

Book Online Appointment with Clinic

End-User Guide

Step 1: Login

1- Click on **(Start the service)** to start. You will be redirected to the appointment request page.

Graduate
Book Online Appointment with Clinic

▶ **Start the service**

[HES] - Book Online Appointment with Clinic

Information last Updated: Dec 06, 2021

Service Time
8:30am - 4:30pm depends on available slots

Service Fee
0

Service Channels

User guide and tools

Transactions: 0
Other Transactions: 0

Click to rate your experience!

Rate this service!
★★★★☆ (0 / 5)

Scan the QR code to make a request using your mobile device.

Description

Health e-service is a web-based health system where ZU community members can schedule an appointment to receive health care or have medical consultation online. Also, they can attain health support services especially for those who have chronic health conditions.

It is an easy and effective service that allows students, faculty and staff members to access online health services; get medical queries answered and have consultation with medical team via live chatting option. This system is also providing management of clients' clinic appointments.

The most important features of Health E- Service system:

- Clients can check their old clinic appointments in the system when they need.
- E-Health provides early notifications for clients to remind them of their appointment.
- Clients can access to the clinic instructions and advises.
- Contact clients through emails and live chat.
- Obtain health support services for students with chronic illness.
- Client can register their clinic appointment based on the timing available.
- The system is effective and easy to use

2- Enter your **Username (ZU ID)** and **Password**, then click on **(Sign in)**.

HealthServiceSystem

Username

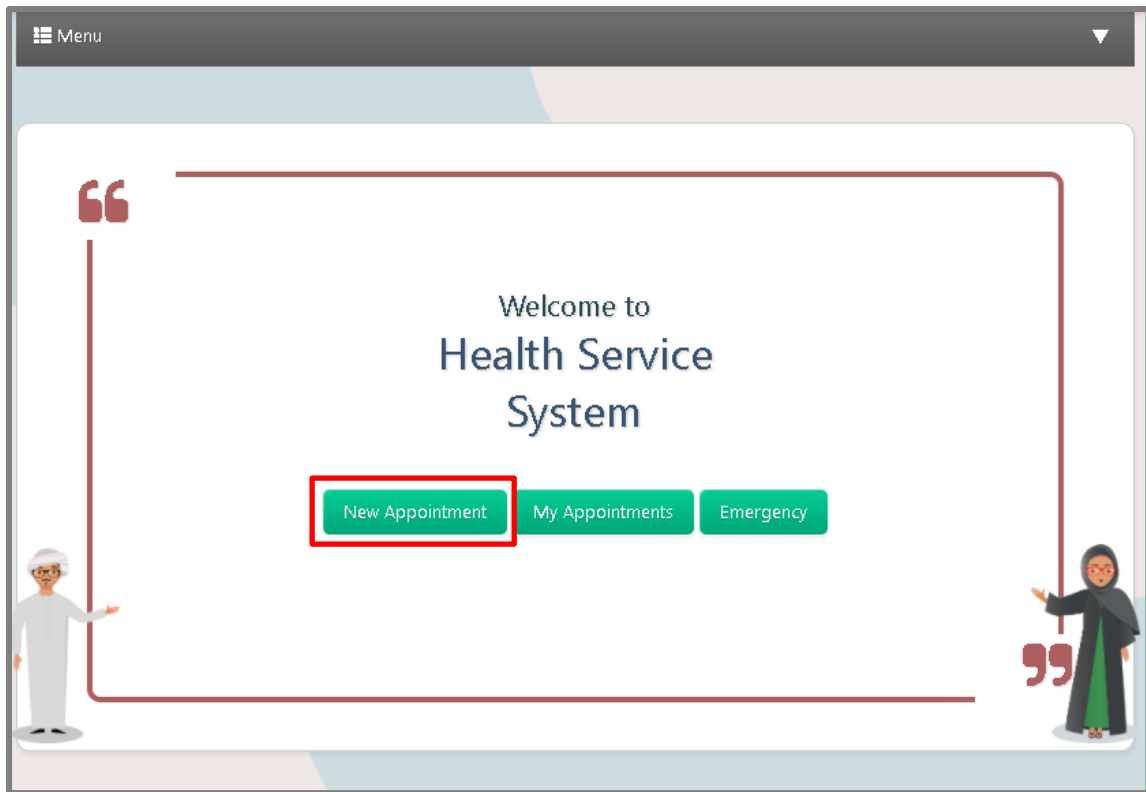
Password

Sign in

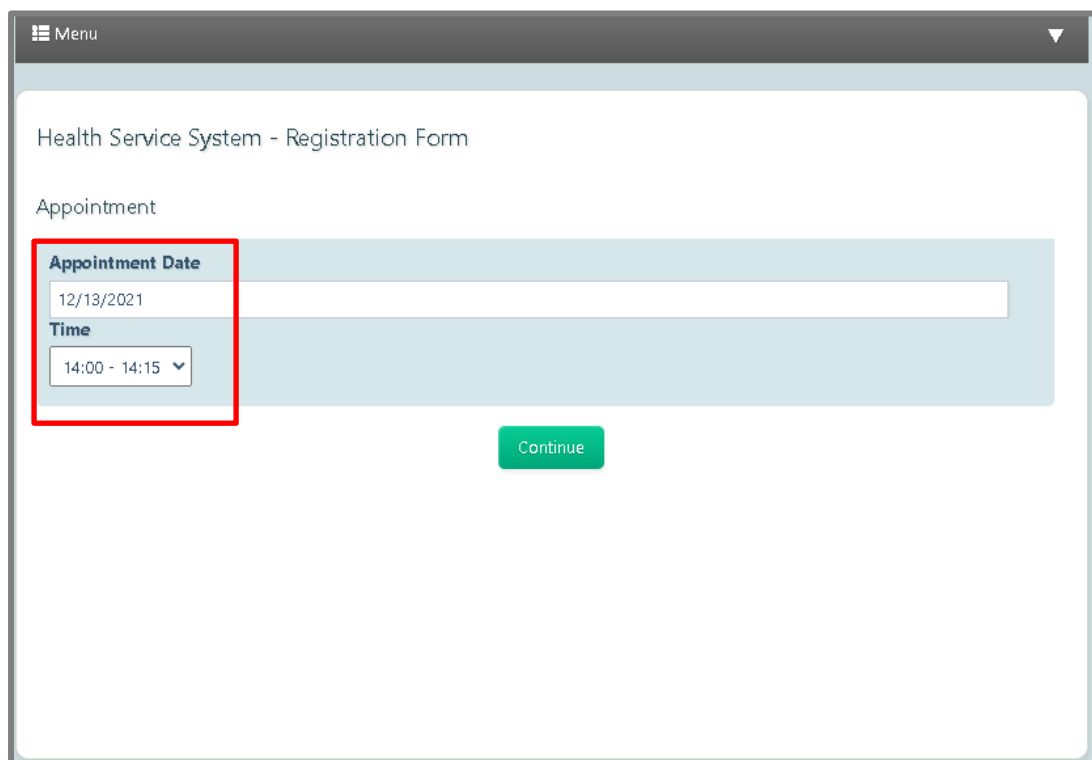
[Not ZU Student, Faculty & Staff](#)

Step 2: Submit Appointment Request

1- Below is the home page for Students/Faculty/Staff to submit appointment requests. Click on “**New Appointment**” to book an appointment.



2- Select Appointment **Date** and **Time** then click on **Continue**.
Note: Available timeslots will be loaded in the time dropdown.



3- In the below screen, **name** and **ID** will be filled automatically (logged-in user's), user must fill the remaining fields in all sections then click on (**Submit**) to book the appointment.

Health Service System - Registration Form

General Information

Name	ID
<input type="text"/>	<input type="text"/>
Age	Gender
<input type="text"/>	Female ▾
Mobile Number	Guardian Number
<input type="text"/>	<input type="text"/>
Marital Status	Pregnant
Single ▾	No ▾

Medical History

History of Medical Disorder	<input type="radio"/> Yes <input type="radio"/> No	Specify	<input type="text"/>
History of allergy to medicine	<input type="radio"/> Yes <input type="radio"/> No	Specify	<input type="text"/>
Any medication taken today	<input type="radio"/> Yes <input type="radio"/> No	Specify	<input type="text"/>
Any recent history of travel (Last 2 months)	<input type="radio"/> Yes <input type="radio"/> No	Specify	<input type="text"/>
Any complain of fever or flu symptoms	<input type="radio"/> Yes <input type="radio"/> No	Specify	<input type="text"/>
Any history of contact with confirmed positive Covid-19 case	<input type="radio"/> Yes <input type="radio"/> No	Specify	<input type="text"/>

Appointment Details

Reason for booking appointment:

Consent

- I, the undersigned, hereby authorize the physicians and other healthcare professionals of Wellness Center under Primary Health Care Services Sector (PHCSS) Centers to manage my health condition.
- I understand that no guarantee has been given as to the results that may be obtained from the management.
- I am fully aware that my personal information will be treated as highly confidential.
- I authorize staff of Wellness Center under PHCSS to release my medical information which help in my treatment and follow up to any person in the work team.
- I agree that wellness center is not responsible for any loss of my personal belongings.
- I acknowledge that I have read and fully understood this consent and I had the opportunity to have my questions answered.
- I'm fully responsible of the consequences for refusing medical treatment or service.

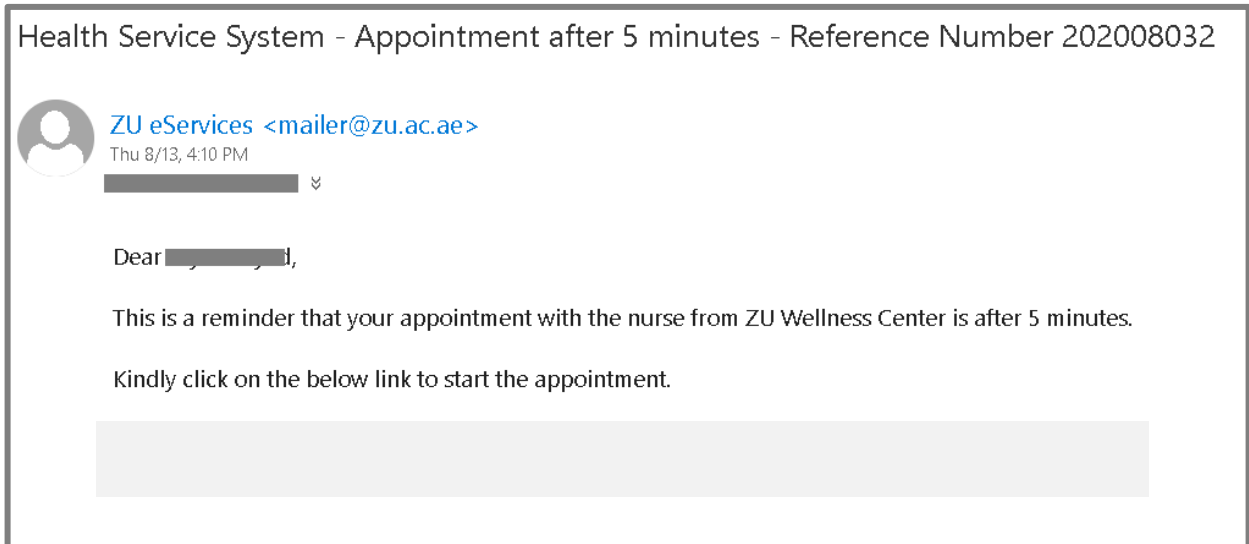
I confirm that I read the above consent

Submit

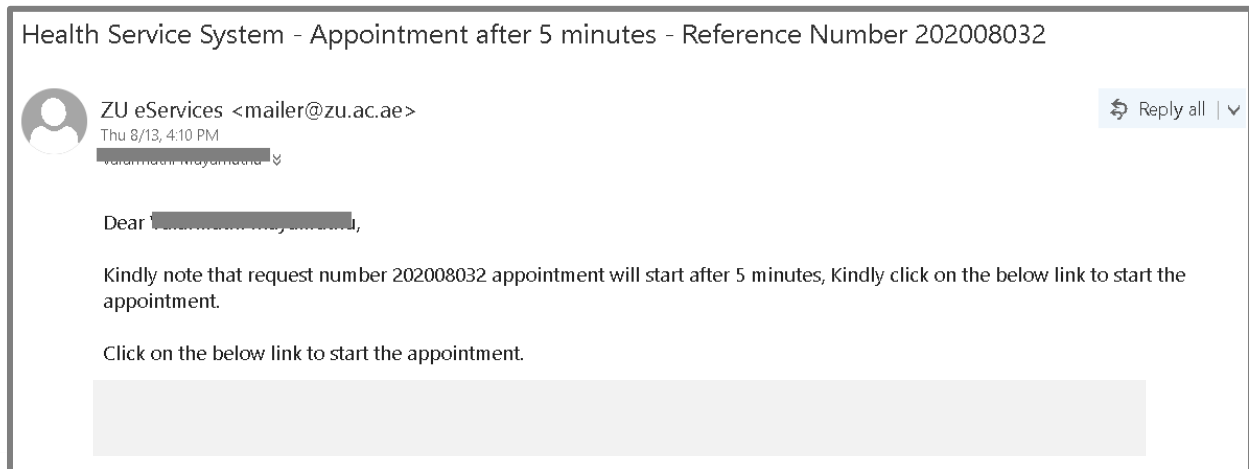
4- Once submitted, below thank you message will be displayed.



5- Just 5 minutes before the appointment time, the user (requester) will receive the below reminder email.

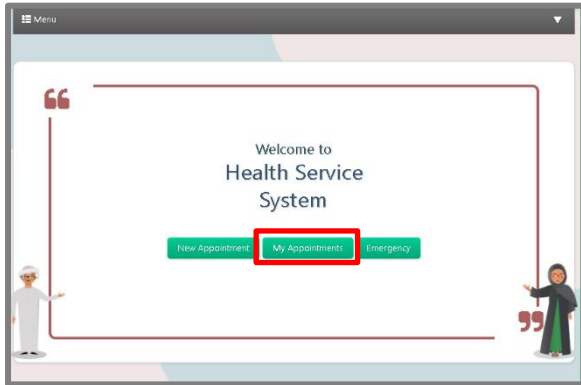


6- Nurses and Doctors will receive the below reminder email.



Step 3: View Submitted appointment requests

1- Click on **(My Appointments)** to view your submitted appointment requests.



2- Click on **(View)** to see the details of the submitted appointment request.

Manage Appointments							
Reference Number:	Appointment Date:						
<input type="text"/>	<input type="text"/>	<input type="button" value="GO"/>					
Number of records shown: 2							
Show	50	entries	<input type="button" value="Export to Excel"/>		Quick search: <input type="text"/>		
	ReferenceNumber	Appointment Date	Appointment Time	Remarks	Nurse Comments	Doctor Comments	
<input type="button" value="View"/>	202008029	August 13, 2020	09:30 - 09:45	Advised to stay home, Short Stay	Test Nurse Comments	Test Doctor Comments	<input type="button" value="Chat"/>
<input type="button" value="View"/>	202008037	August 16, 2020	09:30 - 09:45	No Remarks			

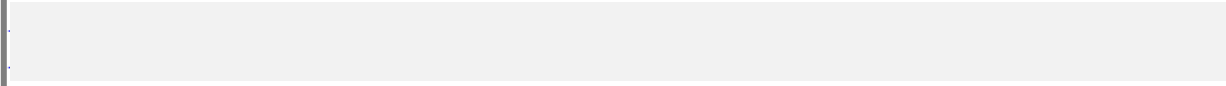
3- Booked appointment details will be displayed as below.

Appointment Date 08/13/2020	Time 09:30 - 09:45		
Name [Redacted]	ID [Redacted]		
Age 20	Gender Female		
Mobile Number 1234	Guardian Number 12345		
Marital Status Single	Pregnant No		
Medical History			
History of Medical Disorder	<input type="radio"/> Yes <input type="radio"/> No	Specify	<input type="text" value="Medical Disorder"/>
History of allergy to medicine	<input type="radio"/> Yes <input type="radio"/> No	Specify	<input type="text"/>
Any medication taken today	<input type="radio"/> Yes <input type="radio"/> No	Specify	<input type="text" value="Medicine Taken"/>
Any recent history of travel (Last 2 months)	<input type="radio"/> Yes <input type="radio"/> No	Specify	<input type="text"/>
Any complain of fever or flu symptoms	<input type="radio"/> Yes <input type="radio"/> No	Specify	<input type="text"/>

Step 4: Chat with Nurse/Doctor

1- Click on the link received in the reminder email to chat with the Doctor/Nurse.

Kindly click on the below link to start the appointment.



2- or Click on (Chat) to open the chat window.

Manage Appointments

Reference Number: Appointment Date:

Number of records shown: 2

Show entries Quick search:

	ReferenceNumber	Appointment Date	Appointment Time	Remarks	Nurse Comments	Doctor Comments	
<input type="button" value="View"/>	202008029	August 13, 2020	09:30 - 09:45	Advised to stay home, Short Stay	Test Nurse Comments	Test Doctor Comments	<input type="button" value="Chat"/>
<input type="button" value="View"/>	202008037	August 16, 2020	09:30 - 09:45	No Remarks			

3- Type message in the chat window to chat with the Nurse/Doctor.

Health Service System - Registration Form

General Information

Appointment Date <input type="text" value="08/13/2020"/>	Time <input type="text" value="09:30 - 09:45"/>
Name <input type="text"/>	ID <input type="text"/>
Age <input type="text" value="20"/>	Gender <input type="text" value="Female"/>
Mobile Number <input type="text" value="1234"/>	Guardian Number <input type="text" value="12345"/>
Marital Status <input type="text" value="Single"/>	Pregnant <input type="text" value="No"/>

Medical History

History of Medical Disorder	<input type="radio"/> Yes <input type="radio"/> No	Specify	<input type="text" value="Medical Disorder"/>
History of allergy to medicine	<input type="radio"/> Yes <input type="radio"/> No	Specify	<input type="text"/>

Chat Window

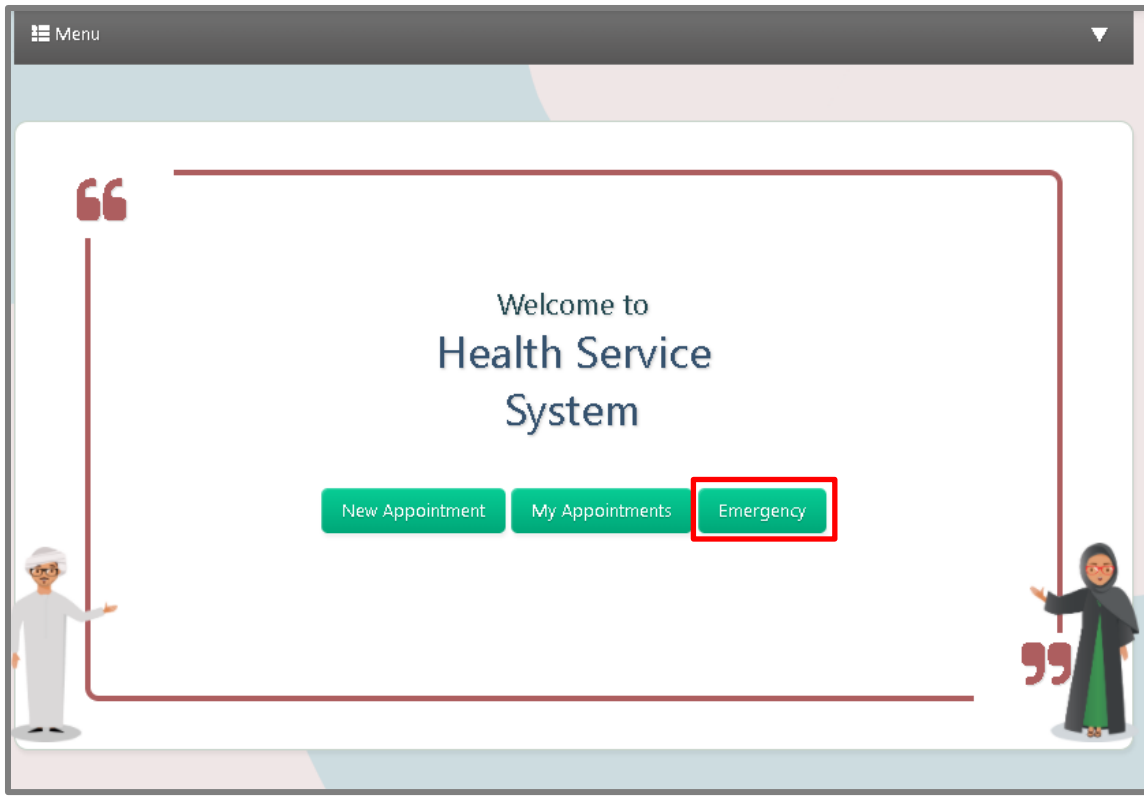
8/12/2020 10:46:39 PM

8/12/2020 10:47:02 PM

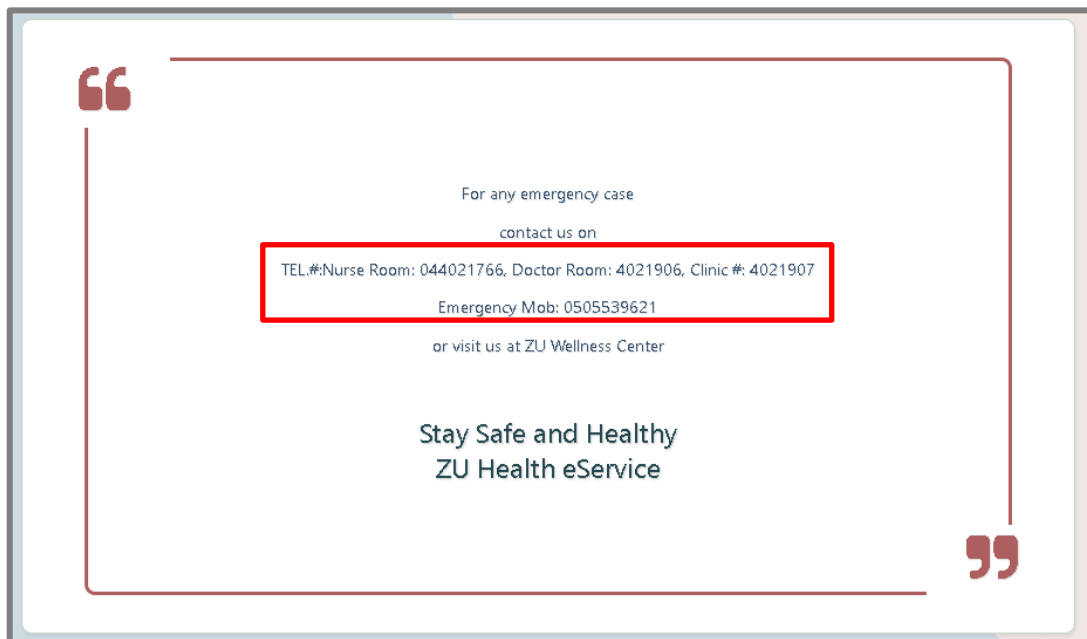
8/12/2020 10:47:34 PM

Step 5: Emergency Appointment

1- Click on the **(Emergency)** Button to make an emergency appointment.

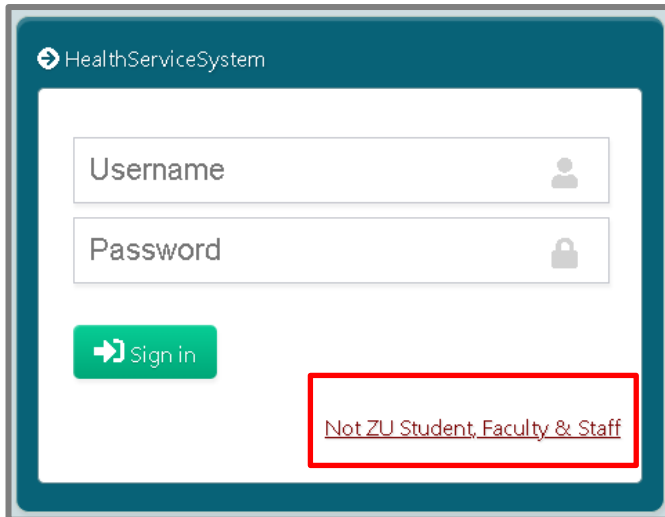


2- Call the number which is displayed in the below screen to consult with the doctor over phone.



Step 6: ZU Workers without ZU Credentials

1- ZU Workers without ZU Credentials must register before booking an appointment. To **register**, click on **(Not ZU Student, Faculty & Staff)** link in the login screen.



HealthServiceSystem

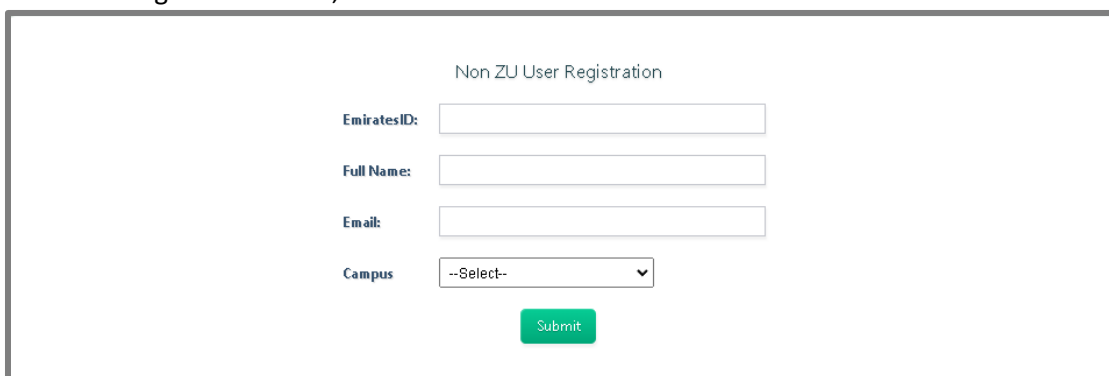
Username

Password

[Sign in](#)

[Not ZU Student, Faculty & Staff](#)

2- Fill the registration form, then click on submit.



Non ZU User Registration

EmiratesID:

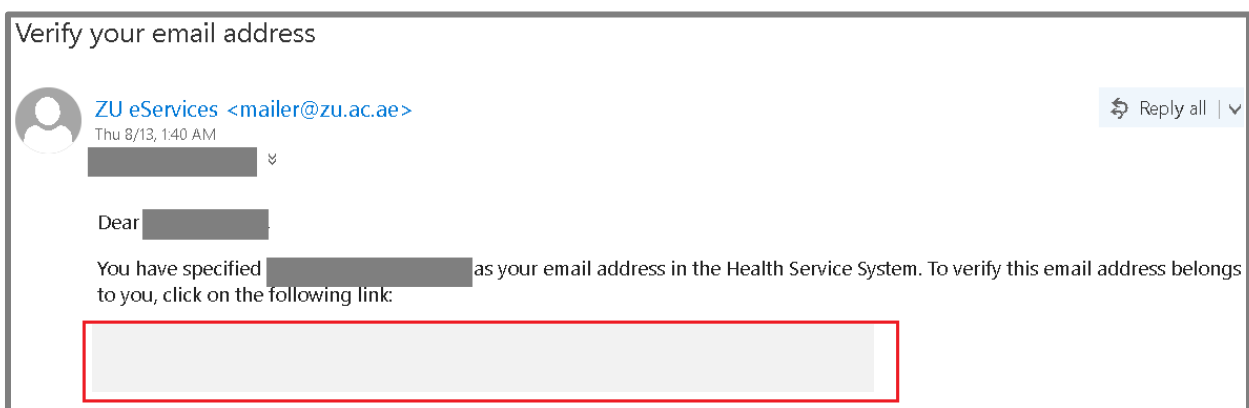
Full Name:

Email:


Campus:

[Submit](#)

3- Once submitted, you need to verify your email by clicking on the link received in the email.



Verify your email address

 ZU eServices <mailer@zu.ac.ae> Thu 8/13, 1:40 AM

Dear [redacted],

You have specified [redacted] as your email address in the Health Service System. To verify this email address belongs to you, click on the following link:

[\[redacted\]](#)

4- Once email verification is done, you can login to the system using your credentials (Use the registered Emirates ID as Username and Password) to book the appointment.

Thank you for using this tutorial



إدارة تقنية المعلومات
Information Technology Department