



*****REQUIRED*****



Please complete the required online questionnaires prior to your visit at the Child Psychiatry Clinic.

Dear Parent or Guardian - Please be aware that arriving to your Zoom video appointment without completing these assigned questionnaires may result in your appointment being rescheduled. Our providers rely on these questionnaires to help determine your child's diagnosis. If you cannot complete the questionnaires prior to the scheduled appointment, please contact our office at 314-286-1700, option 2 to reschedule the appointment.

Steps for completing your child's online questionnaires:

STEP ONE:

For New Users - Registering your account

1. Visit www.chadis.com
2. Click on '**Register**'
3. New users, click "**No, I have never used CHADIS before**".
4. Enter the Invitation Code: **childpsych**
5. Continue with the registration page by entering the requested personal information for yourself.
 - a. Please read and agree to the **Terms of Use** by clicking the box to the left.
 - b. Click '**Register**'
 - c. Click '**Continue**'

For Existing Users – Log In

1. Log In with existing username and email; if you need a password reset, please call our office at 314-286-1700
2. Under Other Options box, select '**Changed or moved to a new doctor's office?**'
3. Select the appropriate patient from the dropdown
4. Enter the Invitation Code: **childpsych**
5. Click '**Next**' (if you are asked, leave 'Remove from Office' un-checked to remain linked to prior office/account)
6. Click '**Continue**'
7. Skip Step 2 below (registering a patient); continuing with Step 3 below (**choose a doctor/provider**)

STEP TWO: Register the Patient

1. Choose your relation to the patient.
2. Enter the requested information about your child & click '**Next**'.
3. You will be brought to your child's page. Under "**Questionnaires for _'Pt's name'_**"
4. Click on the **GO** box next to "**Take questionnaires**".

STEP THREE: Choose a Doctor/Provider

1. Please **select the provider** from the list provided that you will be seeing at your appointment.
 - a. If you do not see your doctor listed, choose the bottom option: "I'm not sure which doctor I'm seeing, but the visit is definitely at Washington University Child Psychiatry Clinic."
2. **Select your doctor/provider** again on the next screen - 'Reason for using CHADIS'
3. Please be sure to click "**Submit**" after the completion of EACH individual questionnaire to ensure your progress is saved.
4. Teachers and other caregivers are invited to fill out the respective teacher/caregiver measures within CHADIS. Detailed instructions on how to invite others are located below.

***Please also complete any additional paperwork that is enclosed in this packet of information, and make sure the scheduling team has a copy of your insurance cards. Thank You.**

Child Psychiatry Clinic for Infants, Children, Adolescents & Families.

4444 Forest Park Avenue, Suite 2600 St. Louis, MO 63108 PH# (314)-286-1700 Fax# (314) 286-1730

wuchild@psychiatry.wustl.edu

Why Invite a Teacher to Complete CHADIS Questionnaires?

If your child has any issues that affect learning or behavior, getting information from teachers about his or her progress can make a big difference in the care the doctor provides. Teachers may require your permission to provide information. You can give this permission within the CHADIS portal. Parents/caregivers may create an invitation code to invite educators to take a CHADIS questionnaire. A questionnaire from teachers provides clinicians with valuable information to diagnose and manage health or developmental/behavioral concerns. **Questionnaires to be sent to teachers or other educators will be clearly marked within your assigned measures.**

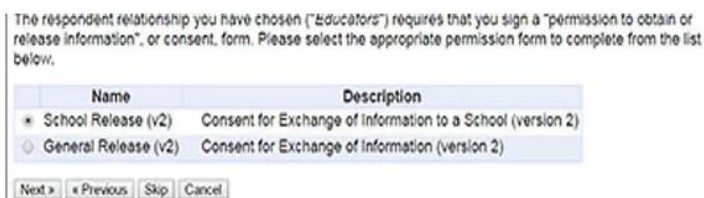
1. Log into CHADIS with your username and password.
2. Select the appropriate child
3. Under **Invite Others** to Take Questionnaires, click on Go next to **Invite another Person to do CHADIS**.



4. Complete the Email or Text Notification form and click **Create Invitation**. An email will be sent inviting the teacher to register.



5. **Completing the Email Notification and Text Message Notification is optional.** If you do not have the teacher's email address or cell phone number, you will still be able to provide the teacher with the required information. Leave the Email and Text Notification section blank. **Click Create Invitation.**
6. If a teacher is invited to complete questionnaires, CHADIS prompts the user to create a viewable and printable consent form for the teacher.
7. You may click **Next** or **Skip** (if you don't need to complete a consent form). *This consent form may be required by school districts before teachers may participate. This process documents caregiver consent.*



Name	Description
* School Release (v2)	Consent for Exchange of Information to a School (version 2)
General Release (v2)	Consent for Exchange of Information (version 2)

8. After printing the page, click **Continue** and you will be taken back to your child's CHADIS Detail page.
9. You may log out or Take Questionnaires if needed.
10. The teacher will log into CHADIS and click on Register. He or she will enter the specific invitation code and complete the registration process. Once logged in, appropriate questionnaires will be available.



CHADIS Invitation Card

CHADIS is an online system that uses questionnaires to help you communicate with your doctor about your child.

Child: Joseph Reese
Invitation: eworingedisofae
Expires: January 20, 2016 5:59 PM EST

Website: <http://www.chadis.com/>
Help: 1-888-4-CHADIS (1-888-424-2347) ext 1
Help: support@chadis.com

Print | Continue >