## **Self-Registering an Account No PIN**

## Self-Registering an Account No Pin Add a Dependent

Log onto patient portal page <u>Wilmington Health Patient Portal</u>.

1. Select Create an Account

OIntelio	, hart	Login 🚔 Create an Account	
Email	dtelencio1212@gmail.com	f Login with Facebook	
Password	A Login	Y Login with Yahoo	
(	Forgot your password? Don't have an account? Register for free!		
© 2010-2016 InteliChart. All Rights Reserved.			

- Enter email address (must be unique for each patient
- Enter password
- Register-Select No PIN
- Enter date of Birth
- Enter Last Name, First name
- Enter gender
- Enter Phone Number
- Enter Location Zip code
- Select Office Location from the drop down list
- Create a Security Question
- Yes Add Child Dependent
- Agree to terms and Conditions
- Select Complete



Login 🗾

🚔 Create an Account

## Welcome to the Patient Portal

To get started, simply complete the below fields to gain access to valuable information and services provided in a secure and confidential manner.

Please note: To be able to access your medical records within the Patient Portal, you must have been seen by a participating physician

## Register using an existing account

Email Address <b>f</b> Facebook	g Google Y Yahoo WH does not require a PIN. Your account will be authenticated
Passwor	d show within 2 business
	Passwords must be at least 8 characters long. Clays.
Registe	er 🔿 Self 🔿 Dependent(s) 💿 No PIN
	Please note you must contact your practice, provider or hospital to receive your PIN registration in order to view labs, appointments and more.
Date of Birl	h 01 🕑 01 🕑 1994 💟
Nam	e Doe Diimoster
	Danpoor
Gende	r 🔿 Male 💿 Female
Phone	ə (910) 341-3300
Location Zip Code	e Within 100 miles 🔽 28405 Internal Medicine At Shipyard 🗸
Security Question	In what year was your mother For your protection, this will help us verify your identity in the future.
Security Answe	r 1900
Add Child/Dependent(s	) 🖲 Yes 🔿 No
	✓ I have read and agree to the Terms & Conditions.
	Cancel Continue

- Enter Child's Date of Birth
- Enter Child's Last Name, First Name
- Enter Gender
- No PIN Necessary
- Optional Add Additional Child
- Select Complete

OInteliChart			Login	🚔 Create an Account
dd Child Information				
Child's Date of Birth	03	08	20	013
Child's Name	DoeDoe	ZZZtest		
Gender	🔿 Male 💿 Female			
PIN Optional				
	PIN is case sensitive		WH does	not
	+ Add Additional Child		require a r	-IN.
	Back Cancel Cor	nplete		

Patient will receive notice the account was successfully registered and ask cmpnygrl69+1 for the email to be Confirmed.

Registration Successful					
Registration was Successful! Please confirm that this is your email address. cmpnygrl69+1@gmail.com					
Update Email Address	Confirm				

Patient will be able to view child's account under the users photo labeled: Switch Accounts



Your child is now registered as a dependent on your account and is waiting to be autheticated by Wilmington Health. Please allow 2 business days, before you have full access to your child's portal account. If you need assistance registering or logging into your patient portal, please contact Customer Service: 910-395-4188.