

## How to complete and submit your online medical questionnaire guide

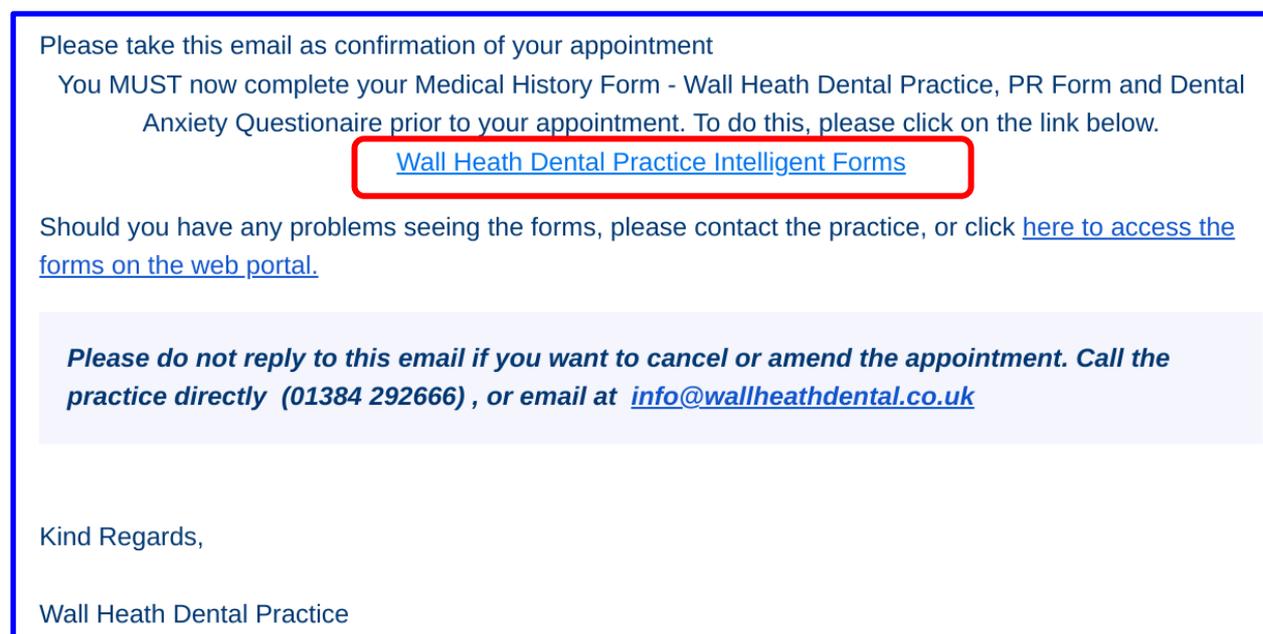
The link to the forms will be sent to you 6 days prior to your appointment from the following email address:

[dentalforms@intelligentforms.co.uk](mailto:dentalforms@intelligentforms.co.uk)

If you do not complete the forms you will receive another email link 3 days prior to your appointment.

Please complete your forms at least 1 full working day prior to your appointment (i.e. by Tuesday for an appointment on Wednesday, by Friday for an appointment on Monday). This lets us know you will be attending the appointment and enables our reception team to check the forms and contact any patients who have not completed their forms or have queries.

The email you receive will look like this:



Please take this email as confirmation of your appointment

You MUST now complete your Medical History Form - Wall Heath Dental Practice, PR Form and Dental Anxiety Questionnaire prior to your appointment. To do this, please click on the link below.

[Wall Heath Dental Practice Intelligent Forms](#)

Should you have any problems seeing the forms, please contact the practice, or click [here to access the forms on the web portal](#).

***Please do not reply to this email if you want to cancel or amend the appointment. Call the practice directly (01384 292666) , or email at [info@wallheathdental.co.uk](mailto:info@wallheathdental.co.uk)***

Kind Regards,

Wall Heath Dental Practice

You need to click the first link (see red circle highlighted in above screenshot)

### Authentication

After you have clicked the link an authentication screen with pop up.

Please enter your/your child's date of birth (the person who the appointment is for)

Take care to enter the information correctly

- e.g. DY6 0HA, not DY6 OHA, 08/03/1973 not 08/03/2022

If you are entering your correct date of birth/postcode and it will not authenticate there is a possibility we have the incorrect date of birth/postcode on your record, please email us to check this for you.

## Complete the Medical Questionnaire:

- Ensure all questions are completed in full
- If you answer yes, you will need to enter details
  - For example  
Are you taking any medication including contraceptives and over the counter medication?  
Select Yes  
Please provide details - List all medication taken:  
Omeprazole, Rampril, Atorvastatin etc
- Sign
- Submit

## Common problems when trying to submit:

Are you seeing the message:



Please recheck carefully that all questions have been answered and details given

If you have multiple forms to complete all essential forms will need completing in full before the software will allow you to submit the information.

If you are resubmitting previously completed forms please re complete the initial COVID screening questions prior to signing and submitting.

If you click the link in your email and see the message:

“The form request has been complete, it is no longer valid”

It means the link has expired, if you still need to submit the forms please email us to send you a new link.

If you have multiple appointments during a 3 day period you will only receive one online form email request. If anything changes between your appointments please email or telephone us to let us know. You do not need to submit a new form.

Thank you for reading this guide and submitting your online forms. This saves time for our reception team and is greatly appreciated.

All the best

Wall Heath Dental Team