

QUICKSTART GUIDE

ADDING *Leva*[®] TO eClinicalWorks EHR

The *Leva* Pelvic Health System can be added to your office's eClinicalWorks[®] EHR platform. Please work with your IT/IS Administrator and use this guide for instructions on how to add *Leva* in eClinicalWorks EHR.

STEP 1

Add "Leva Pelvic Health System" under "Equip/ Supplies"

STEP 2

Enter the Device Identified #: 00860002994406

STEP 3

Add Renovia as a Pharmacy
Renovia
263 Summer Street Boston MA 02210
Fax: 877-800-4371

STEP 4

Reminder: Ensure that required information is included on the eFax: patient name, patient phone, patient email, patient address, ICD-10 diagnosis, patient DOB, signature

The *Leva*[®] Pelvic Health System is intended for (1) strengthening of pelvic floor muscles, (2) rehabilitation and training of weak pelvic floor muscles for the treatment of stress, mixed, and mild to moderate urgency urinary incontinence (including overactive bladder) in women and (3) rehabilitation and training of weak pelvic floor muscles for the first-line treatment of chronic fecal incontinence (>3-month uncontrolled passage of feces) in women. For a complete summary of the risks and instructions for the *Leva* System, see its Instructions for Use available at www.levatherapy.com. Athena is a trademark of AthenaHealth, LLC © 2023 Axena Health. All rights reserved. Not real patient data. Any resemblance to a real person is coincidental.

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ORDERING *Leva*[®] THROUGH eClinicalWorks EHR

The *Leva*[®] Pelvic Health System is now compatible with eClinicalWorks[®] EHR.

Please use this guide for instruction on how to e-fax your patient's *Leva* order. Note: *Leva* must already be in your office's eCW system in order to send the Rx through efax.

STEP 1

Under "Add New Rx" set the "Type" to "Equip/Supplies" and search "Leva Pelvic Health System".

D	F	Strength	Form.	Take	Route	Freq.	Duration	Disp	Refill	AWP(\$)
			Device	as directed					1	

STEP 2

Search "Renovia" in the Local Pharmacy Database and E-fax the *Leva* Rx to Renovia Pharmacy.

M	C	NCPDPID	Store Name	Service Level	Address Line1	Add	City	State	Zip	Ph
			Renovia		263 Summer Street		Boston	MA	02210	

STEP 3

Reminder: Ensure that required information is included on the eFax.

patient name, patient phone, patient email, patient address, ICD-10 diagnosis, patient DOB, signature.