

Patient Education Videos from Texas Health Resources & Emmi™ Solutions

1. **Type in:** my-emmi.com/SelfReg/THRCOMMUNITY

2. **Type in your:**

- a. Texas Health Hospital closest to you
- b. First name, Last name
- c. Date of Birth (MM/DD/YYYY)
- d. Email (Your email is only used for video instructions and reminders)

3. **Select & View Program**

- | | |
|--|--|
| <input type="checkbox"/> Advance Directives | <input type="checkbox"/> High Cholesterol or Triglycerides |
| <input type="checkbox"/> Asthma | <input type="checkbox"/> Hypertension (High Blood Pressure) |
| <input type="checkbox"/> Childbirth | <input type="checkbox"/> Making the Most of Your Medical Visit |
| <input type="checkbox"/> COPD – Lung Problems | <input type="checkbox"/> Medical Home – Introduction |
| <input type="checkbox"/> Colonoscopy | <input type="checkbox"/> Medication History – Patient |
| <input type="checkbox"/> Coping with a Health Condition | <input type="checkbox"/> Nutrition for the Whole Family |
| <input type="checkbox"/> Coronary Artery Disease | <input type="checkbox"/> Pneumonia |
| <input type="checkbox"/> Depression | <input type="checkbox"/> Preventing Falls at Home |
| <input type="checkbox"/> Diabetes – Type 2 (High Blood Sugar) | <input type="checkbox"/> Preventing Stroke or TIA |
| <input type="checkbox"/> Getting the Flu Vaccine | <input type="checkbox"/> Thinking About Quitting Smoking |
| <input type="checkbox"/> Health Insurance: What You Need to Know | <input type="checkbox"/> Total Hip Replacement |
| <input type="checkbox"/> Heart Failure | <input type="checkbox"/> Total Knee Replacement |

If you need help with Emmi:

Email: support@emmisolutions.com Call: **866-294-3664**