

QUICK START GUIDE

MONASH HEALTH REFERRAL SMARTFORM

The Monash Health Referral SmartForm has been designed to make it easier for you to refer your patients electronically for services provided by Monash Health and Monash Children's Hospital. This quick start guide has been developed to help you navigate the new digital form.

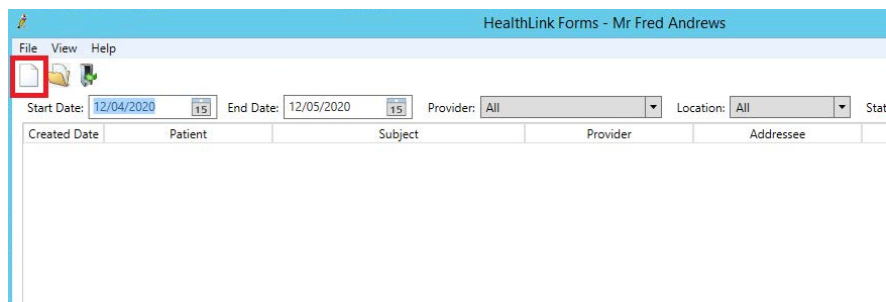
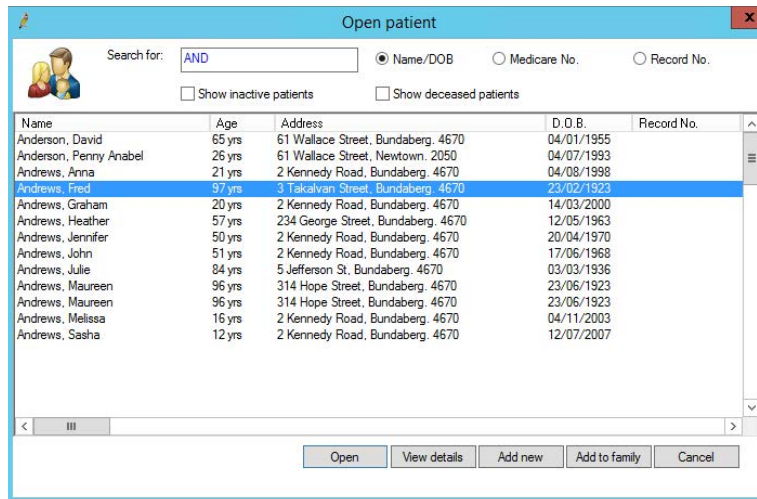
HealthLink Technical Support

E: helpdesk@healthlink.net

P: 1800 125 036

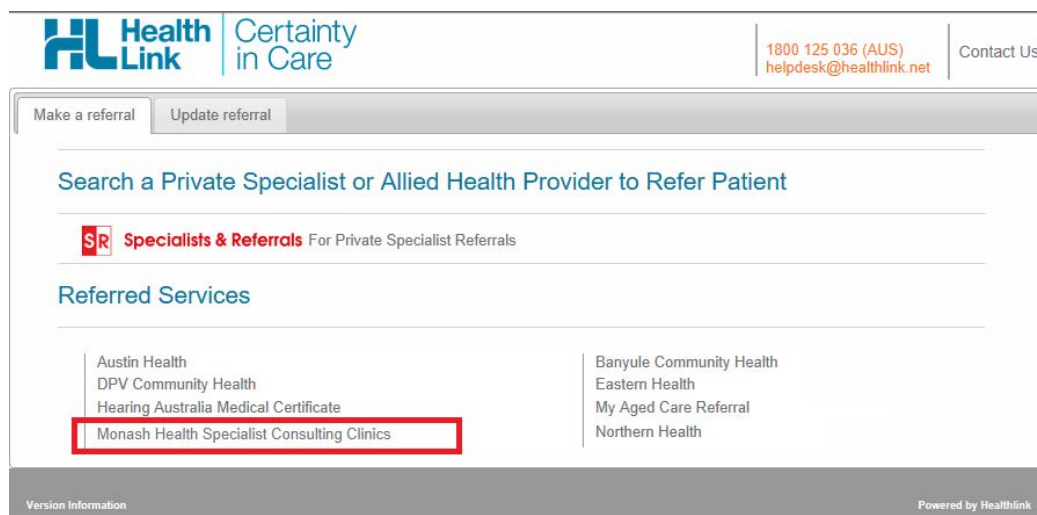
1. Open the patient record

Search for the patient and open their electronic medical record. Then click the **View Menu** and select **HealthLink Forms**. In the HealthLink Forms window, click the **New Form** button.



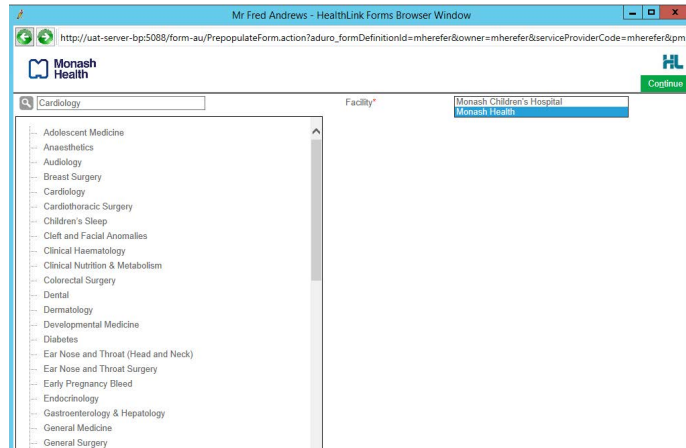
2. Launch the Form

Under the **Referred Services** section, click on Monash Health Specialist Consulting Clinics



3. Select the Monash Health Service you wish to refer to

Select the service you wish to refer the patient to from the list. If the service is available at both Monash Health and Monash Children's Hospital, please select the appropriate facility you wish to refer the patient to. Click the **continue** button on the top right. Should you wish to narrow down the list, you can enter the service (or part of the service) you are looking for into the search field directly above the list.



4. Complete the Form

The form will be displayed. At this point, you will have access to all the information necessary to complete the form for submission. If you need to do something else or are awaiting on lab results not yet available, you can **Park** the form to save what you've currently done so far, and come back to it later to complete it.

Depending on the selections you've made, additional fields will appear allowing you to include the relevant information necessary.

The button **Browse for Consultation Notes** will give you access to today's and previous progress notes from the patient's medical records. You can add clinical notes to the form by selecting the relevant records.

5. Include the relevant attachments

The **Attachments / Reports** tab will give you access to all of the supporting documents that you may wish to attach to the form. You can select any item from the table – showing you patient reports, diagnostic tests, scanned documents or referrals from the last six months. You can browse for additional reports or documents stored earlier in the clinical record or on your computer which have not been stored in the patient clinical record.

| <input type="checkbox"/> | Date | Name | Comments | Type | Size |
|-------------------------------------|------------|--|----------|------|------|
| <input checked="" type="checkbox"/> | 12/05/2020 | Monash Health Specialist Consulting Clinics HTML | | html | 6 KB |
| <input checked="" type="checkbox"/> | 15/01/2020 | Primary Health Tasmania Addendum Form.HTML | | html | 7 KB |
| <input type="checkbox"/> | 15/01/2020 | Primary Health Tasmania Hospitals.HTML | | html | 6 KB |
| <input type="checkbox"/> | 03/12/2019 | Primary Health Tasmania Hospitals.HTML | | html | 6 KB |

6. Select relevant medications, warning and medical history items

The **Medications / Warnings** and **Medical History** tabs will give you access to the relevant pre-populated records. Just select those records that are relevant to the referral or add your specific notes if necessary.

| Date | Details | Dose | Units | Instructions |
|------------|---------------------------------------|------|-------|--|
| 14/02/2013 | Viagra 50mg Tablet | | | 2 Tablets In the morning |
| 14/02/2013 | Ventolin CFC-Free 100mcg/dose Inhaler | | | 2 puffs Inhalation Every 4 hours p.r.n |
| 14/02/2013 | Warfarin 3mg Tablet | | | |
| 14/02/2013 | Warfarin 1mg Tablet | | | |

| <input type="checkbox"/> | Date | Description | Comments |
|-------------------------------------|------------|-------------|---|
| <input checked="" type="checkbox"/> | 15/01/2019 | Bee Sting | Requires Antihistamine To Reduce Swelling |

Mr Fred Andrews - HealthLink Forms Browser Window

http://uat-server-bp:5088/form-au/referralFormFrames.jsp?formScopeld=MH-111&_fsk=-1367380530

Monash Health Cardiology Submit Preview Park

Requested Information ▲
Cardiology

Attachments / Reports
No reports selected
No files attached

Medications, Allergies, Alerts
4 long term medications specified
No medications specified
1 medical warning specified

Medical, Social and Family History
Medical history specified

Patient Information
Fred Andrews
GPCV2140F
23/02/1923

Referrer Information ▲
Best Practice
0000000Y

Current Medical Conditions

| <input type="checkbox"/> | Code | Description | Comments |
|--------------------------|-----------|-----------------------------------|----------|
| <input type="checkbox"/> | 445111008 | Cryotherapy - Solar Keratosis(Es) | |
| <input type="checkbox"/> | 38196001 | X-Ray - Chest | |
| <input type="checkbox"/> | 303238005 | Wart(S) - Removal Of | |
| <input type="checkbox"/> | 54398005 | Urti | |
| <input type="checkbox"/> | 405944004 | Asthma | |

Relevant Past History

| <input type="checkbox"/> | Code | Description | Comments |
|--------------------------|----------|--------------------|----------|
| <input type="checkbox"/> | 17585008 | Testicular atrophy | |

Family History

| <input type="checkbox"/> | Code | Description | Comments |
|--------------------------|----------|-------------|----------|
| <input type="checkbox"/> | 73211009 | Diabetes | |

Social History
Smoker

7. Ensure patient and referrer information is correct

With the 'Patient Information' and 'Recipient/Referrer' tabs, you simply need to ensure that the information displayed is up-to-date and correct. If a piece of required information is missing you will see the validation symbol displayed on the tab. To complete it, just click on the tab and fill-in the required field.



Mr Fred Andrews - HealthLink Forms Browser Window

http://uat-server-bp:5088/form-au/referralFormFrames.jsp?formScopeld=MH-112&_fsk=1635113650

Monash Health Cardiology Submit Preview Park Help

Requested Information ▲
Cardiology

Attachments / Reports
No reports selected
No files attached

Medications, Allergies, Alerts
4 long term medications specified
No medications specified
1 medical warning specified

Medical, Social and Family History
Medical history specified

Patient Information
Fred Andrews
GPCV2140F
23/02/1923

Referrer Information ▲
Best Practice
0000000Y

Patient Information

Date of birth* 23/02/1923

Medicare/DVA Eligible Yes No

Medicare number 2294724171

DVA number GPCV2140F

Private health fund name

Name* Fred Andrews

Gender* Male

Patient's indigenous status* Neither Aboriginal nor Torres Strait Islander origin

Residential Address 3 Takalvan Street, Bundaberg, QLD, 4670

Postal Address Same as residential

3 Takalvan Street, Bundaberg, QLD, 4670

Contact Details (Select preferred phone contact)

Hme 38281836

Next of Kin No patient next of kin specified

Mr Fred Andrews - HealthLink Forms Browser Window

http://uat-server-bp:5088/form-au/referralFormFrames.jsp?formScopeld=MH-112R&_fsk=1635113650

Monash Health Cardiology Submit Preview Park Help

Requested Information ▲
Cardiology

Attachments / Reports
No reports selected
No files attached

Medications, Allergies, Alerts
4 long term medications specified
No medications specified
1 medical warning specified

Medical, Social and Family History
Medical history specified

Patient Information
Fred Andrews
GPCV2140F
23/02/1923

Referrer Information ▲
Best Practice
0000000Y

Recipient
Referral number* MH-112
Referral creation date* 12/05/2020 16:11 NZST

Facility*
Monash Health

Medical Practitioner information

Medicare Provider Number* 0000000Y
Medical Registration Number

HPI I 0003626233399955
HPI O

Name Dr Best Practice

Full name Dr Best Practice

Practice name HealthLink Townsville

Practice Address 4 69 Eyre Street, Suite, North Ward, QLD, 4810

Practice telephone* 0744015650
Practice fax

Email register@healthlink.net
EDI* hbgnuat

8. Submit the Referral

To preview the referral, click **Preview** to verify that the form has been completed correctly. The form will highlight which tab and which fields are incomplete if you have missed some mandatory information for the referral. When you are ready, click on **Submit** to send your referral. This will safely and securely send the form directly to Monash Health and you will see a copy of the completed form containing an acknowledgment of receipt. If required you can print a copy by clicking the **Print** button. Note that it is not necessary for the printed copy to be sent or taken to the hospital.

Monash Health Referral to Cardiology Submit Preview Park Help

Mr Fred Andrews - HealthLink Forms Browser Window
http://uat-server-bp5088/form-au/referralFormFrames.jsp?formScopeId=MH-107&_fsk=-2135603543 Print

Referral Sent and Acknowledged on 12/05/2020 16:02

Cardiology

Patient: Fred Andrews, 97yrs, M, DOB 23/02/1923, Phone: Hme 38281836
Residential address: 3 Takavan Street, Bundaberg, QLD 4670
Postal address: same as residential address
Referred by: Best Practice, HealthLink Townsville, Prov. No. 0000000Y, HPI-O 8003628233359965, PH 0744015555
Referral date: 12/05/2020 16:02 NZST

Clinical Referral Information

Referral Date: 12/05/2020
 Referral Continuation: New
 Referral Period: 12 months
 Interpreter Required: No
 Consider for Telehealth consultation: No
 Urgency: Routine: Greater than 30 days

Referral Details

Date: 09/04/2020 00:00:00 Actions: Imaging request printed to Synergy Radiology: Mammography - Mammogram +/- Ultrasound
 Special Needs / Reasonable Adjustments for Disability: No
 Does the patient have a carer / support person? No

Medications, Allergies, Alerts

Current Medications

| Date | Details | Dose | Units | Instructions |
|------------|---------------------------------------|------|-------|--|
| 14/02/2013 | Warfarin 3mg Tablet | | | |
| 14/02/2013 | Ventolin CFC-Free 100mcg/dose Inhaler | | | 2 puffs Inhalation Every 4 hours p.r.n |

Allergies and Alerts

| Date | Description | Comments |
|------------|-------------|---|
| 15/01/2019 | Bee Sting | Requires Antihistamine To Reduce Swelling |

Access Parked Referrals

To access a parked referral from the patient's record, click on the **View Menu** and Select **HealthLink Forms**. From the available listing, double-click on the parked form you would like to open. Complete the form and then click submit to submit the referral.

| Created Date | Patient | Subject | Provider | Addressee | Location | Status | Message ID |
|--------------|--------------|---|------------------|-----------|-----------------------|-----------------|------------|
| 12/05/2020 | Fred Andrews | Monash Health Specialist Consulting Clinics | Dr Best Practice | mherrefer | HealthLink Townsville | AutoSaved | MH-111 |
| 12/05/2020 | Fred Andrews | Monash Health Specialist Consulting Clinics | Dr Best Practice | mherrefer | HealthLink Townsville | AutoSaved | MH-110 |
| 12/05/2020 | Fred Andrews | Monash Health Specialist Consulting Clinics | Dr Best Practice | mherrefer | HealthLink Townsville | Parked | MH-106 |
| 12/05/2020 | Fred Andrews | Monash Health Specialist Consulting Clinics | Dr Best Practice | mherrefer | HealthLink Townsville | Waiting for Act | MH-107 |

Viewing or Printing Submitted Referrals

A copy of the submitted form can be found in the Correspondence Out section of the patient clinical record. Select the referral from the list and it will display in the right hand viewing window. Note that to see or print a copy of the referral just after submitting it, click on correspondence out and press the F5 button on your keyboard to refresh the correspondence out list.

Referral Sent and Acknowledged on 12/05/2020 16:02 NZST

Cardiology

Patient: Fred Andrews, 97yrs, M, DOB 23/02/1923, Phone: Hme 38281836
Residential address: 3 Takavan Street, Bundaberg, QLD 4670
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 Special Needs / Reasonable Adjustments for Disability: No
 Does the patient have a carer / support person? No

HealthLink helps over 60,000
healthcare practitioners deliver
certainty in care by enabling them
to exchange patient information
quickly, reliably and securely.

For all queries, please contact HealthLink
Customer Care on 1800 125 036 or email
helpdesk@healthlink.net

Monday to Friday (Except Public Holidays)
8:00 am - 6:00 pm

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