

# HOW TO BOOK AN ONLINE APPOINTMENT

### 1. Connect to www.kapfht.ca

2. In the *"Provider Online Booking"* section, click the type of provider you would like to book with: *Nursing Staff, Physician or Dr. Cheung Prenatal*.

Kapuskasing and Ar Équipe de santé fai	ea Family Health Team miliale de la région de Kapuskasing	HOME ABOUTUS CONTACTUS OUR ROLE	
PATIENT EXPERIENCE SURVEY Please take a few minutes to provide us with your feedback. Your feedback about your care experience is important to us and will help us lear what we are doing well, and, more importantly, how we can improve.	TRAVEL CRANTS   A cace deterate the process of concurrage particitants to enter the concurrage particitants to enter the information in our travel part form (dick the button bedrow). Once we receive the information we will fill out our sections and goues a call along.   Sections and goues a call along.   B completed.	<section-header>   Immunization Concerts   Not can use ICON (Immunization formation to their or print an immunization record (Jellow zave) for you your child. ICON is a new provincial program that allows the provincial provincial program that allows the provincial program that allows the provinci provincial program that</section-header>	<section-header><section-header><text><text><text></text></text></text></section-header></section-header>
PATIENT EXPERIENCE SURVEY	FILL OUT YOUR INFORMATION	SEND US A COPY BY EMAIL	ONLINE BOOKING INSTRUCTIONS

 Enter your name, health card number, and birth date to confirm your identity, then press *"check-in"*.

 Select the provider you would like to book with, then press *"choose* provider". (Please note that if you are using the *"Physician"* booking link, you will only see the name of your Primary Care Provider/Family Doctor.

Welcome! 1 informatior	To start your online booking, please input the n below.
Welcome to Portal.	the Kapuskasing and Area Online Booking
Online booł this clinic. N	king is only available for registered patients at lew patients cannot book appointments online.
First Name	
First Name	e
Last Name	
Last Name	2
Last Name Last Name Health Num Enter numb	ers only
Last Name Last Name Health Num Enter numb Health Nu	a <b>ber</b> ers only mber
Last Name Last Name Health Num Enter numb Health Nu Birth Date	ers only mber

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## Select Provider

Select a Healthcare Provider for Online Booking:
O Anik Mondoux, Community Mental Health Worker
Carole Forget, RN
Tiffany Dubien, RPN
Choose Provider

5. Pick the type of appointment you want to book. There will be different options depending on the provider you choose. Once an appointment type is chosen, press *"next"*.

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STEP 1 Check-In	STEP 2 Select Provider	STEP 3 Provide Details	STEP 4 Choose Date & Time	STEP 5 Booking Confirmation			
Provide Details							
What type	What type of appointment would you like to book?						
Allergy Sh	ots Immuni	zation Nursing	Pap Test				
Suture Removal Telephone							
Please briefly describe your reason for visit (up to 20							
characters):							
				Next			

6. Choose the appointment date and time. Available days are in blue. When date and time are chosen, press *"book appointment"*.





#### Choose Date & Time

March 17, 2022						
March 💙 2022					>	
Sun	Mon	Tue	Wed	Thu	Fri	Sat
		8	9	10	11	
	14	15	16	17	18	
			30	31		

#### Available time slots:

9:00 AM	10:15 AM	11:30 AM	2:45 PM
9:15 AM	10:30 AM	11:45 AM	3:00 PM
9:30 AM	10:45 AM	2:00 PM	3:15 PM
9:45 AM	11:00 AM	2:15 PM	3:30 PM
10:00 AM	11:15 AM	2:30 PM	3:45 PM

You are requesting an appointment on March 17, 2022 at 9:00 AM with Carole Forget, RN.

To receive an appointment confirmation by email, please provide your email address below:



Book Appointment

7. Enter any pertinent information for your appointment in the text field, print a booking confirmation if needed, or add to your calendar, then press *"next"*.



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STEP 1 Check-In	STEP 2 Select Provider	STEP 3 Provide Details	STEP 4 Choose Date & Time	STEP 5 Booking Confirmation
Booking	; Confirma	tion		
Your appo	intment is scł	heduled for:		
March 17,	2022 - 9:00	AM with Car	ole Forget, RN	
Kapuskasi 142C Proş Kapuskasi	ing and Area F gress Crescen ing, Ontario P	Family Healtl ht 25N 3H6	h Team	
contact@k 705-371-2 www.kapf	capfht.ca 2220 ht.ca			
Print Co	onfirmation	Add to Go	ogle Calendar	
Downloa	ad ICS			
Visit Pre	paration			
Please co help us p	onsider includ repare:	ling more inf	ormation about	t this visit to
Please ca reschedu	all us (24+ hou ile.	urs in advanc	e) if you need t	o cancel or
				Next

8. Booking confirmation screen appears. You can click the link at the bottom to give feedback on the online booking process.

