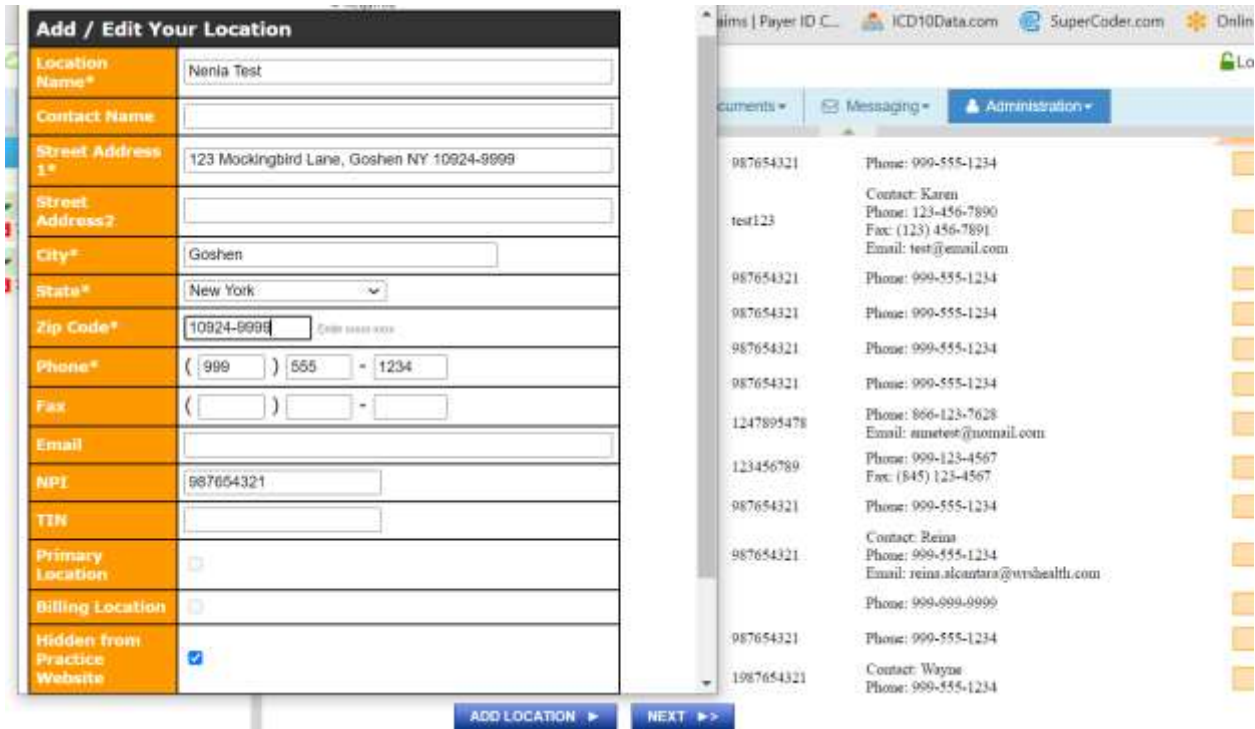DAY 4

PRACTICE SET UP

1. Add location

   a. Location Name: (Your Name) Test

   b. Address – 123 Mockingbird Lane, Goshen NY 10924-9999

   c. Phone – 999-555-1234

   d. NPI – 987654321

   e. Hide from Website

2. 2. Edit Practice Info

   a. What is the format and size of logo that will be uploaded? _____ Maximum image dimensions: 117w x 117h pixels.

   b. If there's a logo uploaded, provide areas where this can be seen

Logo can be seen next to the name of the Practise

-It can also be seen in any email sent to the Patient

such as:
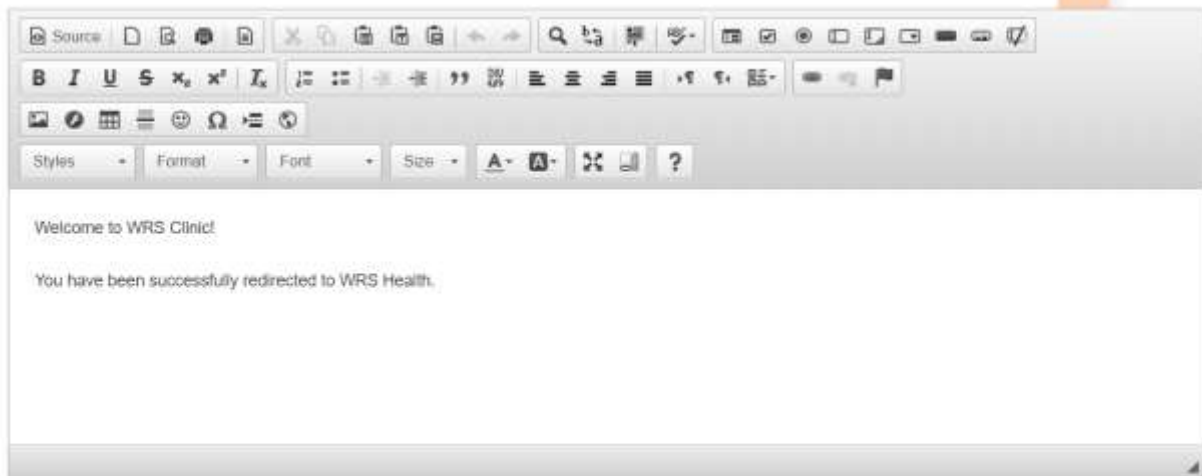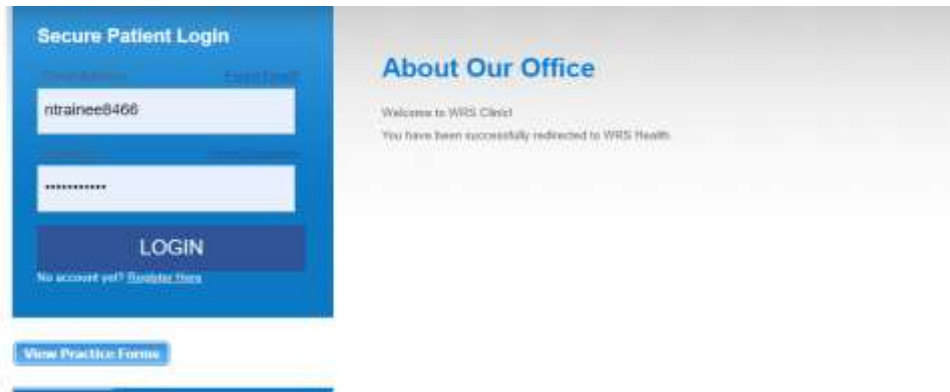
*welcome email

*Confirmation emai

*Appointment email

Clinical notes

3. 3. Edit Website Style

a. Briefly discuss steps on how to embed a practice website to WRS.

**When the Practice has other wesite what we do is,under the Lay-out, we click the embedable tab, we don't customize the color and the banner. We also advice the practice to put notification on the website letting them know that they are redirected to WRS Health.

Ex. You have been successfully redirected to WRS Health

4.Educational Materials contains links that the practice distribute to the Patient for them to be informed about their conditions. While Educational Instruction Patients are provided information that they can modify or add information.

5. Providers Name: Test Faith

UPIN NUMBER:		NPI NUMBER:	
TAXONOMY CODE:	⌄	DEA NUMBER:	(mandatory for ERx and Formulary checking)
PRIMARY PHONE:		PRIMARY FAX:	
PRIMARY SPECIALTY:	⌄	SECONDARY SPECIALTY:	⌄ TERTIAR'
EMAIL:	cynthis edjec	CELL PHONE:	
LOGIN USERNAME:	ftest9226	PASSWORD*:	CONFIRM

Leave password blank if you do not wish to change. Password case sensitive, 8 characters or longer, alphabetic numeric characters,

Please select an image to be used on the website for the doctor. **The image dimensions must be 200w x 250h pixels.**

BROWSE YOUR HARD DRIVE   Choose File   No file chosen   ± Upload

CURRENT IMAGE

◄◄ Reset   🖺 Save   ✖ Close

6.

WRS TRAINING
Test

TEST 2
SAMPLE 1

| Home | Our Providers | Directions | Education | Instructions | Our Services | Forms |

Patient Login

Email Address   Forgot Email?

ntrainee8466
Password   Forgot Password

••••••••••

LOGIN

About Our Office

Welcome to WRS Class!

You have been successfully redirected to WRS Health.