.' Below this is a dashed box with a '+ ADD AN ALLERGY' button. Further down, a checkbox labeled 'This information is correct' is checked. At the bottom, three buttons are visible: 'BACK', 'NEXT', and 'FINISH LATER'. The 'NEXT' button is highlighted with a red rectangle. A 'BACK TO THE HOME PAGE' link is at the bottom right.

Health Issues – enter any health issue you may have

- Click on Add a Health Issue
 - Window will open for you to enter your health issue
 - You may receive a drop down menu to make your selection
- Once completed, click on the box to indicate This information is correct
- Click on Next to move to next section

The screenshot shows the 'eCheck-In' interface for the 'Health Issues' section. The progress bar highlights 'Health Issues'. A message states: 'Please review your health issues and verify that the list is up to date. Call 911 if you have an emergency.' A large grey box indicates 'You have no health issues on file.' Below this is a dashed box with a '+ ADD A HEALTH ISSUE' button. Further down, a checkbox labeled 'This information is correct' is checked. At the bottom, three buttons are visible: 'BACK', 'NEXT', and 'FINISH LATER'. The 'NEXT' button is highlighted with a red rectangle. A 'BACK TO THE HOME PAGE' link is at the bottom right.

Sign Documents – you will need to electronically sign the above documents by clicking on **Review and Sign**

The screenshot shows the 'MyChart' interface for the 'Sign Documents' section. The progress bar highlights 'Sign Documents'. A message states: 'Please review and address the following documents. There may be additional documents to sign at the clinic.' Below this, there are four document cards: 'CE Prospective Auth Reg', 'HIPAA Notice of Privacy', 'Office Authorization', and 'Office PHI'. Each card has a 'Review later' button and a 'Review and sign' button. The 'Review and sign' button for the 'CE Prospective Auth Reg' card is highlighted with a red rectangle. At the bottom, there are 'Next', 'Back', and 'Finish later' buttons, and a 'Back to the home page' link.

- To successfully complete the ECheck-in, all form(s) **MUST** be completed
- Click on **Review and Sign** and the form will present itself for your review and some questions to be answered
- To electronically sign the form
 - Click in the box By clicking this box I understand and acknowledge that I am signing this document electronically
 - Enter your relationship to the Patient, if you are the patient you may enter "Self"
 - Click in the box Signature of Patient and you will see your name

When directed to my satisfaction, I voluntarily and freely consent to the above and accept its terms.

(Required)

* ☒ *By clicking this box I understand and acknowledge that I am signing this document electronically."*

Relationship to Patient

* self **(Required)**

Signature of Patient or Authorized Representative

 April Test
Signature generated for April Test at 05/13/2020 08:34 PM **(Required)**

CONTINUE

CLEAR FORM

CANCEL

- Once all forms have been signed, Click Continue
- You will be brought back to the Document Page reflecting all your documents have been signed
- Click Next to Move to next section

eCheck-In

Personal Info

Medications

Allergies

Health Issues

Sign Documents

Travel History

Trips outside the country
Please update the trips you have taken since April 13, 2020.

You have no trips on file.

+ ADD A TRIP

☒ This information is correct

BACK
NEXT
FINISH LATER

BACK TO THE HOME PAGE

Travel History – enter any trip information

- Click on Add a Trip if you have done any traveling since the identified date
 - If you have not traveled, you do not need to enter any information

- Once completed, click the box to indicate This information is correct
- Click on Next to move to the next section

eCheck-In

Personal Info Medications Allergies Health Issues Sign Documents Travel History Questionnaires

Communicable Disease Screening

For an upcoming appointment with on 5/15/2020

* Indicates a required field.

* Do you have any of the following symptoms?
Select all that apply.

None of these Abdominal pain Bruising or bleeding Chills Cough Diarrhea Fever Joint pain Loss of smell
Loss of taste Muscle pain Rash Red eye Severe headache Shortness of breath Sore throat Vomiting Weakness

* In the last month, have you been in contact with someone who was confirmed or suspected to have Coronavirus / COVID-19?

Yes No / Unsure

CONTINUE FINISH LATER CANCEL

Questionnaire will present for you to answer the two questions by clicking on the appropriate response(s).

- Once completed, click Continue
- Below screen will present to review your answered questions on the questionnaire
- Click Submit

eCheck-In

Personal Info Medications Allergies Health Issues Sign Documents Travel History Questionnaires

Communicable Disease Screening

For an upcoming appointment with on 5/15/2020

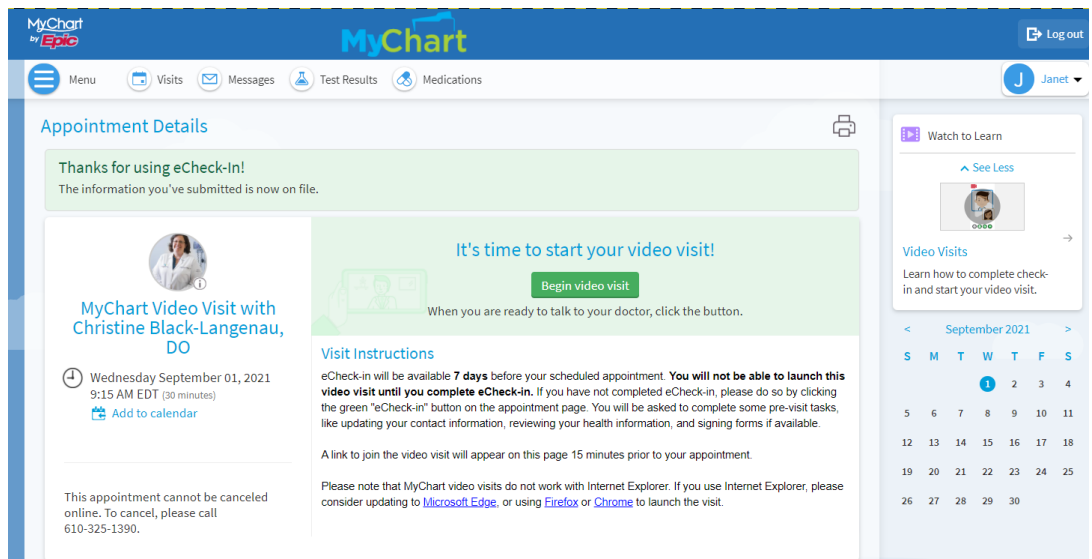
Please review your responses. To finish, click Submit. Or, click any question to modify an answer.

Question	Answer	
Do you have any of the following symptoms?	None of these	
In the last month, have you been in contact with someone who was confirmed or suspected to have Coronavirus / COVID-19?	No / Unsure	

BACK SUBMIT FINISH LATER CANCEL

6. On the day of your appointment and at the appointment time:

- **Sign into your MyChart Account**
- **Click on your appointment for today**
- **Click on Begin Video Visit.**



7. You will be brought to a web page **Epic Telehealth**, shown below. Once the Provider joins the meeting; the session will begin.

