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e-Signature Forms for Clinical and Clerical Staff

Cerner Ambulatory PowerChart EDUCATION

AMBMUNSON, DANIELLE - A01111198 Opened by Ambulato

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Completing eSignature Forms

- 1. In PowerChart, navigate to the patient's chart.
- 2. In the top toolbar, click on Patient and then View Images.

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- 3. Click the sign eForm button.
- 4. Click Select Forms.
- 5. Select the form(s) to be signed and click OK.

Select a parent:					
AMBMUNSON,	DANIELLE - 11/14/2018 2	3:59:59 - Traverse Heart & Vaso	cular - TC, Clinio	c, A0054018834	
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Ambulatory Workflo

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All Forms		×
Form Name :		
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Form Name 0303 Confirmation of Informed Consent 11691 Medical Consent for Treatment of Unaccompanied Minor 280 Authorization for Treatment and Release of Medical Information 2413 Informed Consent to Refuse Examination-Treatment-Transfer 3073 Patient Authorization to Release Protected Health Information - Family or Friend	Document Type Consent for Treatment Consent for Treatment Facesheet Other Consent HIPAA Privacy Document	Subjec Confirn Medice Author Other C Patient
	HIPAA Privacy Document	Notice

Note: Clinics that use Tonic e-Registration will collect the Authorization for Treatment and Release of Medical Information and the Patient Authorization to Release Protected Health Information -Family or Friend through that software application.

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Follow the steps below for each of the specific form(s) to be signed:

0303 Confirmation of Informed Consent

- 1. Physician name is embedded.
- 2. Patient signs form.
- 3. Registration clerk selects accept.
- 4. Date/time stamp embedded.
- 5. Witness stamp is embedded.
- 6. Witness date/timestamp is embedded.
- 7. Form closes and saves.

2280 Authorization for the Treatment and Release of Medical Information

- 1. Type X in the appropriate Location box.
- 2. Select OK.
- 3. Form populates on Wacom.
- 4. Patient to use scroll sown arrows to navigate to signature portion.
- 5. Patient Signs using Stylist (Wacom pen).
- 6. After Signing- Click Accept.
- 7. Signee Relationship Box populates Staff Selects Patient from dropdown.
- 8. Date populates.
- 9. Patient skips the initials box by not signing and selecting Accept.
- 10. Box populates for staff to provide a reason if the patient is unable to sign, click OK without entering a value.
- 11. Patient hands Wacom back to staff.
- 12. Staff signs Signature of Witness Box.
- 13. Click Accept and Date will populate.
- 14. Hand Wacom back to patient.
- 15. Patient/Guardian will sign the NOP portion of the form.
- 16. Click Accept.
- 17. Populate Signee Relationship as Patient.
- 18. Select OK.
- 19. Reason NOP could not be obtained box populates for Staff.
- 20. Click OK without entering a value.
- 21. Select OK.
- 22. Form will save and close.

3073 Patient Authorization to Release Protected Health Information

- 1. Registration fills our free text and confirms with patient the list of individuals, relationships, and telephone numbers to release information in the space provided.
- 2. Patient name is embedded.
- 3. Date of birth is embedded.



- 4. Do we (MHC and business associates) have your permission to contact you by the phone number(s) you provided to us?
 - a. Select Yes or No checkbox.
- 5. Do we have your permission to send you unencrypted text or emails, using the contact information you provided?
 - a. Select Yes or No checkbox.
- 6. Patient/legal guardian signs.
- 7. Registration clerk selects Accept.
- 8. Date/time stamp embeds.
- 9. Patient/legal guardian prints name.
- 10. Registration clerk selects OK.
- 11. Signee relationship is defined.
- 12. Registration clerk selects Ok.
- 13. Forms closes and saves.

11691 Medical Consent of Unaccompanied Minor

- 1. Registration clerk enters phone number of patient/legal guardian.
- 2. Patient name embeds.
- 3. Date of birth embeds.
- 4. Patient/legal guardian signs form.
- 5. Registration clerks selects Accept.
- 6. Date/time stamp embeds.
- 7. Signee relationship is defined.
- 8. Registration clerk selects OK.
- 9. Registration clerk prints name of patient/legal guardian.
- 10. Registration clerk selects OK.