# **OneSight IT Operations**

Registration Clinic Operations User Guide



Feb-2022

#### <u>Overview</u>

This document details the steps required to access a registered patient and print out their name badge label.

#### <u>Access</u>

If you are accessing the "Registration" page before clinic or on a laptop while on clinic, navigate to <u>https://www.onesightclinics.org/</u> and click on the "Clinic Operations" tab.



Now, click on the green "Patient Registration" button at the top.



# **Searching Registration**

You will now be on the "Registration Gateway" page. Here you will fill out different search criteria to search for the patient. These search results will only show patient's that have been registered.

ONESIGHT         Digital Clinic           EssilorLuxottica Foundation         Digital Clinic				
REGISTRATION GATEWAY Version 6.0				
Search for patient to ensure they are not already registered. If no registration exists you will be able to add it.				
Clinic ID Number:				
First Name:				
Last Name:				
Clinic Name:	2020-NA-United	States-TRAINING ~		
Personal ID:				
School/Community:	ALL	v		
Active User:	TRAIN			
SEARCH REGISTRATIONS				
CLEAR FORM		LOG OUT USER		

Below are the fields you will fill out.

Clinic ID Number – The computer-generated ID for the patient.

First Name – The patients first name.

Last Name – The patients last name.

Clinic Name – The name of the clinic. (This should already be in the drop down.)

**Personal ID** – Reference number used for patient and is not unique.

**School/Community** – Use the drop down to choose a specific school or community. You can also leave it set to "All."

Once you have filled out these fields, click on the blue button at the bottom labeled "Search Registration."

### **New Registration**

On this page you will see a list of all search results found from your search criteria. If the patient you are searching for does **NOT** show up, you will need to have them fill out the online registration. Please reference the **Walk in Registration** training if they are a walk in. If this is done prior to clinic, please reference the **Online Registration** training.

## **Existing Registration**

If a patient has already been registered and you would like to edit their information or re-print their label please follow the steps found above for "Searching Registration" but this time your search results will show the patient you are looking for.

Q Search Again	💾 Download Data 🔻				
	CLINIC NAME	<u>ID</u>	FIRST NAME:		
	2019-US-OH-Kent	1819191818	Steve		

LAST NAME:	SCHOOL NAME	GRADE	
Stevens	Jamie Elementary	Other	View Details

There will be 6 columns on this page when there is a patient found.

Clinic Name – The name of the patient the clinic is on.

**ID** – The ID of the patient.

First Name – The patients first name.

Last Name – The patients last name.

School Name – The name of the patient's school, group, or community.

Grade – The grade the patient is in.

There is also an option to "Search Again" at the top left if you wish to go back and change your search criteria. There is also a "Download Data" button which will let you download the search results page in either CSV, Excel, or PDF format.

Now, to edit the patient or re-print the label, start by clicking the "View Details" button found to the far right of the patient.

This will bring you to the "Clinic Registration Update" page. Here you are able to edit any of the patient's details.

Clinic Registration Update
Project Details Active User: TRAIN Logout
Clinic Name / Nombre de la Clinica: Today / hoy* School/Group/Community *
2019-US-OH-Kent
Personal Data
Personal Identification Number * First Name / Nombre de Pila * Last Name / Apellido *
1819191818 Steve Stevens
Birthday (MM/DD/YYYY)* Age* Grade* Gender*
07/30/1998 🗉 21 Other - Male -
For MEEAP Programs Only: No
Health History
Does the patient or anyone in their family have a history of:
Glaucoma* Diabetes* Hypertension* Cataracts:* Macular Degeneration*
No • No • No • No •
NO TO ALL UNKNOWN TO ALL
Please list any medications : Please list any allergies:
Internal Patient Notes Has the Patient worn glasses before?*
No •
Consent to Dilate?* Media Release on File?*  Click to Enter or Update Pretest Results
O Yes O No O Yes O No
UPDATE REGISTRATION RECORD BACK

The first section is "Project Details" and has the following fields.

**Clinic Name** – Here you will confirm the name of the clinic you are currently on. If this is incorrect please reach out to the program manager.

**Today** – Here you will select the current day of the week. Each day will have a number in front of it starting with 1 (Monday) through 7 (Sunday).

**School/Group/Community** – Here you will choose the school, group, or community of the patient you are registering. Please select the correct option here and if the option is missing please reach out to your project manager. The next section is "Personal Data" and has the following fields.

**Personal Identification Number** – Here you can enter a student or government ID. You can also scan the barcode from a *pre-printed* label or enter the number found below it. This field is not required and is mainly used to keep better track of a patient.

First Name – Enter the first name of the patient.

Last Name – Enter the last name of the patient.

**Birthday** – Enter the birthday of the patient in MM/DD/YYYY format.

**Age** – Enter the current age of the patient.

**Grade** – Enter which grade the patient is in.

**Gender** – Select the gender of the patient.

**For MEEAP Programs Only** – Here you will select "Yes," "No," or "N/A" for the question listed. This is only for MEEAP programs so if this is not a MEEAP program please skip this question.

The last section is for "Health History" and has the following fields.

Glaucoma – Select the option for "Yes (Patient)," "Yes (Family)," "No," or "Unknown."

Diabetes – Select the option for "Yes (Patient)," "Yes (Family)," "No," or "Unknown."

**Hypertension** - Select the option for "Yes (Patient)," "Yes (Family)," "No," or "Unknown."

Cataracts - Select the option for "Yes (Patient)," "Yes (Family)," "No," or "Unknown."

**Macular Degeneration** - Select the option for "Yes (Patient)," "Yes (Family)," "No," or "Unknown."

Next, you will find an empty box under "Please list any medications." Please type out any medications the patient is on in this box. To the right of this you will find an empty box under "Please list any allergies." Please type out any allergies the patient has in this box. Now, you will find an empty box under "General Notes." Please enter in general notes about the patient here in this box. This is for medical notes **ONLY** so please keep personal opinions and statements out. Next, there is two more questions.

Has the patient worn glasses before? – Please select the option for "No," "Unknown," "Yes prior within a year," "Yes prior more than one year," or "Yes currently." Consent to Dilate – Select "Yes" or "No."

Media Release on File - Select "Yes" or "No."

**Click to Enter or Update Pretest Results** – If you click this box, an additional field will open below it allowing you to enter or edit the pretest results for this patient.

Pre Test Results				
OD VA Dist	OD VA Near	OD Color Correct:	Depth Test Type	
OS VA Dist	OS VA Near	OS Color Correct	Test Results	
OU VA Dist	OU VA Near			
UPDATE REGISTRATION RECORD BACK				

Once you have updated all the information you need to, or simply want to re-print the label, click the blue button at the bottom labelled "Update Registration Record."

You will now be brought the page where you can print the patients label. Confirm it shows the correct patient and click the yellow button labeled "Print Label" and the label will print out. If it does not or there are any errors, please reach out to your IT Captain.