

Creating a ReadySet Account

NOTE: This network cannot be accessed outside the United States.

1. Go to <https://Ochsner.readysetsecure.com>
2. Click **New User? Click Here to Begin**



3. Type in Access Code **2587**
4. Select **Student** as the program type
5. Type in the code for CAPTCHA
6. Click **Next**

Register with ReadySet

Step 1 of 5: Please enter your code and program type to begin.

This system collects and stores Personal Health Information that is protected by law. To insure that your information remains secure and private, please enter the following to begin creating a unique system identity.

The Access/Org Code is a unique ID number for your organization. If you do not know this code, please contact your Employee/Occupational Health Department.

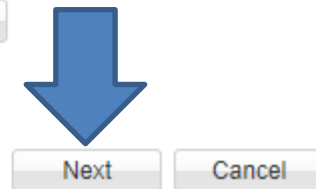
Access/Org Code: *

Program Type: *

Type the code below: *



 Refresh Code

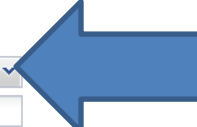


7. Please fill out the following fields. Any field with an asterisk * is required
 - a. If you do not have a Social Security Number (SSN), please put all 0's
 - b. Select Population Type **Student**
8. Click **Next**

Register with ReadySet

Step 2 of 5: Please enter the information below.

First Name: *	<input type="text" value="Test"/>
Last Name: *	<input type="text" value="Student"/>
Date Of Birth: *	<input type="text" value="10/10/1980"/>
Employee ID (Employees must enter Employee ID. If UNKNOWN, may enter full date of birth MMDDYYYY): *	<input type="text" value="10101980"/>
Last 4 of SSN: *	<input type="text" value="0000"/>
Population Type: *	<input type="text" value="Student"/>
Home Address: *	<input type="text" value="123 Main St"/>
City: *	<input type="text" value="New Orleans"/>
State: *	<input type="text" value="Louisiana"/>
Zip: *	<input type="text" value="70123"/>




9. Please fill out the following fields. Any field with an asterisk * is required
 - a. If you do not have a Social Security Number (SSN), please put all 0's
10. Click **Next**

Register with ReadySet


Just need a little more information.

Gender: *	<input type="text" value="Female"/>
SSN: *	<input type="text" value="000-00-0000"/>
Location: *	<input type="text" value="Ochsner Medical Cente"/>
Phone: *	<input type="text" value="(504) 123-1213"/>
Email: *	<input type="text" value="abc@gmail.com"/>



11. Validate the information that was provided. Click **Next**

Personal Health Information is protected by law. By clicking "Next" you are certifying that the information above is accurate and true.



12. Create a username and password for your account and click **Next**

Register with ReadySet

Step 4 of 5: Setup your username and password.

The Username is what you enter to log-in to the system, along with your password. Usernames must be between 5 and 60 characters

Username: *

Password must be 8 to 30 characters in length, and must contain at least 1 upper case character, 1 lower case character, 1 number, and one of the following: ! @ # \$ % ^ & * (). Common words or phrases such as: password, admin, manager, ABC, 123, your username, your first or last name, etc. are not allowed.

Password: *

Verify Password: *

The email address below will be used if you forget your username or password.

Email Address: *



13. Select your security questions for your account and click **Finish and log me in!**

Register with ReadySet

Last Step: Set up your security questions.

Please select three security questions and provide answers to each one. These will be used to verify your identity in the event that your password needs to be reset.

Security question: *

Answer: *

Security question: *

Answer: *

Security question: *

Answer: *



14. After reading the Warning, please click **Agree and enter Site**

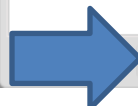
WARNING AUTHORIZED USE ONLY.

You are logged onto a secure medical site intended for use only by the individual who has been given permission to gain access to the site. Unauthorized or improper use of the system may result in disciplinary action, up to and including termination of employment and/or civil/criminal penalties. If any unauthorized or improper use is detected, Axion Health reserves the right, in our sole discretion, to terminate your use of this site until such unauthorized or improper use is fully investigated. By using this system, you agree that you have read this notice and agree to be bound by its terms.

LOG OFF IMMEDIATELY if you do not agree to these conditions.

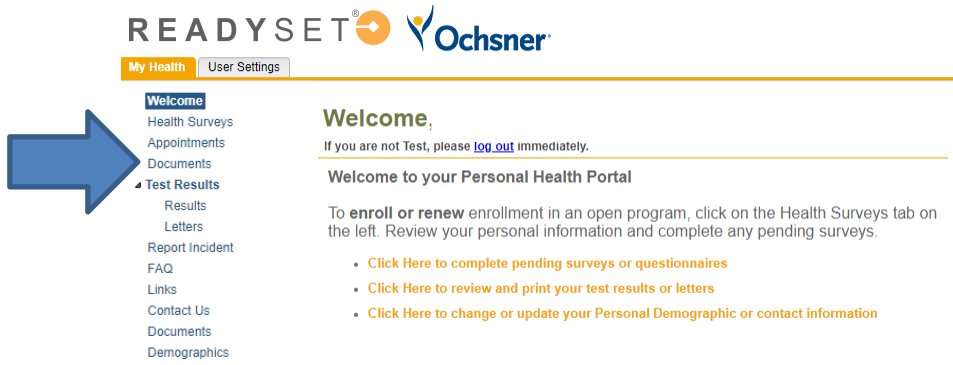
Agreed to by:
Date: 03/31/2022

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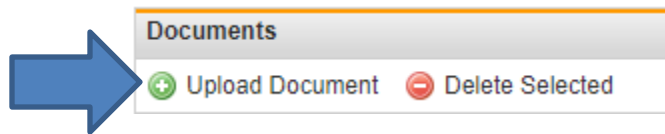


15. You can now upload Flu, TDAP, and COVID documentation

16. Click **Documents**



17. Click **Upload Document**

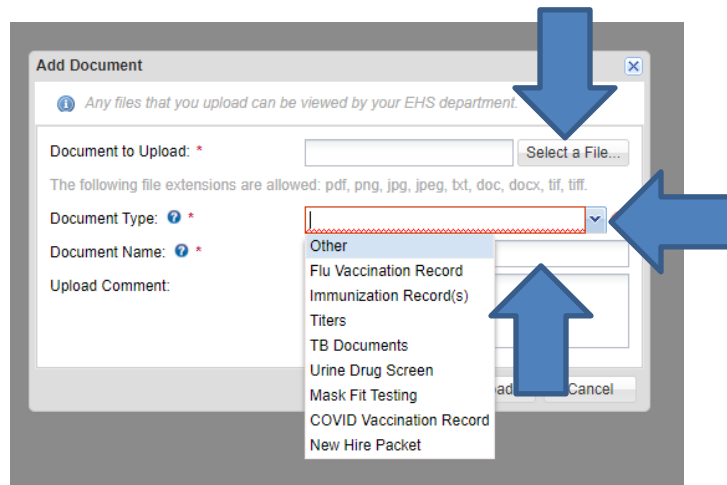


18. Select the file from your computer to upload

19. Select the **Document Type**

20. Give the **Document** a **Name**

21. Click **Upload**



For help logging in or troubleshooting, please call **Employee Health** at **504.842.3628**

EmployeeHealth@ochsner.org