



# Delivery Portal User Guide

A STEP-BY-STEP GUIDE FOR DME PROVIDERS

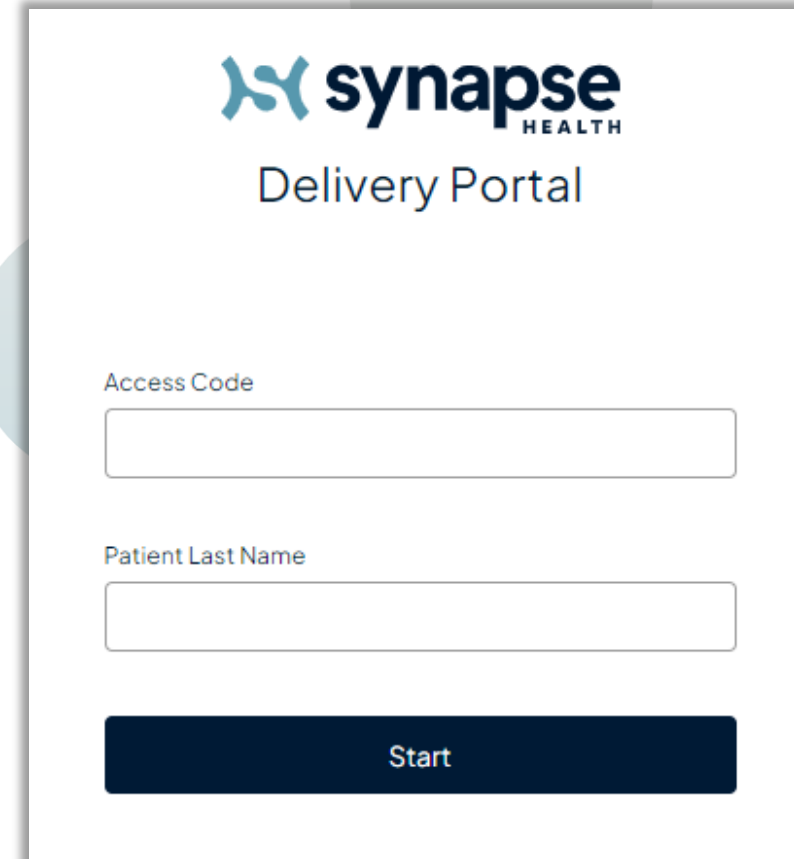
Questions?

Email [dmeprovidersupport@synapsehealth.com](mailto:dmeprovidersupport@synapsehealth.com)

DME Provider Line for Order Assistance: 888.801.9449

# Delivery Portal Use

- The Delivery Portal is utilized by front-line DME staff to **complete orders electronically** during threshold deliveries or for walk-in order pickups for subcontracted orders.
- Bookmark [deliver.synapsehealth.com](https://deliver.synapsehealth.com) for any personnel in the field or front office on smart devices, and computers.
- Paper Tickets/Manual Order Completion: If delivery personnel do not use smart devices in the field, delivery tickets should be uploaded into Fulfill. Please refer to the Fulfill User Guide.



The screenshot shows the Synapse Health Delivery Portal login interface. At the top, the Synapse Health logo is displayed in blue and black, followed by the text "Delivery Portal". Below this, there are two input fields: "Access Code" and "Patient Last Name". A dark blue "Start" button is positioned at the bottom of the form area.

# Accessing an Order in the Delivery Portal

Logging in is easy! No username or password is required.


All that's needed is the access code from the order and the patient's last name.

**Pending Order** ✓ Mark Complete ✕

Access Code: **CRBEOO**      Schedule Date: **08/29/2024**  
Order ID: **SO-D01A5484**

**Patient Information**

Luke <b>Skywalker</b>	Height:
DOB: <b>10/25/1988</b>	Weight:
Contact Phone: <b>(847)732-4917</b>	Patient ID: <b>10000023</b>

  
**synapse**  
HEALTH

Delivery Portal

Access Code

Patient Last Name

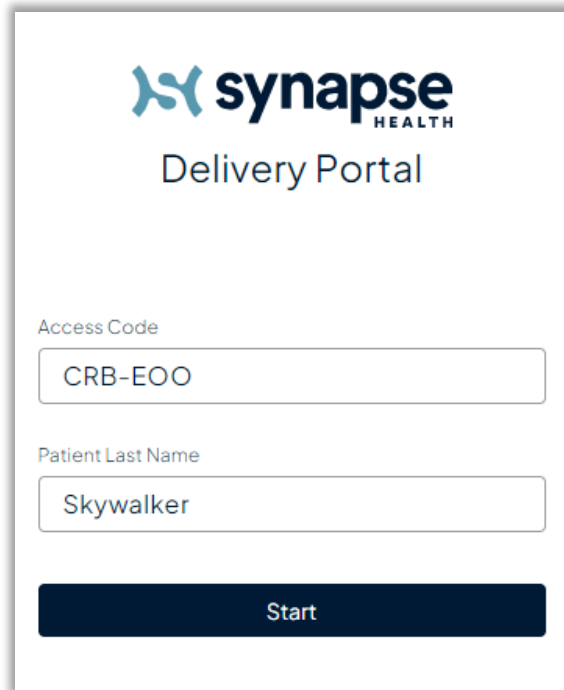
  
  

**Start**



# Order Details

- Once the access code and patient last name have been entered, click start to bring up the order details screen.
- Access the 3 Delivery Portal pages at the top of the screen at any point.



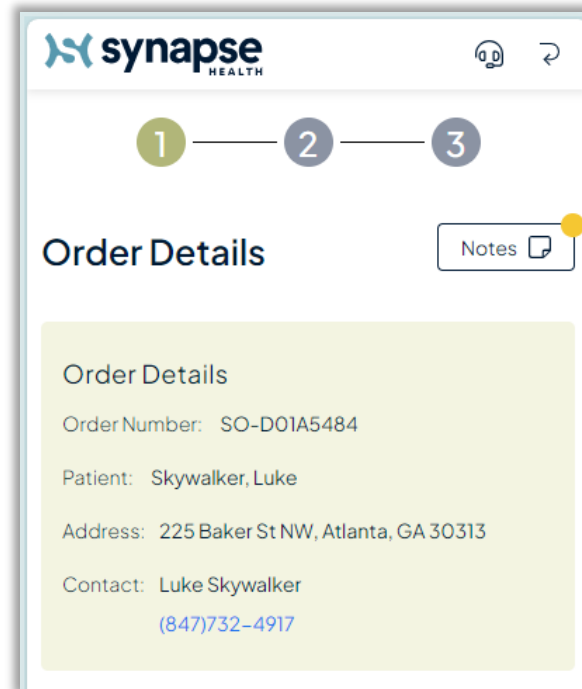
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Delivery Portal

Access Code  
CRB-EOO

Patient Last Name  
Skywalker

Start



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HEALTH

1 — 2 — 3

Order Details

Notes

Order Details

Order Number: SO-D01A5484


Patient: Skywalker, Luke

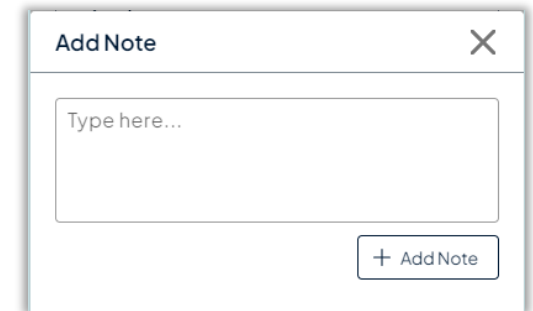
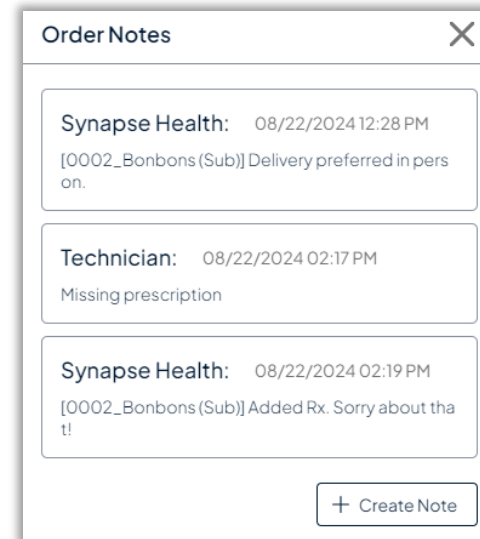
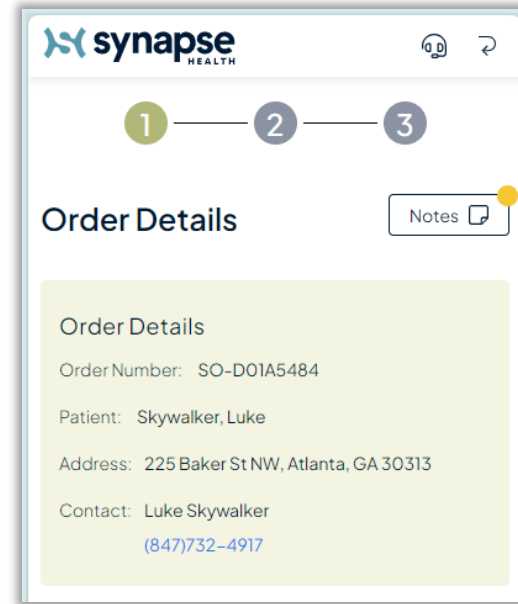
Address: 225 Baker St NW, Atlanta, GA 30313

Contact: Luke Skywalker  
(847)732-4917




# Order Details

- In the top right corner of the screen, easily access the DME Provider Line in the field by clicking the headset  to call regarding any order questions or concerns.
- View patient information including order number (order ID), patient name, delivery address, and contact information.
- View any notes (including messages between the DME provider and Synapse) by clicking notes button on the top right.
  - Personnel in the field can even click “+ Add Note” to add a message to the notes.




# 1 Page 1: Order Products Page: Deliveries/ Walk-Ins

1. Scroll down from the order details to find the products listed individually
2. Enter Serial/ Lot Number
3. Enter Manufacturer
4. Enter Model
5. Enter Last PM (Preventative Maintenance) in MM/DD/YYYY format or select on the calendar by clicking the calendar on the right side of the text box 
  - If uncertain of last PM, enter today's date
6. If applicable, enter patient pin #
7. Once all lines have been filled out, click next in the bottom right side of the screen



Note: If a product has a blue sticky next to the quantity, then there is a specific note associated with that item. Click the sticky note to open the note.


### Order Products

Negative Pressure Wound Therapy (NPWT) Device Qty: 1 


Serial/Lot No.

Manufacturer


Model

Last PM  
 

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NPWT Canister 300 cc with Gel Qty: 1 

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NPWT Dressing Kits Qty: 1 

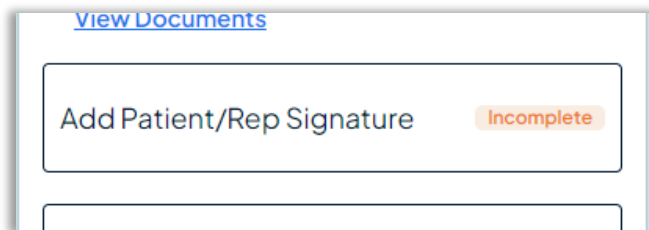
3 of 3 products

**Next**

## 2 Page 2: Signatures

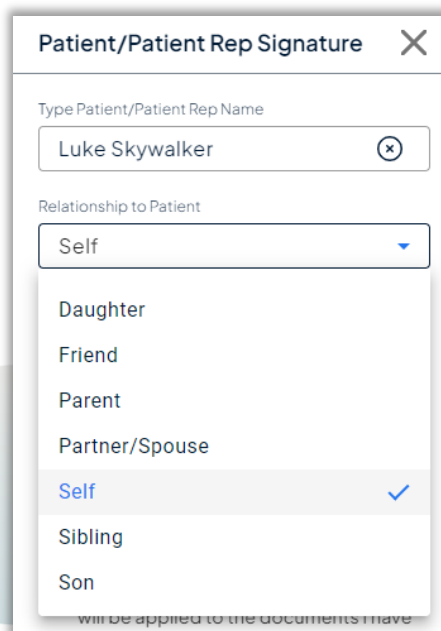
1. Click the first box to add patient or representative signature
2. Type in patient OR representative name
3. Select relationship to patient if representative is signing. If patient, select self
4. Patient/Rep signs in open box
5. Patient/Rep checks boxes to accept
6. Click “create” to finish signature

Note: If doing virtual set-ups for respiratory products, RTs should sign N/A for the patient signature.



[View Documents](#)

Add Patient/Rep Signature Incomplete



Patient/Patient Rep Signature X

Type Patient/Patient Rep Name

Luke Skywalker

Relationship to Patient

Self

Daughter

Friend

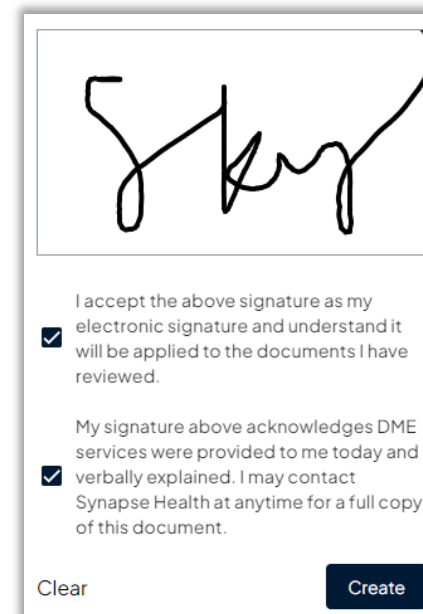
Parent


Partner/Spouse

Self ✓

Sibling

Son





I accept the above signature as my electronic signature and understand it will be applied to the documents I have reviewed.

My signature above acknowledges DME services were provided to me today and verbally explained. I may contact Synapse Health at anytime for a full copy of this document.

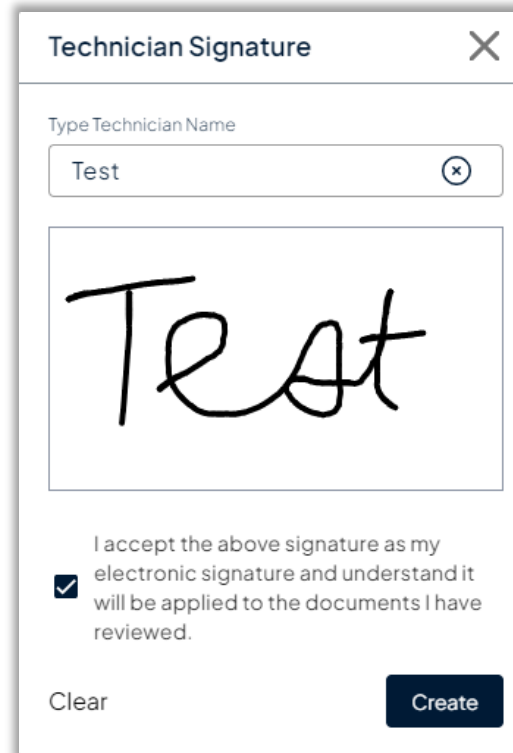
Clear Create

## 2 Page 2: Signatures

1. Click the second box
2. Type technician name
3. Technician signs name
4. Accept signature with check box
5. Click “create”
6. Option to click “view documents” to view delivery packet
  - Synapse can also mail or email a copy



Add Technician Signature Incomplete



Technician Signature

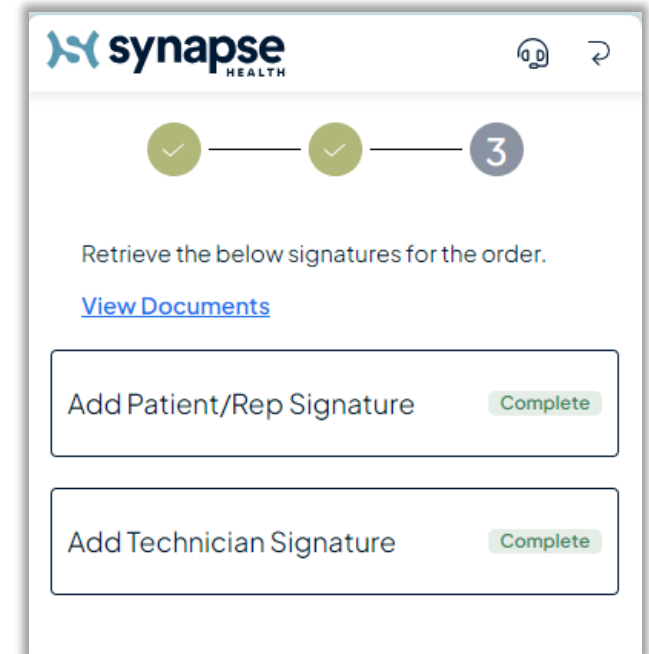
Type Technician Name

Test

Test

I accept the above signature as my electronic signature and understand it will be applied to the documents I have reviewed.

Clear Create



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Retrieve the below signatures for the order.




[View Documents](#)

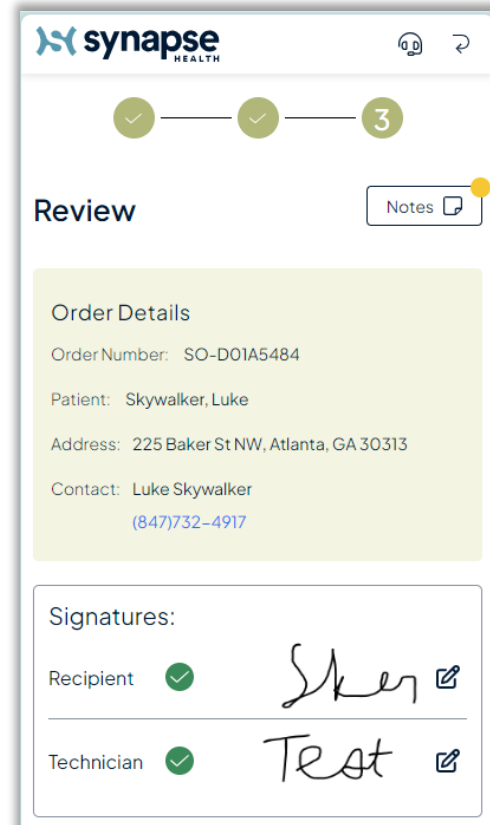
Add Patient/Rep Signature Complete

Add Technician Signature Complete




### 3 Page 3: Review

- Review Order Details, Signatures, and Order Products for accuracy.
- If you notice any discrepancies:
  - Click the first or second check box to go back to the first or second page, respectively  

  - Click the note pad next to the signatures to edit a signature 
  - Click the previous button in the bottom left corner of the screen to go back a page  

- Once completed, click “submit” in the bottom right corner of the screen



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Review

Notes 

**Order Details**



Order Number: SO-D01A5484



Patient: Skywalker, Luke

Address: 225 Baker St NW, Atlanta, GA 30313

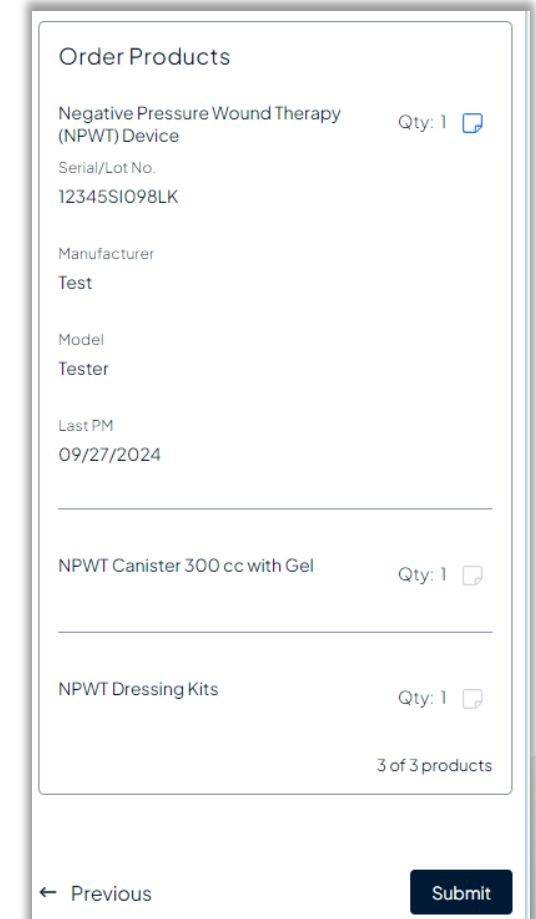
Contact: Luke Skywalker  
(847)732-4917

**Signatures:**


Recipient   

Technician   

← Previous



**Order Products**


Negative Pressure Wound Therapy (NPWT) Device Qty: 1 


Serial/Lot No.  
12345SI098LK

Manufacturer  
Test

Model  
Tester

Last PM  
09/27/2024

NPWT Canister 300 cc with Gel Qty: 1 

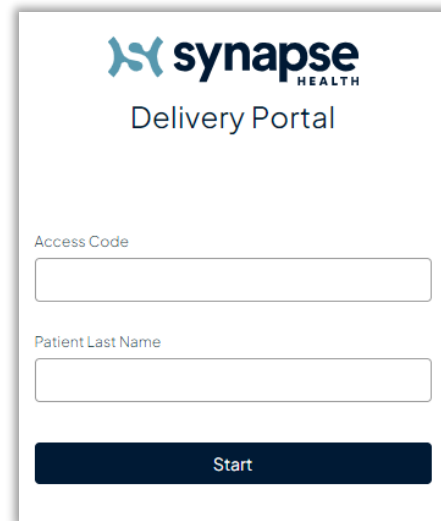
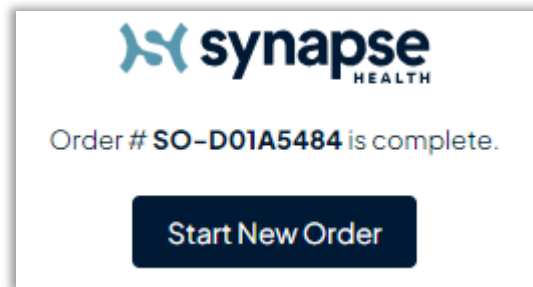
NPWT Dressing Kits Qty: 1 

3 of 3 products

← Previous **Submit**

# Submitting an Order/ Order Completion

- After a technician submits an order:
  - Screen will note that the order has been completed.
  - The status will change to “pending Synapse review” in Fulfill
  - The status will flip to completed within 24–48 hours once the Fulfill Team has confirmed with the patient that the order has been completed and there are no concerns.
- Technician can click “start new order” to be brought back to the Delivery login screen





# Service Requests

# Service Request: Order Details Page

1. Log into Delivery the same way you would for a normal delivery, with the access code and patient last name
2. Review order details, including the reason for service and item that needs serviced
3. View order level notes or messages with the “notes” button
4. Select “next” to move to the second page

## Order Details

Notes

Order Details

Order Number: SO-60CE808C

Patient: Gilmore, Lorelai

Address: 22 Test Way, Decatur, GA 30030

Contact: Lorelai Gilmore  
[\(222\)222-2222](tel:(222)222-2222)

**Reason for service**

Patient indicating malfunction of side rails. Unable to raise.

**Service**

Half Length Side Rails, Each Qty: 2

1 of 1 products

Next

# Service Request: Service Order Page and Signatures

1. Service technician will complete service order page by noting:
  - Were they able to service the product?
  - Was the product exchanged?
2. Add comments if applicable
3. Click “next”
4. Complete signatures
  - See page 8 of guide for more information on signatures
5. Click “next” once signatures are completed

← Back order details

Step 1 of 1

**Service Order**

Original Product(s) Name \*

Half Length Side Rails, Each

Was I able to service product? \*

No Yes

Additional Comments:

Fixed railing

Was the product exchanged? \*

No Yes

Additional Comments:

← Previous Next



✓ — ✓ — 3

Retrieve the below signatures for the order.

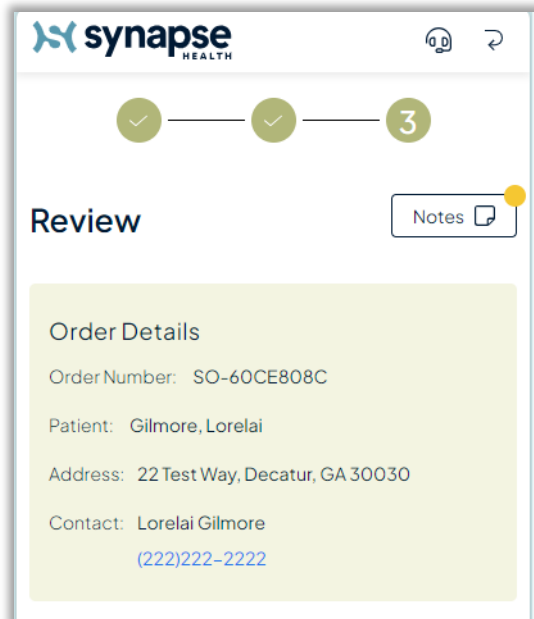
Add Patient/Rep Signature Complete

Add Technician Signature Complete

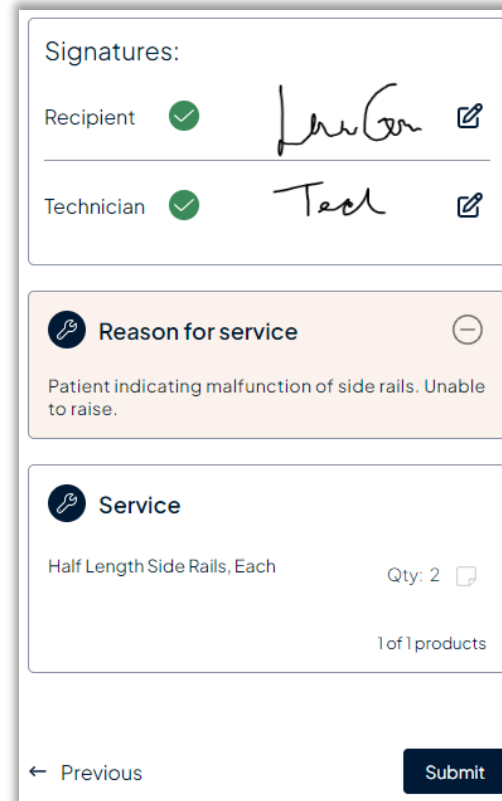
← Previous Next

# Service Request Completion

- As with other deliveries, review the order on the order review page.
- Once everything is confirmed, click the “submit” button to complete the order.



The screenshot shows the Synapse Health order review page. At the top, there is a progress indicator with three steps: the first two are marked with green checkmarks, and the third is marked with a '3' inside a green circle. Below this, the word 'Review' is displayed. To the right of 'Review' is a 'Notes' button with a document icon. The main content area is titled 'Order Details' and contains the following information: Order Number: SO-60CE808C, Patient: Gilmore, Lorelai, Address: 22 Test Way, Decatur, GA 30030, and Contact: Lorelai Gilmore with the phone number (222)222-2222.



The screenshot shows the service completion form. It has a 'Signatures' section with two rows: 'Recipient' with a green checkmark and a handwritten signature 'Lorelai Gilmore', and 'Technician' with a green checkmark and a handwritten signature 'Tech'. Below this is a 'Reason for service' section with a minus sign icon, containing the text 'Patient indicating malfunction of side rails. Unable to raise.'. The next section is 'Service' with a plus sign icon, containing 'Half Length Side Rails, Each' and 'Qty: 2'. At the bottom right of the 'Service' section, it says '1 of 1 products'. At the bottom of the form, there is a 'Previous' button with a left arrow and a 'Submit' button.



The screenshot shows the completion confirmation screen. It features the Synapse Health logo at the top. Below the logo, the text reads 'Order # SO-60CE808C is complete.'. At the bottom, there is a dark blue button with the text 'Start New Order' in white.



# Pickup Requests

# Pickup Requests

Pickup requests will be pushed to DME providers in the Fulfill portal the same way new orders are.

They can be completed by confirming order details, adding signatures, and reviewing before submitting.

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1 — 2 — 3

**Order Details** Notes

Order Details  
Order Number: SO-2CDC49FB  
Patient: Tester, McNally  
Address: 1234 Test Drive, Winona, MN 55987  
Contact: McNally Tester  
(111)111-1111

**Pickup**  
Standard Front Wheeled Walker Qty: 1  
1 of 1 products

Next

**synapse** HEALTH

✓ — 2 — 3

Retrieve the below signatures for the order.





Add Patient/Rep Signature **Incomplete**

Add Technician Signature **Incomplete**

← Previous Next

**Review** Notes

Order Details  
Order Number: SO-2CDC49FB  
Patient: Tester, McNally  
Address: 1234 Test Drive, Winona, MN 55987  
Contact: McNally Tester  
(111)111-1111

**Signatures:**  
Recipient ✓    
Technician ✓  

**Pickup**  
Standard Front Wheeled Walker Qty: 1  
1 of 1 products

← Previous Submit



# Have A Question? Need Help?

Our operations team is available to provide support for any problems along the way!

## Order Related Fulfillment Issues or Questions:

- Email: [fulfill@synapsehealth.com](mailto:fulfill@synapsehealth.com)
- DME Provider Line: 888.801.9449
  - This line routes directly to our Customer Connect Center & they will get you directly to the Fulfillment team during business hours 8am-8pm Eastern.
  - After hours, this line will route initially to our answering service if selecting same day delivery. You will then be dispatched to an on-call employee.

## User Access or General Supplier Questions:

- Email: [dmeprovidersupport@synapsehealth.com](mailto:dmeprovidersupport@synapsehealth.com)

