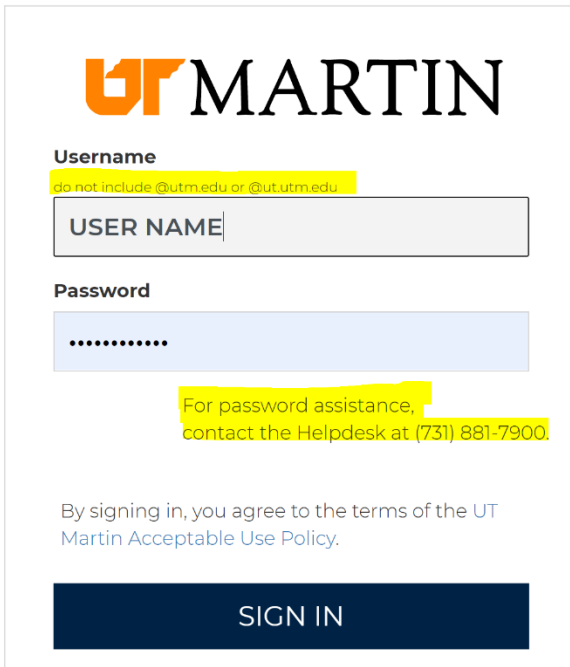


1. Click the Med+Proctor link
2. Enter you **UTM Username** (do not enter @ut.utm.edu) and **Password**. If you need assistance contact the Helpdesk at 731-881-7900



UTM MARTIN

Username
do not include @utm.edu or @ut.utm.edu

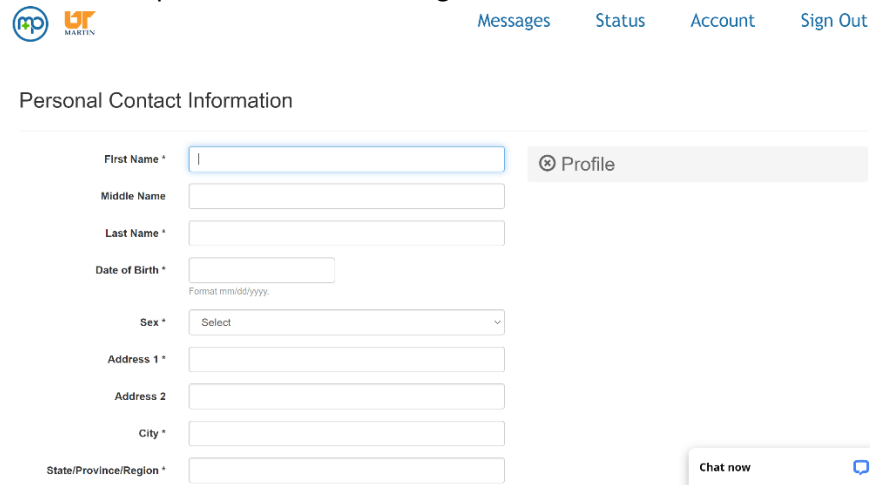
Password
.....



For password assistance, contact the Helpdesk at (731) 881-7900.

By signing in, you agree to the terms of the UT Martin Acceptable Use Policy.

SIGN IN

3. Enter the required information to register for an account.





[Messages](#)
[Status](#)
[Account](#)
[Sign Out](#)

Personal Contact Information

Format mm/dd/yyyy.

4. Complete the End User License Agreement.

END USER LICENSE AGREEMENT / TERMS OF USE

IMPORTANT: PLEASE READ THIS EULA CAREFULLY.
Med+Proctor is a developer and distributor of educational and medical record management hardware, software, and mobile applications. Med+Proctor also provides Services to Educational Institutions, which use its proprietary Program.

This EULA is between Med+Proctor and User. Please read this EULA carefully, as User accepts and agrees to be bound by all Terms by accessing and/or using the Site, Program and/or Services. If User does not accept or agree to be bound by the Terms of this EULA, then User should not access or use the Site, Program and/or Services, and User must immediately exit this Site and/or discontinue use of the Program and/or Services. The access and/or use of the Site, Program and/or Services signifies User's acceptance and continued acceptance of Med+Proctor's Terms, including this EULA, and any revisions thereto.

The Site, Program, and/or Services are to be accessed and used only by Users (and/or their Representatives) who are thirteen (13) years of age or older and who consent to and authorize any and all privacy waivers requested by Med+Proctor. By accessing and/or using the Site, Program and/or Services, the User represents and warrants

Enter your full name for use as an electronic signature

5. Complete the Notice of Medical Privacy Practices.

NOTICE OF MEDICAL PRIVACY PRACTICES

This notice describes how medical information about you may be used or disclosed and how you may access this information. Please review this Notice carefully.


The Indiana Wesleyan University Health Center creates a medical record for you as soon as health information is received in our office and it continues through each encounter you may have in the center. This record may contain health history, immunization records, information about your symptoms, examinations, test results, medications, allergies, and a plan for your care as indicated. Your medical record is an essential part of the healthcare we provide for you. It contains personal health information. State and federal law protects the privacy of this information.

We will use your medical record for treatment. All the physicians, nurses, nurse practitioners, clinical staff, and student nurses involved in your care will document in your record details about your physical examination and the care planned for you. We will provide physicians or other healthcare providers who are treating you with information from your medical record that is pertinent to your care. We may also use your medical record to call you or send a reminder about an appointment, to follow up with diagnostic tests results, or to provide you with information about other treatment or care that could benefit your health. If you are an Indiana Wesleyan University student, your medical information is protected under FERPA. This means pertinent medical information may also be shared with other Indiana Wesleyan University staff such as Student Development and the Center for Student Success. If it is deemed necessary,

Enter your full name

Enter your full name for use as an electronic signature

6. Select the year you will ENTER UTM. Enter your student id number – it starts with 960 or 000. Select your campus resident status. Click Continue.

 Messages Status Account Sign Out

Entering Term


Attention
 Selecting the incorrect requirement group can significantly delay the processing of your records.
 For more information about selecting the right requirement group visit
<https://support.medproctor.com> and search our knowledge base.

Entering Term *

Student ID *

Campus Resident? *

7. Submit your documents

 Messages Status Account Sign Out

Ready to submit your documentation?

★

Profile

Document

Benefits
One-time, easy payment of \$10.00
Priority Access to support staff and verification services.
Lifetime Access: Download and use your immunization forms anytime you need them.
Centralized, Secure Storage: All of your relevant health information in one location.
Access to the Association of American Medical Colleges (AAMC) form which is accepted nationwide.
Generate your complete health record with just one click! Great for transfer of health information to other organizations.

no payment required

8. All questions need to be directed to Med+Proctor via the “Chat Now” box.