## Welcome to Modern Day House Calls eVisit Tutorial

The following information will show you what you can expect when you first log in to our Modern Day House Calls CareSpan Clinic. When you schedule your first eVisit appointment with us, we will set up your patient account.

Once it is created, you will receive an automated email that looks similar to the image below with your username and password and a link to take you directly to your patient portal page. This email sometimes goes to your Spam mail so please check there if you do not see it in your inbox. Also, please be aware that your appointment will not work with Internet Explorer. We recommend Google Chrome.





When logging in for the first time, you will be asked to read several of consent forms and to sign them (virtually) by clicking a consent button. Click on the red buttons and the document will pop open.

| MODERN DAY<br>HOUSE CALLS<br>Welcome Health Record My Account -  |                    | Patient: Test Patient<br>Local Time: 11:25:15 AM (CDT)<br>Modern Day House Calls<br>Logout |
|--|--------------------|--|
| Privacy and Consent Forms - Test Patient<br>The following documents must be signed before you can use the CareSpan clinic. |                    |  |
| Documents Requiring Signature  |                    |  |
| Telemedicine Informed Consent  | Signature Required | View and Sign  |
| Summary Notice Privacy Practices   | Signature Required | View and Sign  |
| Terms of Service   | Signature Required | View and Sign  |
| You have previously signed the following documents. No action is required.   |                    |  |
| Signed Documents   | Last Signed        |  |



Please read each document and scroll all the way down. At the bottom, you will see a checkbox. Click in the checkbox to insert a check and click the consent button to sign. Repeat this process to complete all of the required documents in the list. Now you are ready for your upcoming eVisit.

## guaranteed or assured. 5. I understand that my healthcare information may be shared with other individuals for scheduling, billing and the overall management of my medical treatment. Others may also be present during the consultation other than my health care provider and a consulting health care provider in order to operate the video and diagnostic equipment. The above-mentioned people will all maintain confidentiality of the information obtained. I further understand that I will be informed of their presence in the consultation and thus will have the right to request the following: (1) omit specific details of my medical history/physical examination that are personally sensitive to me; (2) ask nonmedical personnel to leave the telemedicine examination room; and/or (3) terminate the consultation at any time. 6. I understand that I may reside or be located close to, or physically at great distance from, my telemedicine health care provider. I agree that by engaging in a telemedicine consultation and/or treatment, that I will be subject to and abide by the laws and regulations of the jurisdiction of licensure of the telemedicine healthcare provider, just as if I were present in his or her physical location. Patient Consent To The Use of Telemedicine and Digital Health Services I have read and understand the information provided above regarding telemedicine and digital health care, have discussed it with my physician or such medical assistants as may be designated, and all of my questions have been answered to my satisfaction I have read this document carefully and understand the risks and benefits of telemedicine consultation and digital health care and have had my questions regarding these methods explained. I hereby give my informed consent to participate in a telemedicine / digital health visit under the terms described herein. By checking the box below and affixing my digital signature, I hereby state that I have read, understood, and agree to the terms of this document: "Informed Consent for Carespan®-Enabled Telemedicine and Digital Health Services." Test Patient I agree to these terms. Informed Consent for Telemedicine Services I Do Not Consent Download Print



Once we schedule an appointment for you, you will receive a confirmation email similar to this one below. The email will include your appointment date and time and a link to take you directly to your scheduled eVisit. Just click the link (or copy and paste it into your browser) and you will be taken into your appointment (encounter).

| MODERN DAY<br>HOUSE CALLS  |  |  |  |  |
|--|--|--|--|--|
| Appointment Details  |  |  |  |  |
| Patient Name: Molly Test<br>Date: <u>05/03/2019</u><br>Time: 10:55 AM - 11:55 AM CDT   |  |  |  |  |
| If you are unable to keep this appointment please log in to CareSpan and cancel or call your doctor.   |  |  |  |  |
| You may go to this appointment 15 minutes before the assigned time and up to 15 minutes afterwards.  |  |  |  |  |
| To login in to this appointment automatically, click the following link:<br>https://modernday.carespan.clinic/login/welcome/jdONbaluJ8TVfj9CXqdd |  |  |  |  |
| If your default browser is not Google Chrome, cut and paste this link into Chrome for best results.  |  |  |  |  |
| NOTE: CareSpan will NOT work with Microsoft Internet Explorer.   |  |  |  |  |

Please log into your appointment 15 minutes before your appointment. The link to your appointment is active for 15 minutes before and 15 minutes after your scheduled appointment start time.



Once in the appointment you will first be asked to tell us about your current or existing medical conditions. Click the + next to each category where you have symptoms to tell us about. When your appointment is about to start, click on the "Go to Encounter" button. Your practitioner will finish the forms with you.

| MODERN DAY<br>HOUSE CALLS  | Local Time: | 07:04:48 PM (CDŤ)<br>Logout     |
|--|-------------|---------------------------------|
| Medical Conditions   |             |                                 |
| If there have been any changes in your medical status since your last visit, please indicate them in the proper category below. If not, just click 'Enter Exam Room'.<br>To expand a category, click the '+' sign. When you have finished updating your medical status, scroll to the bottom and click 'Save & Go To Exam Room'.<br>Go To Encounter >> |             |                                 |
| Blood and Lymph Nodes Bones, Joints and Muscles  |             |                                 |
| + Ears   |             |                                 |
| Eyes Female Reproductive System  |             |                                 |
| + General Metabolism   |             |                                 |
| + General Well-being   |             |                                 |
| + Genitals and Urinary Tract   | ^ <b>^</b>  | জ্ঞা <i>বে বার্কা 7:04 PM</i> 🖂 |



You may be asked if you want to allow our software to use your microphone and your webcam. This is usually only needed at the first visit. If you get this pop-up box, please click allow.



When you get into the eVisit, you will see yourself on the screen and once the provider joins you will see the provider and a smaller image of yourself in the upper left corner. Picture can be taken and images stored for reference. You can even write or draw on the photos to point out specific areas and describe symptoms.





www.ModernDayHealthCare.com info@MDHC-LLC.com (605) 250 1200 Once your appointment is complete, your practitioner will fax any needed prescriptions or orders to your preferred pharmacy, lab or imaging center and arrange for any follow up visits.

When your examination is complete simply click the "End Encounter" button seen in the upper right-hand corner and your appointment/video connection will be ended.

| MODERN DAY<br>HOUSE CALLS          |                   | Today's Da<br>Elapsed Tir | me: 00h 25m ; os |
|------------------------------------|-------------------|---------------------------|------------------|
| VIDEO CONFERENCE                   |                   | ENCOUNTERS - ID: 81892    |                  |
|                                    | PATIENT CLINICIAN |                           |                  |
|                                    |                   | DIAGNOSTIC DATA IMAGES    |                  |
|                                    | HEIGHT            | WEIGHT                    | BP               |
|                                    | -                 | •                         | -                |
|                                    | GLUCOSE           | ТЕМР                      | PULSE            |
|                                    | •                 | •                         | -                |
|                                    | PO2               | DESD                      |                  |
|                                    | -                 | -                         |                  |
|                                    |                   |                           |                  |
|                                    |                   |                           |                  |
|                                    |                   |                           |                  |
|                                    |                   |                           |                  |
|                                    |                   |                           |                  |
|                                    |                   |                           |                  |
|                                    |                   |                           |                  |
| Sound 1 Tracings 1 SOUNDS Record 0 | Image 🕇           | IMAGES                    |                  |
|                                    |                   |                           | 107 PM           |

We look forward to seeing you at your next eVisit! Call us at (605) 250 1200 or schedule your appointment online by clicking here: <u>https://moderndayhealthcare.com/schedule-an-appointment</u>



www.ModernDayHealthCare.com info@MDHC-LLC.com (605) 250 1200