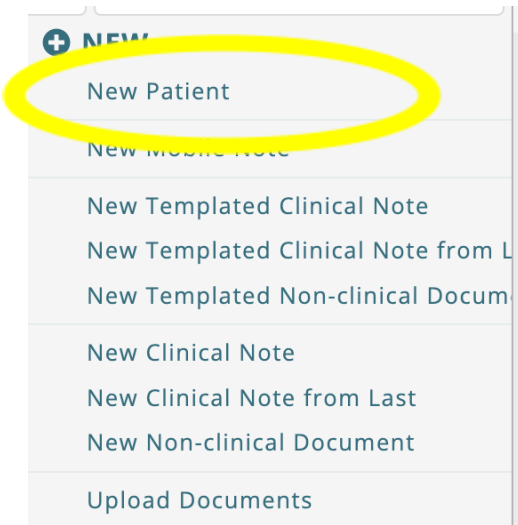


Setting up a New Client File and Sending Intake Forms to Clients

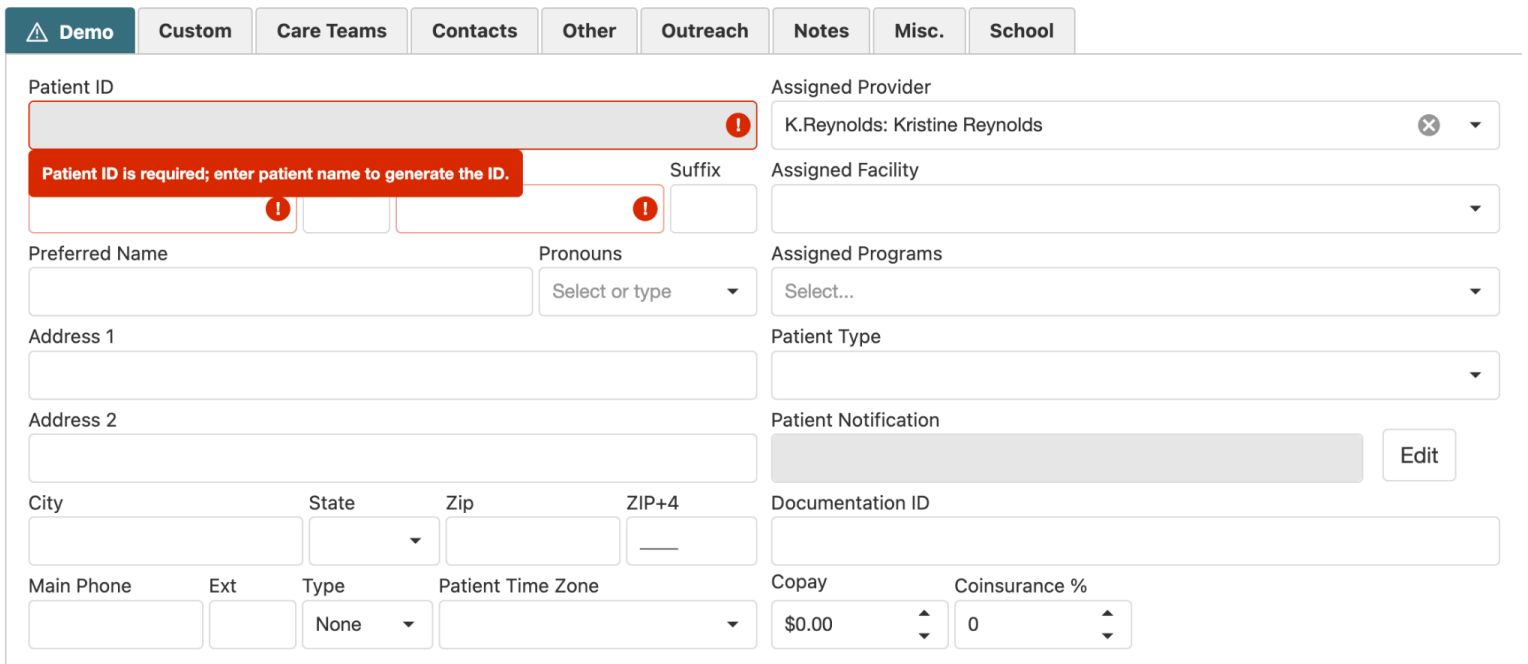
Create a new Patient



A screenshot of a software menu titled '+ NEW'. The menu items are: 'New Patient', 'New Mobile Note', 'New Templated Clinical Note', 'New Templated Clinical Note from L', 'New Templated Non-clinical Docum', 'New Clinical Note', 'New Clinical Note from Last', 'New Non-clinical Document', and 'Upload Documents'. The 'New Patient' option is circled in yellow.

You must input the Clients Name and DOB in order for them to access the client portal/receive forms. Once you have input that information > save

New Patient



The 'New Patient' form features several tabs: Demo (selected), Custom, Care Teams, Contacts, Other, Outreach, Notes, Misc., and School. The form is divided into two main sections. The left section contains fields for Patient ID (with a red error message: 'Patient ID is required; enter patient name to generate the ID.'), Preferred Name, Address 1, Address 2, City, State, Zip, ZIP+4, Main Phone, Ext, Type, and Patient Time Zone. The right section contains fields for Assigned Provider (K.Reynolds: Kristine Reynolds), Assigned Facility, Assigned Programs, Patient Type, Patient Notification (with an Edit button), Documentation ID, Copay (\$0.00), and Coinsurance % (0). A red error message also points to the Suffix field.

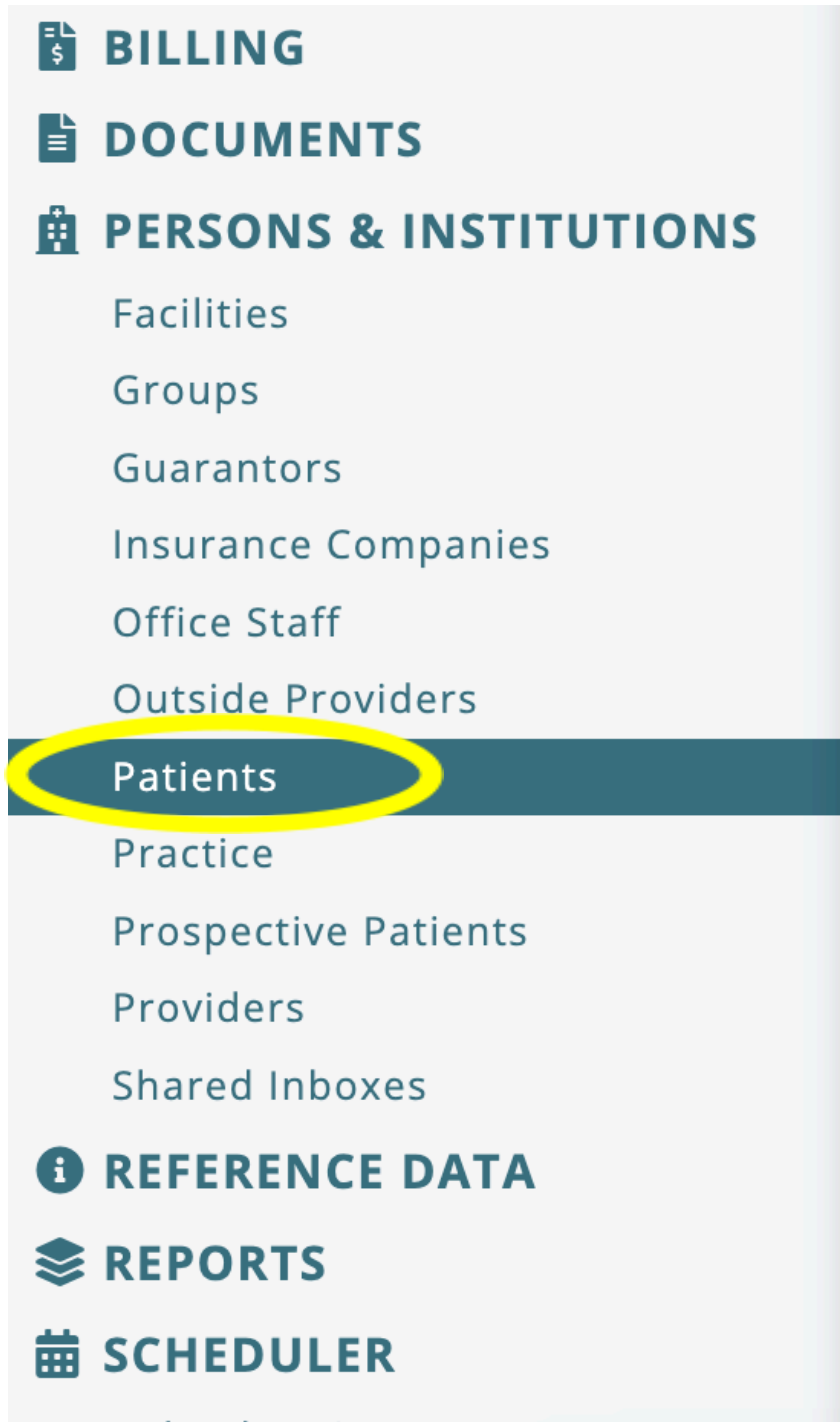
Undo

Cancel

Save

Save & Close

You will then be able to input more information. *If you later need to access the screen to update client demos/contact info you can find that here:*



This information is located in the Patient's demographic page (NOT the client's file)

Little Chickadee (CHILIT) ▾

△ Demo

Custom

Guardians

Related Persons

Care Teams

Appts

Ins

Contacts

Balances

Auths

Other

Outreach

Notes

Misc.

School

Elig

Portal

History

Patient ID

CHILIT

Assigned Provider

K.Reynolds: Kristine Reynolds

✕ ▾

First Name

MI

Last Name

Suffix

Little

Chickadee

Assigned Facility

! ▾

Preferred Name

Pronouns

Select or type ▾

Assigned Programs

Select...

▾

Address 1

a

Patient Type

▾

Address 2

Patient Notification

Edit

City

State

Zip

ZIP+4

!

!

!

—

Documentation ID

Main Phone

Ext

Type

Patient Time Zone

Copay

Coinsurance %

Undo

Cancel

Save

Save & Close

To add Guardians (you will be able to send them forms) > click Guardians

Little Chickadee (CHILIT) ▾

⚠ Demo	Custom	Guardians	Related Persons	Care Teams	Appts	Ins	Contacts	Balances	Auths	Other	Outreach	
Notes	Misc.	School	Elig	Portal	History							

Patient ID CHILIT				Assigned Provider K.Reynolds: Kristine Reynolds			
First Name Little	MI	Last Name Chickadee	Suffix	Assigned Facility			
Preferred Name		Pronouns Select or type ▾		Assigned Programs Select... ▾			
Address 1 a				Patient Type			
Address 2				Patient Notification Edit			
City	State	Zip	ZIP+4	Documentation ID			
Main Phone	Ext	Type	Patient Time Zone	Copay	Coinsurance %		

Undo
Cancel
Save
Save & Close

Click New

Little Chickadee (CHILIT) ▾

⚠ Demo	Custom	Guardians	Related Person
Notes	Misc.	School	Elig
Portal	History		

+ New

Order	Name	Relation	Main Phone
(All)			

Add Guardian's information. You only need the Guardians Name, DOB, and their email to send them Forms. The DOB is their log-in info. You can also include the custody agreement/medical decisions if applicable.

Click the little down arrow for "Setup Account"

Little Chickadee (CHILIT) ▾

⚠ Demo	Custom	Guardians	Related Persons	Care Teams	
Notes	Misc.	School	Elig	Portal	History

Account Setup Status

Never Started

Setup Account ▾

Secure Messaging

☐ Patient can initiate secure messages

Providers and Staff

Shared Inboxes

Select...

To first invite a client to set up their account click "Invite to MYIO Portal". This will prompt you to send them an initial invite to set up their account. Then you can send them forms. By clicking > Send Custom Form Request

Notes	Misc.	School	Elig	Portal
-------	-------	--------	------	--------

Account Setup Status

Never Started

Setup Account ▾

Invite to MYIO Portal

Send Custom Form Request

☐ Patient can initiate secure messages

Providers and Staff

You can choose either to send a “packet” or an individual form.

In Each Packet	Send as an individual form as needed
Personalized Information about My Practice Professional Disclosure Rights and Responsibilities Informed Consent for Treatment Privacy Practices Consent to Use and Disclose Health Information (In “using insurance” packet) Self pay from (in self-pay packet-if provided)	Release of Information Emergency Contact Form VCR Email and Text Policy

Choose the packet or forms that are applicable

New Request

Select client

Little Chickadee (CHILIT)

What are you sending?

Packet(s)

Which Packet(s) would you like to send?

Select...

Next appointment date

4/12/2025

No Appointment Scheduled: The due date is set for 14 days from now as no future appointment is scheduled. If an appointment is set up within this period, the due date will adjust accordingly.

Packet(s) Included

Please add at least 1 packet to the request

Recipients

Role	Recipient Name	Completion Method
Patient	Little Chickadee	Enter email address

+ Add Recipient

The first recipient on this list can fill out the form(s) and sign. Additional recipients can sign only.

Send

Cancel

You then have the opportunity to add a recipient in addition to the client. You must have added potential recipients into the client demographics and Guardians.

New Request

Select a patient

Little Chickadee (CHILIT)

What are you sending?

Packet(s)

Which Packet(s) would you like to send?

Select...

Due date selection

Next appointment date

Next appointment date

4/12/2025

No Appointment Scheduled: The due date is set for 14 days from now as no future appointment is scheduled. If an appointment is set up within this period, the due date will adjust accordingly.

Packet(s) Included

Please add at least 1 packet to the request

Recipients

Role	Recipient Name	Completion Method	
Patient	Little Chickadee	Enter email address	<div><div></div>SaveCancel</div>

The first recipient on this list can fill out the form(s) and sign. Additional recipients can sign only.

+ Add Recipient

Send

Cancel

Add the guardians you wish to send forms to. Note you can also remove the client from this list once you have an additional recipient, if you only want to send a form to a guardian and not the client. Make sure to save.

Recipients

Role	Recipient Name	Completion Method	
Patient	Little Chickadee	kris.eliz.reynolds@gmail.com	<div>EditRemove</div>
<div><div></div></div>	<div><div></div></div>	Enter email address	<div><div></div>SaveCancel</div>

This field is required

The first recipient on this list can fill out the form(s) and sign. Additional recipients can sign only.

Send