

The Questionnaire functionality allows portal users to fill out various pieces of information prior to or after a visit.

These Questionnaires send real time notifications to the portal user and are tailored to specific frequencies based on the service being provided.

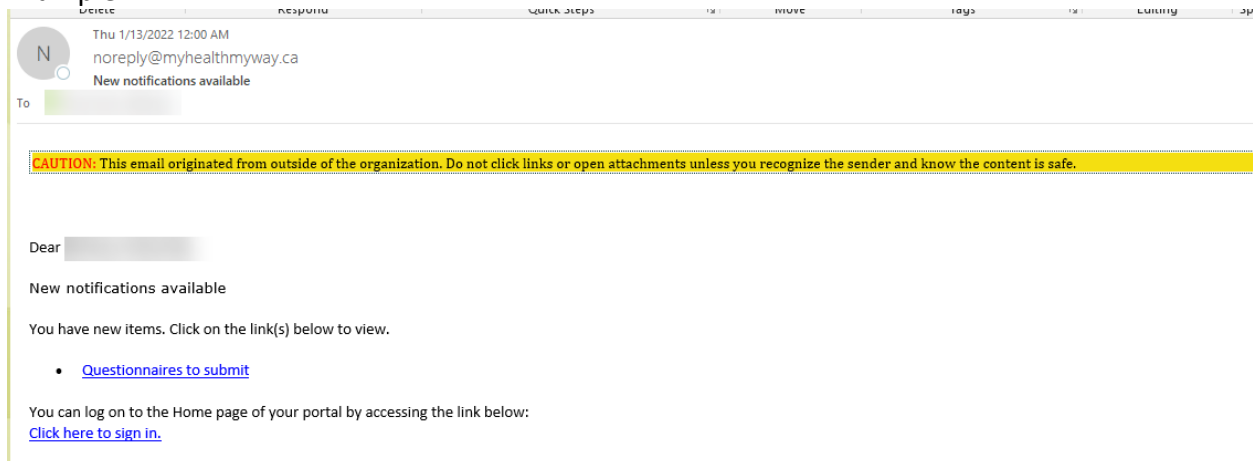
Once the Questionnaire is submitted by a portal user, all of the information can be **consumed** by the clinician into the Electronic Health Record.

Questionnaires are being used in the following services:




- Anxiety and Mood Disorders Service
- Borderline Personality and Self-Regulation Service
- Complex General Psychiatry Outpatient Service
- First Responders Assist Service
- Health Care Worker Assist Service
- Ontario Structured Psychotherapy Service
- Traumatic Stress Clinic
- Women's Clinic

Portal users will receive email notifications when they have been sent a Questionnaire.

Example:




Questionnaires are found in the Health Record tab of the Portal.


 My Health
My Way  


Log Off


Change Person


Demo Questionnaire


 Messages

 Health Record

 Medications

 Appointments

 Profile

 Demo Questionnaire's
Health Record

Select an item below or a button to the right to view more details. To update, change or inquire about any information below, please contact your clinician.
This information does not constitute medical advice or treatment and should not be used in place of a consultation with a medical professional. [Learn More](#)

Allergies

acetaminophen

Milk Containing Products

Penicillins

Medications


ascorbic acid (vitamin C) (Vitamin C) 250 mg


cholecalciferol (vitamin D3) (Vitamin D3) 400 unit (10 mcg)


lorazepam 0.5 mg


Current Conditions


There are no conditions for this patient.


 Visit History


 Results


 Medications


 Allergies & Conditions


 Reports

 Documents

 Health Maintenance

 Questionnaires

 Print

 Medical History

Questionnaires will be listed as “In Progress” if they have been started or blank if they have not been started. They will also have an associated due date for completion or be blank if they can be submitted at any time during service.

My Health My Way

Home | Log Off



Demo Questionnaire's
Questionnaires

Select a questionnaire to view the details and update your healthcare information. [Learn More](#)

[View Completed](#)


Questionnaire		Submit By
Patient Story	In Progress	19 May 2024
PHQ-9 #1		15 Jun 2024
PHQ-9 #1		17 Jun 2024

[Back to Health Record](#)

Questionnaires can be narrative or multiple choice. Portal users can save their responses as they complete their Questionnaires by selecting “Save Draft”. This will mark them “In Progress”.

My Health My Way

Home | Log Off



Demo Questionnaire's
Questionnaires

PHQ-9 #1
Answer the questions to complete your questionnaire.

Step 1 of 1: Patient health questionnaire 9
Patient health questionnaire 9

1. Little interest or pleasure in doing things

☐ 0 - Not at all

☐ 1 - Several days

☐ 2 - More than half the days

☐ 3 - Nearly every day

2. Feeling down, depressed, or hopeless

☐ 0 - Not at all

☐ 1 - Several days

☐ 2 - More than half the days

☐ 3 - Nearly every day

3. Trouble falling or staying asleep, or sleeping too much

☐ 0 - Not at all

Cancel


Save Draft

Submit

Once completed, portal users will click “Submit” to send their Questionnaire to their clinician. Responses of “In Progress” Questionnaires cannot be viewed by a clinician.

My Health My Way

Home | Log Off



**Demo Questionnaire's
Questionnaires**

PHQ-9 #1
Answer the questions to complete your questionnaire.

Step 1 of 1: Patient health questionnaire 9
Patient health questionnaire 9

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☐ 1 - Several days

☐ 2 - More than half the days

☐ 3 - Nearly every day

3. Trouble falling or staying asleep, or sleeping too much

☐ 0 - Not at all

Cancel


Save Draft

Submit

Questionnaires that have been completed can also be reviewed by clicking “View Completed”.

My Health My Way

Home | Log Off



**Demo Questionnaire's
Questionnaires**




Select a questionnaire to view the details and update your healthcare information. [Learn More](#)

Back to Health Record


View Completed

Questionnaire	Submit By
Patient Story	In Progress 19 May 2024
PHQ-9 #1	15 Jun 2024
PHQ-9 #1	17 Jun 2024

Clicking a Questionnaires provides a PDF view which can be printed.

My Health My Way  

Home | Log Off




Demo Questionnaire's
Questionnaires

Select a completed questionnaire to view the details and print the submitted questionnaire.
[Learn More](#)


[View Outstanding](#)

Questionnaire	Submitted
PHQ-9 (Q)	30 Nov 2021
Crisis PP (Questionnaire)	03 Nov 2021
Consent	23 Aug 2021
RAS-24	23 Aug 2021
RAS-24 (Q)	29 Jul 2021
Crisis PP (Questionnaire)	29 Jul 2021

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My Health My Way  

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Demo Questionnaire's
Questionnaires

[Return to the Completed Questionnaires](#)

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Demo Questionnaire's PHQ-9 (Q)

Submitted by [REDACTED] on 30/11/2021 at 3:58 pm

Patient health questionnaire 9
Patient health questionnaire 9

1. Little interest or pleasure in doing things

2. Feeling down, depressed, or hopeless

3. Trouble falling or staying asleep, or sleeping too much

4. Feeling tired or having little energy

0 - Not at all

2 - More than half the days


2 - More than half the days

2 - More than half the days

Click “View Outstanding” to return to the list of Questionnaires.

My Health My Way

Home | Log Off



Demo Questionnaire's

Questionnaires

Select a completed questionnaire to view the details and print the submitted questionnaire.
[Learn More](#)

View Outstanding

Questionnaire	Submitted
PHQ-9 (Q)	30 Nov 2021
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