

Registering For Patient Portal

1. Go to the Patient Portal website (<https://yfm.portalforpatients.com/portal/default.aspx>)
It will look like this:

Log In | View Mobile | Register

Home | About Us | Technical Support

Registered Users

User ID or Email

Password

Log In

[I forgot my password.](#)

New Users

1
FIRST TIME USERS
GET STARTED HERE

 **YELM FAMILY
MEDICINE, PLLC**

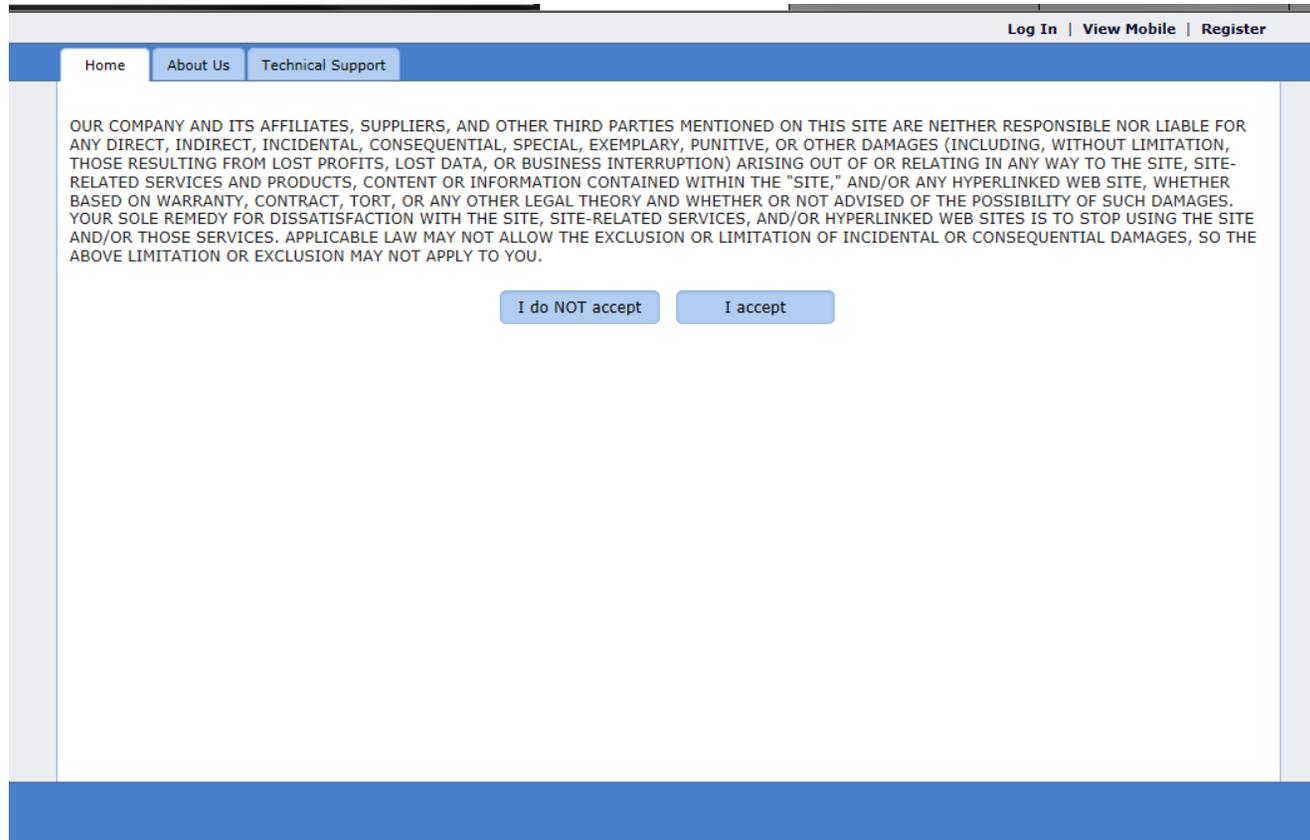


Welcome to [Yelm Family Medicine, PLLC](#), we are an innovative family practice located in Yelm, WA. At [Yelm Family Medicine, PLLC](#), we strive to offer our patients convenient, high-quality care. One of the ways we do this is by offering our patients online health services through our patient portal. If you have questions, please contact us or stop by our office!

These services include access to medical records, medication renewals, and more. If you are currently a patient with our clinic and interested in signing up for these services, simply click on the [Register link](#) at the top of this page and follow the instructions to sign-up.

Powered by:  **vitera**

2. Click “First Time Users Get Started Here”. The website will prompt you to read and agree to our Portal’s Policy. It will look like this:



3. After you accept, you will be required to create your account. List your First Name, Last Name, and Email Address. For your Log In Information, you must pick a username and a password. Do not use your PIN here. Your password will need to need to be between 6 and 15 characters and contain a combination of letters and numbers. This form looks like this:

The screenshot shows a web registration form with a blue header containing navigation links: Home, About Us, and Technical Support. On the right side of the header are links for Log In, View Mobile, and Register. Below the header, a note states: "Create a New Account In order to make full use of our online services, you will need to create an account and verify that you are registered with the clinic, or request to become a new patient." A red asterisk indicates that required fields are marked with an asterisk. Below this, a message says: "Please use the form below to create your account. Once your account is created, you will proceed to the verification process." The form is divided into three sections: "Account Information" with fields for First name, Last name, E-mail address, and Re-enter e-mail address, plus a "Receive Newsletter" checkbox; "Log In Information" with fields for User ID, New password, and Re-enter password; and "Password Recovery" with two questions: "What is your mother's maiden name?" and "What is your favorite pet's name?", each with an answer field.

Home About Us Technical Support Log In | View Mobile | Register

Create a New Account In order to make full use of our online services, you will need to create an account and verify that you are registered with the clinic, or request to become a new patient. * Required fields are marked with an asterisk.

Please use the form below to create your account. Once your account is created, you will proceed to the verification process.

Account Information

* First name:

* Last name:

* E-mail address:

* Re-enter e-mail address:

Receive Newsletter

Log In Information

* User ID:

* New password:

* Re-enter password:

Password Recovery

Question #1: What is your mother's maiden name?

* Answer #1:

Question #2: What is your favorite pet's name?

* Answer #2:

4. The next screen will match your registration to your records. Choose the “I have an appointment or have been seen here by a physician before” option. It will look like this:

Log Out | View Mobile | Edit as ksddf's Account | Verify My Identity

Home About Us Technical Support

Patient Verification

The webpage you are trying to access contains personal health information and is restricted.

In order to access restricted parts of the website, you will need to provide us some additional information so that we can verify your identity.

Please answer the following question:

- I have an appointment or have been seen here by a physician before.
- I do not wish to verify my identity right now, please take me back to the homepage.

If you don't want to verify your identity right now, you can return to this page by clicking the "Verify My Identity" link near the top of the screen, or by visiting a page that contains restricted content.

Next >

5. This page is where you will use the PIN. Once you complete this form and press “Verify” our system will match the information so you may access everything Patient Portal can offer. The page will look like this:

Home About Us Technical Support

* Required fields are marked with an asterisk.

Validate Identity To protect your privacy, we need to verify your identity by matching your personal information with the information stored in our records.

Disclaimer
The information on this Web site is provided as a service by our clinic. While we try to keep the information as accurate as possible, we disclaim any implied or stated warranty or representation about its accuracy, completeness, content or appropriateness for a particular purpose.

Verify Identity

* PIN

* First Name

* Last Name

* Birth date

Verify