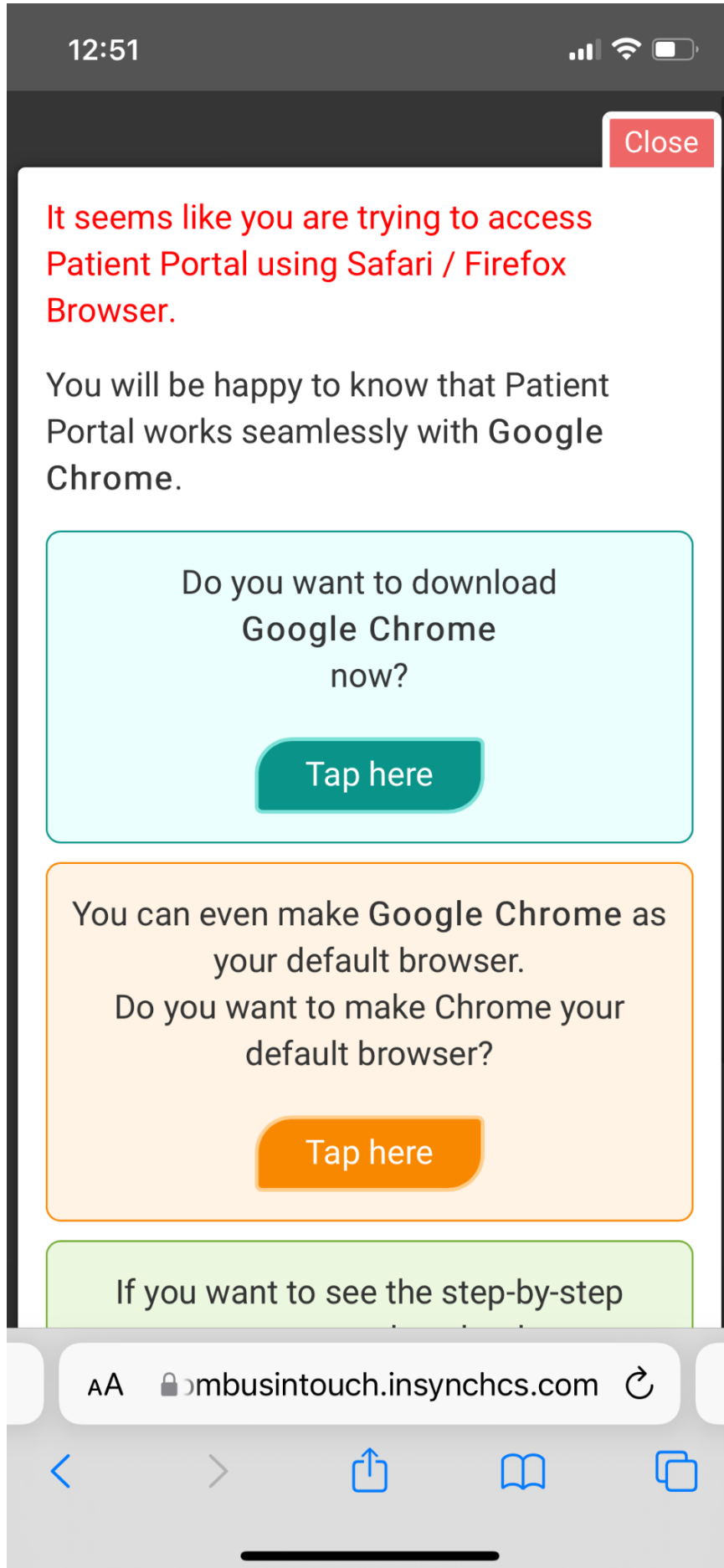


## InSync from Your Cell Phone!



**Make sure you have downloaded Google Chrome downloaded on your phone and is set as default.**

**From your email, click to get to the InSync secure client portal.**

12:52



Welcome to your  
**Patient Portal**

 User Name



 Password

**SIGN IN**

*Forgot Password?*

POWERED BY 

© 2022 InSync Healthcare Solutions

AA  [ambusintouch.insynchcs.com](https://ambusintouch.insynchcs.com) 



**When you first log in you will need your phone and date of birth and then you will pick your password. It will send you a code to your email also.**

1:01



**Test Last Name**  
04/05/2022 01:01 PM

- Home / Dashboard
- My Profile
- Appointments
- Messages** 5
- Education Material
- Forms / Documents 16
- Assessment Tools
- History
- Medications
- Allergies
- Billing

POWERED BY **inSync**

busintouch.insynchcs.com

**This is what it looks inside your portal. Click to read messages.**

12:52



Amount:

\$ 0.00

ePay Now

Inbox (5)

- ➔ All the unread messages will appear in the Unread Messages section.
- ➔ Important messages will appear in red fonts.
- ➔ The messages which you have already read will appear in the Read Messages section.
- ➔ To open any message, you can click on the Subject link or click on the Open button.

Unread Messages (5)

Type to search

Has attachment

**From:** Hayden, Julie  
**Subject:** New forms available on your patient portal!  
**Date:** 03/26/2022 07:39 PM  
[Open](#) [Reply](#)

**From:** Hayden, Julie  
**Subject:** New forms available on your patient portal!  
**Date:** 03/24/2022 06:13 PM  
[Open](#) [Reply](#)

**From:** Hayden, Julie  
**Subject:** New forms available on your patient portal!  
**Date:** 03/24/2022 03:19 PM

Initial messages are likely telling you that you have paperwork to fill out.

AA [ombusintouch.insynchcs.com](https://ombusintouch.insynchcs.com)



12:53



Test Last Name  
04/05/2022 12:53 PM

Home / Dashboard

My Profile

Appointments

Messages 5

Education Material

Forms / Documents 16

Assessment Tools

History

Medications

Allergies

Billing

POWERED BY **inSync**

**Click Forms to fill out the forms for intake/initial session.**

AA ombusintouch.insynchcs.com

< >

12:53



Amount:

\$ 0.00

ePay Now

### Forms / Documents

Patient Forms		
Form Name	Received On	Last Submitted On
Consent for Telep	03/26/2022	03/26/2022 07:42 PM
Court Mandated Ii	03/26/2022	03/26/2022 07:44 PM
Court-Mandated T	03/26/2022	03/26/2022 07:46 PM
Credit Card Autho	03/26/2022	
Electronic Commu	03/26/2022	
Online Group Sch	03/26/2022	
Consent for Treat	03/24/2022	
In Case of an Eme	03/24/2022	
Informed Consent	03/24/2022	
Intern Therapist N	03/24/2022	
Notice of Privacy	03/24/2022	
Practice Policies	03/24/2022	
Release of Inform	03/24/2022	
Consent for Telep	03/24/2022	03/24/2022 12:20 PM
Court Mandated Ii	03/24/2022	

The assessments will be listed and you can click on each one.

AA mbusintouch.insynchcs.com



Electronic Communication Consent Form



Electronic Communication Consent Form

\* indicates a required field

\* I agree to using phone, text, email, and other electronic communication in collaboration with my counselor and other representatives at Rhombus and La Mesa Counseling. I understand that counselors and staff at Rhombus and La Mesa Counseling will take appropriate steps to protect my electronic data and yet there is some risk in information being transmitted through internet and cell services.

Yes, I agree

No, I do not agree

\*Sign to confirm



I consent to sharing information provided here.

Save & Submit

Save

Submit

\*\* Click Save if you only want to save the changes

This is an example of a form to sign.





1:01



Test Last Name  
04/05/2022 01:01 PM

- Home / Dashboard
- My Profile
- Appointments
- Messages 5
- Education Material
- Forms / Documents 16
- Assessment Tools**
- History
- Medications
- Allergies
- Billing

POWERED BY inSync

**Next Click on Assessment Tools to fill out any assessments for your therapist.**

AA [ombusintouch.insynchcs.com](https://ombusintouch.insynchcs.com)

12:54



Amount:

\$ 0.00

ePay Now

Click on the Assessment Tool

*\*\* Below you will find assessments for you to complete. Click on each assessments under the New Assessment Tools section to begin. As you fill them out, you can click on the Save button to save that assessment and finish it at a later time. When ready, click Submit to send it back to the practice.*

New Assessment Tools

Assessment Tool Name	Received On
No record(s) found.	

Submitted Assessment Tools

Assessment Tool Name	Received On	Last Submitted On
Adverse Childho...	03/26/2022	03/26/2022
Michigan Alcoh...	03/26/2022	03/26/2022
Michigan Alcoh...	03/24/2022	03/24/2022
Adverse Childho...	03/24/2022	03/24/2022

AA [ombusintouch.insynchcs.com](https://ombusintouch.insynchcs.com)



Adverse Childhood Experiences <span style="float: right;">✖</span>			
	While you were growing up, during your first 18 years of life:	YES	NO
1	Did a parent or other adult in the household often or very often... Swear at you, insult you, put you down, or humiliate you? Or Act in a way that made you afraid that you might be physically hurt?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2	Did a parent or other adult in the household often or very often... Push, grab, slap, or throw something at you? Or Ever hit you so hard that you had marks or were injured?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3	Did an adult or person at least 5 years older than you ever... Touch or fondle you or have you touch their body in a sexual way? or Attempt or actually have oral, anal, or vaginal intercourse with you?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	Did you often or very often feel that... No one in your family loved you		

**This is an example of what an assessment and marking the check box that matches your answer.**

1:01



Test Last Name  
04/05/2022 01:01 PM

- Home / Dashboard
- My Profile
- Appointments
- Messages 5
- Education Material
- Forms / Documents 16
- Assessment Tools
- History**
- Medications
- Allergies
- Billing

POWERED BY inSync

Click on the History tab to give your therapist your past information.

AA [ombusintouch.insynchcs.com](https://ombusintouch.insynchcs.com)

12:55



Amount:

\$ 0.00

ePay Now

This is an example of what you would fill out.

< Adult Hist >

History

Social History

**Marital History:**

Married  Single  Widowed  Engaged  
 Separated  Polyamorous

**Length of Marriage:**

**Number of Marriages:**

**Family**

Relationship	Name
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Save

Cancel

AA [mbusintouch.insynchcs.com](https://mbusintouch.insynchcs.com)



12:52



Amount:

\$ 0.00

ePay Now



Messages



Education Material



You don't have any upcoming appointments.

Hayden, Julie sent you a message: **New forms availa...**

Read More >>



Upcoming Appointments



You don't have any upcoming appointments.  
To book an appointment, please contact your Practice.

Total No. of Appointments: 0

View More



Account Summary



Hooray!

You have nothing to pay!

\$ 0.00

ePay Now

View Statement

Payment History

AA [ombusintouch.insynchcs.com](https://ombusintouch.insynchcs.com)



Don't forget to put a card on file!

12:55



**ePayment** ✕

Name: **Test Last Name**

Payment Amount (\$): **55.00**

Select Already Saved Card:\*

Search...

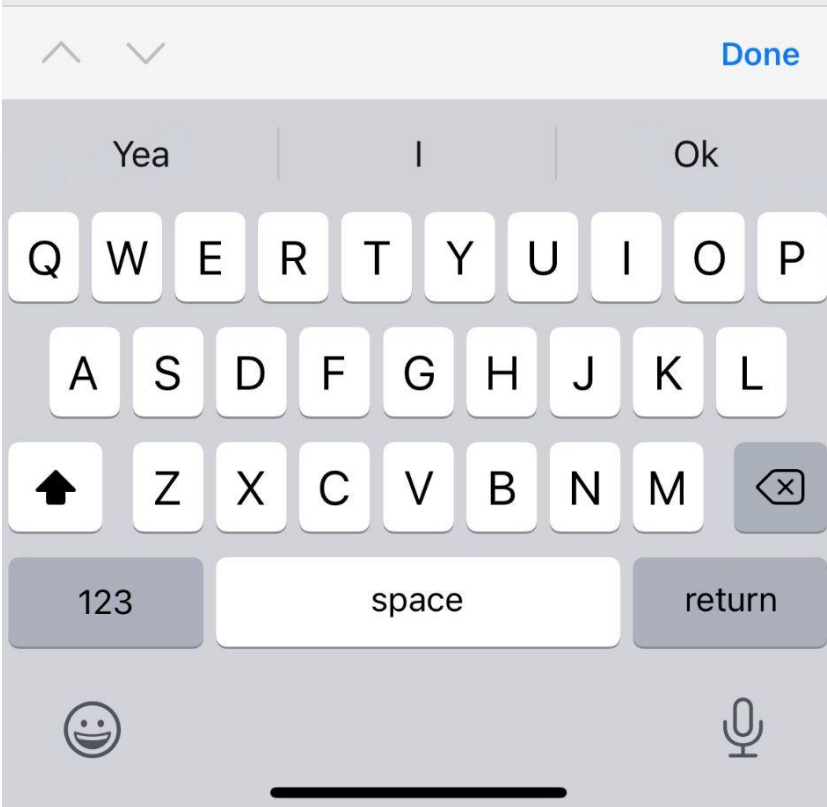
Select

Add new card

**Pay Now**    Manage Saved Cards

Click to add new card

rhombusintouch.insynchcs.com



12:55



**Card on file** ✕  
(Could be used for future payments)

I, the undersigned agree to all terms and conditions set forth in this credit card authorization.

Signature of the card holder:

Sign

Signature Date:

Apr 5, 2022

I agreeClose

**Please choose manual signature to actually put your signature on file.**

