

MEDICAL ASSOCIATES *Plus*

THE ROAD TO HEALTHY

How to use your Healow App for a TeleHealth

Pre-Visit Checklist:

- ✓ Download the Healow Application.
- ✓ Ensure you have a private and quite area with good internet connection for your visit.

Get Started:

1. Download the Healow App from the App Store for iPhone or the Google Play Store for Android.



healow 12+
eClinicalWorks LLC
#3 in Medical
★★★★☆ 3.6, 4.9K Ratings
Free

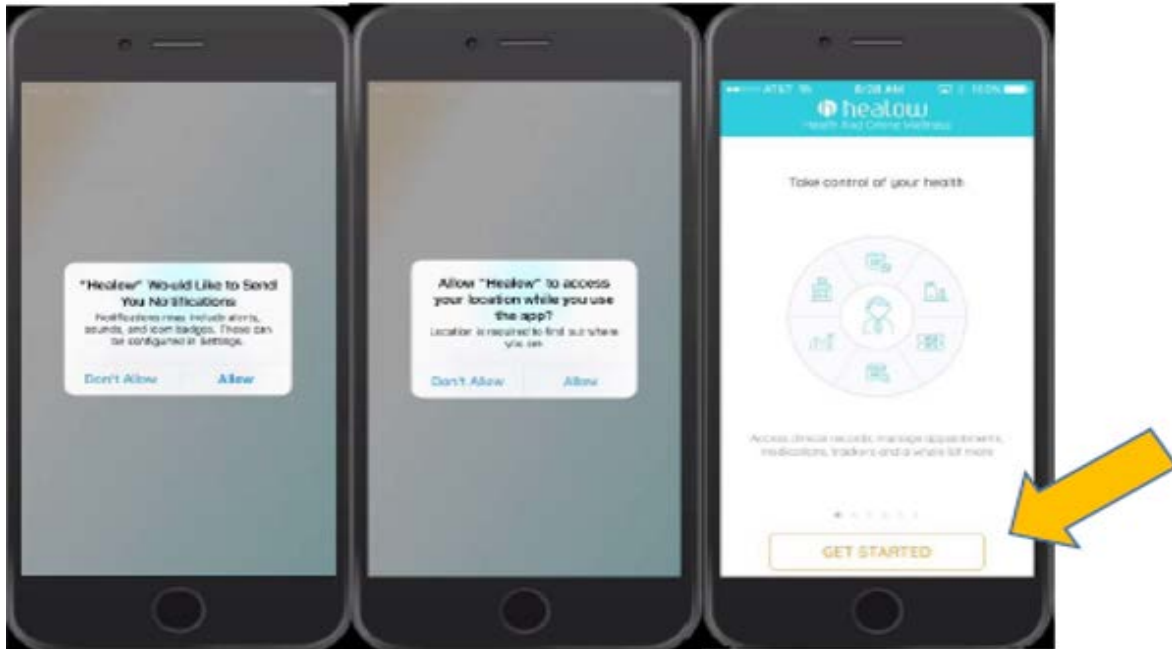


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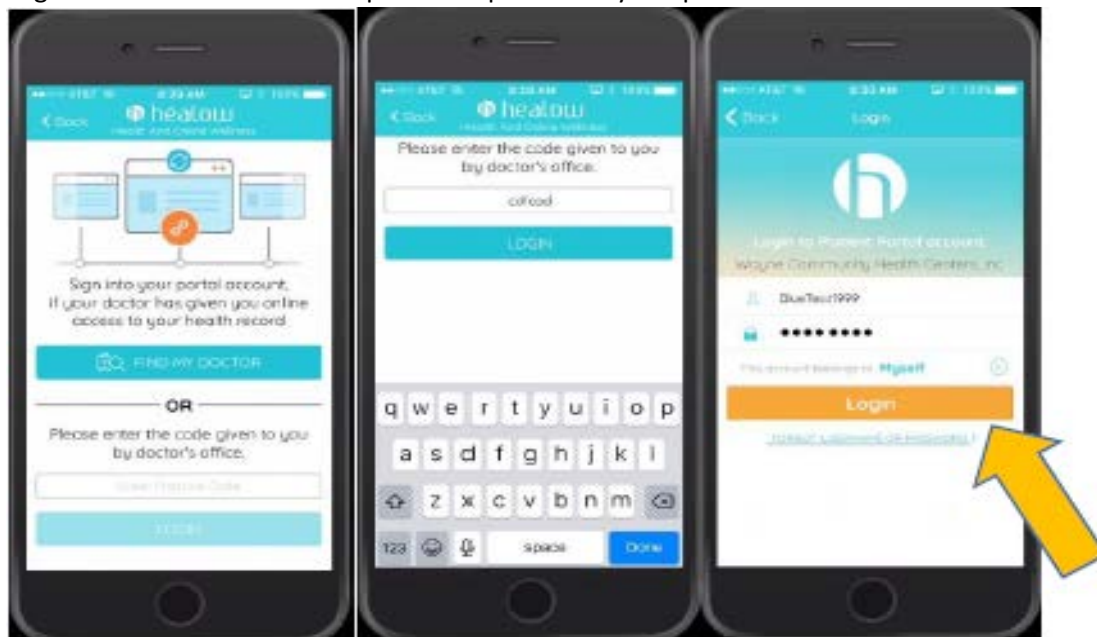
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- Once installed, launch the Healow app. You will be prompted to **Allow** or **Don't Allow** notifications and access to your location. Answer your preferences and then select **Get Started**.



- Search for our practice by provider name or our practice code: (BFIEAA)
- Log in with the username and password provided by the practice.



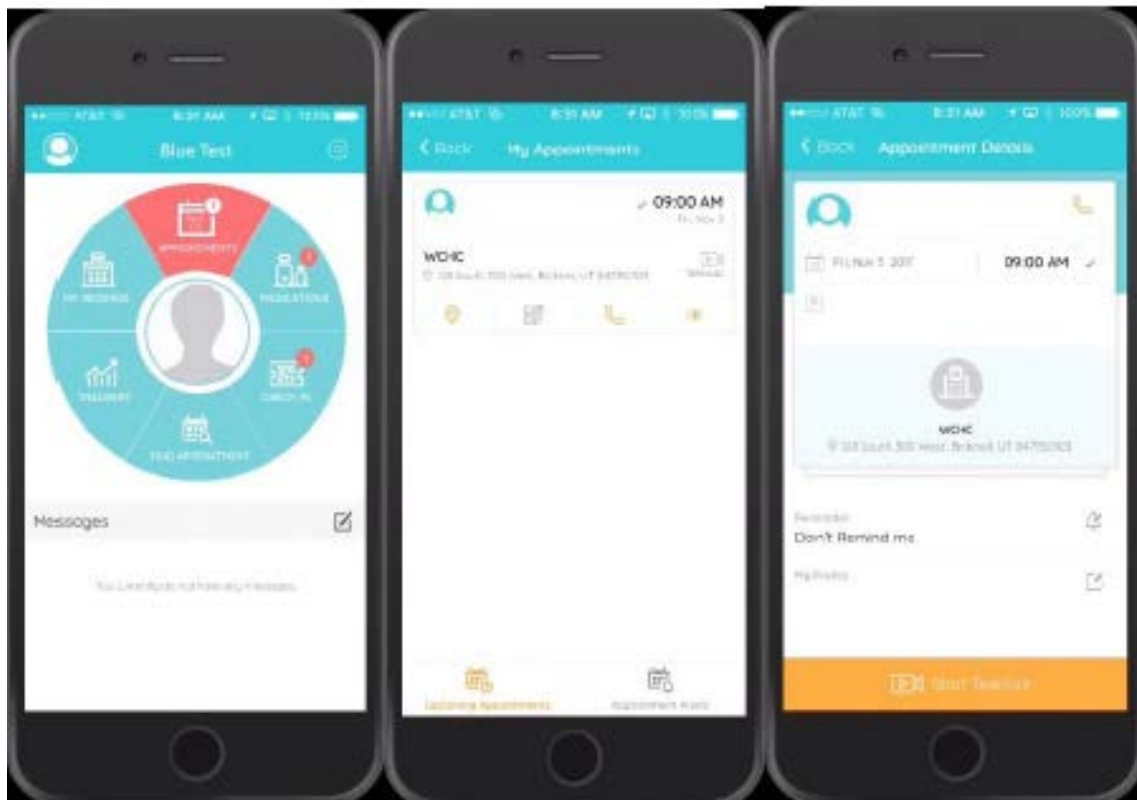
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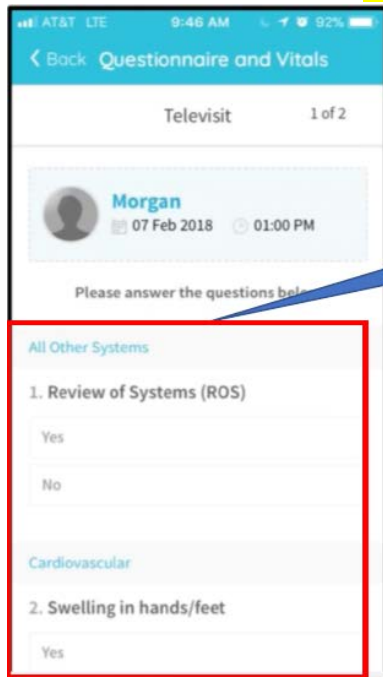
- Review and Accept the **Terms of Use Agreement** and then create a four-digit pin. This pin will be used for future logins. Then select **Done**.



- Now you are logged in. From the home screen, select **Appointments**. Your appointment provider and time will be displayed. Select the appointment and then select **Start TeleHealth** from the bottom of your screen.

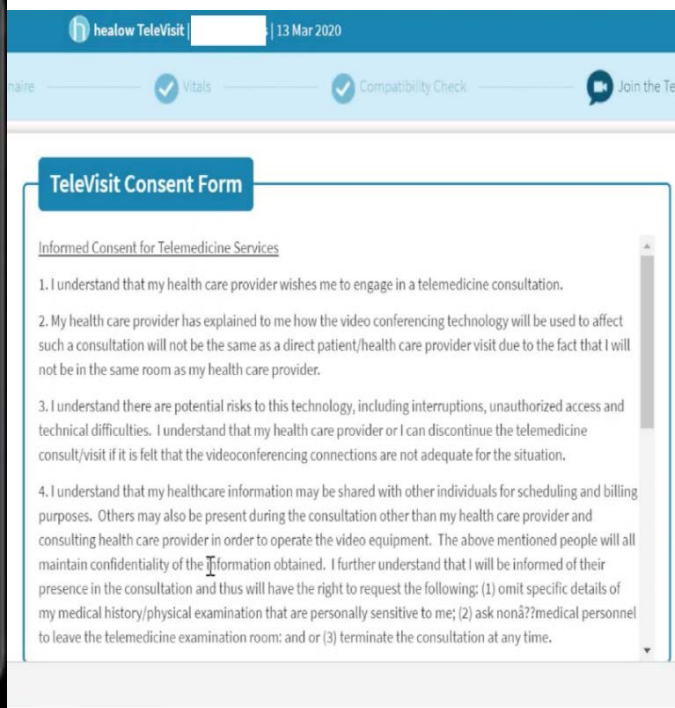


7. Complete any questionnaires (if applicable for the practice).



Fill in the patient questionnaires.

8. Enter any applicable vital signs and then accept the TeleHealth Consent Form.

TeleVisit Consent Form

Informed Consent for Telemedicine Services

1. I understand that my health care provider wishes me to engage in a telemedicine consultation.
2. My health care provider has explained to me how the video conferencing technology will be used to affect such a consultation will not be the same as a direct patient/health care provider visit due to the fact that I will not be in the same room as my health care provider.
3. I understand there are potential risks to this technology, including interruptions, unauthorized access and technical difficulties. I understand that my health care provider or I can discontinue the telemedicine consult/visit if it is felt that the videoconferencing connections are not adequate for the situation.
4. I understand that my healthcare information may be shared with other individuals for scheduling and billing purposes. Others may also be present during the consultation other than my health care provider and consulting health care provider in order to operate the video equipment. The above mentioned people will all maintain confidentiality of the information obtained. I further understand that I will be informed of their presence in the consultation and thus will have the right to request the following: (1) omit specific details of my medical history/physical examination that are personally sensitive to me; (2) ask non-medical personnel to leave the telemedicine examination room; and or (3) terminate the consultation at any time.

9. When the provider joins the visit, you will receive a pop-up message reading, **Healow would like to access the Camera** and **Healow would like to Access the Microphone**. **Allow both** and enter pin. The video of the provider will start showing. When the visit is completed, select the phone icon to end the video sharing.

