

# PRESTIGE ORTHOPAEDICS & SPORTS MEDICINE

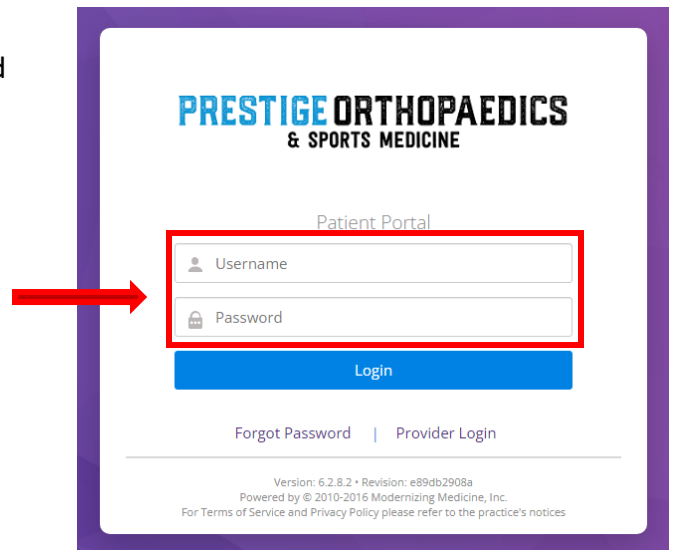
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## NAVIGATING YOUR PORTAL: NEW PATIENT PAPERWORK

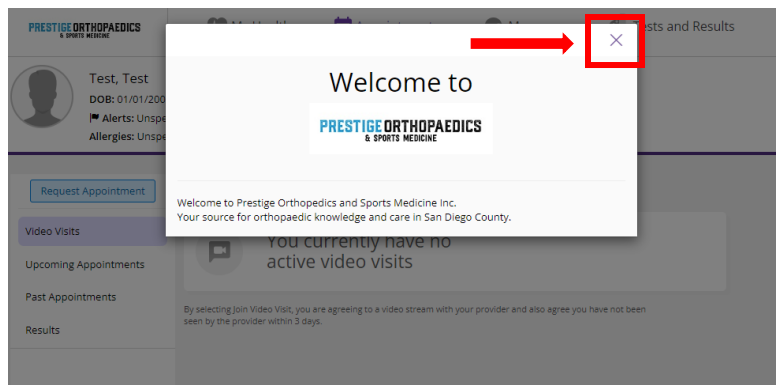
1. Navigate to orthosd.ema.md
2. Click on "Continue as Patient"



3. Login using your username and password
  - a. Refer to "pdf" if you have not yet activated your portal



4. You will be greeted with a "Welcome". Exit out of this notice.



5. In the top left corner, click on My Health.

PRESCRIPTIONS My Health Appointments Messages Tests and Results

Test, Test  
DOB: 01/01/2001 (21) | Phone: 100-1001 00 | Birth Sex: Male | MRN: 9349 | PMS ID: 9349  
Alerts: Unspecified  
Allergies: Unspecified

Contact Info  
Insurance and Pharmacy  
Medications  
Allergies  
Past Medical History  
Musculoskeletal History  
Social History  
Quality Measures

My Contact

Patient Data

Patient Information

Prefix Last Name \* First Name \* Middle Suffix

Marital Status Previous Name

Unknown

Drivers License Number State

Select One

Social Security Number

6. On the left side are all the sections that are required.

7. All the following sections will need to be filled out prior to your visit:

- Contact Info
- Insurance and Policy
- Medications
- Allergies
- Past Medical History
- Musculoskeletal History
- Social History
- Quality Measures
- Implantable Devices
- Family History
- Problem List



8. Once you finish one section, make sure to “Save and Continue” at the bottom of the page

Test, Test  
DOB: 01/01/2001 (21) | Phone: 100-1001 00 | Birth Sex: M:  
Alerts: Unspecified  
Allergies: Unspecified

Contact Info  
Insurance and Pharmacy  
Medications  
Allergies  
Past Medical History  
Musculoskeletal History  
Social History  
Quality Measures  
Implantable Devices  
Family History  
Problem List  
My Forms

My Contact

Patient Data

Patient Information

Prefix Last Name \*

Marital Status

Unknown

Drivers License Number

Social Security Number

Required For Meaningful Use

Date of Birth \*  
mm/dd/yyyy

City of Birth

Zip Code