

How To: Access Forms



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To review created forms for your practice or to access the unique URL link associated with the form:

Click on **Menu - Home - Form Library**.

Forms Library

Available Forms

- August Form
- COVID Screening
- New Patient Information

New Patient Information

Patient Information

First Name *

Last Name *

Date of Birth *

Street Address *

- Clicking on the first icon will copy the unique URL to your computer's clipboard.
- Clicking on the second icon will open a preview of the full form

updox

New Patient Form - Updox Example

New Patient Registration Form

Please fill out this form completely. The following information will help us in providing you the best medical care and treatment possible. If you have any questions, please contact the office. Thank you and we look forward to seeing you!

Patient Information

First Name *

Middle Initial

Last Name *

Date of Birth *

SSN *

Tip: Copy the unique URL for a form to save time when sending it to patients:

1. Create a Template (Menu - Admin - Templates - New) with the form URL for staff to quickly text to a patient.

2. Create a custom Reminder script to include forms that need to be completed prior to an appointment.
 3. Shorten URLs with free tools, such as Bitly, to avoid character limits for text delivery.
 4. Link to relevant forms from your practice's website for your patients to quickly access.
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