

# **MyChart Patient Guide**

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# Account Settings: Change Your Shortcuts

You can change the shortcuts you see in the menu bar at the top of each page when viewing your chart.

1. Select Your Menu

SENTARA <sup>®</sup>				
Your Menu	Schedule an Appointment	Messages	A Test Results	Pay My Bill

2. Under Account Settings, Select Change Your Shortcuts



3. Select a shortcut and choose a shortcut from the list.

#### **Change Your Shortcuts**

To change the shortcuts you see in the me 1. Click a shortcut below. 2. Choose a new shortcut from the list. 3. Click Save changes.	nu bar at the top of ea	ch page when viewing Patient G	uide's chart:	
😵 E-Visit 🔹 ^ 💟	Messages	✓ 📥 Test Results	∼ 📃 Pay My Bill	~
Q Search the menu				
🖞 E-Visit	A 1			
🔐 View Care Team				
Q Search for Provider				
🐆 Register for My Delivery				
Communication				
Messages	0			
拱 Ask a Question				
🔄 Letters				
Clinic Calls				
My Record				
🔆 COVID-19				
🧭 To Do				
🗔 Visits				
👗 Test Results	<b>S</b>			
😞 Medications				
Health Summary				
🔽 Plan of Care				
Preventive Care				
Questionnaires				
Locoming Tests and Procedures	•			

### 4. Select Save changes

Change Your Shortcuts
To change the shortcuts you see in the menu bar at the top of each page when viewing Patient Guide's chart: 1. Click a shortcut below. 2. Choose a new shortcut from the list. 3. Click Save changes.
Image: Save changes       ✓
🖨 Menu 🗔 Visits 🖂 Messages 🍐 Test Results 😑 Pay My Bill
Change Your Shortcuts
To change the shortcuts you see in the menu bar at the top of each page when viewing Patient Guide's chart: 1. Click a shortcut below. 2. Choose a new shortcut from the list. 3. Click Save changes.
💿 Visits 🗸 🗹 Messages 🗸 📥 Test Results 🗸 🔄 Pay My Bill 🗸
Save changes Vall changes have been saved.

### Account Settings: Change Password

1. Select Your Menu



2. Under Account Settings, select Change Password Link

Aco	ount Settings
	Personal Information
*	Personalize
×	Change Your Shortcuts
D	Linked Apps and Devices
G	Communication Preferences
٥	Other Preferences
	Back to the Home Page
	Change Password Link

- 3. Under Current Password, Select the Pencil icon, enter the required information, and then select Save Changes
  - \* Indicates a required field





### Account Settings: Change Security Questions

1. Select Your Menu



2. Under Account Settings, Select Update Security Questions



#### 3. Choose a security question by selecting the down arrow



4. Select the Pencil icon to enter your security question answer, and then Select Save Changes

Security Question 1	Answer 1	
Mother's maiden name?	~	1
Security Question 2	Answer 2	
Name of first pet?	<b>~</b>	/
Security Question 3	Answer 3	

# Account Settings: Communication Preferences

1. Select Your Menu



2. Under Account Settings, select Communication Preferences

Aco	count Settings
	Personal Information
*	Personalize
$\star$	Change Your Shortcuts
D	Linked Apps and Devices
G,	Communication Preferences
۵	Other Preferences
	Back to the Home Page
	Change Password Link
	Update Security Questions
	Deactivate Account

3. Select how you would like to receive your MyChart notifications (email, text, call, or mail), and then select **Save changes** 

ose hum you would like to receive HyChart mitfleations.				
	Orali	94	-040	Cital
, Appointments New encoded and an annual production of a	-	(m)	0	đ
, Messages Receive phone here yes realitioner a garantee.	-	=	3	đ
, Health Total subsective rate of broadlance and failed sheet pairs and	-	-		
Billing	-	(m)		sta
Questionnaires	-	ļ		
Account Management	-	P		
, Telehealth Net to constraint inte	-	m		
To Do And Realized and concepts in prior To Do Link	-			
Additional Notification Settings	-			

### Account Settings: Deactivate Account

1. Select Your Menu



2. Under Account Settings, select Deactivate Account



Deactivate Account

#### 3. Select Deactivate



## Account Settings: Update Personal Information

1. Select Your Menu



2. Under Account Settings, select Personal Information

Acc	count Settings
2	Personal Information
٠	Personalize
$\star$	Change Your Shortcuts
D	Linked Apps and Devices
G,	Communication Preferences
٥	Other Preferences
۵	Back to the Home Page
	Change Password Link
	Update Security Questions
	Deactivate Account

3. Select Edit to open contact information.



4. Enter contact information and/or details about me and select Save Changes. This will send a message to your Sentara Medical Provider. Please allow 48 hours for the information to be updated in the legal medical record at Sentara.

#### \* Indicates a required field

Personal Informati		here, and click Save Chi	anges to send a message to the clinic. Allow 24 hours for the information
to be updated in the legal m	edical record.		
Contact Information		A	Details About Me
Going somewhere for a while?	Add a temporary addres	<u>.</u>	Information entered here may be visible to anyone with access to this legal medical record.
Country United States of Ame	rica	~	Professor Fictoria Professor Fischlame Refil
*StreetAddress 1 First Ave			Preferred First Name is the name by which you want to be addressed. This name can differ from your driver's license or birth certificate.
1 First Ave			Lapat Sax () Female
*cњ∕ Virginia Beach	* <sub>State</sub> Virginia	★ZIP 23456-6782	Gender Identity 🗸 🗸
DANE	•		*Sectasigned at Birth Female
Home Phone 757-555-0000	*Mabile Phone 757-555-1	1234 📌	*MarialStatua Life Partner ✔
Work Phone	test@sen	tara.com	* 1 <sub>810</sub>
			American Indian Asian
	Save ch	nanges Cancel	Black 🗸
			Hold the CTRL key to select multiple options.
			Not Hispanic or Latino
			*Language English
			*talijion ✔ None
			Save changes

# Appointments: Cancel

1. Select Your Menu

<b>5</b> S 1	ENTARA <sup>®</sup>
Your Menu	🕝 Schedule an Appointment 🗹 Messages 👗 Test Results 😑 Pay My Bill

### 2. Under My Record, Select Visits

Му	Record
*	COVID-19
0	To Do
	Visits

3. Select the appointment you wish to cancel

JAN Office Visit
THUL DUICE ABIC
1 O Testing
18 Sentara Family Medicine Physicians
2023 Starts at 7:00 AM EST

### 4. Select Cancel Appointment

Office Visit with Testing     Office Visit with Testing     Wednesday January 18, 3023     TOD ANE EST (IN section     TOD ANE EST (IN section     TOD ANE EST (IN section     Physicians     TOD ANE EST (IN section     Physicians     TOD ANE EST (IN section	Prepare for Your Visit Want an earlier time? Get on the Wart List Want an earlier time? Get on the Wart List All questionnaires for this appointment will be available for you to answer on Wednesday January 11, 2023. Directions for Sentara Family Modicine Physicians Only one visitor or saregive may accompany patients to their scheduled appointment. Thack you for your understanding. Visit Instructions Prease arrive at least 15 minutes before your scheduled appointment time. Remember to bring your insurance mammable to bring your apprent as it is due at the time of service. Please contact us at least 24 hours in advance 6 you must cancel your appointment. We lock forward to seeing you.
× Cancel appointment	

5. Enter the reason for cancelling appointment in the comments section and then select **Confirm Cancellation** 

Cancel Appointment	
Confirm Cancellation	
JAN Office Visit 18 Statistic Provide Mickain Physician 2023 Statistic Link AMISS	
Convinces:	
Confirm cancellation Back	

### Appointments: Mammogram

1. Select Your Menu



2. Under Find Care, select Schedule an Appointment



3. Select Routine Annual Screening Mammogram



4. Select 3D Screening Mammogram



### 5.

•		creening questionnaire and select <b>Continue</b> . <i>guired field</i>
A couple of	ofque	stions
*Indicates a	a require	d field.
*Appointm	nent mu	ist be 1 year and 1 day from last Screening Mammogram appointment for most insurances.
Ad	cknowle	dge
*Do you ha	ave any	breast problems such as a lump, skin thickening, nipple discharge, nipple retraction or focal pain?
	es N	
* Is this a fo	ollow u	o to an abnormal mammogram?
Ye	es N	5
*Have you	been d	iagnosed with breast cancer in the past 3 years?
Ye	es N	
*Do vou ne	eed ass	stance to stand for the mammogram?
	es N	
*Are you p	regnan	17
	es N	
*Do you ha		ecial communication need?
10	es N	
*Notice: It is vace	recomm cine/boo	ended you have your screening mammogram either prior the COVID-19 vaccine or wait 4 to 6 weeks after receiving the COVID-19 ster due to the possibility of swelling in your lymph nodes.
A	cknowle	dge
Continue		

6. Select the location where you would like to have your mammogram and select **Continue** 

Schedule an Appointme	•	, 0	Start over
Mammography 3	eason for visit Edit 🔊 Location D Screening Iammogram	IS J Time	Verify and schedule
Which locations work for you	1? 🛛 🕐 All	Near me 🙆 Near home	Enter ZIP
Any location Schedule at any available location.	Dorothy G Hoefer Comprehensive Breast Center Port Warwick 11803 Jefferson Ave, Suite 130 Newport News VA 23808 128.3 miles from home	Sentara 29N Mammography Breast Center 3283 PROFFIT ROAD CHARLOTTESVILLE VA 22911 92.1 miles from home	Sentara Advanced Imaging Center Gloucester 5659 Parkway Drive, Suite 130 Gloucester VA 23061 108.6 miles from home
Sentara Advanced Imaging Center Independence 800 Independence Blvd Virginia Beach VA 23455 148.1 miles from home	Sentara Advanced Imaging Center St. Luke 20209 SENTARA WAY CARROLLTON VA 23314 137 miles from home	Sentara Albemarle Medical Center Breast Center 1144 N. Road Street Elizabeth City NC 27909 183.0 miles from home	Sentara Belle Harbour Women's Imaging 3920A Bridge Road SUITE 300 SUFFOLK VA 23435 143.5 miles from home
Sentara Careplex Imaging S000 Coliseum Drive Hampton VA 23686 131.5 miles from home	Sentara Fort Norfolk Diagnostic Center 301 Riverview Ave Suite 830 NORFOLK VA 23510 145.8 miles from home	Sentara Greenbrier HealthPlex	Sentara Halifax Regional Hospital Breast Center 2204 Wilborn Avenue South Boston VA 24592 182.2 miles from home
Sentara Lake Ridge Advanced Imaging Center 12825 Minnieville Road Lake Ridge VA 22192 20 miles from home	Sentara Lorton Station Women's Imaging Center 8986 Lorton Station Blvd Ste 200 Lorton VA 22079 15.5 miles from home	Sentara Martha Jefferson Comprehensive Breast Center 595 MARTHA JEFFERSON DRIVE CHARLOTTESVILLE VA 22911 97.0 miles from home	Sentara McLeskey Comprehensive Breast Center e251 E. Virginia Beach Blvd Suite 105 NORFOLK VA 23502 147.9 miles from home
Sentara Norfolk Comprehensive Breast Center 600 Gresham Drive Norfolk VA 23507 145.7 miles from home	Sentara Northern Virginia Comprehensive Breast Center 2300 Opitz Boulevard Woodbridge VA 22191 22.3 miles from home	Sentara Obici Comprehensive Breast Center 2800 Godwin Boulevard Suffolk VA 23434 148.3 miles from home	Sentara Princess Anne Comprehensive Breast Center 1975 Glenn Mitchell Drive Suite 100 Virginia Beach VA 23456 154.7 miles from home
Sentara Princess Anne Comprehensive Breast Center 1950 Glenn Mitchell Drive Suite 208 Virginia Beach VA 23456 154.7 miles from home	Sentara Spring Creek Mammography Breast Center 29 JEFFERSON COURT ZION CROSSROADS VA 22942 89.6 miles from home	Sentara SRMH Funkhouser Women's Center 2275 Health Campus Drive Harrisonburg VA 22801 104.1 miles from home	Sentara Ultrasound Associates Womens Imaging Center 5055 SEMINARY RD #104 ALEXANDRIA VA 22311 5.8 miles from home
Sentara Virginia Beach Comprehensive Breast Center 1080 First Colonial Road Suite 100 Virginia Beach VA 23454 150.4 miles from home	Sentara Williamsburg		
Continue 1 location selected			

7. Select the appointment time that is best for you.

Schedule an A	ppointment						Star	tover
Specialty Edit Mammography		0	Locations Edit Sentara Advanced Imaging Center Independence	Time		Verif	fy and so	chedule
Select a time for your 3D Screening Mammogram appointment								
Thursday Decembe	er 22, 2022				Search	Criteria		
7:30 AM	7:45 AM	8:00 AM	8:15 AM	8:30 AM	Advance	ns: Sentara d Imaging		Edit
8:45 AM	9:00 AM	9:15 AM	9:30 AM	9:45 AM	Indepen Start sea			
10:00 AM	10:15 AM	10:30 AM	10:45 AM	11:00 AM	12/22	/2022	-	
11:15 AM	11:30 AM	11:45 AM	12:00 PM	12:15 PM	Refine \$	Search		
12:30 PM	12:45 PM	1:00 PM	1:15 PM	1:30 PM	Times: Monday			
1:45 PM	2:00 PM	2:15 PM	2:30 PM	2:45 PM	Tuesday		AM	PM
3:00 PM	3:15 PM	3:30 PM	3:45 PM	4:00 PM	Wednes	dav	AM	PM
4:15 PM					Thursda		AM	PM
					Friday		AM	PM
Saturday Decembe					,		AM	PM
8:00 AM	8:30 AM	9:00 AM	9:30 AM	10:00 AM				
10:30 AM	11:00 AM	11:30 AM						

8. Under the Insurance on File section you can update, remove, and/or add insurance coverage. Select This information is correct

Schedule an Appointment				Start over
Mammography 3D Scr	reening Sent mogram Imag	tions Edit tara Advanced ging Center ependence	Time Edit Thursday December 22, 2022 7:30 AM	Verify and schedule
1 This time slot is reserved for you	until 2:13 PM. Please comple	ete scheduling by then.		
Verify your insurance				
Insurance on File				
	You have no	insurance on file.		
+ Add a cove	erage			
This information is correct				

# Review the Appointment detail and ADD your comments or reason for visit Ex. Annual Mammogram. Select **Click Here to Schedule now** \* *Indicates a required field*

<ul> <li>Specialty Edit Mammography</li> <li>Reason for visit Edit 3D Screening Mammogram</li> <li>Locations Edit Sentara Advanced Imaging Center Independence</li> <li>Time Edit Thursday December 22, 2022 7:30 AM</li> <li>You're almost done</li> <li>You're almost done</li> <li>This time slot is reserved for you until 2:13 PM. Please complete scheduling by then.</li> <li>Directions for Sentara Advanced Imaging Center Independence</li> <li>So Screening Mammogram</li> </ul>	ify and schedule
This time slot is reserved for you until 2:13 PM. Please complete scheduling by then. Directions for Sentara Advanced Imaging Center	
<ul> <li>3D Screening Mammogram</li> <li>Sentara Independence Advanced Imaging Center is loc Independence Blvd, Virginia Beach. The patient entran Independence Blvd your scheduled appo Should you need to reschedule your appointment or h about your exam, contact Central Scheduling at 757-75 Unsupervised children under the age of 14 are not allo your visit. Please arrange for appropriate childcare during this visit?</li> </ul>	located at 800 rance faces orders/referrals. pointment time. r have questions -736-0040. llowed during
Before scheduling       A screening 3D (tomosynthesis) mammogram is an x-t breast that helps reveal changes in the breast before the by a woman or her doctor. Breast Tomosynthesis uses computing to convert digital images into a stack of very "slices"-building what is essentially a three-dimensional During tomosynthesis part of the exam, the xray tube (slight arc over the breast, taking multiple breast images is seconds. A computer then produces a 3D image of you in one millimeter layers.         Your exam will last approximately 20-30 minutes.         View full instructions         View full instructions         It everything looks correct, click the button below to schedule.         View full instructions         Your exam will last approximately 20-30 minutes.	e they can be felt es high-powered ary thin layers or nal mammogram. e (sweeps in a se in just your breast tissue clear nipple ng of the breast,

# Schedule an Appointment

1. Select Your Menu



2. Under Find Care, select Schedule an Appointment



3. Select a provider who matches your needs or select a specific reason for scheduling an appointment. The list of providers will be based on your care team and past/future appointments.

Schedule with a specific provider Choose a provider who matches your needs.	OR Tell us why you're coming in Choose a specific reason for scheduling an appointment.	
Robin N Anderson, MD Primary Care Provider Family Practice	Routine Annual Screening Mammogram A routine screening for patients without currient breast problems and not a follow-up to a previous abnormal mammogram. → Virtual Care - Minor Illnesses Choose this option for alle colds, flu-like symptoms, t and medication refills, For scheduling assistance, call 252-3050.	/Tis,
	Virtual Care - Physical Therapy Choose this option for joint pain, sprains and strains, back and neck → pain, and sports injuries. Physical Therapits do not prescribe medications. For questions, call 757-827-2513.	

4. Select what kind of appointment you would like to schedule

Schedule an Appoint	tment						
Providers Edit Robin N Anderson, MD	+ Bearson to	rviati		🔊 Locations	(i) *	mie	Wirfy and achedule
What kind of appointme	anna Macasa	edulin	g? Physica	ŕ			Same Day Video Visit
A general staft with your healthca	ete provider.	4	Routine a	niual visit including female e , and aports/camp physicals.	ramı, medical —y	1	some bay video visit immediate case for a minor lifeas conducted by video $\rightarrow$ with your provide.
Hospital Follow-Up		+		ay in Person Visit in person visit with your pros	idec -9		

5. Select which location works best for you

Schedule an Appointment			
Provides LAR Robin N Anderson, MD     Provides UN     Office Visit     UN     Which location works for you?     Sentara Family Medicine Physicians     MID Phesonethence Rd     Yugma Bundw W.25455-2709	Locations	(1) Time	Verify and schedule

6. To choose the appointment that is best for you, click on the appointment time. You may also search criteria to find the best available time for you.

Schedu Start over	le an Appointr	nen	t							
	ders 100 n N Anderson, MD	0	Reason for wait Office Visit	FØR	0	Sent	tions Edit tara Family Medicine sicians	(1) Time		Verity and schedula
What tim	e works for you?									
1000 Contractor	ecember 19, 2022 derson, MD								Search	
8	2:00 PM		2:30 PM	C	3.00 PM	j	3:30 PM	4:30 PM	an arrestore	arch oh: 12/19/2022 📑
- I	5:00 PM		5;30 PM	IC.	5.00 PM				Times:	All available times

If you have selected to schedule an appointment by type of appointment, you will then select the appointment time that best fits your needs, and the location.

If you select **Use insurance**, under the **Insurance on File** section you can update, remove, and/or add insurance coverage. Select **This information is correct** 

Providers Edit Robin N Anderson, MI	0	Reason for visit Office Visit	Edit 🥑	Locations Edit Sentara Family Medicine Physicians	0	Time Edit Monday December 19, 2022 2:00 PM	Verify and schedule
1 This time sl	ot is reserved f	or you until 2:0	8 PM. Please co	omplete scheduling by t	hen.		
erify your insu	rance						
tesponsibility for	Payment						
Would you like to	use insurance	to pay for this a	appointment?				
Ð							
Use insurance	Do not bill in	urance					
Aetna / Aetna Op Subscriber Name Tinker, Bella Subscriber		dd Insurance ca				+ Add a covera	8ª
Subscriber Number 123456789	Uploading spend up t	mages of your ca he check in proce	ind now will help ma for your next				
Group Number 123456		visit,					
💉 Update cove	rage						
Remove cove	erage						
ending Review							
Testing	Added						
Subscriber Name Tinker, Bella		Subscriber Ni 987654321	umber				

### If you select **Do not bill insurance**, then, next, select **This in formation is correct**.

Schedule an Appointment		Start over
Reason for visit Edit Virtual Care - Primary Care	Monday December 19, 2022 3:00 PM	Verify and schedule
i This time slot is reserved for you unt	il 2:59 PM. Please complete scheduling by then.	
Verify your insurance		
Responsibility for Payment		
*Would you like to use insurance to pay for	this appointment?	
()		
Use insurance Do not bill insurance		
This information is correct		

8. Review the appointment details, ADD the reason for your visit in the comment box, and select **Click Here to Schedule Now**. \* *Indicates a required field* 



You're all set! You can review details o	of your upcoming appointment below.
Confirm you've arrived Have you arrived for this appointment	t? I'm bere
Office Visit with Testing	Get ready for your visit! Check-In Save time by completing eCheck-In ahead of time.
<ul> <li>Monday December 19, 2022 2:30 PM EST (so minutes)</li> <li>Add to calendar</li> <li>Sentara Family Medicine Physicians 2017 Pleasure House Rd Virginis Besch VA 21455-2709 787-316-0600</li> <li>Get directions</li> </ul>	Want an earlier time? Get on the Wait List Directions for Sentara Family Medicine Physicians Only one visitor or caregiver may accompany patients to their scheduled appointment. Thank you for your understanding. Visit Instructions Please arrive at least 15 minutes before your scheduled appointment time. Remember to brin your insurance information, all medications you are currently taking and any appropriate X- rays or test results. Please remember to bring your payment as it is due at the time of service Please contact us at least 24 hours in advance if you must cancel your appointment. We look forward to seeing you.
× Cancel appointment	

# Appointments: Wait List Appointments

This electronic waitlist feature is a convenient way to get the care that you need more quickly.

1. Select Your Menu

Visits

2.

<b>5</b> S E	ENTARA <sup>®</sup>			
Your Menu	Schedule an Appointment	Messages	Test Results	Pay My Bill
Under <b>My Reco</b> i	rd, Select Visits			
My Record				
🔆 COVID-19				
🐼 To Do				

3. Select the appointment that you would like to be added to for the Waitlist

#### 4. Select Get on the Wait List



When an earlier appointment becomes available, you will receive an alert via text or email. The appointment offers are claimed on a FIRST COME, FIRST SERVED basis, but offers do expire – make sure to act fast!

Note: To review your notification preferences, select the **Settings** menu in MyChart, then **Notifications**).

1. Select Your Menu

<b>5</b> s	ENTARA <sup>®</sup>			
9 Your Menu	<b>Schedule an Appointment</b>	Messages	A Test Results	Pay My Bill

2. Under My Record, select Visits

My Record	
🄆 COVID-19	
🧭 To Do	
💼 Visits	3

3. Review the new appointment offering and choose whether you would like to **Keep existing time** or **Accept new time** 

Velcome!	
New appointment offer for Dietician New This offer expires today at 9:04 PM.	
New Time	Existing Time
10:30 AM EDT	☑ 12:30 PM EST
Oct Sentara Comprehensive Weight Loss Solutions	Nov Sentara Comprehensive Weight Loss
6 Signa Comprehensive Weight Loss Solutions 6 Signa Comprehensive Weight Loss Solutions 6 Inter Drive 10 Inter Street Prehensive Weight Loss Solutions	30 Solutions 6333 Center Drive
Norfolk VA 23502-4126	Wed ICC Building #16
	Norfolk VA 23502-4126
Accept new time	Keep existing time
Acceptiew unie	Cicep existing time

# Billing: Request Financial Assistance

1. Select Your Menu

	SENTARA <sup>®</sup>	
	Your Menu Schedule an Appointment Me	ssages. 🔺 Test Results 📄 Pay My Bill
2.	Under Billing, Select Financial Assistance Menu	
	Q Search the menu	
	Billing	•
	🚍 Billing Summary	
	🚰 🛛 Financial Assistance	
I	Estimates	
	🚍 Pay My Bill	

3. Select the person/s bill you need assistance with paying, and then select Next

-	500		<b>a</b>	ps:
Personal Info	Income	Expenses	Assets	Review
init the request and upload	o the documents later			
hose bills do you need	assistance paying?			
u can request assistance for	any bills you are financial	ly responsible for.		
Patient Guide				
Patient Guide				

### 4. Complete the required criteria, select **Next**

### \* Indicates a required field

Financial Assistance				
We'll need a complete picture of y	our annual income an	d expenses, so make sure you l	have any statements and bi	lls available.
<u>\$</u>	<b>1</b>	4		lege .
Personal Info	Income	Expenses	Assets	Review
*Indicates a required field				
*How large is your hou	sehold?			
Include all the people who are in y children, or other people you typi - 1 +			ponsible. This may include y	yourself, your spouse, your
Your household's income Include any income earned by any Enter each income as the pre-tax of		ehold, not just yourself or the	patients whose bills you're	requesting assistance for.
Source of income	How often are you			me amount (in USD)
Select income V	• Hourly Week	ly Biweekly Monthly	Annually	
				Add income
Proof of income document Add any proof of income documen request. You can attach up to 99 files. The allowed f	nts for yourself and oth	-		
Add a document Document types: Bank Statement Assistance Application, Other Su Stub(s), Tax Returns, W-	s, Financial pport, Pay	дась, асо, со, ено, на, на. те		ges and documents.
Next Back Cancel				

5. Complete the required criteria, select **Next** 

### \* Indicates a required field

Personal Info ur household's expenses	Income	Expenses	Assets	Review
ur hausahaldia avaasaa				NEVIEW
ur nousenolu s'expenses				
lude any recurring expenses your	r household has. For expe	nses which change from mo	onth to month, enter the av	verage cost you budge
ype of expense	How often do you pay?		Expen	ise amount (in USD)
Select expense 🗸 🗸	Weekly Biweekly	Monthly Annually		
				Add expense
				Add expense

### 6. Complete the required criteria, select **Next**

\* Indicates a required field

in need a complete picture		expenses, so make sure you n	ave any statements and bills	savailable.
Personal Info	Income	Expenses	Assets	Review
	hold has. If you do not knov	w the exact value of an asset, p	provide your best guess.	
			provide your best guess.	

7. Review information, and then select Submit

	f vour annual inc				
e'll need a complete picture of		ome and expenses, so make sur	e you have any :	statements and bills	available.
Personal Info	Income	Evoesses		Acceto	Paviaw
Personal Info	Income	Expenses		Assets	Review
oes this look right?					
Financial Request Summary Requested on 1/18/2023 on behalf	f of				
Patient Guide					
Request Details People in household: 1					
d= .		RL -		<u>^</u>	
Income	Not entered	Expenses	Not entered	Assets	Not entered
Submit Back Cancel					
Submit Back Cancel	]				
					ć
nancial Assistance	your annual inco	me and expenses, so make sur	e you have any s	tatements and bills	
nancial Assistance		ime and expenses, so make sur f our financial counselors will c			available.
nancial Assistance Il need a complete picture of Your application has been : this page for your records.	submitted. One o				available.
nancial Assistance e'll need a complete picture of Your application has been this page for your records. inancial Request Summary	submitted. One o				available.
nancial Assistance Il need a complete picture of Your application has been : this page for your records. inancial Request Summary equested on 1/18/2023 on behalf Patient Guide	submitted. One o				available.
nancial Assistance e'll need a complete picture of Your application has been this page for your records. inancial Request Summary equested on 1/18/2023 on behalf	submitted. One o				available.
nancial Assistance e'll need a complete picture of Your application has been a this page for your records. inancial Request Summary equested on 1/18/2023 on behalf Patient Guide Case #100057 Request Details	submitted. One o				available.
nancial Assistance "Il need a complete picture of Your application has been: this page for your records. inancial Request Summary equested on 1/10/2023 on behaif Patient Guide Case #100057	submitted. One o				
nancial Assistance e'll need a complete picture of Your application has been a this page for your records. inancial Request Summary equested on 1/18/2023 on behalf Patient Guide Case #100057 Request Details	submitted. One o				available.
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### Billing: View your Account

1. Select Your Menu



2. Under Billing, select Billing Summary



3. You can view both your provider account and hospital account.

Parates 1 Statistic Apparent 21 Auropa	A Technolog M Payments	😰 🖲 🖾 -
Billing Summary (Pop) Click here to pay your bill now. Please need there may be a slight delay for same day payments to be asymmetric above.	ceffeenad in your ladance. Please allow up to 3 business days for the	What is a guaranteer? Also persons is the person or write expension for public the balance of a scream. What if I can't pay all at once? If the only per year which the case, per person which is a scream or the person of the screem.
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D View balance details	D You balance details	
Back to the	a haave page	

You can make payments towards your balance(s) by selecting **Click here to pay your bill with Sentara Bill Pay.** 



4. Select **View balance details** to view any outstanding balance, to see guarantor information and a list of recent payments to the account.

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5. You can view a PDF of your last statement by selecting the Communications tab

# My Record: Download Medical Record

1. Select Your Menu

<b>5</b> S F	ENTARA®		
Your Menu	Schedule an Appointment	Messages 🔺 Test Results	Pay My Bill

### 2. Under My Record, select Document Center

Му	Record
	Request My Medical Records
	Document Center
1	End-of-Life Planning
2=	Wallet Card
•	PatientPass Education

#### 3. Select Visit Records

Visit Records	Requested Records
Download and send visit summaries that would be helpful for a new	Download records you specifically requested, such as:
provider, including details such as:	Legal internation
Health taues	Coordination of Care
Madications	Sovermeent Reporting
Adaptes	Worker's Comp Information
Immunizations	Accounting Daclowin
Plan of Care	Visit and Health Summaries
My Documents	Who's Accessed My Record?
Sign, view, download, and print documents you have on file.	View actions of people who have accessed your record

4. Download options include a Single Visit, Date Range, All Visits, or a complete Lucy Summary of your MyChart account.

	a u'd like to view, download, or send. You can select a single visit or ry is also available.	multiple visits using the options below.
Single visit	Date range All visits Lucy summary	
Los Andres Calor ( Alla	Itpatient Visit with SHRH MAMMO RM 1 ifax Regional Hospital Breast Center	Wednesday January 18, 2023
fiew Downlo	and Send	

5. Select View, Download, or Send your visit records

Visit Recor	ds	
	you'd like to view, download, or send. You can select a single visit or nary is also available.	multiple visits using the options below.
Single visit	Date range All visits Lucy summary	
	Outpatient Visit with SHRH MAMMO RM 1 Ialifax Regional Hospital Breast Center	Wednesday January 18, 2023
View Dow	nload Send	
	Back to Document Center	er

# Insurance: Add Insurance Coverage

1. Select Your Menu

<b>5</b> S I	ENTARA <sup>®</sup>
Your Menu	🐻 Schedule an Appointment 🗹 Messages 🍐 Test Results 📄 Pay My Bill

2. Under Insurance, Select Insurance Summary

urance
Insurance Summary
Coverage Details

### 3. Select Add a coverage

Insurance Summary	
Insurance on File	
Medicare / Medicare Part a 5, 8 Subscriber Name Subscriber Number JAAJAA1AA12	+ Add a coverage
<ul> <li>View coverage details</li> <li>Update coverage</li> <li>Replace insurance card photos</li> <li>Remove coverage</li> </ul>	

4. Select the Insurance company, enter member number/ID, and select if you are the policy holder for the insurance. Then, select **Submit** You can upload images of your insurance card. \* *Indicates a required field* 

nsurance on	r ne
Medicare / Me	dicare Part a & B
Subscriber Name Guide, Patient	
Subscriber	JOHN L SMITH
Number 1AA1AA1AA11	1EG4-TE5-MK72 HOSPITAL (PART A) 03-01-2016 MEDICAL (PART B) 03-01-2016
	MEDICAL (PART B) 03-01-2016
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Indicates a requ	uired field
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## Messaging: Ask a Medical Question

1. Select Your Menu



2. Under Communication, Select Ask a Question



3. Select Ask a medical question and then select Next



4. Select the type of medical question you would like to ask. Select the provider you would like to message

Medical question	68	×
What type of medical question?		1
Advance Care Plan		
Allergies	9	
Immunizations	- 14	
Non-Urgent Medical Question		
Medical Record Request		
Prescription Question	87	
Preventive Care	4	
Test Results Question		
← Non-Urgent Medical Question	10	×
Who do you want to contact?		-
Robin N Anderson, MD Primary cato provider		
Amb Fp Shc, MD, MD Radiation Oncology Previous appointment on 02/25/2022	÷	
ANDREW M ROMANO, MD HSD Cansar Influision Services Previous appointment on 10/26/2021	*	
Betyshia J Belardo, MD	4	
Family Practice Appointment today		

5. ENTER a subject and ENTER the details of your message in the message box. Next, select **Send** to route your message to the provider that you selected. You may attach a PDF or picture if needed. \* *Indicates a required field* 

÷	Non-Urgent Medical Question	23	*
To	Robin N Anderson, MD		
Mes Call *		Learn more	
	sur susseys .		
Î	0	Send	>

## Messaging: Deleting your messages

1. Select Your Menu



2. Under Communication, select Messages



3. Open the message you would like to delete and select the **Move to Trash** icon. You cannot delete messages from the trash.


## Messaging: Medication Refill Request

1. Select Your Menu

<b>5</b> S 1	ENTARA <sup>®</sup>
Your Menu	🐻 Schedule an Appointment 🛛 Messages 👗 Test Results 📄 Pay My Bill

2. Select Medications

Му	My Record			
ġ.	COVID-19			
$\oslash$	To Do			
	Visits			
لله	Test Results			
	Medications			
•	Health Summary			
	My Conditions			

#### 3. Select Request refills



4. Select which medication(s) you would like to refill. Select Next.

efillable Medications		
aose prescriptions to refilt.		
ALPRAZolam 1 mg Tabs		
Commonly known as: Xanax		
D Learn more		
Take 1 mg by Mouth nightly as needed.		
Prescription Details		
Disried taking May 2, 2022		
Discumented by Test		
EScitalopram 10 mg Tabs		E
Commonly known as: Lekapro		
D Learn more		
Take 10 mg by Mouth Once a Day.		
Prescription Details		
Started taking April 5, 2022		
Documented by Test		
ARIPiprazole 10 mg Tabs		
Commonly known as: Ability		
Next Cancel	1 prescription selected	

5. Select the pharmacy you would like to use. Select **Next** and then select **Submit** to send refill request.

Pharmacy	
Please choose how you would like to receive your refills	s and enter any comments or concerns you have for your selected prescriptions.
Selected Refills	
ALPRAZolam 1 mg Tabs Commonly known as: Xanax	$\oslash$
Enter comments for try precordition	
Delivery Method	
Pick up at a pharmacy	
Pharmacy Info	
Pharmacy	
CVS/pharmacy #10018 · Virginia Beach, VA · 208	9 Salem RC Y
Hours: Not available	
Next Back Cancel	1 prescription selected

Review Your Request		
Requested Medications		
ALPRAZolam 1 mg Tabs Commonly known as: Xanax Enter commerts for this prescription	$\oslash$	
Request Details Pharmacy		
CVS/pharmacy #10018 - Virginia Beach, VA - 2089 Salem Rd 2089 Salem Rd Virginia Beach VA 23456 Phone number: 757-471-2202		
Submit Back Cancel	1 prescription sele	cted

## Messaging: Review deleted messages

1. Select Your Menu

<b>5</b> S E	NTARA <sup>®</sup>
Your Menu	🐻 Schedule an Appointment 🛛 Messages 👗 Test Results 📄 Pay My Bill

2. Under Communication, Select Messages

Cor	Communication		
	Messages		
5	Ask a Question		

3. Select Trash.

Message Center	Trash Q, 5	weit tash
Send a monage	B TESTING QK	May I
🔹 Conversations 🛛 🔘	<ul> <li>Responses submitted for Symmethy Sergional Scales, (View emparated)</li> </ul>	
B Bootenarkeit	Server on one of contraction in the	
T Appointment		
🕷 Automatiet messages 🛛 😨		
1 Sec.		

4. Select deleted message that you would like to view. If you would like to restore the message back to conversations, select **Restore Conversation** 

e Consentition Link TESTING QX		The feature conversation
Participants		Tou B Inc.(1.5.179 B Eperth Steepress Scale (Vive request)
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## Messaging: View your new messages

1. Select Your Menu



2. Under Communications, select Messages



3. Under the message center the number of unread messages is displayed next to each folder. You must open the messages to delete them. The unread messages are bolded.

Message Center	Conversations Reception	Q, Search conversations
Sent Alternage	B Medication Ranewal Request You ReVisitness have requesting for the following restitutions	Des 21 - AUMAGolam (ABAG) 1 mg PO 1885. Prefernst phonosys CPUPP.
Baskmannet     Aggeskmannet     Automatedommenages	B Test Your Test2	Arg
E Teat	Test • Test	Aug
	TEST     TESTRE     CONTINUE NUMBERLING BASE LUPPLY PROVIDE	ini J
Vessage Center	Appointment Meaning Ventilities	Q. South apprivate little
Consentions 0	Appointment Missed MyChart • Representation	Dec 34
R Backmanked	Appointment Missed MyChart • No previous prolicity.	5ec 21

Appointment Missed

Appointment Missed

HyChart No preven

WyChart



Dec 21

Dec 20



### Messaging: View your sent messages

1. Select Your Menu



2. Under Communications, select Messages

Coi	Communication		
	Messages		
:-7	Ask a Question		

3. Under **Conversations**, any message labeled as *You* was sent by you. *Messages in* bold *are unread messages*.

Message Center	Conversations Q	Search conversations
Send anneuster	Medication Ranéwal Request You Reflected for the following medication: AUMIGNAM (LENGE) 1 mg PO TAB	Dec 20 5. Preferal phoresp. CVU/Ph.
Baskmannet     Aggaskmannet     Aggaskmannet     Aggaskmannet     Addematicalmensages	B Test Vor: Vest2	Aug
Taut.	Test	Aug
	TEST	144.20

### Request Medical Records

1. Select Your Menu

4.



2. Under My Record, select Request My Medical Records



3. Follow the steps on the 3<sup>rd</sup> party site to request your complete medical record.

SENTARA SENTARA	
* Request medical records from Sentara Healthcare.	
Rather use a smartphone? Click how to get a link.	
CHC Letts Got	
Video futerial: click here for a short video that walks you through this tool.	
ciox	



5. Continue through the medical records request process. The online tool verifies your identity by asking for a photo of your driver's license or government issued identification, which can be taken via webcam or smartphone.

Use the link below to find a medical records department nearest you.

https://www.sentara.com/patientguide/medical-records/request-your-medical-records.aspx

# *Proxy Sharing: How to grant another person access to your account*

Instructions for access to another adult when a person is wishing to access information and is a current Sentara MyChart user

1. Select Your Menu

<b>S</b> s	ENTARA <sup>®</sup>
9 Your Menu	🐻 Schedule an Appointment 🖾 Messages 🍐 Test Results 📄 Pay My Bill
Indor <b>Charing</b>	Salact Sharing Hub

2. Under Sharing, Select Sharing Hub

Sha	aring
8	Sharing Hub
G	Share Everywhere
e	Link My Accounts
ΞI.	Lucy

3. Under Already know which sharing option you want?, select Give friends and family access

Sharing Hub			
here are many ways to share your health inf	ormation. Let us help you find what you need.		
Who do you want to share your heal	th information with?		
Tournelf Tournelf be trying to get a copy for your personal reference.	A family member, class friend, or carefular This person might be taking care of you or helping you hadk your health.	A healthcare provider is a health pofessional for example, a doctor, dentar, mice, or accal worker or a healthcare improtation.	Anyone else Thu night be someowe at another organization, like your insurance or workalize.
Watch to Learn			
Watch to Learn	Learnin	ptopia in	
Your Hea	Ith Record on the Go health data is securely shared between doctors		r Record Bout hew you can share your record.
Your Hea	Ith Record on the Go heath data is securely shared between doctors instrons.		bout how you can share your record.
Your Heat Learn hou and organ	Ith Record on the Co health data is securely shared between doctors tations. Watch r	Sharing You Learn more a	bout how you can share your record.
Your Hea	Ith Record on the Co health data is securely shared between doctors tations. Watch r	Sharing You Learn more a nerv volens	bout hew you can share your record.

4. Select +Invite Some
------------------------

Schedule an Appointment	t 🖂 Messages 🤰	Test Results 📄 Pay My Bill	
Friends and Family Access			
Who Can See My Record?			
	No one can see y	our information	
+ Invite someone			
Whose Records Can I See?			
Bell Tinker Nickname: Bell This is your record.		Mike Test Nickname: Mike Access until: 10/17/2969	Revoke
Periplaneta Americana Nickname: Periplaneta Access until: 12/2/2944	Revoke	Vickname: Testing Access until: 8/7/2999	Revoke
	Back to Sh	aring Hub	

5. Fill out the required information, review and accept the **Terms and Conditions**, and select **Send Invite** \* *Indicates a required field* 

Your Menu 💿 Schedule an Appointme	ant 🔟 Messages 👗 Test Results 😑 Pay My Bill
Invite Someone to Have Access	to Your Record
<ol> <li>We will email an invitation to someone you trust.</li> </ol>	<ul> <li>From the email, they can log in to their</li> <li>MyChart to accept the invitation.</li> <li>They must verify they know you by entering your date of birth.</li> </ul>
Who are you inviting to have access to *ture Test Where should we send this invitation?	
★ <sub>Email</sub> test@sentara.com	*confirm ===il test@sentara.com
*What kind of access would you like th Adult accessing Adult This access type allows another adult to have access to your medical record, including messaging and scheduling	his person to have to your medical record?



The invite is sent out to the email address provided.

The requester will receive an email and must select **Accept Invitation**. Next, log into their Sentara MyChart account. If the person you sent the invite to does not have a Sentara MyChart account, they will need to create one.

## To access another Sentara MyChart adult patient's account when requestor is not a current Sentara patient

- Complete the Sentara Healthcare MyChart Proxy Access form ensuring that both adults sign the form.
- Return the form to the physician's office.

#### To access a Sentara MyChart teen (14-17 yrs.) patient's account

- Complete the Proxy Access form allowing one parent or legal guardian access and return it the teen's provider. Both the parent/guardian and teen must sign this form.
- The Teen will be issued an activation code for their own MyChart account.
- The teen must activate their account and that will complete the proxy access for the parent or legal guardian.

#### To access a Sentara MyChart child (Birth - 13) patient's account

- Complete the Sentara Healthcare MyChart Proxy Access form.
- Return the form to your child's physician.

All proxy forms may be located by copying and pasting the link below in your browser address bar: <u>http://www.sentara.com/hampton-roads-virginia/patientguide/medical-records/sentara-mychart/patient-forms.aspx</u>

You may also request them from your physician's office.

If you do not have a Sentara Medical Group provider, you may send in a pdf format to <u>Mychart\_support@sentara.com</u>

## *Proxy Sharing: How to remove another person's access to your account*

1. Select Your Menu

<u>5</u> s	ENTARA <sup>®</sup>
Your Menu	🕝 Schedule an Appointment 🛛 Messages 🍐 Test Results 😑 Pay My Bill

2. Under Sharing, select Sharing Hub

Sha	aring
4	Sharing Hub
Ð	Share Everywhere
e	Link My Accounts
ΒT.	Lucy

3. Under Already know which sharing option you want?, select Give friends and family access

Sharing Hub			
There are many ways to share your health lofo	emation. Let us help you find what you need.		
Who do you want to share your healt	h information with?		
Yourself You might be trying to get a copy for your personal reference.	A family member, close friend, or cantainer This person might be taking care of you or helping you track your health.	A healthcare provider A healthcare provider is a health professional for example, a doctor, dentian nucle, or obtail worker) or a healthcare imprication.	Anyone else This might be someone at another organization, like your insurance or workplace.
Watch to Learn			
	Learning	ptopica 🔿	
	In Record on the Go health data is securely shared between doctors antons.		sur Recard atiout how you can aftere your record.
	Watub (	tere videre	
Aready know which sharing option you w	ant)		
G Give friends and family occurs	Grant one-time access wit	h Share Everywhere 🛓 Down	oad health and sisit summary
Propagat formal copy of health record	C live permasion to share (	tour health record	

4. Choose the person and select Revoke

You' Menu 🛛 🐻 Schedule an Aj	pointment 🛄 Messages	📕 Test Results 🛛 👼 Pay My Bill	
riends and Family Access the Can See My Record?			
Fail Weather They Access Al Adult accessing Adult (1) Access antil 3/24/2586	Revolu	Harold Vaccine their extension Adult a convening Adult (1) Access with 3/24/2996	Revole
Gwen Stefani There excess its Adult accessing Adult (1) Invite sent to ctnichol@sentara.com	Revolve	+ Invite summe	2018
hose Records Can I See?			
Wanda Welcome Nichneme Wanda This is your record.		Active October Network Active Active 2/28/2991	Revolu
Gold Beaker Nickhaine Gold		Odessa Vaccine Notingere Access until	

5. Select **Revoke** and the Family and Friends access page will refresh. After this action is complete, the person you revoked access from will be unable to access your Sentara MyChart account.

	Fall Weather The seasant, Adult accessing Adult (2) Means with STA2988	Benthe		Harold Variative There excession Adult accessing Adult (a) Assessment 3/24/2008	Bruthe
	Given Shifari Seramata Adat aronning Allat (j) min anna rink aron rink aron	(Rending)	rouke access to	your record for Fall Weather?	Carnel
mar De	conta Can t See 7		-		Cannad

# *Proxy Sharing: How to view another person's record that you have access to*

1. Locate the Person Icon on the top right. Select the Person icon on the top right. Select the **Switch** button. Next, select the Person icon for the person you would like to access.



## Update End of Life Planning

1. Select Your Menu



2. Under My Record, select End-of- Life Planning



3. You can now upload your Advance Care Plan to send to your physician's office. To upload your Advance Care plan under **Document on File**, select **Add a document** 



## Update Wallet Card

1. Select Your Menu

<b>S</b> 8 E	ENTARA <sup>®</sup>			
Your Menu	Schedule an Appointment	🖾 Messages 🏾 🍐	Test Results 🛛 🧲	Pay My Bill

2. Under My Record, select Wallet Card



3. Select **Edit** next to the heading Medical Information, contacts, or Insurance Information to make any updates and pull information from your MyChart to the card.

If you would like to print a copy of your wallet card, select the *Print* icon in the upper right corner of the wallet card page.

Wallet Card	<b>中</b> (1)
This page is a convenient, printable summary of your medical informati of the Wallet Card. You can also add comments and information that are	
Patient Information Name: Patient Guide Address: 1 First Ave Virginia Beach VA 23456-6782	Medical Information       Ex         Conditions:       Chest pain         Medications:       Note:         Allergies:       NKDA         Note:       Medical information may have been changed by patient.
Contacts Edit	Insurance Information E

## View and/or Complete Questionnaires

1. Select Your Menu



2. Under My Record, select Questionnaires

Му	Record	
÷.	COVID-19	
$\oslash$	To Do	
	Visits	
لله	Test Results	
	Medications	
•	Health Summary	
	Plan of Care	
۲	Preventive Care	
7	Questionnaires	
4	Upcoming Tests and Procedures	

- 3. Select the questionnaire, complete the answers, and select Submit
  - \* Indicates a required field

Questionnaires	¢.
Assigned Questionnaires	
For an upcoming appointment (j)	
Communicable Disease Screening	Due 12/22/2022 →
Mammography Patient Questionnaire	0 ce 12/22/2022 →
Breast Imaging History	Due 12/22/2022 →

Your updated information will show in your MyChart account once your provider's office has reviewed and reconciled the information.

### View Test Results

1. Select Your Menu

<b>S</b> 8 F	E N	TARA*				
Your Menu	6	Schedule an Appointment	Messages	٨	Test Results	Pay My Bill

2. Under My Record, select Test Results

Му	My Record				
<b>\$</b>	COVID-19				
$\odot$	To Do				
	Visits				
لله	Test Results				

3. Check the box to **Show Hospital Results** and a complete list of available tests will display. Select the test result you would like to view. The unviewed test results will be bolded.

Test Results				÷
Search this list	<ul> <li>Show hospital res</li> </ul>	sults		
Test		<u>Ordered By</u> -	Date	
() 🚣 CHOLESTEROL		Test	May 5, 2022	
🕕 🚉 EKG 12-LEAD		SHC Historical Provider	May 9, 2022	

To learn more regarding the test, select **About this test**.

To compare the new result with previous results for the same test you may graph/tend this test over time by selecting **Past Result** or **Graph of Past Results** 

If you would like to print a copy of your test results, select the printer icon in the upper right corner of the test results page.

CHOLESTEROL - Det	ails		(i) About this test
Details Past Results G	raph of Past Results		
Component Results			
Component	Your Value	Standard Range	Flag
Cholesterol	210 mg/dL	110 - 200 mg/dL	A
General Information			
This test result has been relea	ased by an automatic process.		
	Back to	o the Test Results page	

## **Review our Terms and Conditions**

- 1. Scroll to the bottom of the MyChart home page
- 2. Select the Terms and Conditions link