

How to complete your screening with the Physician Results Form

- Visit My.QuestForHealth.com and use the **Sign In** area to log in using the username and password you created
- Or, if you are a new user, please click the **Register Now** button in the **Sign Up Now** area to register
- After logging in or registering, and accepting the terms and conditions, click **Get Started** to go to the **Screening Homepage**



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- Click **Participate Now** to download the **Physician Results Form**

The screenshot displays the Quest Diagnostics website interface. At the top left, the text "Health & Wellness" is visible. The Quest Diagnostics logo is centered at the top. On the right side of the top navigation bar, there are links for "My Account", "Contact Us", and "Logout".

The main content area features a large banner with the heading "Welcome, Sample Participant". Below this heading is a large image of a woman smiling while using a scale. Overlaid on the right side of this image is a teal-colored box titled "Your Screening". Inside this box, the text reads: "Please select 'Participate Now' to schedule your upcoming screening." Below this text is a prominent green button labeled "Participate Now". A red arrow points directly to this button.

On the left side of the banner image, there is a vertical teal bar containing the text "WELCOME" and "YOUR SCREENING".

At the bottom of the page, a footer contains the following text: "About Us | Contact Us | FAQ | Privacy Policy | © 2000-2016 Quest Diagnostics Incorporated. All rights reserved."

- From your screening options, click the **Download Form** button in the **Physician Results Form** box

Schedule Your Screening

Welcome, Sample Participant

Your path to Health & Wellness starts here. To get started, select a screening option below, that is convenient for you.

AT A PATIENT SERVICE CENTER

Schedule a screening at a nearby Quest Diagnostics location.

[Schedule a Screening](#)

AT AN EVENT

Attend a wellness event at work or a location designated by your organization.

[Make an Appointment](#)

PHYSICIAN RESULTS FORM

Download a form that your health provider completes with your recent test results.

[Download Form](#)

AT-HOME TEST

Collect your own screening specimen in your home using the Qcard™ Dried Blood Spot method.

[Request Materials](#)

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- Use the link next to the image of the form to download and print your personalized Physician Results Form
- Verify that all of your personalized information included in the form is accurate and have your physician complete the form

Health & Wellness



My Account



Contact Us

Logout

Confirmation

Thank You Sample Participant! Your wellness screening form is ready to download and take to your Healthcare Provider.

Physician Results Form [Cancel](#)

Test(s) must be completed on or before:
Friday, Mar 17, 2017

Physician Results Form Must be Returned by:
Friday, Mar 17, 2017

Prepare for Your Appointment

Thank you for selecting the Physician Result Form option.

Take the below form to your Healthcare Provider. Be sure they complete the form in its entirety and fax it to the number provided before your deadline.

Helpful Appointment Information

For questions, contact the Health & Wellness Service Center: 1.855.623.9355

Next Steps For You

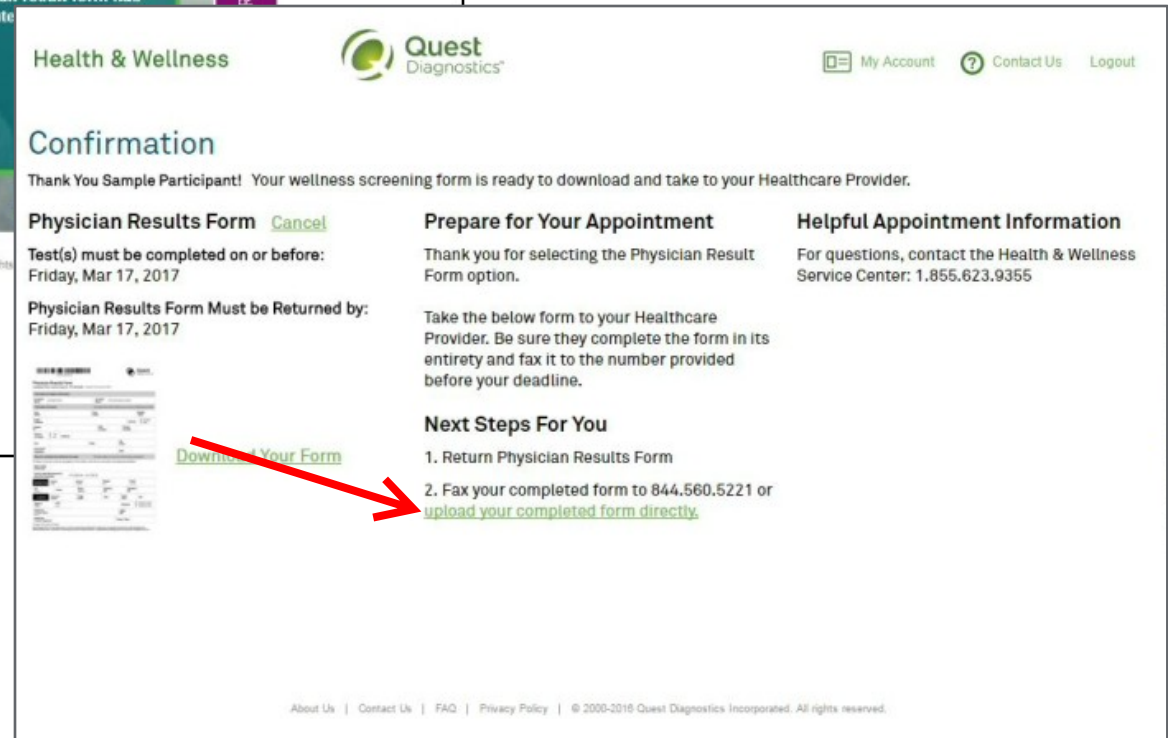
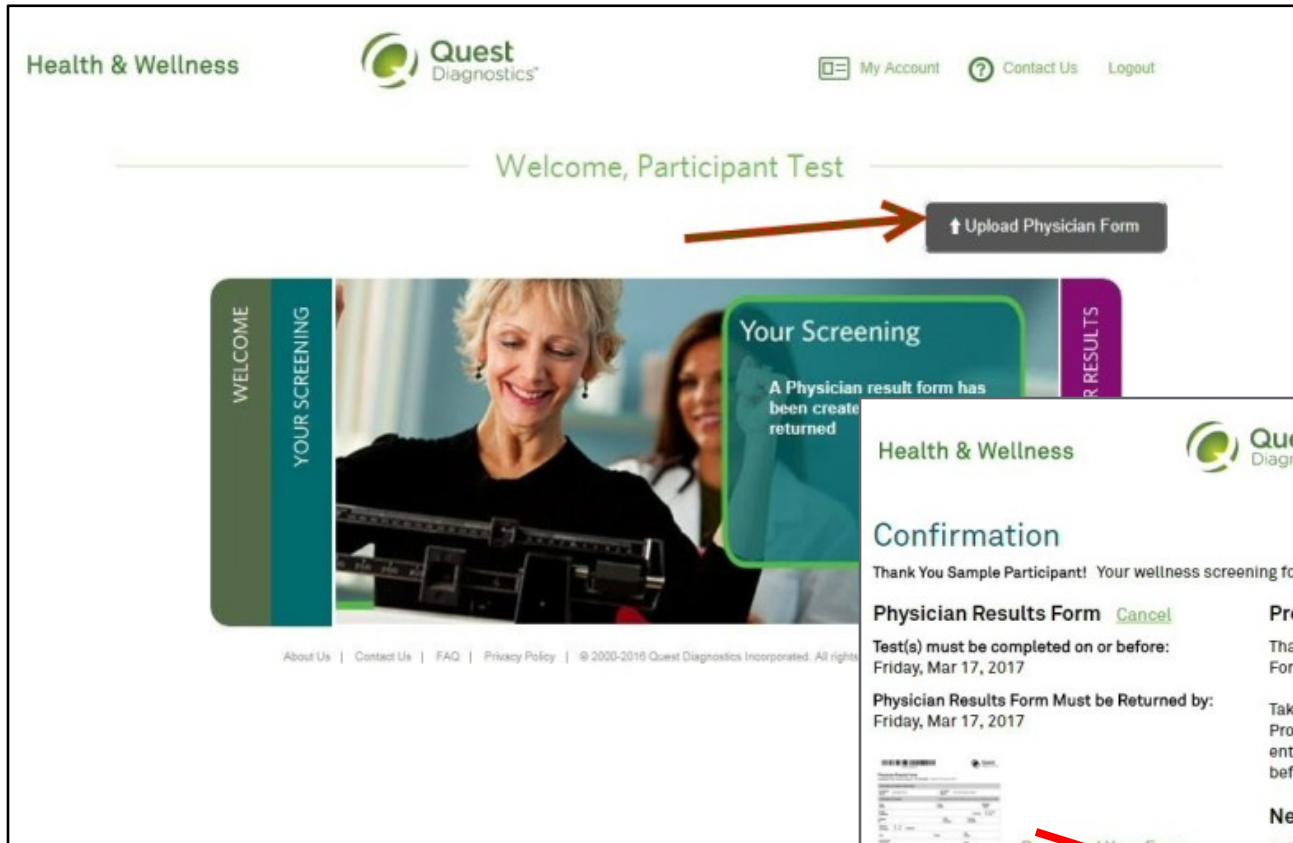
1. Return Physician Results Form
2. Fax your completed form to 844.560.5221 or [upload your completed form directly.](#)



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After your doctor completes the form, there are three options for submitting the form to Quest Diagnostics

- Your doctor can fax the completed form to the fax number indicated on the form, or
- You may fax the completed form to the fax number indicated on the form, or
- You may submit your completed form to Quest Diagnostics electronically using the **Upload Physician Form** button in the upper right hand corner of the **Homepage** or the **upload your completed form directly** link on the **Confirmation** page
 - To use this method to submit your form, click the **Upload Physician Form** button or **upload your completed form directly** link and proceed to the next slide for further instructions




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- After selecting **Upload Physician Form**, a **Confirm Your Email** window will pop up
 - To use this option you must have a working email address on file for notification purposes in the event your form is rejected
- If the email address that appears is blank or incorrect, click the **Edit** button
 - This will take you to the **My Account** page where you can update the email address on file
 - You will need to update your email address and click **Save** to return to the homepage where you can click the **Upload Physician Form** button to begin the uploading process
- If the email address that appears in the **Confirm Your Email** window is correct, click the **Yes** button to proceed

The screenshot shows the Quest Diagnostics website interface. At the top, there is a navigation bar with the text "Health & Wellness" on the left, the Quest Diagnostics logo in the center, and "My Account", "Contact Us", and "Logout" on the right. Below the navigation bar, a large heading reads "Welcome, Participant Test". On the right side of the page, there is a button labeled "Upload Physician Form".

The main content area features a "Your Screening" section with a message: "A Physician result form has been created but not yet returned". Below this message is a "View / Cancel" button. A modal window titled "Confirm Your Email" is overlaid on the page. The modal contains the text: "We will use the below email for all communications concerning your Physician Results Form. Confirm that it is correct." Below the text, the email address "testparticipant@sampleclient.com" is displayed in a red-bordered box. At the bottom of the modal, there are two buttons: "Yes" and "Edit". A red arrow points to the "Yes" button.

- After selecting **Yes** to confirm your email address, the **Verify the Information on Your Form** window will pop up
- Click the **Browse** button to locate your Physician Results Form file on your computer (.jpg, .png, .gif, or .pdf file formats are accepted)

Health & Wellness  [My Account](#) [Contact Us](#) [Logout](#)

Welcome Participant Test

Verify the Information on Your Form

Scan your Physician Results Form and upload the file here.

Browse Select File. (.jpg, .png, .gif or .pdf files only)

Enter Your Results

Be aware that if you don't have a result for a required field below, your results cannot be processed. You will have to contact your physician to get the missing information.

HEIGHT (ft)	(in)	WEIGHT (lbs)	SYSTOLIC BP	DIASTOLIC BP
<input type="text" value="ft"/>	<input type="text" value="in"/>	<input type="text" value="lbs"/>	<input type="text"/>	<input type="text"/>
TRIGS (mg/dL)	HDL	TOTAL CHOL	LDL	
<input type="text" value="mg/dL"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
GLUCOSE	Nicotine User	Fasting > 9 Hours		
<input type="text" value="mg/dL"/>	<input type="text" value="Not provided"/>	<input type="text" value="Unknown"/>		
WAIST (in)				
<input type="text" value="in"/>				
Date Test(s) Performed	Healthcare Provider	UPIN/NPI		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

You have signed your form. (if not your results will be rejected)

Your physician has signed the form. (if not your results will be rejected)

Submit

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- The file name should appear next to the **Browse** button once it is selected

Health & Wellness My Account Contact Us Logout

Welcome Participant Test

Verify the Information on Your Form

Scan your Physician Results Form and upload the file here.

Browse PhysicianResultsForm_Example.pdf (.jpg, .png, .gif or .pdf files only)

Enter Your Results

Be aware that if you don't have a result for a required field below, your results cannot be processed. You will have to contact your physician to get the missing information.

HEIGHT (ft)	(in)	WEIGHT (lbs)	SYSTOLIC BP	DIASTOLIC BP
<input type="text" value="ft"/>	<input type="text" value="in"/>	<input type="text" value="lbs"/>	<input type="text"/>	<input type="text"/>
TRIGS (mg/dL)	HDL	TOTAL CHOL	LDL	
<input type="text" value="mg/dL"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
GLUCOSE	Nicotine User	Fasting > 9 Hours		
<input type="text" value="mg/dL"/>	<input type="text" value="Not provided"/>	<input type="text" value="Unknown"/>		
WAIST (in)				
<input type="text" value="in"/>				
Date Test(s) Performed	Healthcare Provider	UPIN/NPI		
<input type="text"/>	<input type="text"/>	<input type="text"/>		

You have signed your form. (if not your results will be rejected)

Your physician has signed the form. (if not your results will be rejected)

Submit

- Enter the results from your form into the fields provided on the **Verify the Information on Your Form** pop-up window before clicking the **Submit** button
- ***Important:** You will be required to enter all lab results required by the Program Panel before being able to click the **Submit** button to upload your completed Physician Results Form. The **Date Test(s) Performed** field is required to fall within the **Collection Date Range** configured for the program before allowing you to click the **Submit** button. If Signatures are required, then the participant will be required to acknowledge these signatures were provided before submitting the form

Health & Wellness

Quest Diagnostics™

My Account Contact Us Logout

Welcome Participant Test

Verify the Information on Your Form

Scan your Physician Results Form and upload the file here.

Browse PhysicianResultsForm_Example.pdf (.jpg, .png, .gif or .pdf files only)

Enter Your Results

Be aware that if you don't have a result for a required field below, your results cannot be processed. You will have to contact your physician to get the missing information.

HEIGHT (ft)	(in)	WEIGHT (lbs)	SYSTOLIC BP	DIASTOLIC BP
6	0	190	119	76

TRIGS (mg/dL)	HDL	TOTAL CHOL	LDL
90	110	95	100

GLUCOSE: 85

Nicotine User: No

Fasting > 9 Hours: Yes

WAIST (in): 32

Date Test(s) Performed	Healthcare Provider	UPIN/NPI
06/14/2016	Dr. Sample	12345678

You have signed your form. (if not your results will be rejected)

Your physician has signed the form. (if not your results will be rejected)

Submit

- Once the participant selects “Submit” a **Thank You** window will appear and include a confirmation message
- The **Upload Physician Form** button will no longer be visible on the **Homepage** or the **Confirmation** page
- The **Upload Physician Form** button will only reappear if the form was rejected

The screenshot displays the Quest Diagnostics participant portal. At the top left, it says "Health & Wellness". The Quest Diagnostics logo is in the top center. On the top right, there are links for "My Account", "Contact Us", and "Logout". The main heading reads "Welcome, Participant Test".

The central content area features a large image of a woman smiling. Overlaid on this image is a notification box titled "Your Screening" with the text: "A Physician result form has been created but not yet returned" and a "View / Cancel" button. Below this, a "Thank You!" modal window is open, containing the message: "Your results have been uploaded. You will be informed via email when your results are processed." At the bottom of the modal are two buttons: "Back to Homepage" and "Log Out".

Vertical navigation tabs on the left and right sides of the main content area are labeled "WELCOME", "YOUR SCREENING", and "YOUR RESULTS".