

Health At Home





This is the **Home** Page



(c) Ubiqare Health pvt.Ltd.-2018















Records Condition Vital



Health At Home





You can access Multiple Options in the bottom tray

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pvt.Ltd.-2018





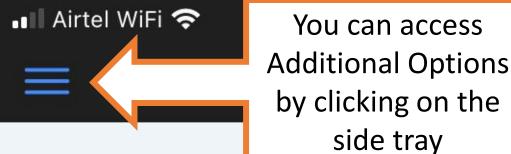






















(c) Ubiqare Health pvt.Ltd.-2018







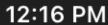
















Urgent Phone call



Phone Call to Care Doctor

Click on **Call** to reach out to St. John's Information Desk





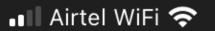












12:18 PM





Medical Records



No records found

Click on **Records** to upload any lab reports, X Ray reports or Prescriptions







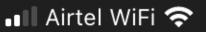






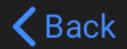
Page: 1





12:18 PM

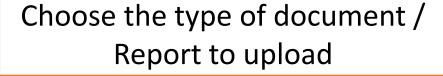


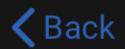


File Upload

Choose a document type

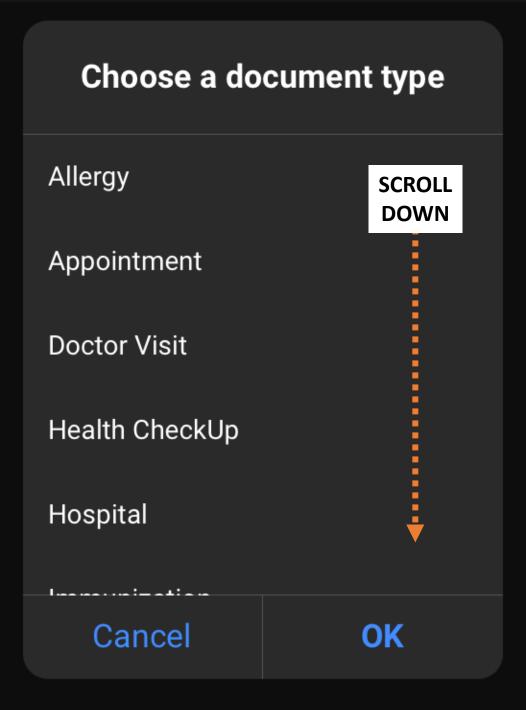
Choose a document type



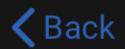


Choose a document type

Choose a document type



Choose the appropriate document / report to upload



Choose a document type

Choose a document type

Choose a document type

Tioopitai

Immunization

Insurance

Lab Report

Other form BBMP criteria

Prescription

Cancel

OK

Choose the appropriate document / report to upload



Choose a document type

Lab Report

Choose a document type

. . .

Immunization

Insurance

Lab Report

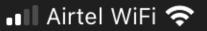
Other form BBMP criteria

Prescription

Cancel

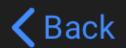
OK

Choose the appropriate document / report to upload and click **OK**



12:18 PM





File Upload

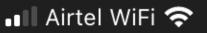
Choose a document type

Lab Report



Select File





12:19 PM





File Upload

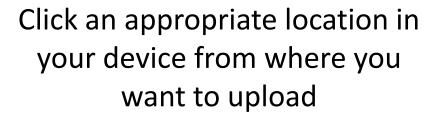


Lab Report



Take Photo

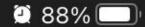
Browse

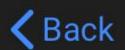


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Choose a document type

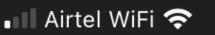
Lab Report



Select File

Click on **Upload File** to complete the record upload











Mild Moderate Severe

+ COVID Symptoms

Submit

Click on **Condition** to describe your Health Condition







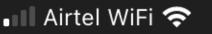












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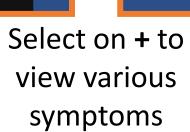




Health Condition Entry

Mild Moderate Severe

+ COVID Symptoms



Submit













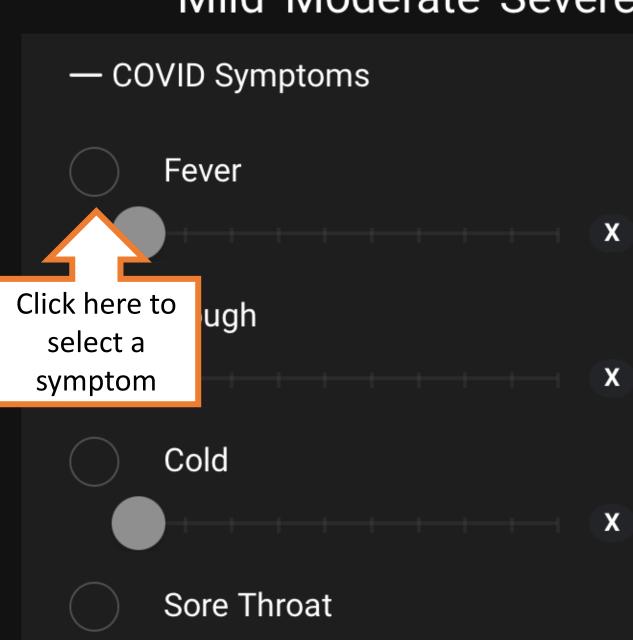




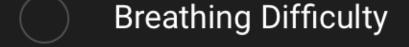




Mild Moderate Severe







persistent Pain/pressure in the chest













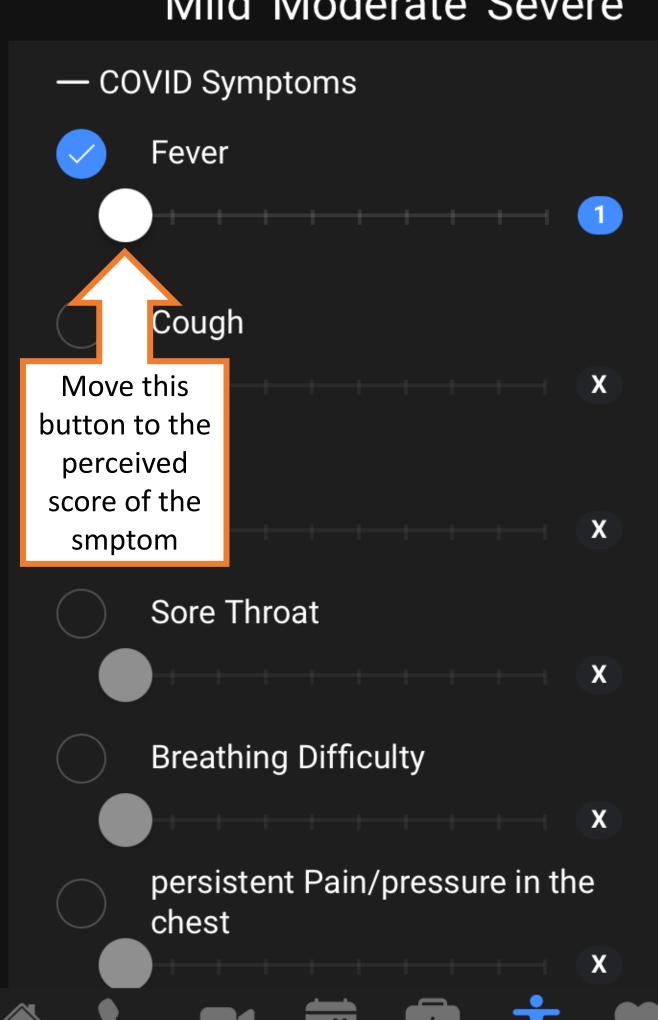


X

X



Mild Moderate Severe









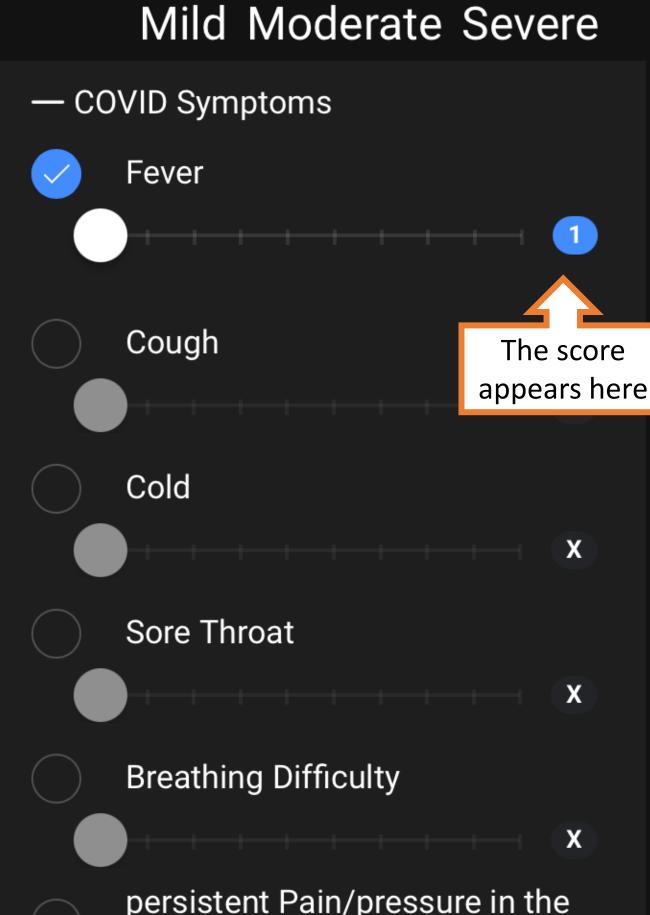


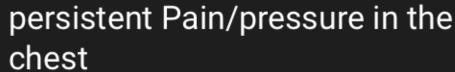


























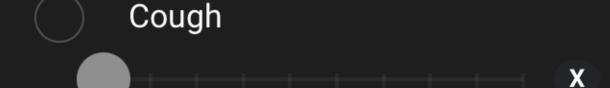
X





mptoms Milder the symptoms, lesser the score









X

Breathing Difficulty

persistent Pain/pressure in the

chest







Sore Throat



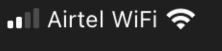






X

X















Fever



the score





X





X

Sore Throat



X

Breathing Difficulty



X

X

persistent Pain/pressure in the chest









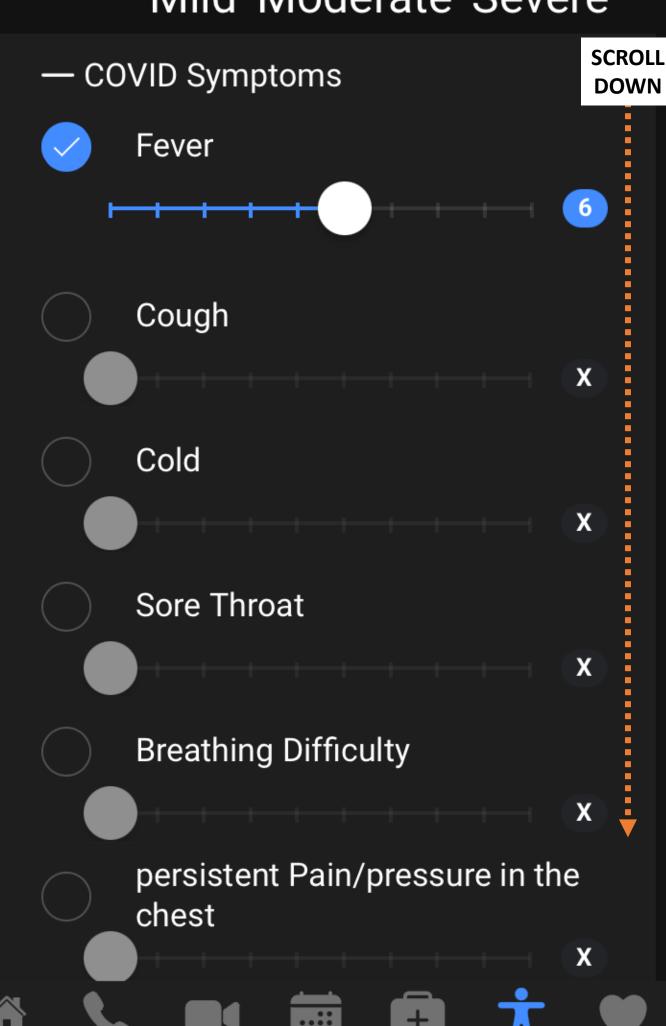








Mild Moderate Severe







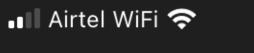












1:02 PM



X

X

X

X

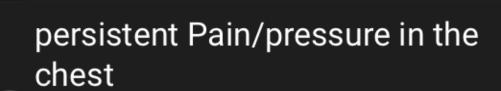
X

X

X

tions





Mental Confusion or inability to arouse

Slurred Speech

Seizures

Weakness or numbness in any limb or face

Once all the symptoms are entered, Scroll Down & click on **Submit**

Submit





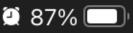














Vital Entry

Body Temperature

°F °C

BP Systolic (mmHg)

in mmHg

BP Diastolic (mmHg)

in mmHg

Pulse Rate (bpm)

in bpm

O2 Saturation (%)

Weight (Kg)

in Kg

You can enter your VITALS here and click on Submit

Submit













