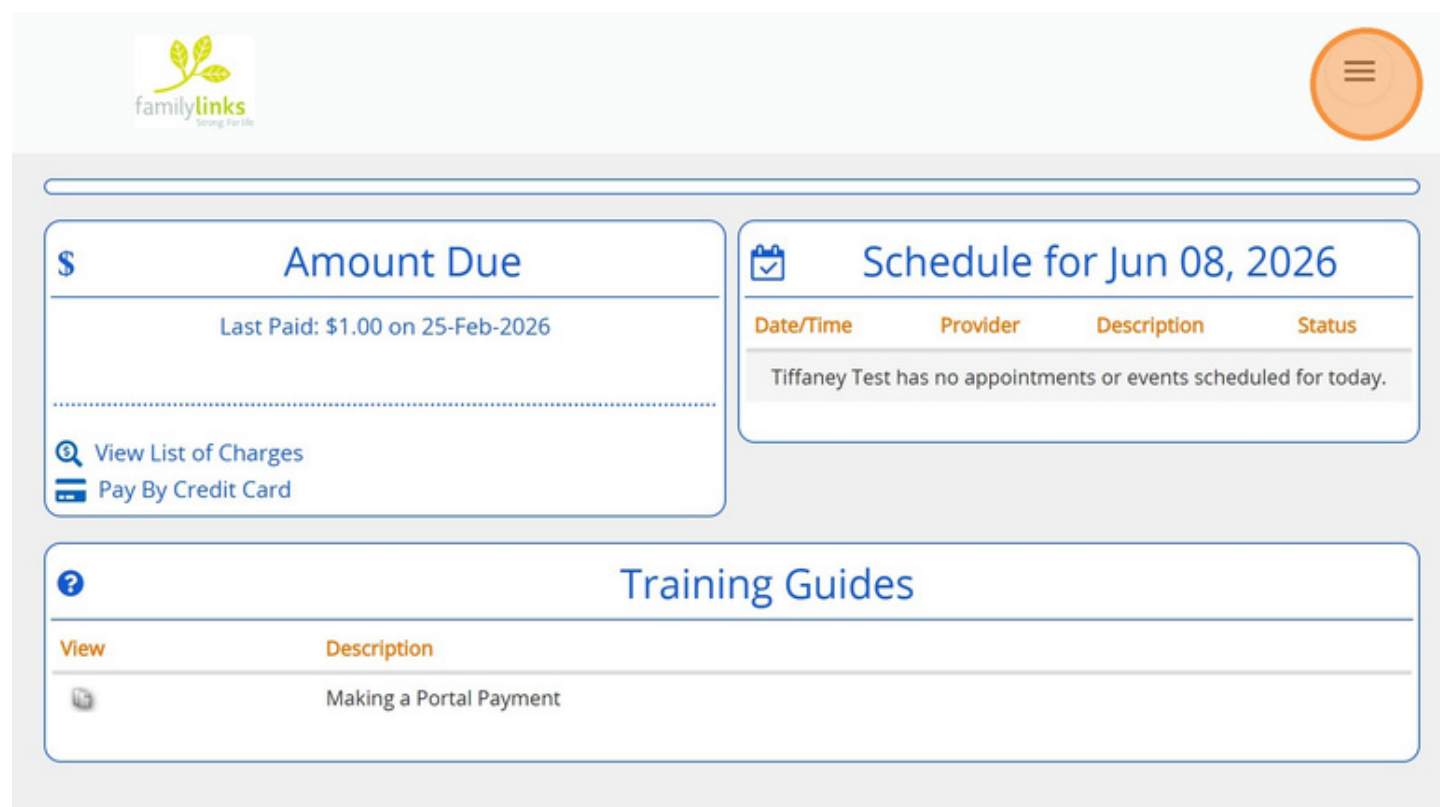


Welligent How To:

Completing a Document via the Patient Portal

Step 1:

Click the menu icon at the top of your portal homepage.



The screenshot shows the familylinks patient portal homepage. At the top left is the familylinks logo. At the top right is a circular menu icon with three horizontal lines. Below the header, there are three main sections:

- Amount Due:** Displays a dollar sign icon, the title "Amount Due", and the text "Last Paid: \$1.00 on 25-Feb-2026". Below this, there are two links: "View List of Charges" (with a magnifying glass icon) and "Pay By Credit Card" (with a credit card icon).
- Schedule for Jun 08, 2026:** Displays a calendar icon, the title "Schedule for Jun 08, 2026", and a table with the following columns: "Date/Time", "Provider", "Description", and "Status". The table content shows "Tiffany Test has no appointments or events scheduled for today."
- Training Guides:** Displays a question mark icon, the title "Training Guides", and a table with the following columns: "View" and "Description". The table content shows a document icon and the text "Making a Portal Payment".

Step 2:

Click "To Do List".




 To Do List →

 Documents →

 Client Info →

 Profile →

 Mail →

 To Do List



Training Guides

Step 3:

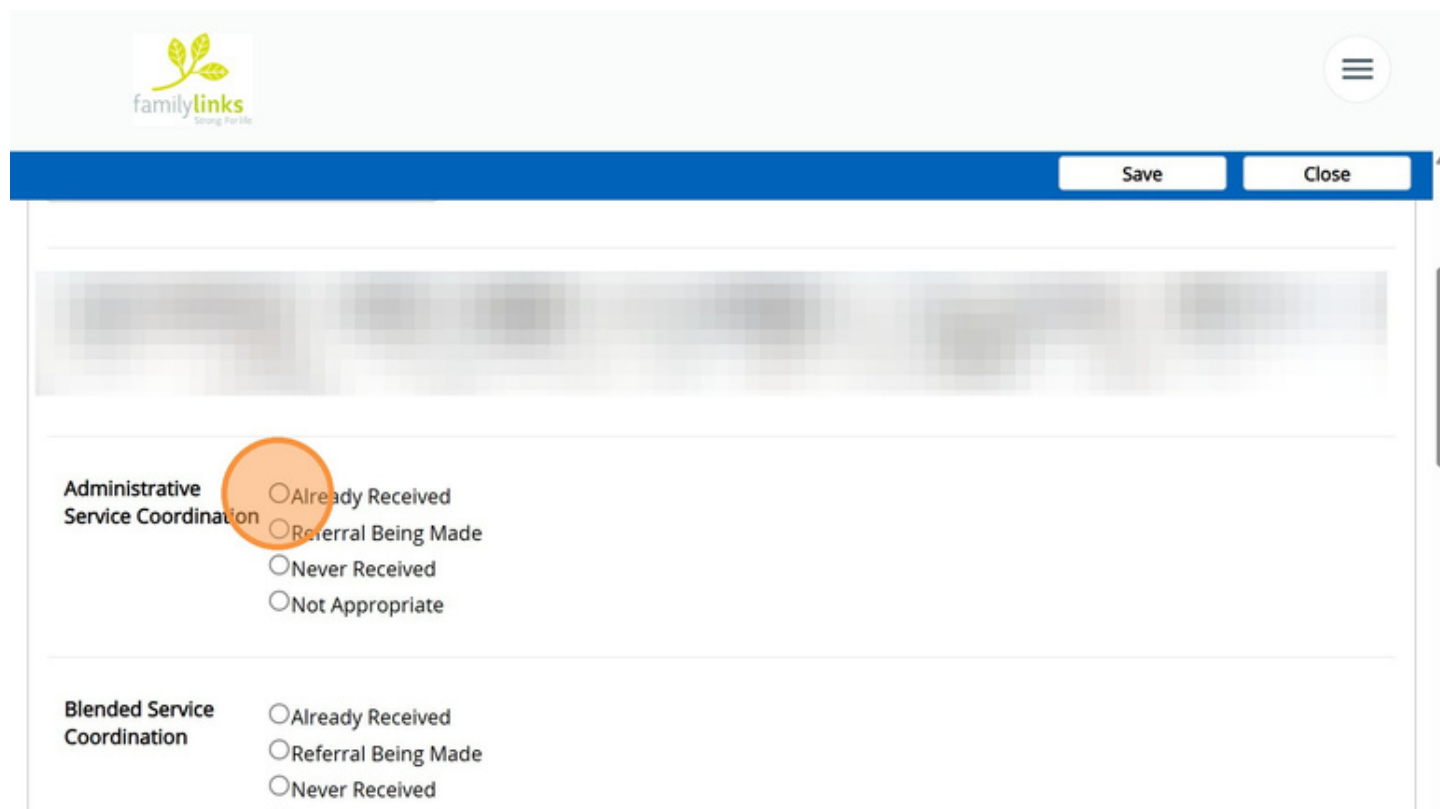
To complete a document, look for "Fill Out" in the Action column. Click the swiggle icon to complete the document and sign.

Forms To Complete

Click to Edit	Action	Document Name
	Fill Out	BH Consent to Treat
	Fill Out	BH Consent to Treat
	Fill Out	Discharge Letter (Successful)
	Fill Out	FBMH - Family Choice Notification Form
	Fill Out	FBMH Treatment Plan Consents
	Fill Out	Generalized Anxiety Disorder (GAD-7)

Step 4:

Form will pop-up on you screen for completion.



familylinks
Strong For Life

Save Close

Administrative Service Coordination

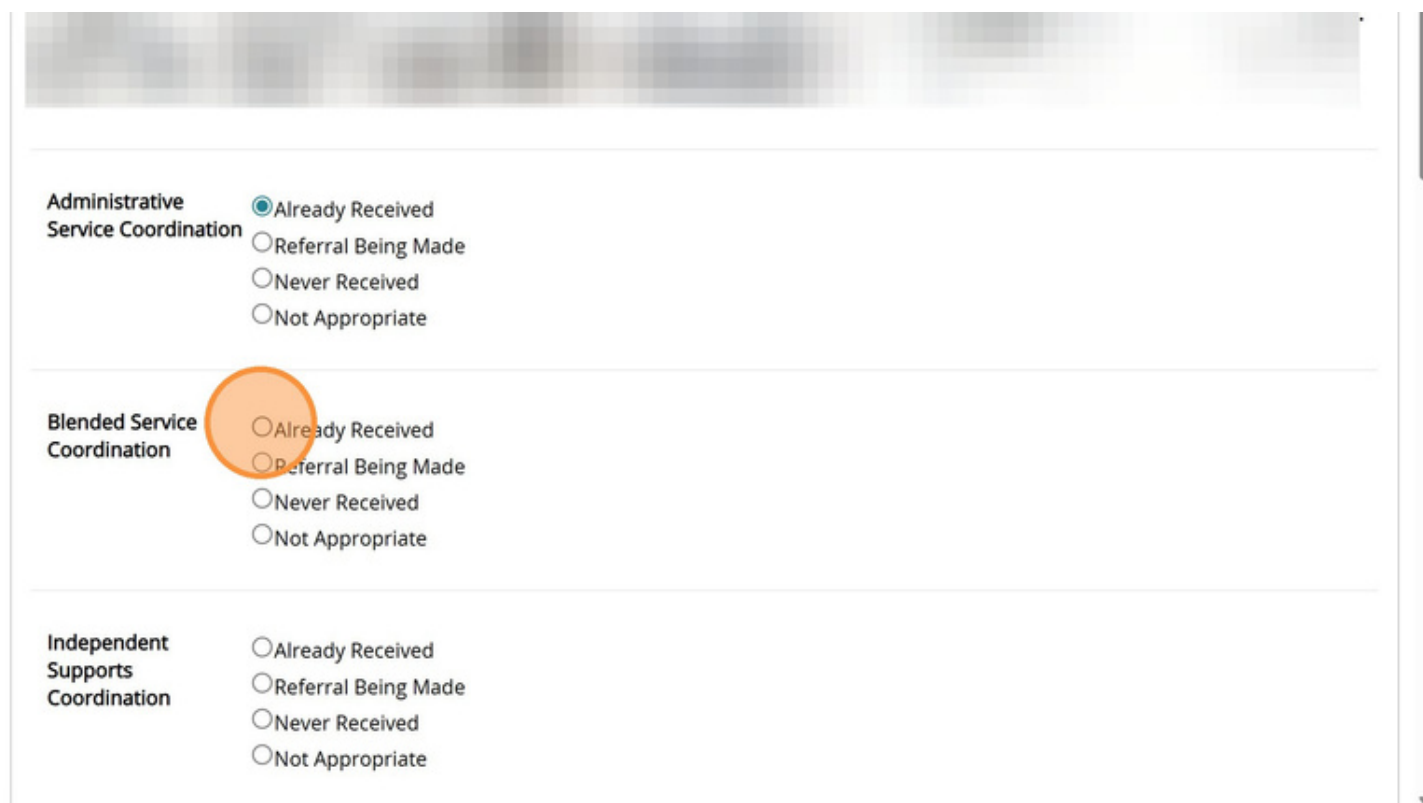
- ☒ Already Received
- ☐ Referral Being Made
- ☐ Never Received
- ☐ Not Appropriate

Blended Service Coordination

- ☐ Already Received
- ☐ Referral Being Made
- ☐ Never Received

Step 5:

Items will show as text boxes, radio buttons, drop down menus or check boxes. Complete all questions.



Administrative Service Coordination

- ☒ Already Received
- ☐ Referral Being Made
- ☐ Never Received
- ☐ Not Appropriate

Blended Service Coordination

- ☒ Already Received
- ☐ Referral Being Made
- ☐ Never Received
- ☐ Not Appropriate

Independent Supports Coordination

- ☐ Already Received
- ☐ Referral Being Made
- ☐ Never Received
- ☐ Not Appropriate

Step 6:

Click this check box to autofill the current date and time.



S

Edit FBMH - Family Choice Notification Form Information - Test,Tiffany H(ID# 8220594)

Form Status Information

Status:

Date Completed:  Time: 

Title

FAMILY CHOICE

Family Choice

Jun 2026

Su	Mo	Tu	We	Th	Fr	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

Step 7:

Select "Complete" from the Status dropdown menu.



Save

Close

Edit FBMH - Family Choice Notification Form Information - Test,Tiffany H(ID# 8220594)

Form Status Information

Status:

Complete

Date Completed: 08-JUN-2026  Time: 03:28PM

Title

FAMILY CHOICE NOTIFICATION FORM

Family Choice Notification Form

Step: 8

Click "Save".



Save

Close

Edit FBMH - Family Choice Notification Form Information - Test,Tiffany H(ID# 8220594)

Form Status Information

Status:

Complete

Date Completed:

08-JUN-2026

 Time:

03:28PM

Title

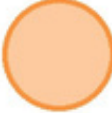
FAMILY CHOICE NOTIFICATION FORM

Family Choice Notification Form

Step 9:

Draw your signature in the signature pad.

Signatures

Signature Type	Signature
Signature ☐ Topaz For Chrome/Edge ☒ Mouse Signature Role Client Signee TIFFANEY TEST * for the purposes of authorizing and authenticating electronic your electronic signature has the full force and effect of a signed by hand to a paper document.	

Save Signature

Signatures Collected 

Step 10:

Click "Save Signature".

gent E-Signature Pad - Assessment Tools

Add Digital Signatures

Signature Type		Signature
☐ E-Signature ☐ Topaz For Chrome/Edge ☒ Mouse Signature		
Signature Title	Client	
Full Name of Signee	TIFFANEY TEST *	
Notes		

You agree that for the purposes of authorizing and authenticating electronic health records, your electronic signature has the full force and effect of a signature affixed by hand to a paper document.

Save Signature

Signatures Collected

Step 11:

Click "Save".

familylinks

Sign Save Close

Edit FBMH - Family Choice Notification Form Information - Test, Tiffany H (ID# 8220594)

Form Status Information

Status: Complete

Date Completed: 08-JUN-2026 Time: 03:28pm

Title

FAMILY CHOICE NOTIFICATION FORM

Family Choice Notification Form

Step 12:

Click "Close".

[Sign](#) [Save](#) [Close](#)

Edit FBMH - Family Choice Notification Form Information - Test,Tiffany H(ID# 8220594)

Form Status Information

Status:

Date Completed:  Time: ☐

Title

FAMILY CHOICE NOTIFICATION FORM

Family Choice Notification Form

