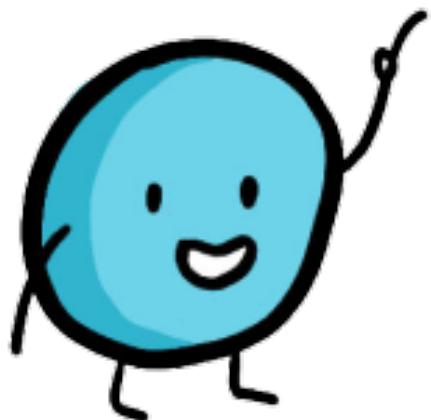


Already Have An Account? [Sign In.](#)

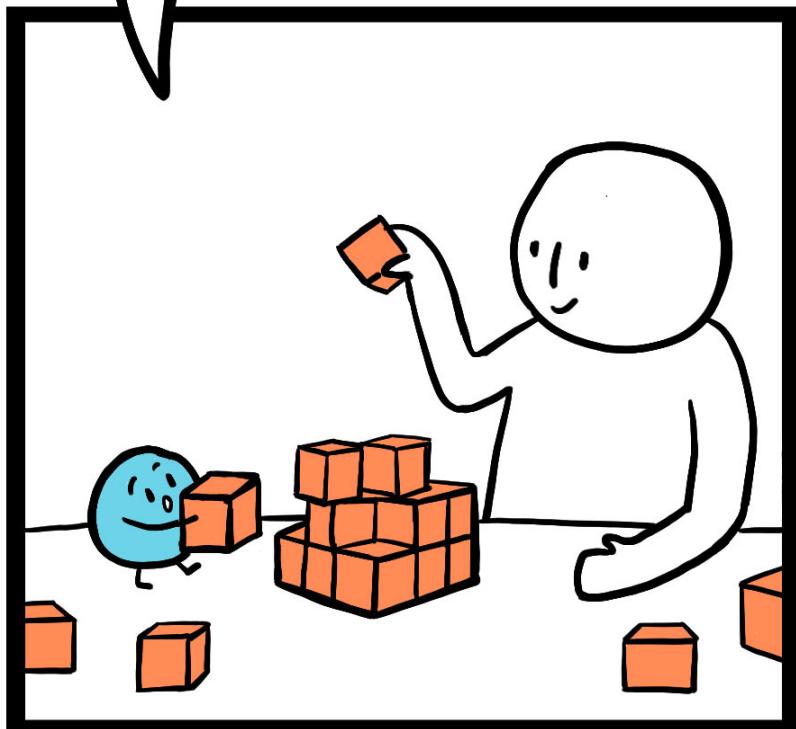
## GET CONTROL OF YOUR HEALTH

FOLLOW ME AND  
LEARN HOW!



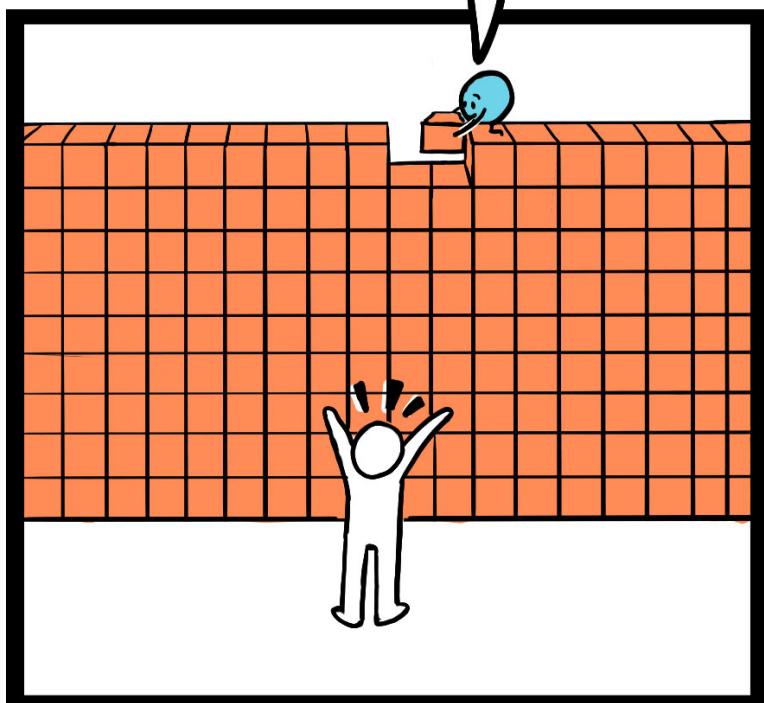
Next →

YOUR DATA CAN COME FROM ANYWHERE...  
FROM YOU, THE DOCTOR'S OFFICE, OR A DEVICE LIKE YOUR PHONE. WE PUT IT ALL IN THE SAME PLACE.





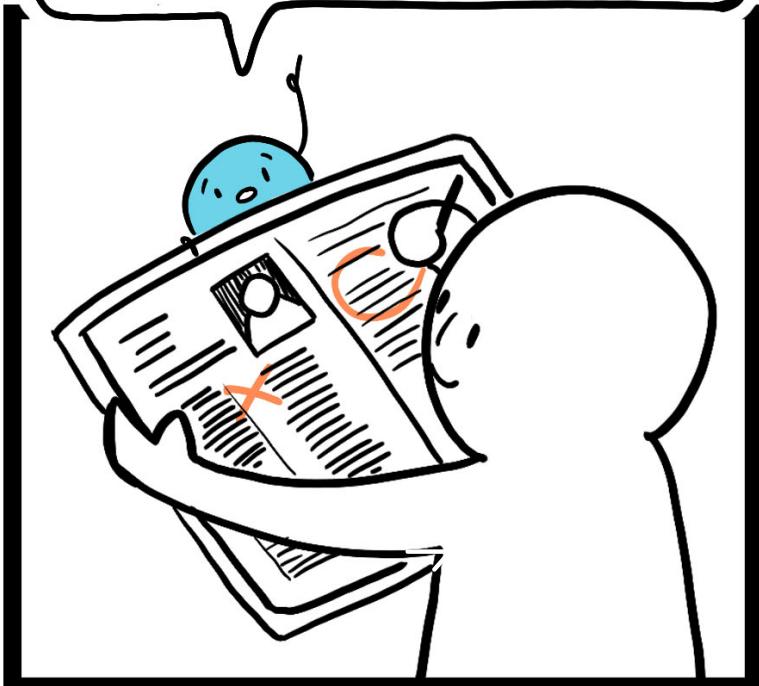
NOW YOU CAN FINALLY  
HAVE ONE PLACE TO  
SEE YOUR ENTIRE  
HEALTH PICTURE.



Next →

&lt;

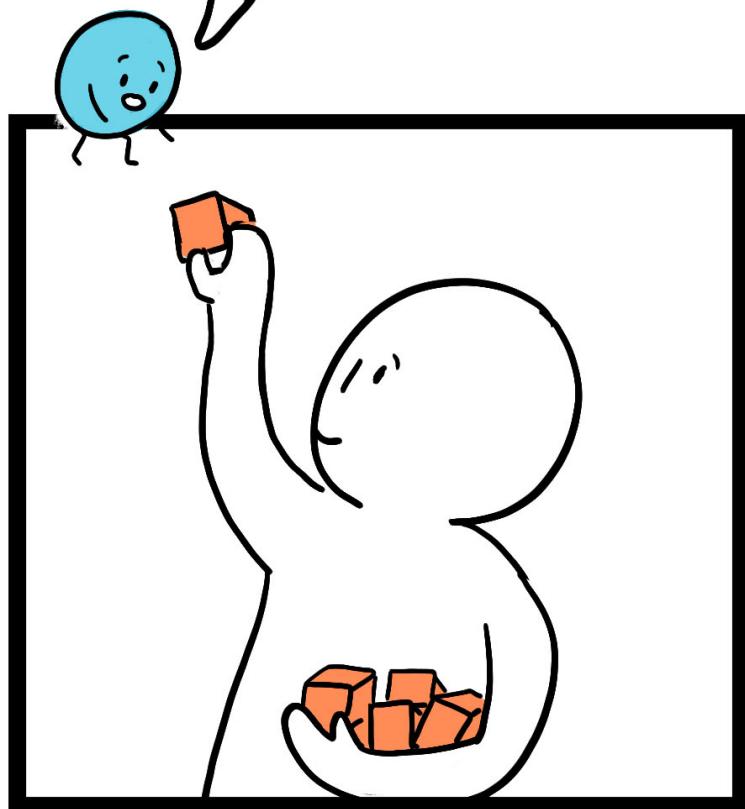
MISTAKES HAPPEN.  
THIS IS WHY YOU CAN  
**CORRECT** (WITH  
SOME EXCEPTIONS)  
AND **ANNOTATE**  
**YOUR DATA.**



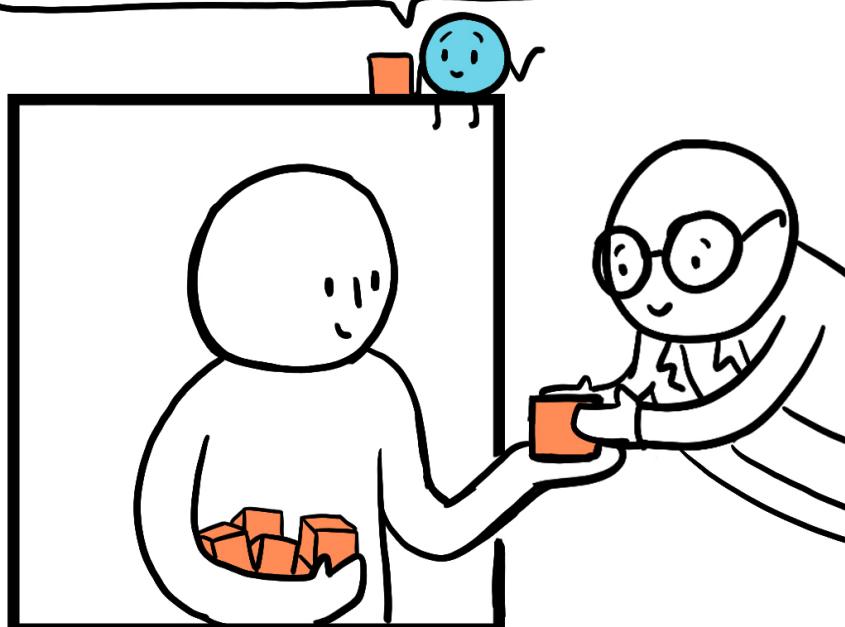
Next →

**YOU CAN SHARE YOUR  
DATA WITH ANYONE.**

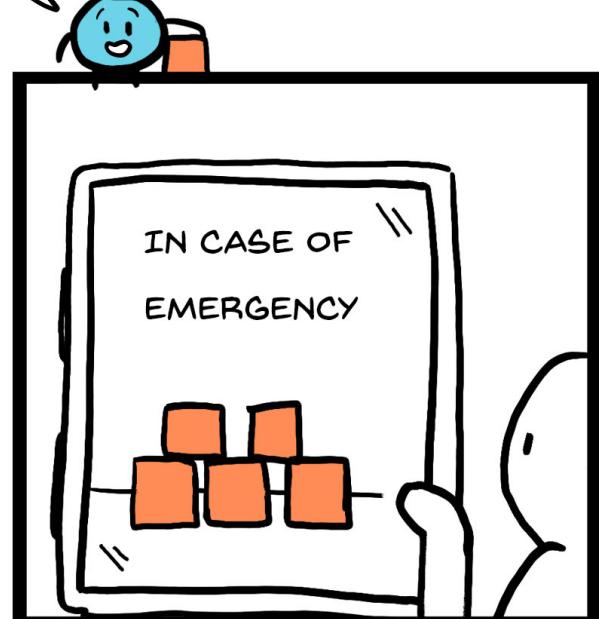
WE ALWAYS NEED YOUR  
PERMISSION BEFORE  
SHARING YOUR DATA.



YOU CAN SHARE YOUR  
DATA WITH  
RECOMMENDATION  
SERVICES TO ACCESS  
SUGGESTIONS FOR A  
**HEALTHIER LIFESTYLE.**

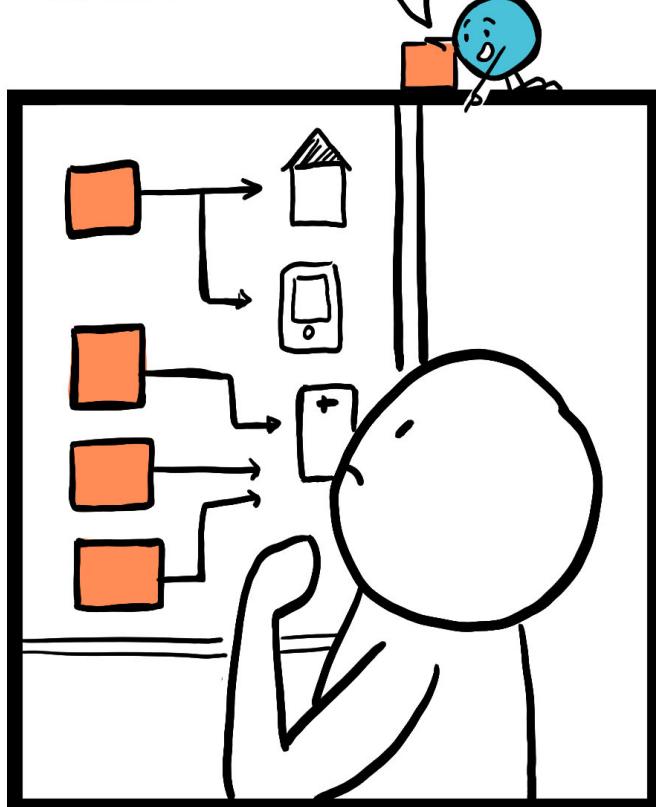


**YOU CAN SHARE YOUR  
DATA AUTOMATICALLY  
DURING AN EMERGENCY.  
FIRST RESPONDERS WOULD  
BE ABLE TO SEE CRITICAL  
HEALTH INFORMATION ABOUT  
YOU.**





YOU CAN REVIEW WHO HAS  
ACCESS TO YOUR DATA.



Halfway through, continue →



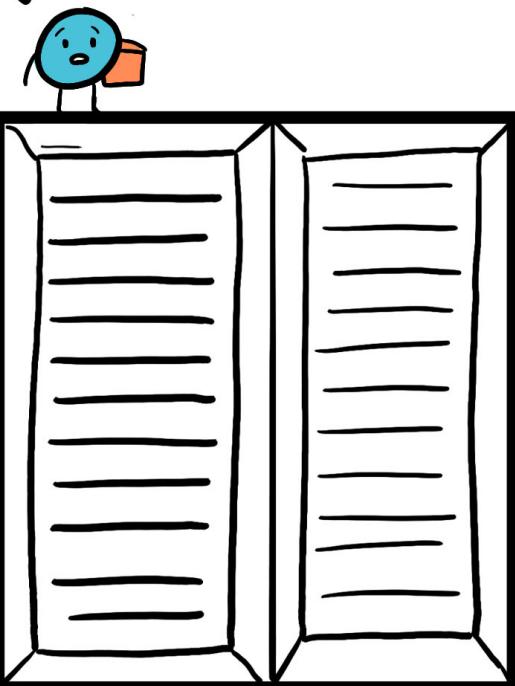
YOU CAN **STOP** SHARING  
YOUR DATA AT ANY TIME



Next →



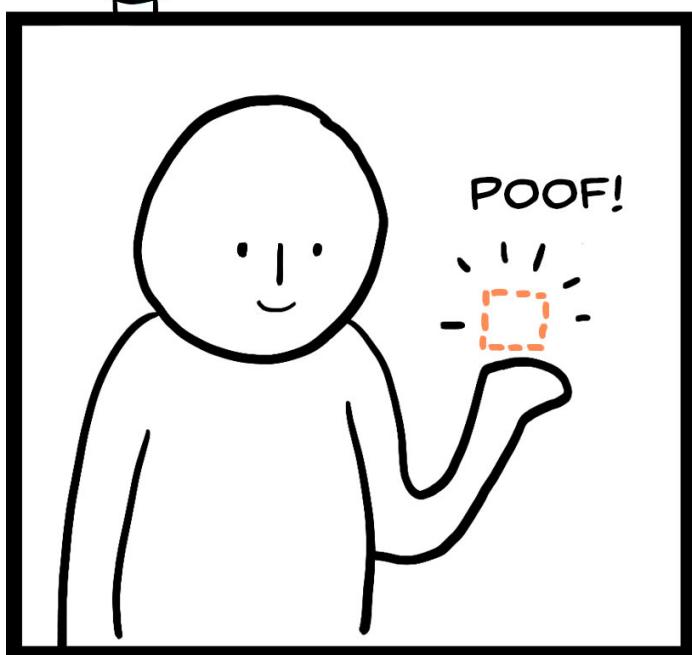
HOWEVER, THOSE YOU HAVE SHARED WITH MAY KEEP A COPY OF YOUR DATA. BUT, THEY CANNOT GET ANY NEW DATA AFTER YOU STOP SHARING.



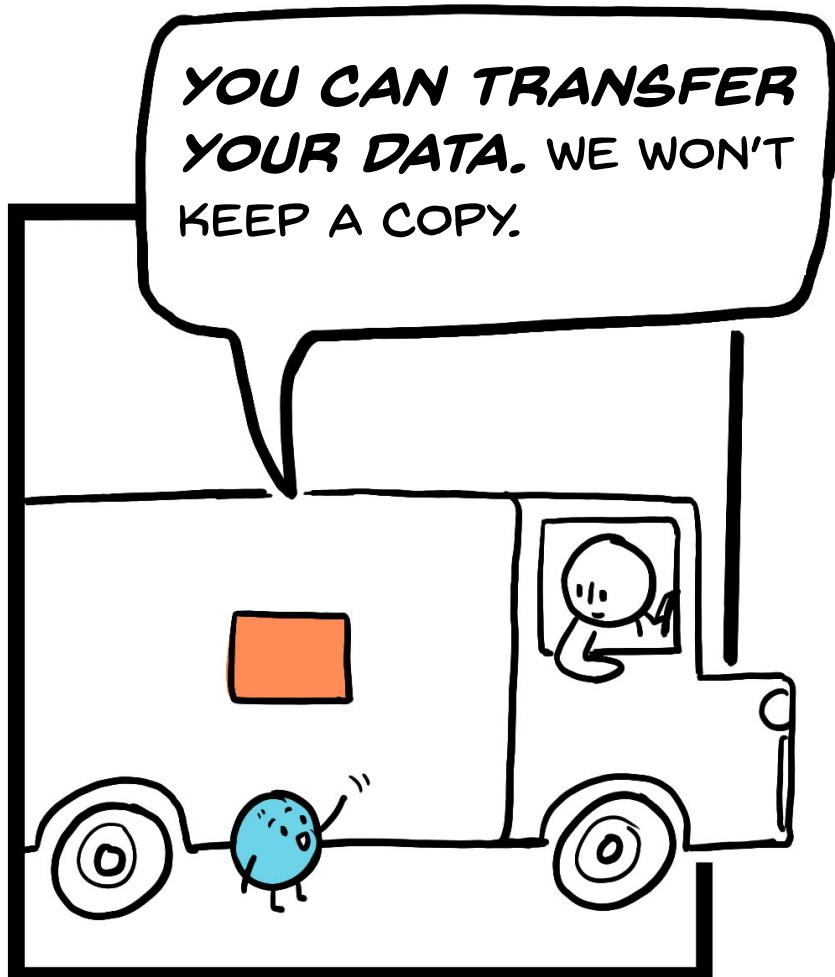
Next →



YOU CAN DELETE YOUR DATA.  
WE WON'T KEEP A COPY.  
HOWEVER, WE CAN'T MAKE  
PEOPLE DELETE THE DATA YOU  
ALREADY SHARED WITH THEM.

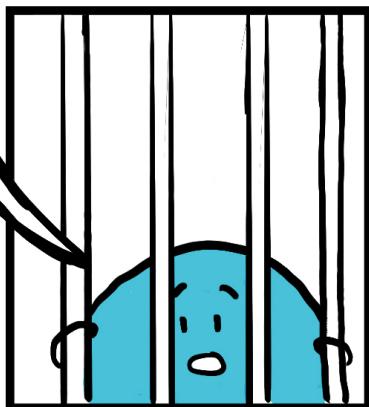


Next →



Next →

WE'RE RESPONSIBLE  
FOR KEEPING YOUR  
DATA SAFE. YOU CAN  
HOLD US ACCOUNTABLE  
IF THERE IS A DATA  
BREACH FROM OPEN  
HEALTH MANAGER.



<

# Signature

Type your full name to sign

---

- By checking this box, I understand and agree to the terms of the [Patient Data Use Agreement](#) and acknowledge that typing my name above represents my electronic signature.

Disagree

Agree

# Signature

Linda Wang

---

- By checking this box, I understand and agree to the terms of the [Patient Data Use Agreement](#) and acknowledge that typing my name above represents my electronic signature.

Disagree

Agree

# Signature

Linda Wang

---

- By checking this box, I understand and agree to the terms of the [Patient Data Use Agreement](#) and acknowledge that typing my name above represents my electronic signature.

Disagree

Agree



## Sign Up



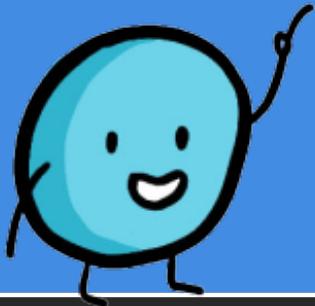
Full Name



Email Address

Sign Up

Already Have An Account? [Sign In.](#)



## Sign Up



Linda Wang



lindawang@gmail.com

Sign Up

Already Have An Account? [Sign In.](#)

# Get Started with Preventative Health Check



**Looks like you don't have any  
health data sources yet.**

Connect your health data sources to have a  
more comprehensive view of your own  
health.

[Connect Data & Services](#)



PDM



Care Plan



Home



Community



Settings

9:41



# Connect Data & Services



**Apple Health**

Health Profile, Health Records

## U.S. Preventative Services | Preventative Task Force

Preventative Screening Recommendations

[Learn more](#)



**Launch Preventative Health Check**



PDM



Care Plan



Home



Community



Settings

9:41



## Connect Data & Services



Apple Health

Health Profile, Health Records



**"Rosie" Would Like  
to Access Apple  
Health**

[Open Settings](#)

[Not Now](#)



PDM



Care Plan



Home



Community



Settings



< Privacy

# Health

Your data is encrypted on your device and can only be shared with your permission.

[Learn more about Health & Privacy...](#)

# Headphone Audio Levels

APPS



## Clock



## Health



# Rosie



# MapMyRun



# Messages



MyFitnessPal



As apps request permission to update your Health data, they will be added to the list.

2:25 ↗



&lt; Rosie

[Health](#)**Rosie**

Allow

App Explanation: Allows Rosie to  
read data to the health app.

ALLOW "ROSIE" TO READ

[Turn on All](#)

Systolic Blood Pressure



Diastolic Blood Pressure



Weight



Date of Weight Recording



Height



Date of Birth



Sex



2:25 ↗



&lt; Rosie

[Health](#)**Rosie**[Allow](#)

App Explanation: Allows Rosie to  
read data to the health app.

ALLOW "ROSIE" TO READ

[Turn on All](#)

Systolic Blood Pressure

Diastolic Blood Pressure

Weight

Date of Weight Recording

Height

Date of Birth

Sex

# Connect Data & Services



## Apple Health

Health Profile, Health Records

## U.S. Preventative Services | Preventative Task Force

Preventative Screening Recommendations

[Learn more](#)



Great, while I collect that health data...  
...let's get started with a few short questions  
so I can manage your health.

**Update**



PDM



Care Plan



Home



Community



Settings

## ≡ Preventative Health Check

### Get Blood Pressure Checked

Based On:

42 y.o. | BP date Mar, 2020 >

- your age (40 or older)
- the absence of a current blood pressure reading (greater than 1-year)

It is recommended that:

- **you get your blood pressure checked**

[Ignore](#)

[Update Blood Pressure](#)

### Allergy Screener

### Mental Health Screener



PDM



Care Plan



Home



Community



Settings

## ≡ Preventative Health Check

The information below is needed to get the most personalized list of recommendations from the US Preventative Services Task Force.

All fields are optional.

Date of Birth

Feb 16, 1980



Sex Assigned at Birth

Female



Height

5 ft 10 in



Weight

250 lbs



### Blood pressure

Systolic (mmHg)

150



Diastolic (mmHg)

98



Date Recorded

Mar 1, 2020



Pregnant



Tobacco Use



Sexually Active



Submit



PDM



Care Plan



Home



Community

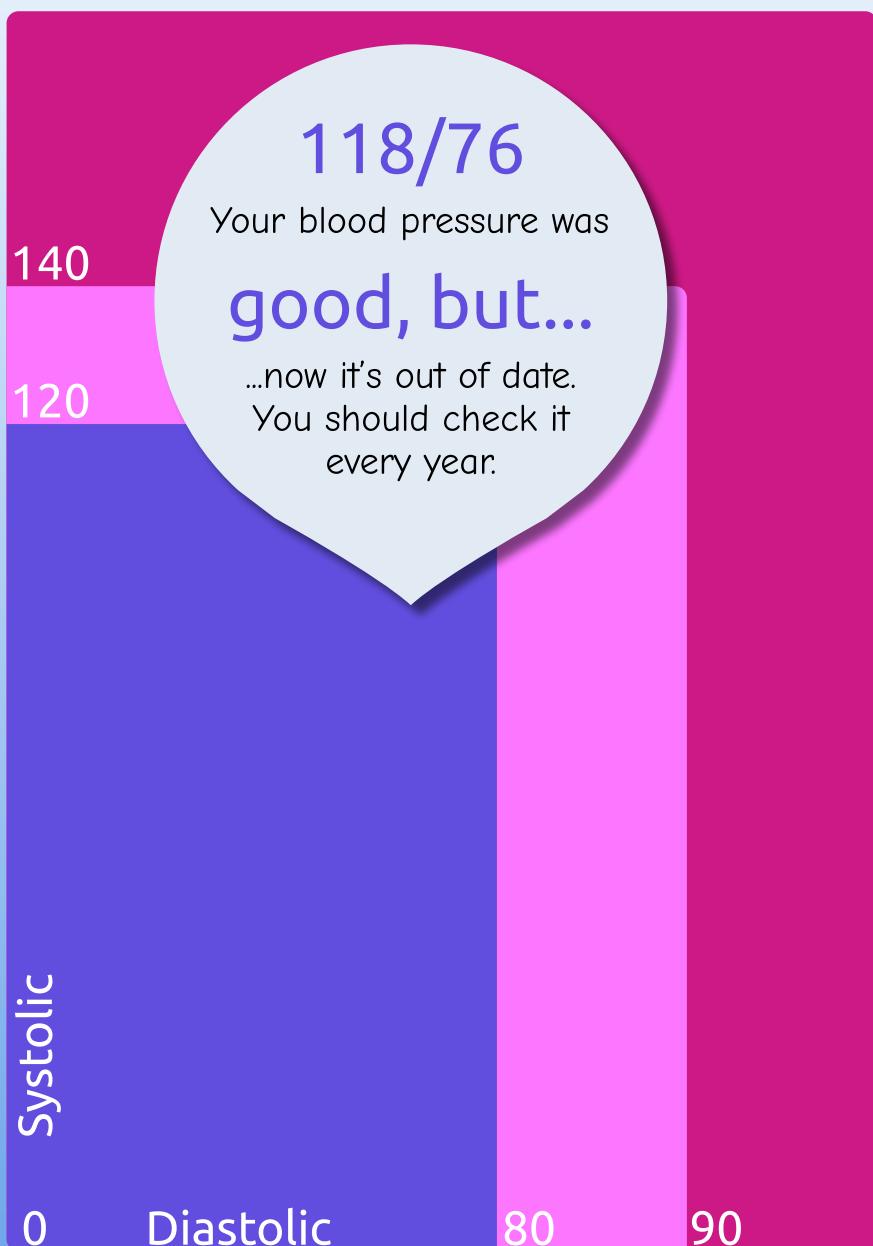


Settings

9:41



## Blood Pressure



Update Blood Pressure

Update



PDM



Care Plan



Home



Community



Settings



## Blood Pressure



118/76

Your blood pressure was

good, but...

...now it's out of date.  
You should check it

Enter your blood pressure.

Systolic

Systolic (mmHg)

118



Diastolic

Diastolic (mmHg)

76



Update

Systolic

0

Diastolic

80

90



Need help checking it?

Help



PDM



Care Plan



Home



Community



Settings



## Blood Pressure



118/76

Your blood pressure was

good, but...

...now it's out of date.  
You should check it

How can I help?

Show me clinics nearby

Clinics

Call family

Call Family

Tell me how to check it

Check it

Systolic

0

Diastolic

80

90



Update Blood Pressure

Update



PDM



Care Plan



Home



Community



Settings



## Blood Pressure



118/76  
Your blood pressure was

12

Enter your blood pressure

Systolic      Systolic (mmHg)  
118     

---

Diastolic      Diastolic (mmHg)  
76     

---

**Update**

1      2      3  
A B C      D E F

4      5      6  
G H I      J K L      M N O

7      8      9  
P Q R S      T U V      W X Y Z

0     

PDM      Care Plan      Home      Community      Settings



## Blood Pressure



118/76  
Your blood pressure was  
118/76 mmHg

Enter your blood pressure

Systolic      Systolic (mmHg)  
167             

---

Diastolic      Diastolic (mmHg)  
92             

---

**Update**

1      2      3  
A B C    D E F

4      5      6  
G H I    J K L    M N O

7      8      9  
P Q R S    T U V    W X Y Z

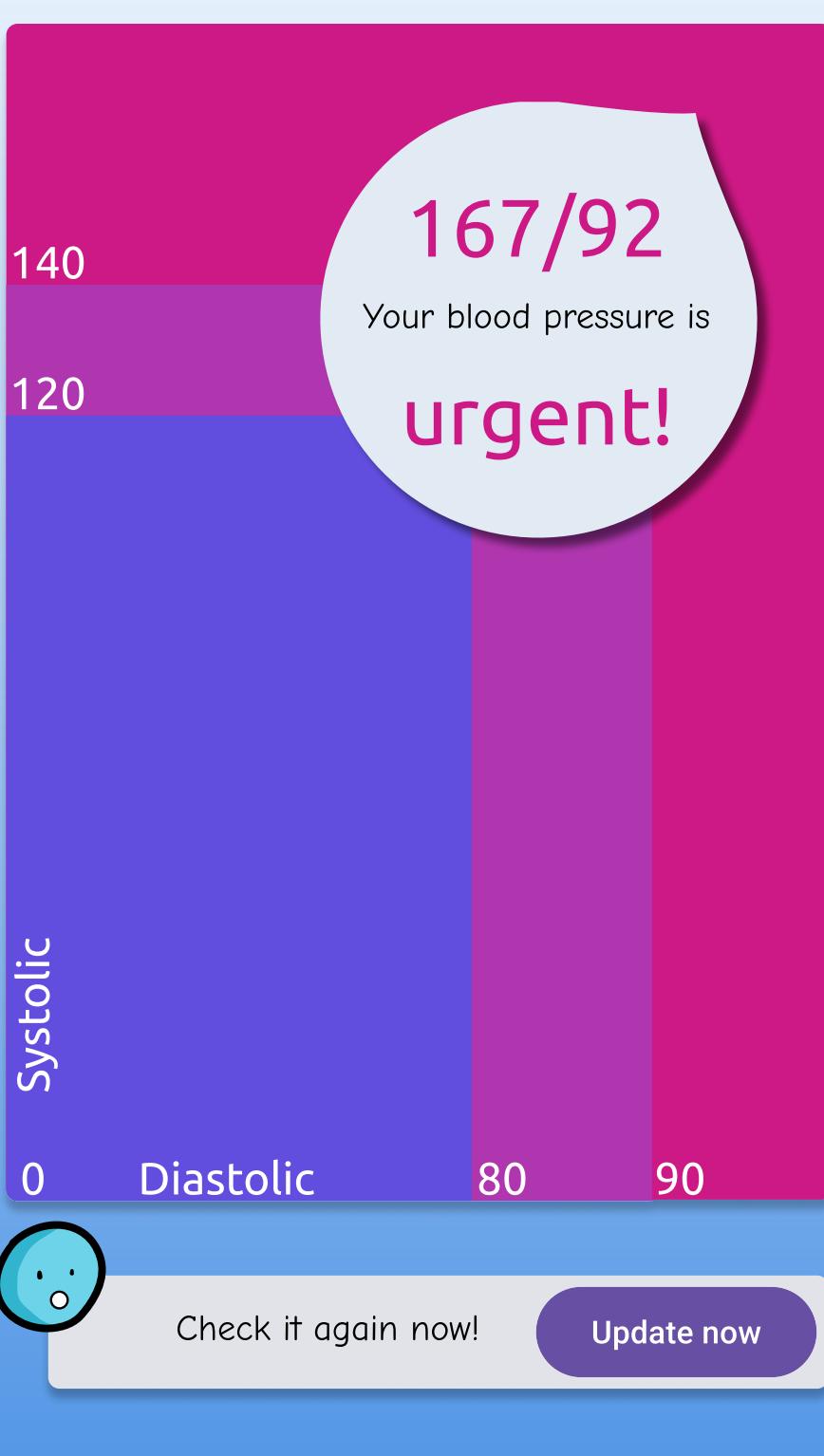
0     

PDM      Care Plan      Home      Community      Settings

9:41



## Blood Pressure



PDM



Care Plan



Home



Community



Settings