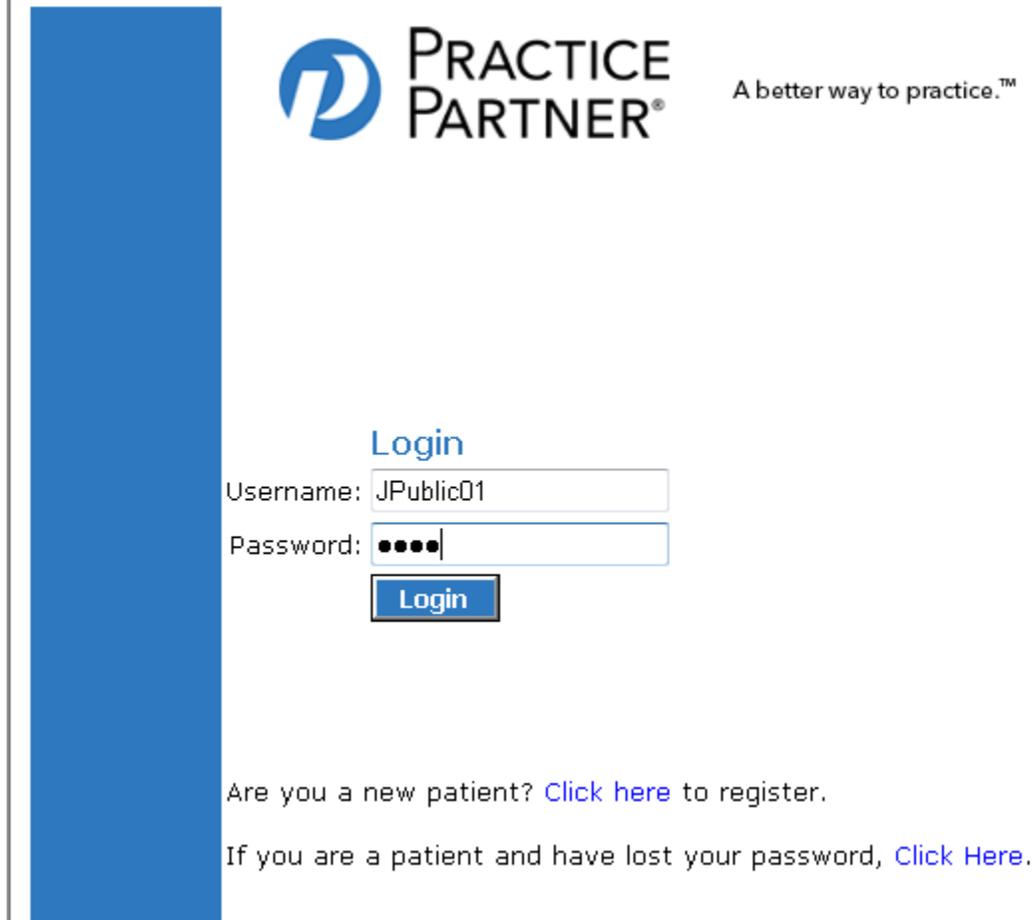


## Webview

### Appointment Check-in

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



 PRACTICE PARTNER® A better way to practice.™

**Login**

Username:

Password:

Are you a new patient? [Click here](#) to register.

If you are a patient and have lost your password, [Click Here](#).



3. From the main screen, click on APPOINTMENTS

The screenshot shows the Practice Partner interface. At the top left is a 'Logout' button. The Practice Partner logo and tagline 'A better way to practice.™' are at the top center. 'Patient Chart' is at the top right. A navigation menu on the left includes: Messaging (Inbox, New Message, Sent), Appointments (Appointments, Appointment Request), Chart (Major Problems, Allergies, Vital Signs, Hospitalizations), Prescriptions (Rx - Current), and Notes (Letters, X-Ray, Pathology, Special Studies). The 'Appointments' menu item is highlighted with a green arrow. The main content area shows patient information: Public, John; ID: 38394; Age: 48; Sex: M.

4. You will see a list of appointments. The upcoming appointment has a button CHECK-IN (green arrow). Click on that button to check in. You may check in 48 hours prior to your appointment.

The screenshot shows the Practice Partner interface with the 'Appointments' list. The 'Appointments' menu item is highlighted in the left navigation menu. The main content area shows a table of appointments for patient Public, John (ID: 38394, Age: 48, Sex: M). The table has columns for Date, Time, Length, Provider, Practice, and a 'Check-In' button. A green arrow points to the 'Check-In' button for the first appointment on 10/28/2008 at 5:00 PM. Other appointments are marked as 'Check-In Completed'.

Date	Time	Length	Provider	Practice	Check-In
10/28/2008	5:00 PM	15	ALLEN HOWE		Check-In
10/02/2008	5:00 PM	15	ALLEN HOWE		Check-In Completed
10/01/2008	12:00 PM	15	ALLEN HOWE		Check-In
08/26/2008	5:00 PM	15	ALLEN HOWE		Check-In Completed
08/22/2008	8:30 AM	15	ALLEN HOWE		Check-In
08/22/2008	8:15 AM	15	ALLEN HOWE		Check-In
08/22/2008	8:00 AM	15	ALLEN HOWE		Check-In
08/15/2008	8:00 AM	15	ALLEN HOWE		Check-In

- The next screen shows demographic information. If correct, click on CONFIRM AND PROCEED. (green arrow) If some information is incorrect, click on CHANGE INFORMATION (red arrow)

Logout

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Check-In, Demographics

Public, John ID: 38394 Age: 48 Sex: M

**Personal Information**

First Name: John  
 Middle Initial: Q  
 Last Name: Public  
 Suffix:  
 Address: 123 Main Street  
 City: Reston  
 State: Virginia  
 Zip: 20191 -  
 Country: USA  
 County: Fairfax

Sex: Male  
 Marital Status: Married  
 Date Of Birth: January 1 1960  
 Social Security #: 222 - 33 - 9999  
 Email Address: ahowe1@cox.net  
 Occupation: Sycophant  
 Employer: Self  
 School:  
 Home: (703) 123 - 4567  
 Work: (703) 987 - 6543 Ext:  
 Cell: ( ) -  
 Pager: ( ) -  
 Fax: ( ) -

Confirm and Proceed Change Information Cancel

- If you need to correct information, click on CHANGE INFORMATION, edit the appropriate fields and then click on CONFIRM AND PROCEED.
- The next screen shows billing and insurance information. You cannot edit these fields, but if they are incorrect click on the box (red arrow) that the information has changed. Then click NEXT. If you check the changed information box the office will get an email indicating that you need to

change the information.

Logout



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Check-In, Insurance

- Messaging
- Inbox
- New Message
- Sent
- Appointments
- Appointment Request
- Chart
- Major Problems
- Allergies
- Vital Signs
- Hospitalizations
- Prescriptions
- Rx - Current
- Notes
- Letters
- X-Ray
- Pathology
- Special Studies

Public, John ID: 38394 Age: 48 Sex: M

Guarantor Information

Patient Relationship To Guarantor: N/A

First Name: John

Middle Initial: G

Last Name: Public

Suffix:

Address: 123 Main Street

City: Reston

State: Virginia

Zip: 20191

Country: USA

Alternate Billing Information:

First Name:

Middle Initial:

Last Name:

Address:

City:

State:

Zip:

Country: USA

Email Address: ahowe1@cox.net

Home: (703) 123 - 4567

Work: (703) 987 - 6543 Ext:

Cell: -

Pager: -

Fax: -

Insurance Plans

Carrier Name: AARP1

Plan:

Insured Name: Public, John Q

Relation To Insured: SELF

Date Of Birth: 01/01/1960

Sex: M

Social Security #: 222-33-0000

Co-Pay: 0.00

Insurance ID: 0000 00 12345

Group Number: 123 45 6789

Override ID:

Employer:

Address:

City:

State:

Zip:

Country:

Phone Number: -

Check here to indicate that some of this information has changed.

Next

Cancel

8. The next screen shows a few questions for your check in. Please answer the questions and then click NEXT. (Please be patient, these screens are a little slow.)

Logout

**PRACTICE PARTNER** A better way to practice.™

Check-In Questionnaire

Public, John ID: 38394 Age: 48 Sex: M

Skip Questionnaire

**Check-In**

1. Has there been any change in your health insurance since your last visit? Please bring a copy of your insurance card with you to the visit.  Yes  No  Don't Know  
If so, please enter changes

2. What is your concern for this visit?

3. Are there any changes to your medications since last time?  Yes  No  Don't Know  
Please list:

Next Cancel

9. When complete:

