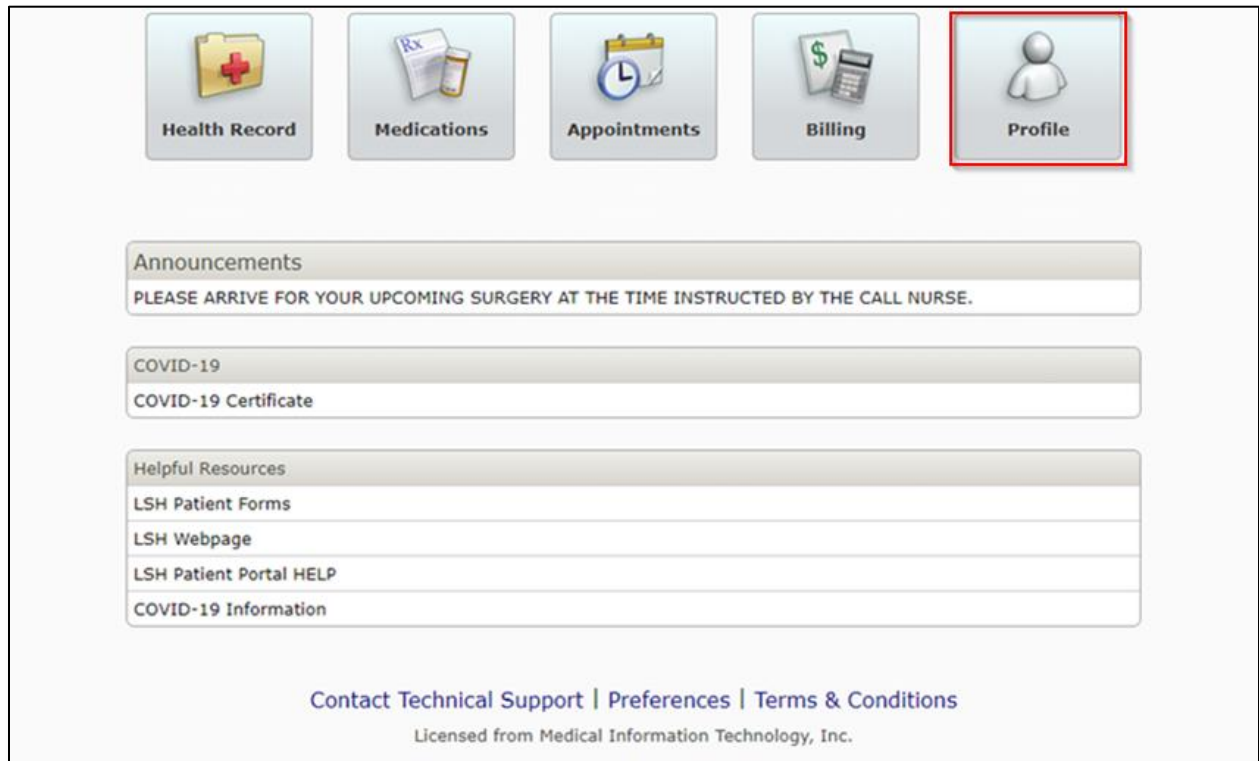


Profile

The Profile area of the Patient Portal provides a way for a Portal User to communicate information about the patient including Demographic Information and Contacts.



All information changed in the Portal is sent to the Health Information Team for review. The Hospital Staff may update the information and this change is then reflected in the Patient Profile display below.


The Profile page has three categories of data: Demographic Information, Contacts, and Shared Access.


The Shared Access displays the Portal Users that have access to the selected patient's information.


The Profile reflects the current information in your Electronic Medical Record. Select 'Update Profile' to request an update to your profile. [Learn More](#)

Demographic Information			
Name:	ZZZTest, Patient		
Address:	111 Apple Health Test Lincoln, Nebraska 68510		
Birthdate:	01/01/2001	Age:	20
Marital Status:	Single		
Race:	White	Religion:	Catholic
Cell Phone:	(402)432-4758	Phone 2:	
Email Address:	jvanlent@lincolnsurgery.com		
Mother's Name:	Don't Know		
Primary Care Physician:	William Coady		

Contacts			
Emergency Contact			
Name:		Relationship:	
Address:			
Phone 1:		Phone 2:	
Day of Surgery Contact			
Name:	ZZZTest, PatientMother	Relationship:	Mother
Address:			
Cell Phone:	(555)555-5656	Phone 2:	

 **Update Profile**

 **Shared Access**

 **Print**

Update Profile Wizard

Clicking on the “Update Profile” button in the right hand column will launch the user into the Profile Wizard. This is used to update a patient’s profile information, which includes person and contact information.

Page 1: Demographic Information

Patient information defaults into the following fields from the Lincoln Surgical Hospital and Nebraska Surgery Center Information System (if the data is available):

Request Update

Update your information below and select 'Submit' to send this update request to our Health Information Department.

Step 1: Patient Information

Address

City

State

Zip code

Cell Phone:

Phone 2:

Email

Page 2: Contact Information

Contact information will default in according to what is stored in the Electronic Health Information System:

Request Update
Update your information below and select 'Submit' to send this update request to our Health Information Department.

Step 2: Contacts

Emergency Contact

First Name (required)

Middle Name

Last Name (required)

Address

City

State

As with the Demographic Information tab, a Portal User can update all of the available fields if he or she desires.

Confirmation Screen

Once the request to update information has been submitted, a confirmation screen will appear.




Shared Access

To allow others to access your Patient Portal information.

The Profile reflects the current information in your Electronic Medical Record. Select 'Update Profile' to request an update to your profile. [Learn More](#)


Demographic Information			
Name:	ZZZTest, Patient		
Address:	111 Apple Health Test Lincoln, Nebraska 68510		
Birthdate:	01/01/2001	Age:	20
Marital Status:	Single		
Race:	White	Religion:	Catholic
Cell Phone:	(402)432-4758	Phone 2:	
Email Address:	jvanlent@lincolnsurgery.com		
Mother's Name:	Don't Know		
Primary Care Physician:	William Coady		

Contacts			
Emergency Contact			
Name:		Relationship:	
Address:			
Phone 1:		Phone 2:	
Day of Surgery Contact			
Name:	ZZZTest, PatientMother	Relationship:	Mother
Address:			
Cell Phone:	(555)555-5656	Phone 2:	



Select Create Invitation button.

Shared Access displays all users that have access to this patient's portal.

Create Access Invitation
To allow someone to access your Patient Portal information, select the Create Invitation button below. You will have the opportunity to choose which areas of your Patient Portal this person will have access to before sending the invitation.




You will have the opportunity to choose which areas of your Patient Portal this person will have access to before sending the invitation.

Create an Invitation

Create an invitation for another person to access this Patient Portal by completing the form below. Please verify the email address with the person you are inviting. They must accept the invitation using the same email address.

Step 1: Who would you like to invite?

First Name (required)

Last Name (required)

Email Address (required)

Confirm Email Address (required)

I am this person's... (required)
Relationship

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