

# Matthew Eidem, M.D.

Board-Certified Gastroenterologist

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## Patient Portal Information

**If you have not logged in to the Patient Portal before, please read the instructions below:**

Thank you for choosing Matthew Eidem, M.D. a DHAT physician and for using our Patient Portal.

You will receive an email from Dr. Eidem's office once you have been web enabled. The email will contain your User ID and Temporary password.

The first time you log in, you will be asked you to enter your birthday. Please enter your birthday with 2-digits for the month, 2-digits for the day and 4-digits for the year. You do not have to enter a telephone number if you do not want to in this screen. Click "Submit".

The next screen will ask you to change your password. Create a new password using 8 characters (Example: hello123). Please be sure to make note of your newly created password. Click "Submit".

The next screen is the eClinicalWorks and Practice Consent Forms. Please read this information carefully and check the bottom box and click "Agree" stating, "I have read the consent form and the above information and I accept the conditions."

NOTE: NEVER use the patient portal for emergency purposes. If you have an emergency, please call 911 or your doctor's office.

Now you will be logged into the Patient Portal Home Screen. The column on the left, lists items you will be able to view, as well as sections where you will need to complete information in FOUR Steps:

- Step 1: Your Info: Demographic information can be changed in this step. (NOTE: you MUST select "Digestive Health Associates of TX" under DEFAULT FACILITY for information you have added or modified to be saved)
- Step 2: Contacts and Pharmacy.

Note: The section, "Contacts [Optional]" is for Personal Representatives to whom DHAT may disclose or provide your protected health information (PHI).

- Step 3: There are TWO options in Step 3, Adults Questionnaire and Pediatrics Questionnaire. If you are an adult patient, please choose "ADULTS ONLY," If you are filling this out for a child, please choose "PEDIATRICS ONLY".

\*\*\*Please ONLY choose one questionnaire or the other: Adults OR Pediatrics\*\*\*

- Step 4: Surgical, Hospitalization and Allergies

Note: in this field you will be able to free text your information

Please DO NOT use special characters such as (! @ # \$ % & \*) when you enter free text. This will cause an error to occur when we download your information into your chart.

**NOTE: It is important that you scroll down to the bottom on each Step and click "Update / Submit" otherwise it WILL NOT SAVE your information. You can only submit once per Step, per log in. If you forgot to update any Step, please log out of the patient portal and then log back in to make additional changes**