



Easy to Use Online Appointment Scheduling

A Guide for Patients

We are excited to introduce a simple and convenient method for requesting an appointment with your healthcare provider online. Whether you're a new or existing patient, you can effortlessly request an appointment with your provider to keep your health a top priority. Follow the steps outlined below to access this convenient feature on the patient portal.

If you need to book an appointment with a mental health provider or nutrition services provider, change, or cancel an appointment call us at 602-307-5330.

GETTING STARTED

For Established Patients

- Visit our website at www.swcenter.org/appointment
- Select **Request an Appointment**.
- Find your provider and select **Book**.
- Select **Yes** for the Question: Have you visited this provider/practice before?
- Select the reason for your appointment in the dropdown list.
- Select your preferred appointment time based on availability.

- In Patient Details select **Book for Myself** or **Book for Someone Else** and enter patient information.
- To help your health provider be better prepared to assist you provide as much information as you can regarding the reason for your visit.
- Select **Continue**.
- Enter your **Payment Details & Verification**. If you are entering insurance information, please bring your insurance card and a photo ID at the time of your visit.
- You will be required to verify your booking by entering a code. **Choose Text or Voice** to receive a code which will be sent to the phone number entered in Step 1.
- Select **Send**.
- You will receive an email notification once your appointment request has been submitted. Your appointment request will be routed to our staff and will be acknowledged within 24 business hours of submission.

1 Patient Details

☒ Book for Myself ☐ Book for Someone Else

First Name Last Name

Date of Birth Sex

This information is required for patient registration.

Phone Number Email

Continue

2 Appointment Details

Appointment Reason

Info for the Provider
I would like to schedule a follow up appointment to have my diabetes checked. I am needing a refill on my insulin and cholesterol medications.

Characters Limit: 143/250

Continue

3 Payment Details & Verification

☐ By Cash ☒ By Insurance ☐ Not Applicable

Insurance Insurance Subscriber No.

We need to verify your phone number for this booking

This will be done by an instant phone call or text message.
Select your preference.


☒ Text ☐ Voice


By entering your number, you agree to receive an automated telephone call or one text message (with a passcode) to verify your account. Message and data rates may apply.

Send

Appointment Request Submitted Successfully

We have sent an email confirmation for this appointment at testpatient@testpatient.com

 **Leanne Muniz**
Family Medicine

 **Southwest Center**
1101 N CENTRAL AVE, STE 200 PHOENIX, AZ 85004

When: **As soon as possible** Time: **Morning**

Day: **Friday**

Patient Name: **Test Patient, 25 Y, U**

Reason: **New Patient Send Request Only**

Info. for Provider: **I would like to establish care with a provider. I am also needing refills on my PrEP medication.**

Payment Details: **By Insurance**

Insurance Details: **United Health Care**

Contact details: **Email: testpatient@testpatient.com**
Phone: [REDACTED]

Print **Close**

For New Patients

When you request an appointment online for the first time, you will NOT be able to confirm and select a time slot right away. However, this feature enables you to select your appointment preferences including day and time. After you submit your request, a member of our team will contact you to confirm your preferred time slot and complete your New Patient enrollment.

- Visit our website at www.swcenter.org/appointment
- Select **Request an Appointment**.
- Find your provider and select **Book**.
- Select **No** for the Question: Have you visited this provider/practice before?
- Select **New Patient - Send Request Only** for 'Appointment Reason'.
- Select **Send Request**.

The screenshot displays the Southwest Center appointment booking interface. On the left, a list of providers is shown, including Kathleen Smorko, Leanno Muniz, and Raven Brown. Leanno Muniz's 'Book' button is highlighted with a green box and labeled '1'. On the right, a detailed booking form for Southwest Center is shown. It includes a map, a question 'Have you visited this provider/practice before?' with 'No' selected (labeled '2'), an 'Appointment reason' dropdown set to 'New Patient Send Request Only' (labeled '3'), a date picker for '13 Mar, 2024', and a 'Send Request' button (labeled '4').

- In Patient Details select **Book for Myself** or **Book for Someone Else** and enter patient information.
- To help your health provider be better prepared to assist you provide as much information as you can regarding the reason for your visit.

The 'Patient Details' form is shown. It has two radio buttons: 'Book for Myself' (selected) and 'Book for Someone Else'. Below these are input fields for 'First Name' (Test), 'Last Name' (Patient), 'Date of Birth' (01/01/2000), 'Sex' (Other/Prefer Not to Disclose), 'Phone Number' (123-456-7890), and 'Email' (testpatient@testpatient.com). A 'Continue' button is at the bottom. A note at the bottom right states: 'This information is required for patient registration.'

- Select your **Appointment Preferences** including the day of the week and time.

2
Appointment Details

Appointment Reason
New Patient Send Request Only

Info for the Provider
I would like to establish care with a provider. I am also needing refills on my PrEP medication.

Characters Limit : 97/250

Appointment Preferences (Date and time to be determined)

When do you want the appointment?

☒ As Soon As Possible
☐ In One Week
☐ In Two Weeks
☐ No Preference

What day of the week?

Mon Tue Wed Thu **Fri** Sat Sun

☐ No Preference

At what time?

☒ Anytime
☒ Morning
☐ Afternoon
☐ Evening

Continue

- Select your **Appointment Preferences** including the day and time you prefer.
- Enter your **Payment Details & Verification**. If you are entering insurance information, please bring your insurance card and a photo ID at the time of your visit.
- Select **Send**.
- You will receive an email notification once your appointment request has been submitted. Your appointment request will be routed to our staff and will be acknowledged within 24 business hours of submission.

Print
Close

Appointment Request Submitted Successfully
We have sent an email confirmation for this appointment at testpatient@testpatient.com

Leanne Muniz
Family Medicine

Southwest Center
1101 N CENTRAL AVE, STE 200 PHOENIX, AZ 85004

When
As soon as possible
Day
Friday

Time
Morning

Patient Name
Test Patient, 25 Y, U
Reason
New Patient Send Request Only
Info. for Provider
I would like to establish care with a provider. I am also needing refills on my PrEP medication.
Payment Details
By Insurance
Insurance Details
United Health Care
Contact details
Email: testpatient@testpatient.com
Phone: [REDACTED]