HELP

REGISTRATION STEPS FOR DOCTORS AND OTHER HEALTHCARE PROVIDERS.

To register, click on the "Register" button on the home page of findadoctor.com, from the drop-down select "Doctor Registration".

Find A Doctor.com Home · About FAD · Why FAD · Health Forum · Blog · FAQs · Contact · Login ·	Register ·
FIND A DOCTOR	Doctors Registration
Find the doctor / practitioner of your choice by specialty, qualifications and office location.	
Image: Wedical Image: Wental Health Image: Wental Health Image: We	

Registration is a simple 3-step process.

Step 1: Enter your NPI number and click verify, your details from our database will be auto filled.

For Doctor Membership	
1 2 3	
	3
STEPS STEPS STE	TEPS
m for patient appointments and maintain your profile for your potential patients to se	see!
Last Name +	
First Name -	
dde Name Middle Name	
I+ VERIF	IFY
bile - Mobile	
nder. FEMALE	
noil - Email	

A popup message will appear asking you to confirm your information.



After completing the first step, you will see a popup notification asking you to verify your "Mobile No. & Email Id."

NPI *	XXXX	VERIFY
Mobile *	XXXX 3	×
Gender * Your	Mobile : (_{XXXXXXX} 3	
🖾 Email 🛛 🔽	AGREE CANCEL	
🕞 Do you accept new patie	nts? YES NO	
		NEXT

Step 2: Enter your login details such as username, password, and security question.

atform for patient appointi	nents and maintain your profile for your poten	itial patients to see!
User Name +	User Name	
Password *	Password	
Confirm Password •	Confirm Password	
Security Question *		
Answer •	Answer	

Click 'l agree' on the popup to give your consent for the display of your information on our portal.



Step 3: Upload/Capture your profile picture and agree to terms and conditions and submit to sign up.



By registering at this site, you can use our site for secure communication with your patients, use the platform for patient appointments and maintain your profile for your potential patients to see!

CAPTURE Choose File No file chosen	
PREVIOUS SUBMIT	

Activation link will be sent to the registered email ID, click on the link to activate your account.



Click on 'Verify Email', it will redirect you to the login page of FAD portal.

	Verity Email Address for www.findade	octor.com	Inbox ×			¢	Ľ	
F	support@findadoctor.com to me -			6:41PM (2 minutes ago)	☆	Ł	:	
	Dear Agence, Thank you for registering on <u>www.findar</u> confirm that this is you. Please click belo	doctor.com! Befo w to verify your e Verify Email	pre we get s mail addres	started, we just need to ss:				
	Need help? Contact our support team.							

Enter your login details to login.



MEMBERSHIP PROFILE

Click 'Membership' on the home page. Membership is the space where you can update your information.



You have the following sections in Membership to update your information. Profile - Personal details such as Last Name, First Name, Middle Name, NPI, Gender

General Information - Mobile No, Email ID, Degree, Tax ID, Name of Practice, Type of Practice, Website, a space to describe your Practice

re	Profile							
	Last Name *	X			NPL*			
Sec. 2	First Name "				Gender*	MALE	EMALE	
	Middle Name		ne					
CHANGE PH	010							
CHANGE PH								
CHANCE PH	070							
CHANCE PF	070							
CHANCE PI	000		Ca					
CHANCE PI General Information		_	CL	ICK TO VERIFY/COMPLETE				
CHANCE PI General Information			(cr	ICK TO VERIFY/COMPLETE	Tacib			
CHANCE P	Norma di procisie		(cr	ICK TO VERIFY/COMPLETE	Tax ID Type of price	10		
CHANGE P General Information oble * ngrees * anne of proctice oblite	Norro Norro Norre of procise Website		(ct	ICK TO VERIFY/COMPLETE	Tax iD Type of point	24		
CHANGE P Seneral Information Sobile * igrees * imme of practice absite	Norro	500 characters)	(ct	ICK TO VERIFY/COMPLETE	Tax ID Type of pract			

Specialties - you can add your specialty, sub-specialties, and expertise.

1	Family Practice	Family Practice	Enter the expertise

Location - you can add your mailing and practice location.

 Locations 			
		CLICK TO VERIFY/COMPLETE	
Туре *	MAILING	Address Line) *	
Address Line2		City*	
State *	New York	Zip Code *	
Telephone		Fax	Enter a phone number
туре *	MALING PRACTICE	Address Line1*	
Address Line2		City*	
State *	New York	Zip Code *	
Telephone		Fax	Enter a phone number

Hospital affiliations - list of hospitals the provider is affiliated.

 Hospital Affi 	✓ Hospital Affiliatione								
		CLICK TO VER	HFY/COMPLETE						
S.No	Stote	City	Hospital Affiliations	Year Started					
1				Year. 🗸					

Medical schools

✓ Medical Schools									
			CLICK TO VERIFY/COMPLETE						
S.No	Country	State	City	School	Year From	Year To	Year Graduated		
1	1 Enter Country Enter State Enter City OTHER 0 0 1986								
				A3					

Training - Internship, Residency and Fellowship

Training	1					
√ Interr	nship					
			CLICK TO VER	RIFY/COMPLETE		
S.No	Country	State	City	Hospitol	Type Year From	YearTo
1	Enter Country	Enter Stote	Enter City	Enter Hospital		
√ Resid	lency		C			
S.No	Country	State	City	Hospital	Type Year From	Year To
1		Enter State		Enter Hospitol		
v Fellov	vship					
			CLICK TO VER	RIFY/COMPLETE		
S.No	Country	State	City	Hospital	Type Year From	Year To
1		Enter State				

Board Certification and medical licenses

		CLICK TO VER			
S.No		State		License	Year
1	Enter Stole				
			RIFY/COMPLETE		
S No.	Name of board	General Certificate(s)	Year Certified	Subspecialty Certificates	Year Certified

Insurance & Language Details - Accepted insurances by Provider, Spoken languages by Provider and staff.



Membership - Member in professional organization

∨ Membership		
		CLICK TO VERIFY/COMPLETE
Member in professional organization	ins.	
S.No	Professional Organizations	
1		

APPOINTMENT SETTINGS

Click on "Appointment" and select "Setting".



You can set your appointment settings as per your availability.

you accept new patient? *	YES	NO					
you willing to allow appointment requiral? *	ists using our YES	NO					
Please list emails of persons who will b	e notified by FAD team on me	ssages in the portal:					
	S.No	Name	Em	ail Address	Mobile Number	Action	
	1 contact	Name	Email		Mobile	E 1	
Please list the office date and time: Neek < Jun 18-2 Same as previous week acting	5,2023 >						
Please list the office date and time: Week < Jun 18-2 Same as previous week setting	4, 2023 >						
Please list the office date and time: Week < Jun 18-2 Same as previous week setting	5, 2023 >	Day	Starting Time	Ending Time	Starting Time	Ending Time	
Please list the office date and time: Week < Jun 10-2 Same as previous week .	5, 2023 >	Day Monday	Starting Time	Ending Time	Starting Time	Ending Time	
Please list the office date and time: Week < Jun 10-2 Same as previous week betting	, 2023 > ■ ■	Doy Monday Tuesday	Starting Time 08 00 09 15	Ending Time	Starting Time 00:00 © 00:00 ©	Ending Time 00:00 © 00:00 ©	
Please list the office date and time: Week < Jun 10-2 Same as previous week actiling	, 2023 > ■ ■ ■ ■	Day Monday Tuesday Wednesday	Storting Time 08 00 09 15 10 3	Ending Time 00:00 0 00:00 0 00:00 0	Starting Time 00:00 © 00:00 © 00:00 ©	Ending Time 00.00 Image: Comparison of the c	
Please list the office date and time: Week < Jun 10-2 Same as previous week setting	, 2023 > ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■	Doy Monday Tuesday Wednesday Thursday	Starting Time 08 00 09 15 10 30 11 45 12 0	Ending Time 00.00 0 00.00 0 00.00 0 00.00 0 00.00 0	Starting Time 00:00 0 00:00 0 00:00 0 00:00 0 00:00 0	Ending Time 00:00 © 00:00 © 00:00 © 00:00 ©	
Please list the office date and time: Week < Jun 10-2 Same as previous week setting	, 2023 >	Doy Monday Tuesday Wednesday Thursday Friday	Starting Time 0000 0 00 00 00 15 10 00 11 45 12 0 00:000 0	Ending Time 00.00 0 00.00 0 00.00 0 00.00 0 00.00 0 00.00 0 00.00 0 00.00 0 00.00 0	Starting Time 00:00 © 00:00 © 00:00 © 00:00 © 00:00 © 00:00 © 00:00 © 00:00 © 00:00 ©	Ending Time 00:00 © 00:00 © 00:00 © 00:00 © 00:00 © 00:00 © 00:00 ©	
Please list the office date and time: Week < Jun 18-2 Same as previous week detting	, 2023 >	Doy Monilay Tuesday Wednesday Thursday Friday Saturday	Starting Time 00 0 00 0 00 0 10 30 11 45 12 0 13 0 00:00 0	Ending Time 00:00 0 00:00 0 00:00 0 00:00 0 00:00 0 00:00 0 00:00 0 00:00 0 00:00 0 00:00 0	Starting Time 00:00 © 00:00 © 00:00 © 00:00 © 00:00 © 00:00 © 00:00 © 00:00 © 00:00 ©	Ending Time 00:00 © 00:00 © 00:00 © 00:00 © 00:00 © 00:00 © 00:00 ©	

You can view the appointments requested by clicking 'Request List' in the 'Appointment' on the Home Page.

- Click 'View' icon to see all the appointment request details.
- Click 'Approve' icon to approve the request.
- Click 'Deny' icon to deny the request.

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Click 'Request response' to view any change to the request.

Patient	y Gender	¥ Email ¥	Phone	🐺 Request Date	🍷 Time From	🐺 Time To	y Status	¥ Action
Aisha Parveen	Female	aisha@digixtreme.com	(638) 314-0000	05/04/2023	09:15	09:30	Request	🔽 🧕 💽 View
Aisha Parveen	Female	aisha@idigixtreme.com	(638) 314-0000	05/04/2023	11:45	12:00	Request	🗹 🧕
Aisha Parveen	Female	aisha@digixtreme.com	(638) 314-0000	05/04/2023	09:15	09:30	Request	🖸 🧧 💽
			۵	Find & Doctor com	tions to select and	ttenduschie Minikähr s		Parameteria Batal
			V	Fild A DOCORTON	Home Appointment	wembership i sigibiirty i t	communication kequest	Communication Portal + Logout +
Patient Appointment	information							
ppointment for	: 50	off				Patient's Relati	onship	
equest For	: A1	aron Slinker, M.D				Location		111 Michigan Ave Nw Washington DC-20010
equest Date	: 05	5/04/2023				Visit Type		Routine - Follow-up Visit
equest Time	: 01	9:15-09:30				Reason for visit		check up
ayment Method	: In	surance				Gender		Female
ast Name	: Po	arveen				Address Line1		lincoln street
irst Name	: Al	isha				Address Line2		
liddle Name						City		: Lakewood
OB	: 12	/21/1995				State		New Jersey
mail Id	ai	sha@digixtreme.com				Zip Code		08701
tobile	: (6	38) 314-0000				Transaction ID		: 583
Insurance information	N.							
olicy Holder	: Po	atient				Name of Insura	ince	Aetna
ubscriber Id	: 12	3				Group Number		
ayer ID								
Guarantor of Paymon	t							
uarantor						Relation to Gu	arantor	
ast Name						DOB		
irst Name						Employee		
liddle Name								

Click on calendar to check your appointment schedules.

Same as previous week setting						
		Day	Starting Time	Ending Time	Starting Time	Ending Time
		Monday	0800 0	00.00	00:00	00:00
		Tuesday	08 00 09 15	00:00	00:00	00:00
		Wednesday	10 30	00.00	00:00	00:00
		Thursday	12 3	00:00	00:00	00:00
		Friday	13 00:00 ③	00:00 @	00:00	00:00
		Saturday	00:00	00:00 ③	00:00 ③	00:00
		Sunday	00:00	00:00	00:00	00:00

You can track your scheduled appointments on this page.

			· · ·												
ın 11-17, 2023 >															
Days	08 am	09 am	10 am	11 am	12 pm	01 pm	02 pm	03 pm	04 pm	05 pm	06 pm	07 pm	08 pm	09 pm	10 pm
/11/2023															
/12/2023															
/13/2023															
/14/2023															
/15/2023															
/16/2023															
6/17/2023															

INSURANCE ELIGIBILITY CHECK

You can check the insurance eligibility of your consumer by clicking "Eligibility" on the home page.

Find A Doctor.com Home - Appointment · Membership	Eligibility Communication Request Communication Portal Logout
	Practice Setup
FIND A D	Subscriber Setup
Find the doctor/practitioner of your choice by	Eligibility Request and office location
Image: Wedical Image:	Image: Wental Health Image: Wental Health
Doctors	Other Healthcare Providers

To check the eligibility criteria, you can add your Practice Setup, Subscriber Setup, Eligibility Request by Clicking "Add+" on the respective fields.

		Practice Name			Practice NPI	Tax ID	Action
C WELFARE TRUST FUN	ND				1234567893	123123123	
A PHYSIOTHERAPHY					1234568888	667788944	Ø
old Palmer Hospital for O	Children- Pediatric Genetics				1043273337	123123122	8
ADD +							< 1
ADD + Practice Setup ractice Name *	Practice Name		Practice NPI	NPI			< 1
ADD + Practice Setup Yractice Name * Yractice Tax ID *	Practice Name Enter the Tax ID		Practice NPI	NPI			< 1
ADD + Practice Setup Practice Name * Practice Tax ID *	Practice Name Enter the Tax ID		Practice NPI	NPI			



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Subscriber ID	Last Name		First Name		SSN	DOB		Action
ABC000001	Smith	Jacob				05/21/1980	ß	
WZ0001	Stark	Jhon				03/06/1975	Ø	
2345	Jacob	Thomas				03/26/1968	C2	0
4961744507	Drnec	Paul				11/22/1959	C2	
ADD +								
Subscriber								
Subscriber Subscriber ID *	Subscriber ID		SSN	SSN				
Subscriber Subscriber ID * Last Name *	Subscriber ID Last Name		SSN First Name *	SSN First Name				
Subscriber Subscriber ID * Last Name * Middle Name	Subscriber ID Lass Name Middle Name		SSN First Nome * Suffix	SSN First Name Please selec	đ			
Subscriber Subscriber ID * Last Name * Middle Name DOB *	Subscriber ID Last Name Middle Name		SSN First Nome * Suffix Gender	SSN First Name Please selec Male	t Femdle			Ŷ
Subscriber Subscriber ID * Lost Name * Midde Name DOB * Address Line]	Subscriber ID Last Name Middle Name DOB Address Line1		SSN First Name * Suffix Gender Address Line2	SSN First Name Please selec Male Address Lind	t Fende			
Subscriber Subscriber ID * Last Name * Middle Name DOB * Address Line1 City	Subscriber ID Last Name: Middle Hame DOB Address Line1 City		SSN First Name * Suffix Gender Address Line2 State	SSN First Name Please selec Address Linu State	t Fenale			×

0	Find A Doctor.com	Home	•	Appointment		Membership	•	Eligibility •	Communication Request	•	Communication Portal	•	Logout	•
---	-------------------	------	---	-------------	--	------------	---	---------------	-----------------------	---	----------------------	---	--------	---

Submitted Date	ए Subscriber ID ए	Patient Name 💡	Patient DOB 🛒	Payer Name 🛛 🍸	Eligibility Status	₹ Request Status	T Action
Create Eligibility Request +							
✓ Eligibility Request							
Туре	Individual Organization						
Provider Name *	Provider Name		NPI *				
Payer *			> Payer Id				
Date to check for Eligibility *	Date From *	Date To 📋					
> Subscriber Search							
> Patient							
> Services							
		SAVE AND SUBMIT	LATER SAVE AND SUBM				

By clicking "Save and Submit", you will know your Consumer's Insurance Eligibility. Based on which you can "Accept/Deny" an appointment request.

COMMUNICATION REQUEST

Your consumers must submit and get your approval on the "COMMUNICATION REQUEST" before communicating with you.

Find A Doctor.com	Sility · Communication Request · Communication Portal · Logout ·
FIND A DOC	TOR
Find the doctor/practitioner of your choice by speci	ialty, qualifications and office location
Image: Second system Medical Image: Second system Dentist Image: Second system Podiatry Image: Second system Other paracelic Image: Second system Optionetry Image: Dectors Dectors	Image: Weight of the second

You can "Accept" or "Deny" the request once you receive it.

First Name	Last Name	DOB	Family Member Name	Relationship	Insurance	Requested Date	Status 🖷	Action
Beenu	Y	07/27/1981	SHYJU	Spouse	Aetna	05/24/2023	Pending	@ACCEPT
								< 1

The Request Status changes from "PENDING" to "ACCEPTED" after you accept it. Now the consumer can communicate with you through our secured Communication Portal.

•	Dr. SLINKER AARON M.D		Pe	ediatrics (Primary Care)		
	Family Member Name	Relationship		Insurance	Status	
	SHYJU	Spouse	Aetna		Accepted	
					<	1
-	+ dd					

COMMUNICATION PORTAL

You can now receive and send mails to your consumers through our HIPPA encrypted secure portal.

(Find A Doctor.com	Home · Appointment · Membership ·	Eligibility · Communication Request · Commu	unication Portal + Logout -
Messages	Inbox			Search mail Q
🖻 Inbox	Received From	Sent To	Subject	Received Date
🖾 Sent 🙎			No record found	
Q Draft				
Your Patient	i i			

SEARCH ENGINE TO FIND A DOCTOR OR OTHER HEALTHCARE PROVIDER

You can search for a doctor (or) other healthcare provider, by clicking on search button.



Use our comprehensive search engine to connect with over 70,000 healthcare providers across the country, searchable by specialty and sub-specialty, Doctor's name and location.

1. SEARCH BY SPECIALTY

	Find the Doctor of your	DOCTORS choice by selecting spec	cialty or doctor's name	
	PEC	DOCTOR'S	SNAME	
		Select specialty		
	оA		5	(α)
	00	Y	T	~~ /
Family Practice	Internal Medicine	Pediatrics	Gynecology	Cardiology
Loc	ation	Specialty or ke	eywords	
0	Enter City or State or Zip Code	Q Select (or	Q Select (or) Enter Specialty/Keyword	

- Choose a SPECIALTY from the carousel or the drop-down menu.
- Fill in the location and set the mile radius.
- Accept the "Terms and Conditions" and the "MTS Privacy Policy" and search.

SEARCH BY DOCTOR'S/PROVIDER'S NAME:

Click on "Doctor's Name" to find a doctor by his last name or first name.

Last Name Search - Enter the Doctor's <<Last Name>>, <<First Name >> and search

E.g. To find a doctor called Aaron Slinker, enter **Slinker, Aaron**.

	DOCTORS
Find the Doctor of yo	our choice by selecting specialty or doctor's name
SPI	ECIALTY DOCTOR'S NAME
Doctor Name	Location
Q slinker,a	O Enter City or State or Zip Code
Aaron Slinker, M.D 111 Michigan Ave Nw Washington, DC 20010 (202) 476-4177	ion of use and MTS Privacy policy
2 Miles	Search

First Name Search - Enter doctor's <<First Name>> space <<Last Name>>

and Search.

DOCTOR'S NAME
DOCTOR'S NAME
DOCTOR'S NAME
Location
Enter City or State or Zip Code
ion of use and MTS Privacy policy
) Search

E.g.: When searching by first name, enter **Aaron Slinker**.

Advanced Search

Advanced search filter helps you to narrow down your search and filter the results by zip code, gender, distance, hospital affiliation, and languages spoken. By default, every search with more than 20 results will display a pop-up directing you to the advanced search.

	Pind	A Doctor.com	Home - About FAD - Why FA	D + Health Forum + 1	Blog - FAQs - Contact - L	ogin - Register -	
Home 3 Search Doctors	Annual Location G Brooklyn, NY 11201		There are 219 dectors in th Would you like to use Adva	e specialty/area you seler nce Search to narrow the	cted. search?	Search Clear All	
Record Found 219						Advance Sez	rich Soft by Name (A to Z)
Laita Adhyankar, MO C4 (718) 422-1818	 Family Practice 300 Gadman Pit W Brooklyn, NY 11201 0.34 miles away 	Shurfy Abraham, M.B. Ce (718) 250-8621	 Ferrify Practice Hospice And Patilative Medicine 121, Desaith Ave Brookin, NY 11301 0.88 mitres away 	Nudir Al Hushimy, MD (* (718) 250-8621	 ✓ Fanity Practice 121 Dehalti Ave Bioolays, NY 11201 ● 0.88 milles away 	Lars Alberts, MD (1 (646) 744-2599	Family Practice
L View Profile	🙎 View on Map	🛔 View Profile 🛕 V	View on Map	L View Profile	🚊 View on Map	L View Peofée	👗 View on Map
Energette Alexa, MO Ci (718) 596-9800	 Family Practice 650 Futor St Brooklyn, NY 11217 1.17 miles away 	Ricords Alerray, M.D. (1 (855) 634-5748	 Grandy Fractices 121 Dekath Ave Brooklyn, NY 11201 2.88 miles away 	Russel Alpert, M.D. (s (202) 810-1584	Family Practice S19 Laftystre GL # 151 New York, NY 10012 1.27 miles away	Reith Aguzza, MD (* (212) 263-9705	 Spi Family Practice Rr2, 111 Broadway Heav York, NY 10008 Spi 1.26 miles areay
1 View Profile	👗 View on Map	L View Profile	🚊 View on Map	L View Profile	👗 View on Map	L View Profile	🔔 View on Map

Advance Filter Option will open up by clicking "Yes."

Advance Search	Filter	\otimes
Only within the zip cod	le	
Search only within th	e zip code selected	
Gender		
Enter Gender		~
Distance		
O 2 Miles		-
Specialty		
Internal Medicine		~
Sub-Specialty		
Internist - General Intern	nal Medicine	~
Insurance accepted		
Enter Insurance		
Hospital affiliation		
Enter Affiliation		
Language spoken doct	tor	
Enter Doctor Language		
Language spoken staf	f	

SEARCH FOR OTHER HEALTHCARE PROVIDERS

Searching for other health care providers is similar to searching for a doctor except you must click on "Other Care Providers" on the home page.

