

New Patient Instructions to CARE for the Bay Area's Patient Web Portal:

1. Once you have logged in, go to the Details tab and select 'My details' and you will be automatically directed to your 'Personal information.'
2. Click the 'Edit' button in each section to update your
 - a. Personal Information
 - b. Phones and devices
 - c. Emergency contact

The screenshot shows the 'Personal information' section of the patient web portal. The user is identified as Karen Test (Number: 10013). The 'Personal information' section includes fields for Title, First name (Karen), Last name (Test), Address (555 Knowles Dr Ste 212), City (LOS RATOS), State (CALIFORNIA), and Zipcode (95031). The 'Phones and devices' section includes fields for Home number, Work number, and Mobile number, each with a checkbox for 'Preferred #' and 'Receive Voice-Mail'. The 'Emergency contact' section is partially visible at the bottom.

3. Once editing is complete, click the 'Save' button
4. To change your password, click the 'Edit' button
 - a. Enter your current password
 - b. Enter in the New Password
 - c. Re-enter in the New Password in the Confirm Password section

The screenshot shows the 'Email and password' section of the patient web portal. It includes instructions for changing the user's email and password. The 'Current password' field is empty, the 'E-mail' field contains 'patientcare@care4ba.com', and the 'New password' and 'Confirm password' fields are empty. The footer indicates '© MedwoodMedical 2017 - V 1.3.9'.

5. Go to the 'My Forms' tab; Once at the "My Forms" page, select the '+ Add' button next to the appropriate form
 - a. Insurance Information
 - b. ASRM Infertility History Form
 - i. Fill out whichever form is applicable to you (i.e. Female, Male). If you have a partner who will be doing treatment with you, have them fill one out as well (they do **not** need to create a new user name a login).
 - c. Preferred Pharmacy Information



Fill out a new form

Do this only if you've been asked to do so by your doctor, a nurse, or clinic administrator

Insurance Information
If you would like us to determine the benefits your insurance policy provides, click the '+ Add' button to the right.

ASRM Male Infertility History Form
To enter the male history, click the "+ Add" button to the right. Use the "Submit" button when all fields are completed; you will no longer be able to edit the information. Click the "Save" button if the form is not yet complete.

Preferred Pharmacy Information
Please provide the contact information of the pharmacy that you choose to send prescriptions.

ASRM Female Infertility History Form
To enter the female history, click the "+ Add" button to the right. Use the "Submit" button when all fields are completed; you will no longer be able to edit the information. Click the "Save" button if the form is not yet complete.

+ Add

+ Add

+ Add

+ Add