



## Portal Quick Reference Guide

### Log In

- Enter the user name and password provided to you in the Welcome Email. You will be asked to create a new password when logging in for the first time. Click User Name Help? or Password Help? to retrieve credentials that you can't remember.

**Primary Referring Veterinarian Login**

User Name

Password

User Name Help?

Password Help?

Secure Login

☐ Remember Me

### Changing your Password

- Click Password on the portal menu to change your password in the portal.

**Password**

After your changes are complete, Please click Update.

Current Password

New Password

Confirm New Password

Update

## Profile & Settings

- To edit your practice's profile and contact details, select Profile & Settings from the header menu.

Here you can update your hospital name, address, city, state, zip code or phone number.

[Refer Patient](#) | [My Referrals](#) | [Patient Search](#) | [Profile & Settings](#) | [Password](#) | [Log Out](#)

### Profile & Settings

After your changes are complete, Please click Update.

Clinic Name

FVARC Internal Referrals

Address

City

Address 2

State

Zipcode / Postal Code

Phone

Show Search Results At Login

Last Week

#### Notification Settings

Fax Number	Check In	Update	Check Out	Deceased	
	Off	Off	Off	Off	

Email Addresses	Check In	Update	Check Out	Deceased	
llicari@horizondvm.com	Off	Off	Off	Off	<div>Edit</div> <div>Delete</div>
bmillier@fvarc.com	On	On	On	On	<div>Edit</div> <div>Delete</div>

+

 Add

Update

“Show search results at login”

Here you can choose which patients will automatically display when selecting patient search. Your choices are today, yesterday, last week and last month.

In the Notification settings area, you can add/ remove or update your email or fax number.

After entering the fax number, use the On/Off toggles to set which notifications will be received by fax.

After entering an email, use the On/Off toggles to set which notifications will be received by each email address.

When you are done making changes, click on Update.

## Searching & Selecting Patients

- Click on Patient Search.

[Refer Patient](#) | [My Referrals](#) | **[Patient Search](#)** | [Profile & Settings](#) | [Password](#) | [Log Out](#)

### Patient Search (Classic View)

Enter a Patient First Name, Client Last Name, or select Last Updated then click Search.

Patient First Name  
(partial accepted)

Client Last Name  
(partial accepted)

Last Updated:

Last Week ▾

Patient	Client	Description	Last Update ▾	Details
There has been no patient activity in the selected timeframe. Please select a wider timeframe under "Last Updated" to the left.				

Search

**NOTICE:** Our system is updated throughout the day, medical notes are uploaded as they are completed.

- To search for a specific patient, enter the patient first name and/or client last name. Partial names are accepted. You can also use the Last Updated field to search within a specific timeframe
- Once you have located your patient, click on show.

## Medical Record Information

- Client and patient information.

Client Information					PDF 
Client Name	[REDACTED]		Home Phone	[REDACTED]	
Email			Work Phone		
Address	[REDACTED]		Mobile Phone		
City	Oshkosh	State	WI	Zip	54901

Patient Information (ID: 109993F)			
Name	Cody	Breed	Bichon Frise
Color	White	Weight	0 lbs
Birthday	5/17/2005	Altered	Yes
Sex	Male	Species	Canine

- Scroll down to view the available information for your patient.

Appointments <span>▢ less detail</span>		scroll to top
Date ▼	Description	
6/22/2017 9:05 AM	Dr. Terri Cole	
6/7/2017 9:05 AM	Emergency	

Medical Notes <span>▢ less detail</span>			scroll to top
Date ▼	Description		Details
6/3/2017 9:04 AM	Archive: ██████████ 2017-06-03 09:04:23 AM		Open
6/3/2017 9:02 AM	CS-Final Recheck FV		Open
4/28/2017 10:13 AM	Take Home Instructions		Open

Laboratory <span>▢ less detail</span>			scroll to top
Please be aware lab results displayed below may not have been reviewed or communicated to your client by our clinicians. We will follow-up with your client once these results have been interpreted by our clinicians.			
Date ▼	Description		Results
6/1/2017 9:10 AM	GI PANEL 1 W/ SPEC fPL FE, FOLATE & VITAMIN B12 (COBALAMIN), SPEC fPL		Open
5/16/2017 4:19 AM	T4, CHEM 21 w/ SDMA		Open

Medications <span>▢ less detail</span>				scroll to top
Date ▼	Description	Quantity		Notes
5/31/2017 11:40 AM	Amoxicillin/Clav. Susp 62.5mg/ml 15ml	2		Show
5/31/2017 11:28 AM	Vit. B12 (Cyanocobalamin) inj 1000mcg/mL	250		

Digital Images <span>▢ less detail</span>				scroll to top
Date ▼	Modality	Images		Details
5/31/2017 12:00 AM	Ultrasound	25		Open
4/18/2017 12:00 AM	Computed Radiography	2		Open

## **Opening Attachments**

- Some medical record information may have reports or test results associated with them. Click “Open” to open these files. Once opened, you can also print or save a copy to your computer.
- Medical Notes listed as CS-open are typically updated twice daily and provide an ongoing report of the patient’s medical condition.
- Medical Notes listed as CS-Final are concluded summary documents of this visit.
- Medical Notes listed as “Archived” documents are similar to the reports you have received in the past. The archived document includes bloodwork results, ultrasound forms, and other information relevant to this visit. This “Archive” can be saved to your hospital electronic medical record if desired.

## Referring a Patient

- To refer a patient, click on “Refer Patient” on the top left.

[Refer Patient](#) | [My Referrals](#) | [Patient Search](#) | [Profile & Settings](#) | [Password](#) | [Log Out](#)

### Refer Patient

1

2

3

4

5

Referral Details

Referring Veterinarian

Client

Patient

Review & Complete

#### Referral Details

Referral Practice \*

- Enter in the referral details.

- At any time during this process you wish to save your progress and finish later, click on finish later at the bottom of the page.
- Red asterisk indicates a required field

[Refer Patient](#) | [My Referrals](#) | [Patient Search](#) | [Profile & Settings](#) | [Password](#) | [Log Out](#)

### Refer Patient

1

2

3

4

5

Referral Details

Referring Veterinarian

Client

Patient

Review & Complete

#### Referral Details

Referral Practice \*

Animal Referral Center of Fox Valley

Specialty Service for Referral \*

- Select One -

Request Specific Doctor

Reason for Referral/Primary Complaint

Expectation for this case

Consult, Diagnostic Testing and Treatment  
Please transfer patient back to my practice for treatment after diagnostic testing  
Consult Only, No Additional Diagnostics  
Other (please specify in comments section below)

Additional Comments | Pertinent History | Vaccine History (8000 characters maximum)

Cancel Finish Later Next

Select the practice you are referring the patient to.

Select the specialty you would like the patient to see.

Select an expectation for this case.

You can also select how you would like an appointment scheduled, which doctor you would like the patient to see, the reason for the referral and add any additional comments.

When you are finished, click on Next.

- **Enter your information.**

[Refer Patient](#) | [My Referrals](#) | [Patient Search](#) | [Profile & Settings](#) | [Password](#) | [Log Out](#)

**Refer Patient**

1

2

3

4

5

Referral  
Details

Referring  
Veterinarian

Client

Patient

Review &  
Complete

**Referring Veterinarian Information**

Hospital Name \*

Phone Number

Veterinarian's Name \*

Fax Number

Submitted By

E-mail Address

Previous

Cancel

Finish Later

Next

Enter your name in the veterinarian's name field.

You may also enter the name of the person submitting the referral.

Click Next when you are finished.

- **Enter the client's information.**

[Refer Patient](#) | [My Referrals](#) | [Patient Search](#) | [Profile & Settings](#) | [Password](#) | [Log Out](#)

**Refer Patient**

1

2

3

4

5

Referral  
Details

Referring  
Veterinarian

Client

Patient

Review &  
Complete

**Client Information**

First Name \*

Alternate First Name

Last Name \*

Alternate Last Name

Address

Primary Phone

Home

Mobile

Work

Address 2

Home Phone \*

City

Mobile Phone

State

- Select One -

Work Phone

Zip/Postcode

E-mail Address

Previous

Cancel

Finish Later

Next

Enter the Client's first name, last name, and phone number.

You can also enter their address and alternative name and phone numbers.

- Enter the patient's information.

Refer Patient | My Referrals | Patient Search | Profile & Settings | Password | Log Out

### Refer Patient

1

2

3

4

5

Referral Details

Referring Veterinarian

Client

Patient

Review & Complete

#### Patient Information

Name \*

Breed \*

Color / Description

Species \*

- Select One -

Sex \*

- Select One -

DOB or Age \*

#### Patient Files

Medical Records \*

- Required -

Lab Results \*

- Required -

Diagnostic Images \*

- Required -

+ Add File

Name
------

Previous

Cancel

Finish Later

Next

Enter the patient's name, species, breed, sex and DOB or age.

You can also enter the patient's color / description.

- Choose how you will share the patient's records.

### Patient Files

Medical Records \*

- Required -

Lab Results \*

- Required -

Diagnostic Images \*

- Required -

+ Add File

Name
------

Will be attached (add file below)

Will be emailed

Will be faxed

Client will bring

Lab results pending

Radiographs sent via

Previous

Cancel

Finish Later

Next

For each drop down list (medical records, lab results and diagnostic images) select how you will be sharing the results.

After selecting an option for each list, you may add files to share by clicking on add files. Type in a description of the file you are uploading and click on select file. Browse to the file on your computer and click on upload.

When you are finished, click on Next.



- Review and submission.

**Patient Information**

Name \*

Species \*

- Select One -

Breed \*

Sex \*

- Select One -

Color / Description

DOB or Age \*

**Patient Files**

Medical Records \*

- Required -

Lab Results \*

- Required -

Diagnostic Images \*

- Required -

+ Add File

Name

Previous

Cancel

Finish Later

Submit

Review the information entered, if it is complete, click on submit at the bottom of the page.

## Reviewing your saved and completed referrals.

- Click on my referrals.

[Refer Patient](#)
[My Referrals](#)
[Patient Search](#)
[Profile & Settings](#)
[Password](#)
[Log Out](#)

My Referrals				
<div> <div>Add Referral</div> <div>Export to Excel</div> <div>Export to PDF</div> </div>				
Practice	Patient	Specialty	Status	
Animal Referral Center of Fox Valley	schuh, wilson	Emergency & Critical Care	Not Yet Submitted	<div>Edit</div> <div>Delete</div>
Animal Referral Center of Fox Valley		Internal Medicine	Submitted	<div>View</div> <div>Update</div>
Animal Referral Center of Fox Valley	Tester, Tesla	Emergency & Critical Care	Submitted	<div>View</div> <div>Update</div>

Here you can see the list of saved and submitted referrals.

To edit a saved referral, click on edit.

You can also add a new referral, or export the list to excel or PDF.