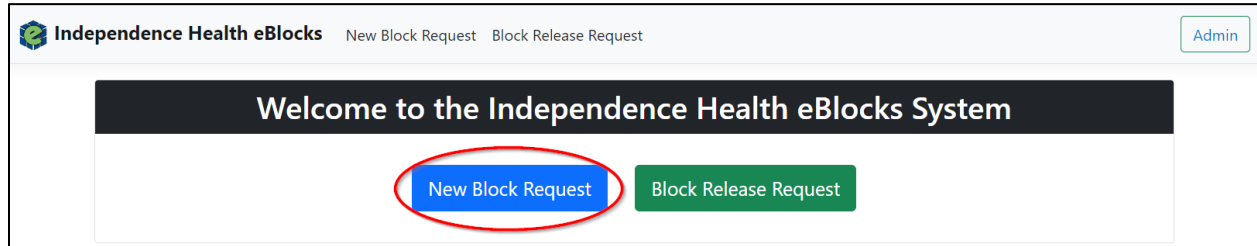


Independence Health eBlocks User Guide

This user guide applies to the web & mobile version of the eBlocks tool

Entering a New Block Request

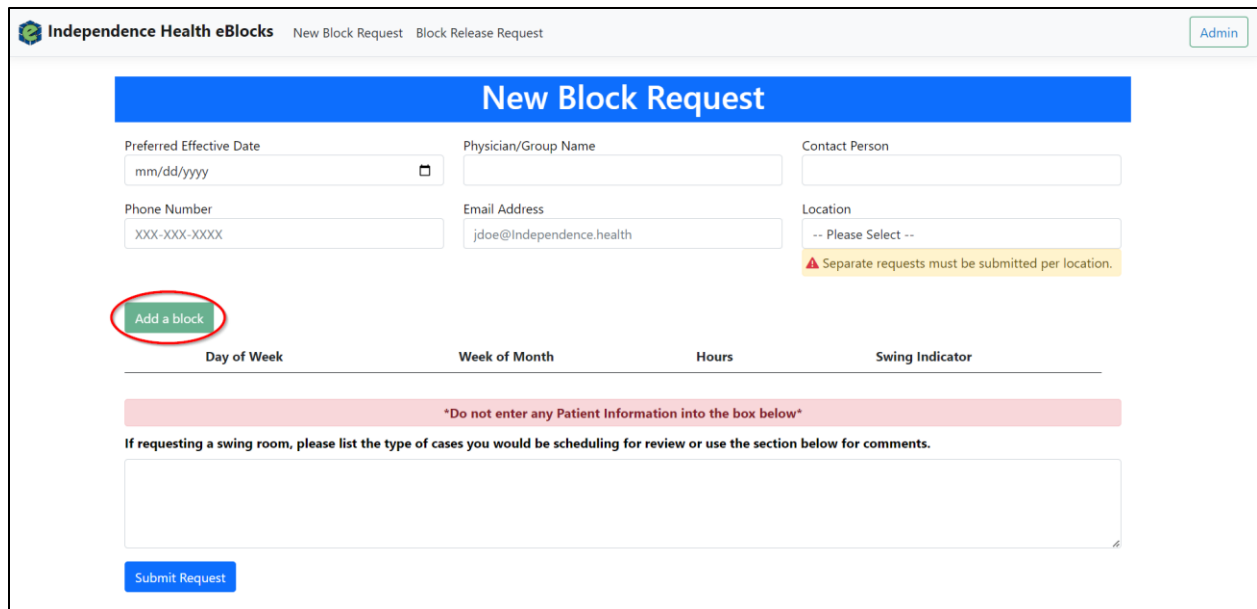
1.) On the Independence Health eBlocks System main page, click on "New Block Request"



2.) Enter the necessary information into the proper boxes on the "New Block Request" form

***Please Note:** All fields are required and separate requests must be submitted per location*

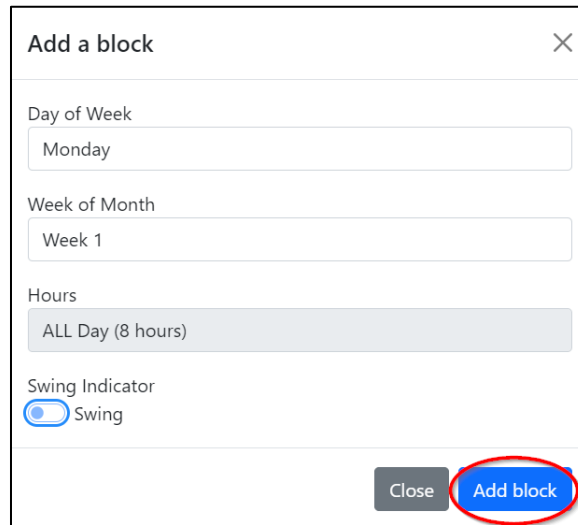
3.) Click the "Add a block" button



4.) Select the appropriate information in the "Add a block" popup dialog box
a. Select the "Swing Indicator" if a swing room is necessary

(Continue on next page)

- 5.) Click the "Add Block" button
a. This will return you to the original "New Block Request" form



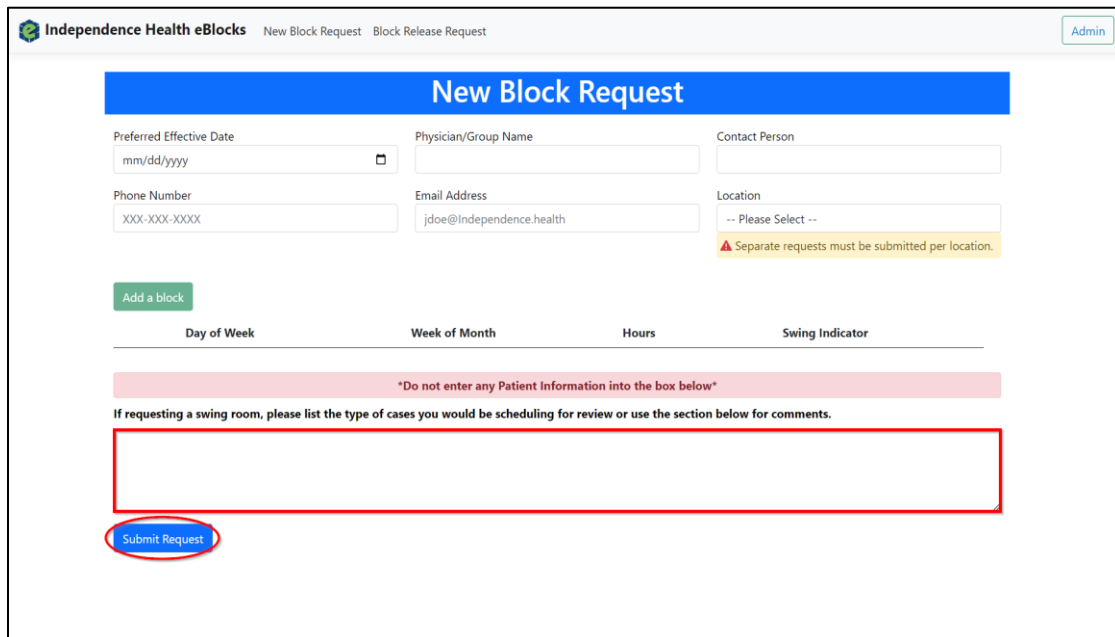
The screenshot shows a modal window titled "Add a block" with a close button (X) in the top right corner. The form contains the following fields and controls:

- Day of Week:** A dropdown menu with "Monday" selected.
- Week of Month:** A dropdown menu with "Week 1" selected.
- Hours:** A dropdown menu with "ALL Day (8 hours)" selected.
- Swing Indicator:** A toggle switch labeled "Swing" that is currently turned on.
- Buttons:** A "Close" button and an "Add block" button. The "Add block" button is circled in red.

- 6.) Enter any swing room information or general comments in the provided box at the bottom of the form

***Please Note:** Do NOT enter any patient information into the swing room/comment box*

- 7.) Click "Submit Request" to complete the "New Block Request" form




The screenshot shows the "New Block Request" form in the Independence Health eBlocks system. The form includes the following elements:

- Header:** "Independence Health eBlocks" logo and navigation links for "New Block Request" and "Block Release Request". An "Admin" button is in the top right.
- Title Bar:** "New Block Request" in a blue header.
- Form Fields:**
 - Preferred Effective Date:** Input field with "mm/dd/yyyy" placeholder and a calendar icon.
 - Physician/Group Name:** Input field.
 - Contact Person:** Input field.
 - Phone Number:** Input field with "XXX-XXX-XXXX" placeholder.
 - Email Address:** Input field with "jdoe@Independence.health" placeholder.
 - Location:** Dropdown menu with "-- Please Select --" and a warning message: "Separate requests must be submitted per location."
- Buttons:** A green "Add a block" button.
- Summary Row:** Labels for "Day of Week", "Week of Month", "Hours", and "Swing Indicator".
- Warning Box:** A pink box with the text: "*Do not enter any Patient Information into the box below*".
- Comments Box:** A large empty text area with the instruction: "If requesting a swing room, please list the type of cases you would be scheduling for review or use the section below for comments." This box is outlined in red.
- Submit Button:** A blue "Submit Request" button circled in red.

(Continue on next page)

You will receive the following confirmation that your request has been sent and an email to confirm your New Block Request

 **Request Sent**
Thank you. Your request form has been sent to the appropriate administrators.
[Submit another request](#)

eBlocks - New Block Request Confirmation

Request ID#: 78
Preferred Effective Date: 12/1/2023
Physician/Group Name: Test
Contact Person: Test
Contact Phone: 5555555555
Contact Email: 5555555555@westmoreland.org
Location: Westmoreland
Comments: Test

Blocks Requested

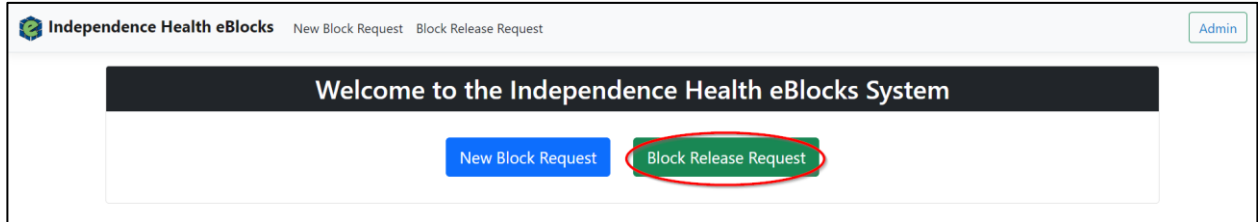
Day of week	Week of Month	Hours	Swing Indicator
Friday	Week 1	ALL Day (8 hours)	False

You will receive an email of approval or denial after the quarterly committee meeting.

(Continue on next page)

Entering a Block Release Request

1.) On the Independence Health eBlocks System main page, click on "Block Release Request"



Independence Health eBlocks New Block Request Block Release Request Admin

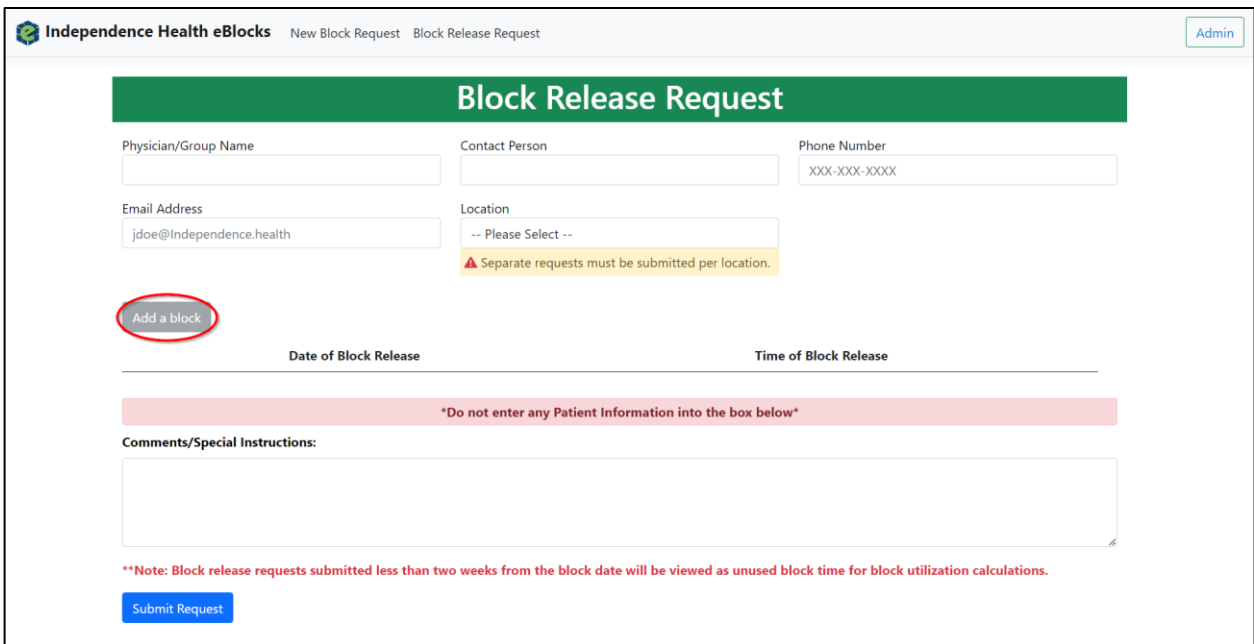
Welcome to the Independence Health eBlocks System

New Block Request Block Release Request

2.) Enter the necessary information into the proper boxes on the "Block Release Request" form

***Please Note:** All fields are required, and separate requests must be submitted per location*

3.) Click the "Add a block" button



Independence Health eBlocks New Block Request Block Release Request Admin

Block Release Request

Physician/Group Name Contact Person Phone Number
XXX-XXX-XXXX

Email Address Location
jdoe@Independence.health -- Please Select --

▲ Separate requests must be submitted per location.

Add a block

Date of Block Release Time of Block Release

Do not enter any Patient Information into the box below

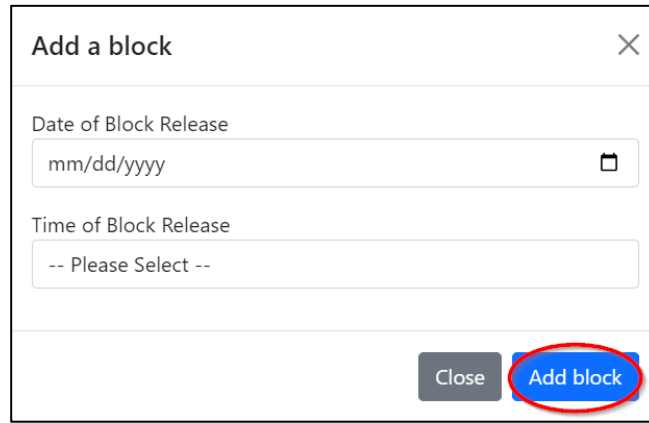
Comments/Special Instructions:

**Note: Block release requests submitted less than two weeks from the block date will be viewed as unused block time for block utilization calculations.

Submit Request

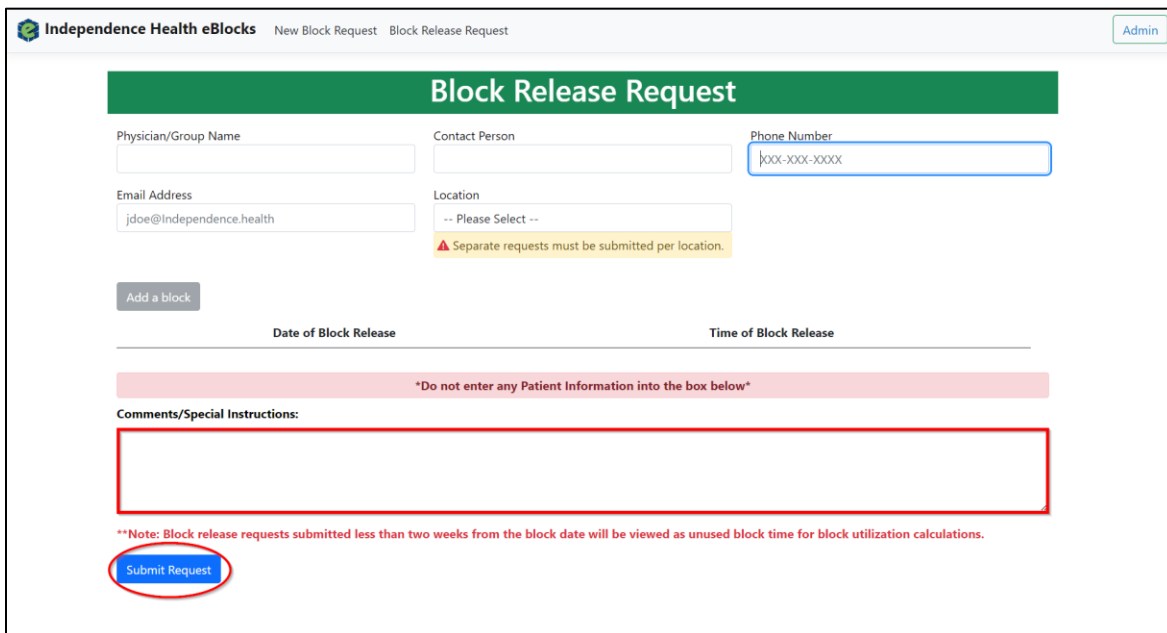
(Continue on next page)

- 4.) Enter the appropriate information into the "Add a block" popup dialog box
- Click "Add block", This will return you to the "Block Release Request" form



The screenshot shows a modal dialog box titled "Add a block" with a close button (X) in the top right corner. It contains two input fields: "Date of Block Release" with a placeholder "mm/dd/yyyy" and a calendar icon, and "Time of Block Release" with a dropdown menu showing "-- Please Select --". At the bottom, there are two buttons: a grey "Close" button and a blue "Add block" button, which is circled in red.


- 5.) Enter any comments/special instructions in the provided box at the bottom of the form
- *Please Note:** Do NOT enter any patient information into the swing room/comment box*
- 6.) Click the "Submit Request" button to complete the "Block Release Request" form



The screenshot shows the "Block Release Request" form on the Independence Health eBlocks website. The form has a green header with the title "Block Release Request". It includes several input fields: "Physician/Group Name", "Contact Person", "Phone Number" (with a placeholder "xxx-xxx-xxxx"), "Email Address" (with "jdoe@Independence.health"), and "Location" (with a dropdown menu showing "-- Please Select --"). A warning message states: "Separate requests must be submitted per location." Below these fields is an "Add a block" button. The form also has fields for "Date of Block Release" and "Time of Block Release". A red box highlights a section for "Comments/Special Instructions" with a warning: "Do not enter any Patient Information into the box below". At the bottom, there is a note: "**Note: Block release requests submitted less than two weeks from the block date will be viewed as unused block time for block utilization calculations." and a blue "Submit Request" button, which is circled in red.

(Continue on next page)

You will receive the following confirmation that your request has been sent and an email to confirm your Block Release Request

 **Request Sent**

Thank you. Your request form has been sent to the appropriate administrators.
[Submit another request](#)

eBlocks - Release Block Request Confirmation

Request ID#: 79
Physician/Group Name: Test
Contact Person: Test
Contact Phone: 5555555555
Contact Email: john.smith@westmoreland.org
Location: Westmoreland
Comments: Test

Blocks Requested for Release

Date	Time
**12/5/2023	All Day

You will receive an email once this has been completed.

**Your release request was submitted less than 2 weeks from the block date.
This will be viewed as unused block time for block utilization calculations, per policy.