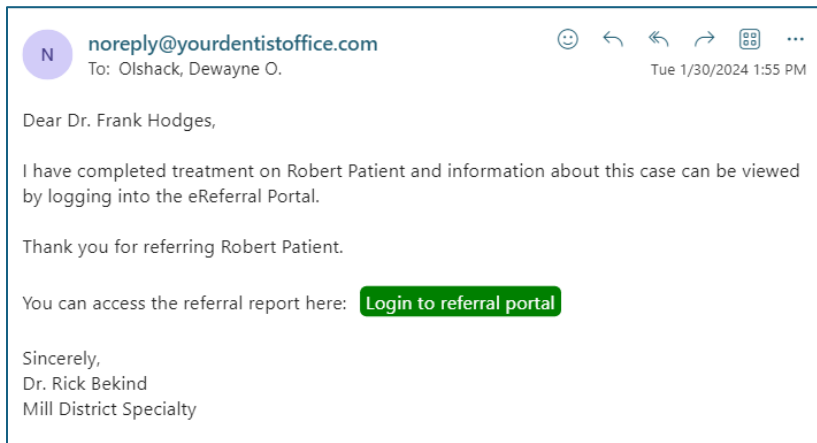


### eReferral Portal – Accessing the Portal

Although you or your practice may have submitted a referral previously to The Facial Pain Center, a one-time Sign-Up is now required for our updated eReferral Portal for all referrals after **February 12, 2024**. Sign-up for the eReferral Portal will provide the most efficient referral submissions and real-time access to your patients' treatment status in our practice.

Once you have completed your quick one-time eReferral Portal registration you are ready to refer patients! After the patient is seen by The Facial Pain Center, an email notification will be sent to the registered email address that was designated in the eReferral Portal.

Click the **Login** to eReferral Portal button in the email. This will direct you to your secure eReferral Portal.



- Sign into the portal using the registered email and eReferral ID.

**Sign In** [ACCESS INSTRUCTION](#)

Email Address

eReferral ID

[CONTINUE >](#)

- Click **Continue**

- Once in the portal you will be able to see the patient status and the referral report detailing treatment done, images, etc.
- During the life of the referral, you may receive additional notifications regarding the status of treatment and next steps for the referred patient.

denticon | eReferral

**PATIENTS REFERRED**

Search Patient ✕ 🔍

Pending
Accepted
In Progress
Rejected
Expired
Completed

Referred To Office Name	Sent On
<div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> <p><b>Mill District Specialty [101]</b></p> <p>Patient: <b>Test, Ava</b></p> </div>	<div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> <p><b>01/25/2024</b></p> </div>
<div style="border: 1px solid #ccc; padding: 5px; margin-bottom: 5px;"> <p>Referred To Office Name: <b>Mill District Specialty [101]</b></p> <p>Referred To: <b>Bekind, Rick (RKBKIN)</b></p> <p>Patient: <b>Test, Ava</b>      Sent On: <b>01/25/2024 03:33:00 PM PT</b>      DoB: <b>01/04/2006</b></p> </div>	

**Mill District Specialty Referral Report**

January 25, 2024

Dear ,

Thank you for your recent referral of Ava Test. The treatment was completed successfully and Ava is ready to return to your practice for continuing care.

We greatly appreciate the trust that you show in our practice by referring patients to us for treatment.

I've included my findings and images, as appropriate.

Date	Code	Description	Th	Surf
01/25/2024	D3330	RCT Molar		15