

Community/Facility Staff Registration Form

The Bluestone Bridge was created to provide secure, direct communication between families, facility nursing staff, service partners and our providers. Users are not allowed to enroll as a group and each user must have an individual, active email address to utilize the Bluestone Bridge. The Nurse Manager, Health Service Manager, Manager of Home Care, Director of Health Services or Executive Director may fill out and sign the form on behalf of facility nursing staff.

Step 1: (New Registration Only)

Go to <https://mankato-204d.bluestonebridge.com/default.aspx> and click on the “Enroll for portal access” button (found towards the middle of your screen). Follow the steps for online portal registration and then move to step 2.

Step 2:

Fax this completed form to the Bluestone Vista Team Coordinator at 1-507-385-4186

☐ Add User

☐ Remove User

First Name: _____ Last Name: _____

Title: _____

Email Address: _____

☐ Facility Nurse

Name of Facility: _____

Address of Facility: _____

Phone Number (for verification purposes): _____

Name of person filling out this form (if different than above): _____

Title (if different than above): _____

Signature: _____ Date: _____