## Webview

## **Scheduling Appointments**

- 1. Log in to Webview at <a href="https://webview.mckesson.com/RockdaleGaWebView">https://webview.mckesson.com/RockdaleGaWebView</a>
- 2. Enter login and password information.

PRACTICE PARTNER <sup>®</sup> A better way to practice.™
Username: JPublic01 Password: ••••
Are you a new patient? <mark>Click here</mark> to register. If you are a patient and have lost your password, <mark>Click Here</mark> .

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3. From the main window select, APPOINTMENT REQUEST

	CE R <sup>®</sup> A better way to practice. <sup>™</sup>		Patient Chart
Messaging       Inbox       New Message       Sent       Appointments       Appointment Request       Chart       Major Problems       Allergies       Vital Signs       Horspitalizations       Prescriptions       Rx - Current       Notes       Letters       X-Ray       Pathology       Special Studies	ID: 38394	Age: 48	Sex: M

4. Please note that this is for NON-URGENT appointments. If you need an appointment that day, please call the office. Note that the message says we confirm your appointment. It states we will call; we will either call or email you.

Logout		RACTICE ARTNER <sup>®</sup> A better way to practice."			Request A	Appointment
Messaging Inbox	Public, John	I	D: 38394	Age: 48	Sex: M	
New Message Sent Appointments Appointments Appointment Request Chart	l	If you would like to <mark>request a non-urg</mark> assume that an appointment has bee Do not use this form if you need imme	ent appointment, please complet scheduled. We will call you to c diate medical attention. Instead	e the form below and click the subm confirm your appointment. I, call the doctor's office directly.	it button. Please do not	
Major Problems Allergies Vital Signs Hospitalizations Prescriptions		Provider Information Provider:	Select a Provider 🔹 🔫			
Rx - Current		Appointment Date				
Notes Letters X-Ray Pathology Special Studies		● Specific Date: Or ○ (Time Period) In: Day of week:	- • O Days O Weeks O Mor Any Day •	ths		
		Appointment Time				
		After: Before:	Any Time			
		Appointment Reason Reason: Notes:	Submit Plane Close	Ĵ		
			Submit Clear Llose			

Click on the drop down box to select a provider (green arrow). Select a provider from the list.

5. You may click on the button to request a specific date. Click on the small calendar icon to select the date. The calendar opens in a new window

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Logou	Logout			Pick A Date			- • •			
		2	<b>≤</b>	<u>&lt;</u>	Octo	ber 20	<b>)0</b> 8	<u>&gt; &gt;&gt;</u>	-	ice." Request Appointmer
Messa Inbox New Mi Sent Appoin Appoin Appoin Chart	iging essage timents tment Request	Public, John	Sur 5 12 19 26	6 13 20 27	Tue 7 14 21 28	Wed 1 15 15 22 29	Thu         Fr           2         3           9         10           16         12           23         24           30         31	i Sat 4 11 18 4 25		ID: 38394 Age: 48 Sex: M urgent appointment, please complete the form below and click the submit button. Please do not been scheduled. We will call you to confirm your appointment. Immediate medical attention. Instead, call the doctor's office directly.
Major F Allergie Vital Si Hospita Prescr Rx - CL Notos Letters X-Ray Patholc Special	Problems Is Iggns alizations iptions arrent S 99y I Studies					Pr Aţ	ovider Appol (Tit Appoint)	Inform Pro- Specific Day of ntmen E Nent R R	mat rovin c D c D c D c D c D c c c d t D c c d t t t t t t t t t t t t t t t t t	tion tion Ate ate: or or Days Weeks Months eek: Any Day • time fter: Any Time • son: tes: Submit Clear Close
-14	-									

6. Select the date. OR You may select a time period days, weeks, or months in the future.

Logour	D P P	RACTICE A better way to practice.™ ARTNER®		Request Appoint
Messaging Inbox	Public, John	ID: 38394	Age: 48	Sex: M
New Message Sent Appointments Appointments Appointment Request Chart		If you would like to request a non-urgent appointment, please con assume that an appointment has been scheduled. We will call you Do not use this form if you need immediate medical attention. Ins	plete the form below and click the submit b i to confirm your appointment. tead, call the doctor's office directly.	utton. Please do not
Major Problems Allergies Vital Signs Hospitalizations		Provider Information Provider: ALLEN HOWE		
Prescriptions Rx - Current Notes Letters X-Ray Pathology Special Studies		Appointment Date Specific Date: Or • (Time Period) In: 2 • Days • Weeks Day of week: Any Day	Months	
		Appointment Time After: Any Time Before: Any Time		
		Appointment Reason Reason: Notes: Submit Clear Close	*	

7. Add a reason for the appointment and a note if desired. Then click SUBMIT.

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Public, John	ID: 38394	Age: 48	Sex: M
If you w assume Do not u	uld like to request a non-urgent appointment, please con that an appointment has been scheduled. We will call you se this form if you need immediate medical attention. Ins	plete the form below and click the submit to confirm your appointment. tead, call the doctor's office directly.	button. Please do not
	Provider Information Provider: ALLEN HOWE		
	Appointment Date		
	<ul> <li>Specific Date: 10/28/2008</li> </ul>		
	Or		
	○ (Time Period) In: 2    Days ○ Weeks ○ Day of week: Any Day	Months	
	Annointment Time		
	After: Any Time		
_	Before: Any Time 👻		
	Appointment Reason		
	Reason: sore throat		
	Notes:	* *	
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8. You will see a confirmation screen. You will get a phone call or email advising you of your appointment.

Logout	Practice Partner®	A better way to practice."		Request Appointment
Messaging Inbox	Public, John	ID: 38394	Age: 48	Sex: M
New Message Sent Appointments Appointments Appointment Request	Thank you. Your app	pointment request was submitted.		
Chart Major Problems Allergies Vital Signs Hospitalizations				
Prescriptions Rx - Current				
Notes Letters X-Ray Pathology Special Studies				
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