

https://www.myescreen.com/v3/

@screen.

MYeSCREEN

Scheduling Tests

Step 1

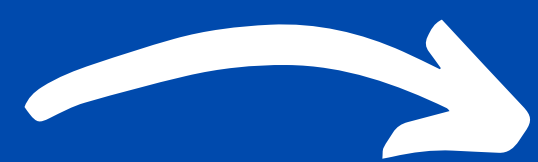
On the menu on the left side...

- HOME
- INBOX
- MESSAGING
- REPORTS
- HEALTH-eSCREEN SERVICES
- SCHEDULING
- HELP
- DOCUMENTS
- RANDOMS
- ACCOUNT INFORMATION
- USER SETTINGS
- LOG OFF



go to 'Scheduling'...

- HOME
- INBOX
- MESSAGING
- REPORTS
- HEALTH-eSCREEN SERVICES
- SCHEDULING**
- HELP
- DOCUMENTS
- RANDOMS
- ACCOUNT INFORMATION
- USER SETTINGS
- LOG OFF



go to 'Schedule An Event'

- HOME
- INBOX
- MESSAGING
- REPORTS
- HEALTH-eSCREEN SERVICES
- SCHEDULING
 - SCHEDULE AN EVENT**
 - FIND/EDIT EVENT
- HELP
- DOCUMENTS
- RANDOMS
- ACCOUNT INFORMATION
- USER SETTINGS
- LOG OFF

Step 2

You will now be on the DONOR INFO page.

DONOR INFO

BACK

NEXT: SELECT A CLINIC

EMPLOYER

Master-Med LLC - DEMO ACCOUNT - Bensenville

REASON FOR TEST - DRUG TESTING

- Pre-employment
- Random
- Post Accident

- Periodic Medical
- Promotion
- Return to Duty
- Diversion

- Followup
- Transfer
- Reasonable Suspicion/Cause
- Other

Specify reason

TYPE OF TEST - DRUG TESTING

- DOT/FEDERAL TESTS
- NON-DOT TESTS

REASON FOR SERVICE - OCCUPATIONAL HEALTH

- New Certification
- Recertification
- Follow-up

- Other
- Site Access
- Pre-employment

- Return to Duty
- Surveillance

TYPE OF SERVICE - OCCUPATIONAL HEALTH

Physical

- DOT Physical

1. Select the REASON FOR TEST.
2. Choose TYPE OF TEST (DOT for all truck drivers).
3. Check off which test you want (Drug, Alcohol, or both).
4. Select Regulation for DOT/FEDERAL TESTS (by default it is already selected as FMCSA).

You have the option to schedule a medical card as well. Otherwise leave this blank.

REASON FOR TEST - DRUG TESTING

- Pre-employment
- Random
- Post Accident
- Periodic Medical
- Promotion
- Return to Duty
- Diversion
- Followup
- Transfer
- Reasonable Suspicion/Cause
- Other

TYPE OF TEST - DRUG TESTING

- DOT/FEDERAL TESTS
- NON-DOT TESTS

- DOT urine collection for drug test
- DOT Breath alcohol test

Please select a Regulation

- FAA
- FMCSA
- FRA
- FTA
- PHMSA
- USCG

Scroll down to the bottom and add the donor's/driver's information.

DONOR

* Indicates Required Field

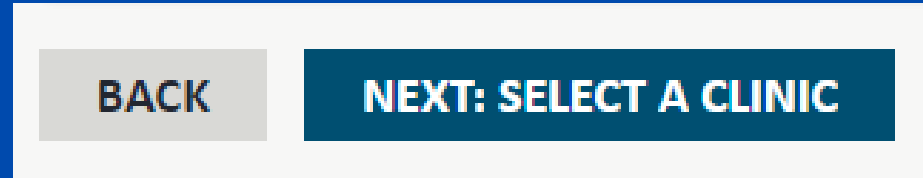
First Name*	Day Phone
<input type="text" value="John"/>	(<input type="text" value="630"/>) <input type="text" value="422"/> - <input type="text" value="7497"/> Ext. <input type="text"/>
Middle Name	Evening Phone
<input type="text" value="David"/>	(<input type="text"/>) <input type="text"/> - <input type="text"/> Ext. <input type="text"/>
Last Name*	Email Address
<input type="text" value="Doe"/>	<input type="text" value="johndoe@gmail.com"/>
Social Security Number	Donor ID
<input type="text" value="111"/> - <input type="text" value="22"/> - <input type="text" value="3333"/>	<input type="text" value="ILD16469793487"/> <input style="border: none; padding-left: 10px; font-size: small; vertical-align: middle;" type="text" value="Drivers License"/> ▼
Date of Birth	Cost Center / Job Code
<input type="text" value="11"/> / <input type="text" value="11"/> / <input type="text" value="1990"/> MM/DD/YYYY	<input style="border: none; padding-left: 5px; font-size: small; vertical-align: middle;" type="text" value="~Select~"/> ▼ <input style="background-color: #cccccc; width: 100px; height: 20px; border: none;" type="text"/>

When entering the DONOR ID, select 'Drivers License' from the drop down menu (Choose this if you have a CDL as well).

Also add the license state abbreviation in front of the license number. (I used Illinois as an example above)

Step 3

Click on 'Next: Select a Clinic' at the bottom.








You can enter a more exact address, or just search by zip code.

A screenshot of a web form titled 'SELECT CLINIC'. The form has a light gray header with the title on the left and a 'BACK' button on the right. Below the header, there are three input fields: 'Address', 'City', and 'State/Province'. The 'State/Province' field is a dropdown menu with '-- Choose --' and a downward arrow. Below these fields, there are two more input fields: 'Postal Code' and 'Distance'. The 'Postal Code' field contains '60045' and the 'Distance' field contains '30'. To the right of the 'Distance' field is a dropdown menu with 'Miles' and a downward arrow. At the bottom of the form, there are two buttons: 'SEARCH' (dark teal) and 'SHOW DEFAULT CLINICS' (light gray).


Click 'Search'

Now you will see a list of all the clinics in the network within the search radius/distance. (The furthest you can search by is 60 miles).

This is an example of what you would see...

	CLINIC NAME	DRUG	DISTANCE	PHONE	ADDRESS	CITY	STATE/PROVINCE	POSTAL CODE
▼	Corporate Wellness Ptrs		5 m	8479907220	716 S. Milwaukee Avenue	Libertyville	IL	60048
▼	Concentra Medical Center - Wheeling		7 m	8474196974	544A W DUNDEE RD	WHEELING	IL	60090
▼	PromptMed UC - Waukegan		10 m	8479018400	724 N. Green Bay Road	Waukegan	IL	60085
▼	Vista Medical Center East		10 m	8473602860	1324 N. Sheridan Road	WAUKEGAN	IL	60085
▼	InOut Labs		14 m	8476577900	6449 DEMPSTER ST	MORTON GROVE	IL	60053

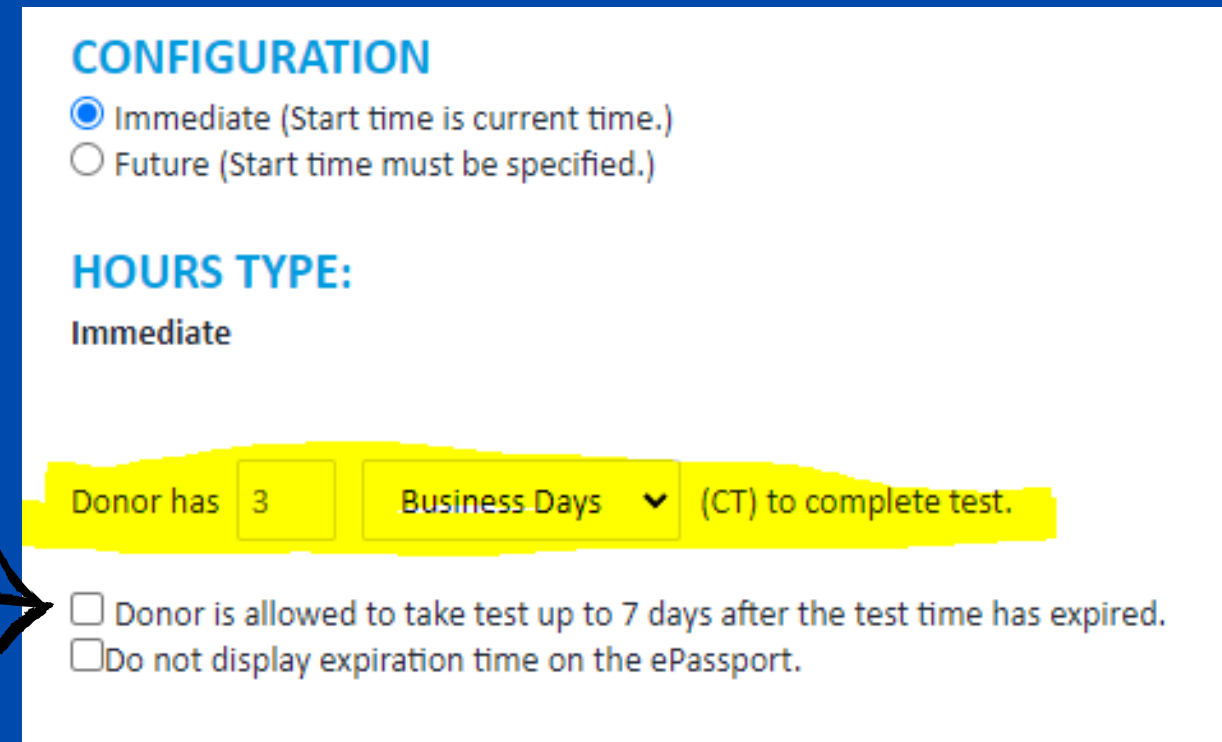
If you click on the drop down menu for a clinic you can see the hours that they are open.

▲	InOut Labs		14 m	8476577900	6449 DEMPSTER ST	MORTON GROVE	IL	60053
Clinic Attributes:		Hours:						
Observed Collections	M:	8:30 AM - 3:00 PM						
Public Transportation	T:	8:30 AM - 3:00 PM						
Requires Appointment	W:	8:30 AM - 3:00 PM						
	Th:	8:30 AM - 3:00 PM						
	F:	8:30 AM - 3:00 PM						
	Saturday:	Closed						
	Sunday:	Closed						

Step 4

If you are ready to choose a clinic, click on the clinic name.

Here you can set how long the epassport (schedule) will be good for.



The screenshot shows a configuration form with the following sections:

- CONFIGURATION**
 - Immediate (Start time is current time.)
 - Future (Start time must be specified.)
- HOURS TYPE:**
 - Immediate
- Donor has** **Business Days** - Donor is allowed to take test up to 7 days after the test time has expired.
- Do not display expiration time on the ePassport.

You can select this option as well, that way if the donor happens to go after his epassport expires he will still be able to take the test.

The rest of the fields you can leave as it is.

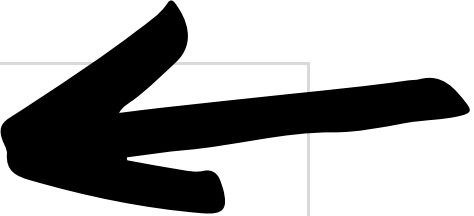
Click on 'Confirm Scheduled Event' at the top.

Step 5

On this page you can send the epassport to the donor's email and phone number. (You can also print the epassport out to give to the donor)/

PRINT ePASSPORT

ePASSPORT NOTIFICATION OPTIONS

Email: 

Type email or emails. When adding more emails, separate each one with a ;

Note: To email multiple recipients, separate email addresses with a semicolon.

Would you like to send this ePassport via text message?
Note: If you select the option to text the ePassport to the participant, the participant will receive a text message instructing them to click a link to open their ePassport.

SEND

INSTRUCTIONS

Option 1: Print out this sheet and send with the participant to the clinic.

Option 2: Email the ePassport to the participant.

COPY EVENT **DONE**

 Check the box and enter the donors phone number.

Click 'Send' and the donor will receive the epassport.