

## HIGH COUNTRY NEUROLOGY

### INSTRUCTIONS FOR FILLING OUR NEW PATIENT FORMS ONLINE

1. Go to your patient portal for our practice (please call our staff at 828-262-0600 if you have not been granted access or are having problems getting on the portal).
2. Click on the *PATIENT FORMS* tab.
3. Click on *NEW PATIENT* on the left.
4. Under *PATIENT FORMS* in the center of your screen, click on the blue link for the *INITIAL NEW PATIENT HISTORY FORM*.
5. Fill the form out by clicking through the form, note that there are multiple sections labeled "other" where you can add information not available as a choice in the form. Don't worry about spelling, just do your best. When entering your medications, please try to enter the medication name, dose and how you take it. When completed, click on *SUBMIT* at the bottom of the form. Your neurologist will go over the information on this form during your appointment, and any changes needed can be made then. When done, close this window/form by clicking the "X" in the top right corner.
6. Now click on the blue link for the *DESIGNATED INDIVIDUALS AUTHORIZATION FORM*.
7. Please type into the available boxes the names of any individuals you would like to have access to your health information in our office, this would include the ability to discuss your neurological illness over the phone. This usually might include a spouse, child or whoever has your health care power of attorney. Please enter their relationship to you in the boxes on the right. Then click on the *CLICK TO SIGN* box at the bottom, do your best with a signature with your mouse (or finger on your phone) and click OK to save your signature. Then click the *CALENDAR* icon to the right of the *DATE OF SIGNATURE* box and select that date you are signing the form. Finally, click on *SUBMIT* at the bottom. Close the screen with the "X" in the top right corner.
8. Now click on the blue link for the *PRIVACY AND PAYMENT CONSENT FORM*.
9. Please read through this form, and if you agree *CLICK TO SIGN* in the two boxes on the left, and click on *SUBMIT* at the bottom, close with screen with the "X" in the top right.
10. Almost done!! Please take a clear, close up picture of the front and back of your insurance card(s). Click on *CLINIC SHARED DOCUMENTS* at the top of the patient portal page, and then click on *ATTACH DOCUMENTS* on the left. Select "OTHERS" from the drop down menu under category, type "insurance card" under subject, and then click the *ATTACH* button on the right. Now click on the white *CHOOSE FILE* button on the left, find your photo on your computer/phone, select, and click the *ATTACH* button at the bottom. You will have to do this for the front and back of your card.