

Open Message Center



Click the 'Write' icon on the upper right of the window and choose 'Compose Message'



Compose Message

Compose Reminder

Click the 'Add Patient' icon on the upper left of the window



Key the patient's name and click 'Search'

← Patient Search

Name

Name must contain at least two characters

DOB



(MM/DD/YYYY)

MRN

Phone Number

Phone number must contain at least seven characters

Search

Select patient

← Search Results

ZZTEST, HEATHER MICHELLE
15 years F DOB: Aug 24, 2005
MRN: 32160451
PCP: OHANLON MD, KATHLEEN M

Select your department and click 'Continue'

In the 'To:' section, key your location's admin pool (ie) MH Neuro – Admin

In the 'Subject:' section, click the 'Add Template' icon 

Scroll to the bottom and select 'Verbal Consent for Telephone/TeleHealth Visit'

Subject: Verbal Consent for Telephone/TeleHealth Visit

In the body of the message, start typing .ver and it will show the appropriate dot phrase

.ver

.verbalconsent_telehealth

Complete the fields

Date of Service:

Provider:

The patient or parent/legal representative gave verbal consent and requested a Telephone/TeleHealth visit.

Additional Consent 

Parent/Legal representative name:

Phone number to use for visit:

Email to use for visit:

Method of TeleHealth: Method 

Verbal consent was obtained by phone on

Click on 'Additional Consent' and choose the appropriate answer:

Additional Consent ▾

Additional Consent

Consent was also given for future telephone/telehealth visits with other Marshall Health providers.

Consent was not given for future telephone/telehealth visits with other Marshall Health providers.

Click on 'Method' and choose the appropriate answer:

Method of TeleHealth: Method ▾

Verbal consent was ob

Method

Microsoft Teams

Doximity

Zoom

Amwell

Telephone

Other:

Once template is complete, click 'Options' at the top right of the window and check 'Save To Chart'

Options >

Priority

Save To Chart

Document Type

Phone Msg ▾

Click 'Send' at the top right of the window

Send

To review: open PowerChart, click on 'Documentation' from the Table of Contents:

Caller: ZZTEST, HEATHER MICHELLE

N

To: MH NEUROLOGY - ADMIN

Provider:

Subject: Verbal Consent for Telephone/TeleHealth Visit

Date of Service: 01/08/2021

Provider: Ferguson

The patient or parent/legal representative gave verbal consent and requested a Telephone/TeleHealth visit.

Consent was also given for future telephone/telehealth visits with other Marshall Health providers.

Parent/Legal representative name: Holly

Phone number to use for visit: 3046918660

Email to use for visit: myemail@send.com

Method of TeleHealth: [Microsoft Teams](#)

Verbal consent was obtained by phone on 01/07/2021