

Primary Care Provider Visit



Visit to Primary Care Physician (PCP)

1. Who do I call when I need a prescription refill?

Name / Role: _____ Telephone #: _____

Pharmacy Phone #: _____ Pharmacy hours: _____

2. Who do I call when I have an urgent need (i.e., speak to a nurse about a health concern)?

Name / Role: _____ Telephone #: _____

3. Who do I call to change, confirm, or schedule an appointment?

Name / Role: _____ Telephone #: _____

Key Points of Contact in Primary Care

4. Nurse Care Manager in Primary Care

Name: _____ Telephone #: _____

5. PACT / HPACT Social Worker:

Name: _____ Telephone #: _____

6. Other: _____

Register for MyHealthVet

1. Go to www.myhealthvet.va.gov
2. Select the green **REGISTER** button



Account Information:

- **User ID:** _____
(Unique and contains no spaces; it must be 6-12 characters)
- **Password:** _____
(Unique, contains no spaces; must be 8-12 characters and have at least one letter and one number and one special character (such as !, #, %))

