## Patient Portal

How to create a portal account

# Synovation

During your next office visit, ask the front desk if they can send you a portal invitation.

They will ask for your email, you will receive a portal invitation via your email.

## Email Invitation

Check your email from Synovation Medical Group with the title "Register with Synovation Medical Group"

Please Note: Check your spam/junk inbox as well.

Try It: Click on the Register Here button.

Register with Synovation Medical Group		
SG Synovation Medical Group <donotreply@myhealthrecord.com></donotreply@myhealthrecord.com>		
To:		
Dear test,		
We are excited to invite you to join our patient portal. On the portal, you can		
View your upcoming appointments		
Securely communicate with your provider		
View your health information		
Sign up for an account to get anytime, anywhere access to all of the above – and more! It's an easy way to stay connected and communicate with us about your healthcare.		
Let's get you started. To register and start taking advantage of the patient portal, visit this link:           Register Here		
This link will expire in 14 days. If your link expires or you need assistance with registration, please call our office.		
After you register, go to <a href="https://myhealthrecord.com">https://myhealthrecord.com</a> anytime to visit our port		
Thank You,		
Synovation Medical Group		
Note: Please do not reply to this email. If you have any questions or concerns, please contact our office. You received this email because you provided us with the email address: <u>synovationmedicalgroup.com</u> . If you believe you received this message in error, please contact us immediately.		

## Creating Portal Account

Once you click on the link from the invitation email, a window will open.

Try It: Fill out your personal information. It will need to match what is on file on our system.

Please Note: if you get an error message, there might be some information that needs to be changed on our end, without those changes, you will not be able to create an account.

Those changes can take up to 24 hours to take effect before you can register for an account using the updated information.

1. Fill out your first name, last name, date of birth and zip code

#### Identification

Please be sure to use the exact information you gave the practice.

First Name (required)
First Name
Last Name (required)
Last Name
Date of Birth (required)
MM/DD/YYYY

Please use MM/DD/YYYY format

Zip Code (required)

Zip Code

Continue

**2.** A message will appear while your account is being created. Then a new page will appear for your user profile.

USERNAME: username should be at least 6 characters with no spaces and no @ symbol.

PASSWORD: passwords need to be at least 8 characters with no spaces and no @ sign. Must include letters and numbers

SECURITY QUESTIONS: Please note: the answers you provide for the security questions are case sensitive, make sure you write down the answers and if the answers have capital or lower-case letters

#### User Profile

Username (required)

username

\*Username should be 6 to 50 characters with no spaces and no @ sign. Letters, numbers and special characters \_.!\$\*= allowed

Password (required)

password

\*Password should be 8 to 20 characters with no spaces and no @ sign. Letters, numbers and special characters \_.!\$\*= allowed. Must include a combination of letters and numbers

Confirm Password (required)

password

Security Question #1 (required)

Please choose

Answer (required)

answer

Security Question #2 (required)

Please choose

Answer (required)

answer

**3.** Once you are done filling out your profile information, click on the blue register button on the bottom right corner of the page.



**4.** You might get a warning if your username has already been taken, please change your username and then click the register button again.



**5.** You will receive an email confirming you have successfully created your account.

Synovation Medical Group welcomes you to MyHealthRecord powered by Greenway Health		
SG	Synovation Medical Group <donotreply@myhealthrecord.com> 8:49 AM</donotreply@myhealthrecord.com>	Ē
To:	▶synovationmedicalgroup.com	
Dear tes	it,	
Welcom	e! Your patient portal account is ready to use. You now have anytime, anywhere access to:	
•	Communicate with your provider	
•	View your health information	
•	And even manage your family's care	
With ou Visit <u>htt</u>	r patient portal, it's easy to stay connected and communicate with us about your healthcare. <u>ps://myhealthrecord.com</u> to access your account.	
The port	tal is a great way to stay informed about your health. Log in today!	
Thank Y	ou,	
Synovat	ion Medical Group	
Note: Pl email be address immedia	ease do not reply to this email. If you have any questions or concerns, please contact our office. You rece ecause you are registered on <u>https://myhealthrecord.com</u> with the email <u>@synovationmedicalgroup.com</u> . If you believe you received this message in error, please contact tely.	eived this t us

**6.** The page will load for a bit and then you will be redirected to the portal: <u>https://myhealthrecord.com</u>



## Logging into the portal

Now that your account has successfully been created, please log into the portal.

**Try It:** Type in your username and password

1. Type in your username and password and then click log in

Log in
Username
Your username
Password
Your password
Log in

2. Once you click on the log in button, you will then get prompted to Accept a Registration Disclaimer

	Synovation Medical Group
Synovation	
	Registration Disclaimer
	IF YOU ACCEPT THE TERMS ABOVE, AS WELL AS THE TERMS OF SERVICE AND PRIVACY POLICY SET FORTH BELOW, CLICK 'I accept' BELOW.
<b>X</b>	The Terms of Service and Privacy Policy are posted on the site and made available to you for your review at any time.
	I accept I decline

3. You are now logged into your dashboard

	Synovation Medical Group			
Synovation	My Health My Messages My Appointments My Profile Pay My Bill			
i Summary	My Health Record 🗘			
🔁 Visits	Your record was last received on 2/22/2019 at 8:42 AM.			
Medications	VIEW All History	Send Download		
Patient Education	test test			
Health History Forms	Vitals Social History	Patient #20092		
Documents & Forms	Date 12/28/2016 BP 140/ 80 Heart Rate 84/min Caffeine			
	Vitals History Alcohol			

### Using the portal

Now that you have successfully logged into the portal, you will want to know how to use the portal.

**Please note:** The main screen will have a basic summary of your chart. Please contact the Medical Records Department directly at 626-696-1490 if you need a copy of your patient charts.

**1.** If you want to message your provider, please click on "my messages" on the top of the page.



2. Once you are in the messages page, click on the new button



**3.** Select your provider from the list of providers



**4.** Choose what you would like to ask



**5.** Type your message and then click send, a message will appear that your message has been sent successfully

👤 To: Seltzer, Andrew	
L From: test test	
Please give us a little more information below before sending	
How can we help you?	
Need my medication	
Maximum subject length is 50 characters.	Change question type
Anything else you would like us to know?	
Type your notes here	
	Attach File Send Cancel
	Attached files will be converted to .PDI

**6.** If you wish to request an appointment, click on "my appointments" tab on the top of the page



**7.** Click on the Request tab and then click on the new button



**8.** Select a location, provider and an availability option.

#### Request Appointment

IMPORTANT: Appointment requests should be limited to non-emergency communications. In case of emergency, call 911 or go to the nearest emergency room.			
Patient	test test		
+ Location	Synovation Medical Group Corona $\sim$		
Provider	Mauro Zappaterra V		
How soon?	First Available V		

**9.** Scroll down on that same page, select your preferred day(s), time preference, what is important to you and a reason for visit and then click the submit button

Preferred Day(s) ☑ Monday ☑ Tuesday ☑ Wednesday □ Thursday □ Friday	
Time ○ No preference ● Morning ○ Afternoon	
What is most important to Physician	/
Reason for visit (required) Test	
	Submit Cancel

**10.** A message receipt will then appear showing your appointment request.

#### **Requested Appointment**

Patient: test test Date Request Submitted: 2/22/2019 Location: Pasadena Rehabiliation Institute / Synovation Medical Group Provider: Mauro Zappaterra How soon? First Available Preferred Day(s): Monday, Tuesday, Wednesday Time: Morning What is important to you? Physician