



757.321.3300

Specializing in All Areas of Orthopaedic Health



Signup for our Newsletter

Name:

Email:

SUBSCRIBE

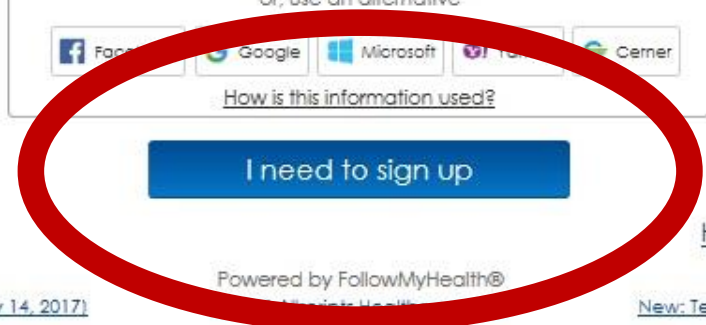
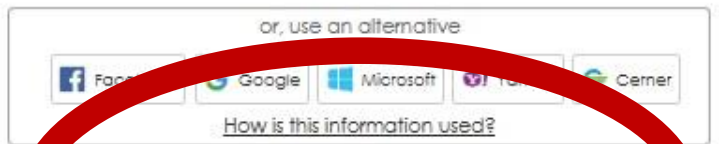
Communicate with your physician, update your health information, request appointments, and more!

Log In/Create an Account

How do I sign up?

I already have a FollowMyHealth

Begin by clicking the Log In/ Create an Account button



If you already have an account with patient portal you can sign in on this page or sign up by hitting the-I need to sign up button



Sign Up and Connect

With FollowMyHealth® you can manage your health information and communicate with providers in a secure, online environment – 24 hours a day / 7 days a week. Once you create your account, you will be prompted to search for and connect with available providers in your area.

Notifications Email <input type="text"/>	Zip Code <input type="text"/>
First Name <input type="text"/>	Home Phone Number (optional) <input type="text"/>
Last Name <input type="text"/>	Social Security Number (optional) <input type="text"/>
Date of Birth (e.g. 10/29/1985) <input type="text"/>	

[« Back](#)

[Confirm and Continue](#)

When signing up please fill in your patient information and then click confirm/continue



FollowMyHealth Universal Health Record

Terms of Use

Welcome to the FollowMyHealth Universal Health Record. All users of this web site, as well as the FollowMyHealth Universal Health Record and all related products and services (collectively, the "Service"), are subject to the following terms and conditions of use (these "Terms of Use"). Please read these Terms of Use carefully before accessing or using any part of the Service. By accessing or using the Service, you agree that you have read, understand, and agree to be bound by these Terms of Use, as amended from time to time, and agree to be bound by FollowMyHealth Privacy Policy which is hereby incorporated into these Terms of Use. If you do not wish to agree to these Terms of Use and/or the FollowMyHealth Privacy Policy, do not access or use any part of the Service.

1. Definitions

(a) Aggregate Data. Aggregate Data is RHR Data that: (1) has names and other identifiers

Please read terms of use and then click- I accept button

« Back **I Accept** I Decline

[Help](#) | [English](#)



**ATLANTIC
ORTHOPAEDIC
SPECIALISTS**
Leaders in Orthopaedic Health

Sign Up and Connect



Create Username (Using your email is recommended)

- ✘ Cannot contain the characters /, ?, #, or \
- ✘ If using your email, must be a valid email address

Create Password

- ✘ Must be at least 8 characters
- ✘ Must contain at least one number
- ✘ Must contain at least one special character.
For example: !@#\$\$%^&*()-
- ✘ Passwords must match

[« Back](#)

[Confirm and Continue](#)

[Help](#) | [English](#)

[New: Privacy Policy \(updated July 14, 2017\)](#)

Powered by FollowMyHealth®
© 2016 Allscripts Healthcare, LLC.
[All rights reserved](#)

[New: Terms of Use \(updated July 14, 2017\)](#)

Enter a username and password that you would like to use and will remember. Click the confirm and continue button once completed.



Español

Request Connections to Healthcare Organizations

Requesting a connection informs your healthcare provider that you would like your medical information to be made available online through FollowMyHealth.

If your healthcare provider is a participant in FollowMyHealth, they will display in the search results below. Use the Search Box to locate available connections by entering your zip code, provider, or healthcare organization. (We have started the process for you by entering your zip code.)

To use FollowMyHealth without adding connections, please click the "Skip This Step" button.

Please note that response times to your connection requests may vary by organizations or providers.

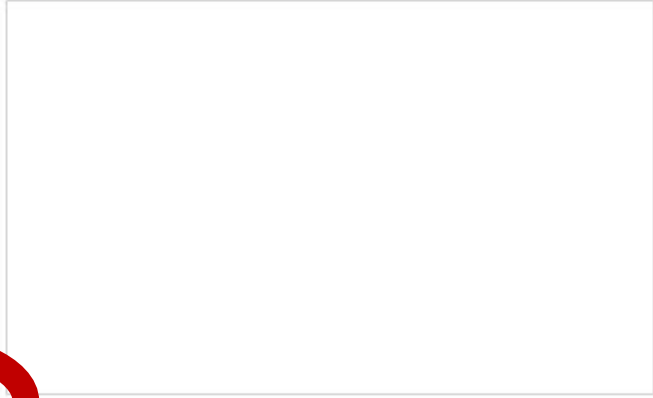
Search: (Zip Code, Organization, or Provider)

Search Results

Chesapeake Internist 113 Gainsborough Square Suite 113 Chesapeake, Virginia 23320	Connect
Westminster Canterbury On Chesapeake Bay 3100 Shore Drive Virginia Beach, Virginia 23451	Connect
Virginia Beach Surgery 329 Phillip Ave Ste 102 Virginia Beach, Virginia 23454	Connect
Atlantic Orthopaedic Specialists	Connect



My Organizations



Skip This Step Next

To become connected to Atlantic Orthopaedic Specialists, find us on the search results by scrolling through the healthcare organization list and clicking connect, and then hitting the next button in the bottom right hand corner.
****It may take 24-48 hours for you to become connected. You will receive a confirmation email when you are connected.****

Connections

Visualize Connections

Request for Access

Request for Access for Atlantic Orthopaedic Specialists

Please review the Request for Access agreement and accept or decline the terms below. Print

I hereby request such information that it has configured to be transmitted to my FollowMyHealth personal health record for my own uses and purposes. I acknowledge that such healthcare information may include the following: x-rays, clinical diagnosis, histories of present illnesses, immunizations, allergies, prescription drug information, laboratory results, diagnostic screening and testing, clinical procedures, medical research, clinical trials, billing, account, and insurance information.

I acknowledge that such healthcare information may include information regarding mental health screenings and/or treatment, including psychotherapy notes, HIV/AIDS, infectious disease, sexually transmitted infection testing, screening, diagnosis, and/or treatment; genetic testing, history of domestic violence, child abuse, and/or family abuse; and, substance/alcohol use and treatment history.

I acknowledge that with this Request for Access Atlantic Orthopaedic Specialists may disclose any information or records (within the scope of the Request for Access) that Atlantic Orthopaedic Specialists has received about me from other healthcare Practices or facilities. Atlantic Orthopaedic Specialists may, within its discretion, withhold from disclosure any of the above information as permitted or required by law.

Access to treatment or services may not be denied to me if I decline to sign this Request for Access or revoke my Request for Access. However, without this Request for Access, my Practice will not electronically release my healthcare information to my FollowMyHealth personal health record. I may revoke this Request for Access at any time. Such revocation will promptly take effect except to the extent that Atlantic Orthopaedic Specialists already has acted based on this Request for Access.

I may revoke this Request for Access by removing my connection to Atlantic Orthopaedic Specialists from my FollowMyHealth account or providing my request to Atlantic Orthopaedic Specialists. However, I acknowledge that data previously submitted by Atlantic Orthopaedic Specialists as authorized by me prior to my subsequent revocation of this Request for Access will remain in my FollowMyHealth account. I understand that I may delete my FollowMyHealth account any time.

Read the terms/ Access agreement and click accept.



This portal is not intended for emergencies. If you require urgent medical care, call 911



Health Summary

Age: 27
Birth Sex: Unspecified

Appointments

Search: Schedule Export

Upcoming Past Other

You have no upcoming appointments.

Action Center

- You have not connected to any healthcare providers!
- You haven't set your address in your contact information.
- You haven't verified your email.**
- Add your mobile phone number

Recent Activity

- Previous Page 1 of 1 Next
- You joined FollowMyHealth@
27 minutes ago

App Center

+ Add Apps

Health Journal

New View More

Click the 'New' button to create a new Journal Entry pertaining to

This is the Follow My Health Portal Homepage here you will find important notifications. Please click the verify your email button as seen here.

Browser address bar: <https://atlanticortho.followmyhealth.com/patientaccess#/Home>

Page Title: Patient Portal - Atlantic Ortho... FollowMyHealth@

Language: English

Disclaimer: This portal is not intended for emergencies. If you require urgent medical care, call 911

Navigation: Home Messages My Health Wellness

Health Summary

Age: 27
Birth Sex: Unspecified

Appointments

Search: Schedule Export

Upcoming Past Other

You have no upcoming appointments.

Verify Email Address

We need to confirm that you own the email that you used to create this account. This helps us know that we're sending your account info to the right place.

Is this your email address? We'll send you a verification code to enter on the next screen.

Email

Continue

Action Center

- You have no notifications
- You haven't seen any new notifications
- You haven't verified your email address
- Add your mobile phone number

App Center

+ Add Apps

Health Journal

New View More

Enter your correct email address and click continue. This will send you an email with a verification code that is needed to confirm your secured email address.



Health Summary

Age: 27
Birth Sex: Unspecified

Appointments

Search: [input] Schedule Export

Upcoming Past Other

You have no upcoming appointments.

Verify Email Address

Almost there! An email with a verification code was just sent to [redacted]@atlanticortho.com. Enter that code below to verify your email.

Verification Code

[Resend verification code](#)

Not receiving a code? Make sure to check your spam folder or junk mail. You can also contact your provider's support team for help.

[Back](#)

[Verify Email](#)

Action Center

You have not...

You haven't se...

You haven't ve...

Add your mobile phone number

App Center

+ Add Apps



Health Journal

New View More

Click the 'New' button to create a new Journal Entry pertaining to

Once you have retrieved your email with the verification code enter it on the following screen and then click verify email.



Health Summary

Age 27
Gender Identity Male

Appointments

Search: Schedule Export

Upcoming Past Other

You have no upcoming appointments.

Recent activity such as appointments and medications will be displayed on your home page.

Action Center

- Your health record contains new clinical items.
- You haven't set your address in your contact information.
- Add your mobile phone number

Recent Activity

- Atlantic Orthopaedic Specialists added 1 prescriptions to your health record.
06/19/2019 8:28 am
- You have requested to connect your...
Orthopaedic Specialists
06/17/2019 3:14 pm

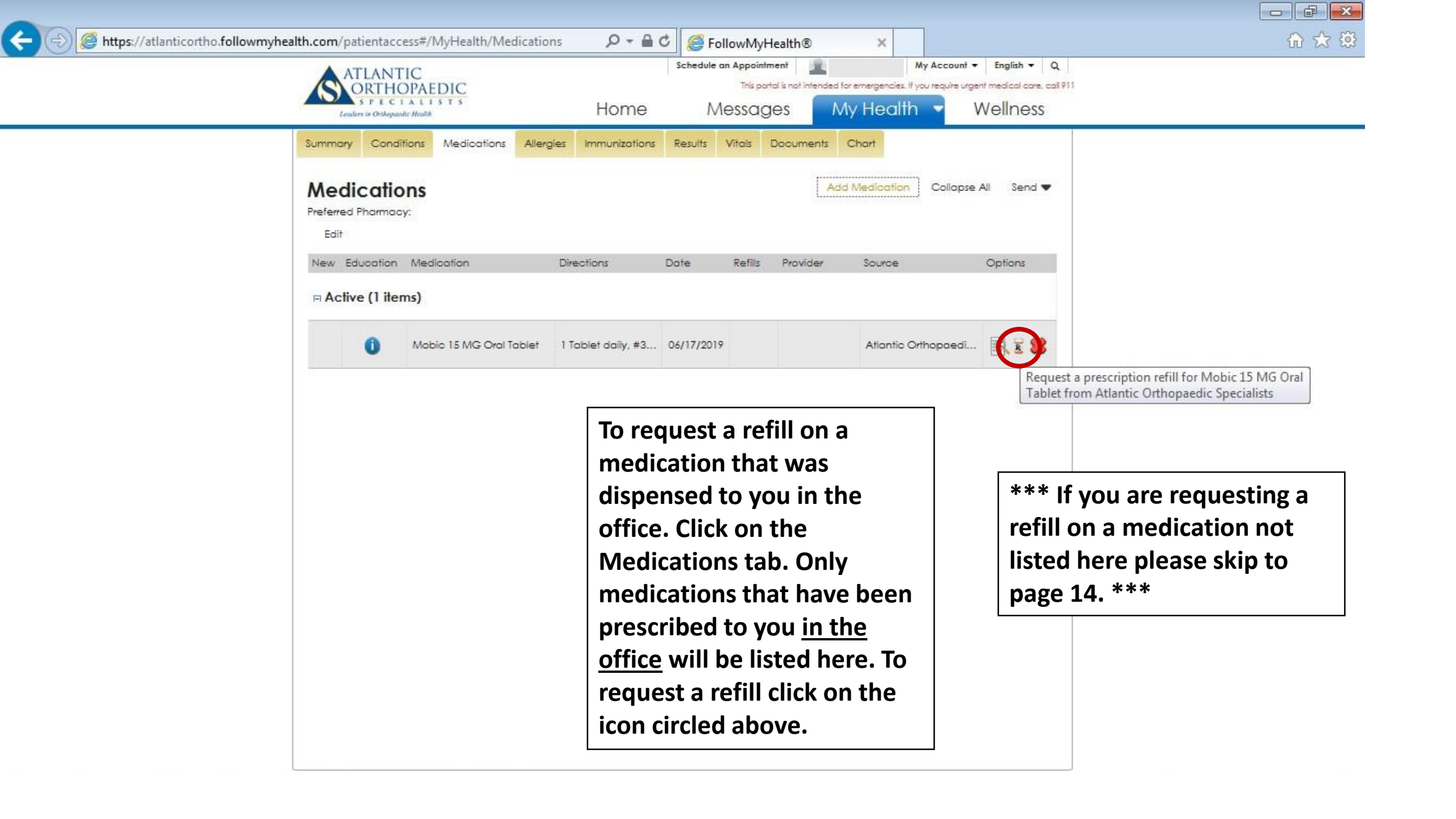
App Center

+ Add Apps

Health Journal

New View More

Click the 'New' button to create a new Journal Entry pertaining to your health. Journal entries are private but can be printed to share with your healthcare provider.



Medications

Add Medication Collapse All Send

Preferred Pharmacy:
Edit

New	Education	Medication	Directions	Date	Refills	Provider	Source	Options
-----	-----------	------------	------------	------	---------	----------	--------	---------

Active (1 items)

		Mobic 15 MG Oral Tablet	1 Tablet daily, #3...	06/17/2019		Atlantic Orthopaedi...		
--	--	-------------------------	-----------------------	------------	--	------------------------	--	---

Request a prescription refill for Mobic 15 MG Oral Tablet from Atlantic Orthopaedic Specialists

To request a refill on a medication that was dispensed to you in the office. Click on the Medications tab. Only medications that have been prescribed to you in the office will be listed here. To request a refill click on the icon circled above.

*** If you are requesting a refill on a medication not listed here please skip to page 14. ***

Summary Conditions Medications Allergies Immunizations Results Vitals Documents Chart

Medications

Preferred Pharmacy:
Edit
New Education Med

Active (1 items)

Renew a Prescription

Provider:
Brad Butkovich, MD

Prescription:
Mobio 15 MG Oral Tablet

Medication Info:
Mobio 15 MG Oral Tablet
1 Tablet daily, #30, 30 days starting 6/17/2019, Ref. x0.

Preferred Pharmacy:
What pharmacy do you wish to use for this renewal request?*
Pharmacy not selected Edit

Comments:

Send Cancel

Select the pharmacy in which you would like the prescription to be sent to and click send.

Connections

Visualize Connections

▼ With Providers and Healthcare Organizations (1 Organization , 4 Providers) Add Organization

Atlantic Orthopaedic (Connected)

Compose Secure Message ✕

! If this is an emergency, please call 911 Dismiss

Organization: Atlantic Orthopaedic Specialists

Choose a Provider Don't see your provider? [?](#)

- Samuel Kline, MD
- Chad R Manke, MD
- Thomas C Markham, MD

Continue

Specialties: none
Address: 230 Clearfield Ave, Suite 124, Virginia Beach, Virginia 23462

Thomas C Markham, MD Show More What do you want to do? ✕

Affiliated Practice: Atlantic Orthopaedic Specialists
Place of Service: Atlantic Orthopaedic Specialists
Credentials:
Contact Info:

If requesting a refill on a prescription that was not listed on your medication list- Click the Send a Message tab circled above. Select the provider who you are requesting the refill from and click continue.

Connections

▼ With Providers and Healthcare Organizations (1 Organization , 4 Providers) Add Organization

Atlantic Orthopaedic (Connected)

Compose Secure Message

! If this is an emergency, please call 911 Dismiss

Organization: **Atlantic Orthopaedic Specialists**

To: **Chad R Manke, MD**

Subject

Message Characters used: 0 / 1000

Back Send

Specialties: none

230 Clearfield Ave,
Suite 124
Virginia Beach, Virginia
23462

Thomas C Markham, MD [Show More](#) What do you want to do?

Affiliated Practice: Atlantic Orthopaedic Specialists

Place of Service: Atlantic Orthopaedic Specialists

Credentials: **Contact Info:**

In the subject line please state "Medication Refill". In the body of the message please state all information listed on your medication bottle to include the name of medicine, dosage, and directions.