VIRTUAL VISITS:

Connect with a Hartford HealthCare-GoHealth Urgent Care provider, via video, from wherever you are in Connecticut with the convenience of a mobile device, tablet, or computer.

**MON-FRI:** 8am-8pm  
**SAT-SUN:** 9am-5pm

1. **SELECT** a time and symptom  
2. **COMPLETE** online registration  
3. **CONNECT** to your video session

For more information, visit GoHealthUC.com/CTStudents
FREQUENTLY ASKED QUESTIONS

HOW DOES A VIRTUAL VISIT WORK?
+ Similar to WhatsApp, Skype and FaceTime, a Virtual Visit allows you to meet with a provider via video. Like an in-person visit, a Virtual Visit can be made same-day.
+ 15 minutes before your session starts, you will receive an email and/or a text message with a direct link to your video session. Click the link to enter your date of birth and electronically sign any consent form.
+ When you connect to the video session, your provider will be notified and will join.

WHO CAN BE SEEN VIA A VIRTUAL VISIT?
+ Anyone over the age of 6 months old who is physically located within the State of Connecticut during the virtual visit.
+ Non-life-threatening injuries and illnesses need immediate care, too.

WE COVER:
+ Allergies
+ Asthma attacks and wheezing
+ COVID-19 Evaluation
+ Bronchitis and respiratory infection
+ Colds, cough, flu and mild fever
+ Earache or ear infection
+ Headache and migraine
+ Mild animal or insect bites
+ Pink eye
+ Poison oak and ivy
+ Rash and skin infection
+ Sinus infections
+ Sore throat, laryngitis and strep
+ Sprains and strains
+ STD/STI treatment and testing
+ Urinary tract infection (UTIs)

CAN I RECEIVE PRESCRIPTIONS FROM A VIRTUAL VISIT?
+ Yes. Prescriptions are handled in the same manner as an in-person visit and are delivered electronically to the patient’s pharmacy. Narcotics may not be prescribed during a virtual visit.

WHAT DEVICES DO I NEED?
+ Smartphone, tablet, laptop or desktop with internet connection.
+ Webcam and mic if using a desktop.

*Google Chrome is preferred, but Internet Explorer and Firefox are also compatible.

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