

QUICK START GUIDE BEST PRATICE EDITION

HealthLink Technical Support

helpdesk@healthlink.net 1800 125 036

Contact

If you have questions relating to the Mater Health eReferral Program, please contact:

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MATER HEALTH REFERRAL SMARTFORM

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





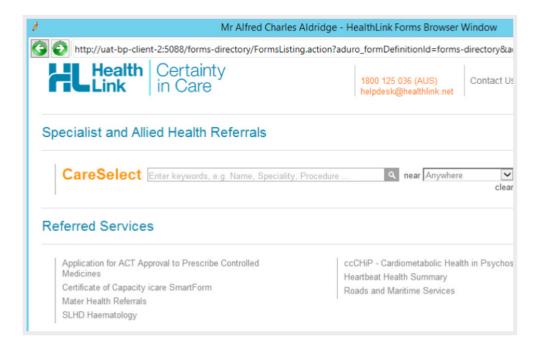
1. Open the patient record

Search for the patient and open their electronic medical record. Open the Best Practice Word Processor by clicking on the **Letter** icon (or use the F4 on the keyboard). Then click on the **HealthLink Forms** icon. In the HealthLink Forms window, click the **New Form** button.

📄 Bp Premier Word Pr	rocessor - Untitled				
<u>F</u> ile <u>E</u> dit ⊻iew <u>I</u> nsert	For <u>m</u> at Ta <u>b</u> le <u>T</u> emplates	Utilities Help			
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Start Date: 19/0	6/2016 15 Provider: Al	•	Location: All	Status: All	•
Created Date	Patient	Subject	Provider	Addressee	

2. Launch the Form

Under the **Referred Services** section, click on Mater Health Referrals.





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

Select the required service and recipient provider from the Mater Health Services list and click the **continue** button on the top right. Should you wish to narrow down the list, you can enter the clinic or provider name you are looking for into the search field directly above the list.

fmater health	Co <u>n</u> tinue
Q General Surgery - Dr C Pyke	
Antenatal - Dr Paul Bretz	
-Breast/Endocrine Surgery - Dr C Pyke	
Cardiology - Dr K Kostner	
Colorectal Surgery - Dr C Pyke	
- Dermatology - Dr J Muir	
ENT - Dr C Que Hee	
Endocrine/Diabetes - Dr H Barrett	
Fracture Clinic - Dr J Radovanovic	
Gastroenterology - Dr M Mortimore	
General Medicine - Dr N Fagermo	
General Surgery - Dr C Pyke	
Gynae/Oncology - Dr L Perrin	
- Gynaecology - Dr M Beckmann	

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, you can **Park** the form to save what you've currently done so far.

fmater health	General Surgery - Dr C P	yke			<u>S</u> ubmit	Pre <u>v</u> iew	<u>P</u> ark	Help V
Requested Information Second S	Referral Date* Referral Continuation*	05/03/2019 • New		Continuation				
	Referral Period*	Please Se	lect \$					
Attachments / <u>Reports</u> No reports selected	Feedback Requested*	• Yes	O No					
No files attached	Interpreter Required*	O Yes	🔿 No					
Medications / <u>W</u> arnings	Consider for Telehealth consultation	◯ Yes	No					
No long term medications specified No medications specified No medical warnings specified	Urgency	Please Se	lect	\$				
Medical History No medical history specified	Browse for Consultation N		ecific informatio	n outlined in standard referral guid	delines <u>here</u> *			
Patient Information	Reason for Patient Referral							1.
No date of birth	Other Notes (for example current services)							
Referrer Information Lawrence Peterson 0401732B	Other Notes (for example cu	rrent services)						1.



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

fmater health	General Surgery - Dr C F	^o yke			<u>S</u> ubmit	Pre <u>v</u> iew <u>P</u> ark	Help
Requested Information E General Surgery - Dr C Pyke	Referral Date* Referral Continuation*	05/03/2019 New		Continuation			
Attachments / <u>Reports</u> No reports selected No files attached	Referral Period* Feedback Requested* Interpreter Required* Consider for Telehealth	 Please Se Yes Yes Yes 	No No No				
Medications / <u>Warnings</u> No long term medications specified No medications specified No medical warnings specified	consultation Urgency	Please Se		\$			
Medical History No medical history specified	Please include all the esser Browse for Consultation N	Reason for Patient Referral: Plea se include all the essential condition specific information outlined in standard referral guidelines <u>here</u> * Browse for Consultation Notes					
Patient Information No patient name No patient ID available No date of birth	Reason for Patient Referral Other Notes (for example c						11
Referrer Information Lawrence Peterson 0401732B	Other Notes (for example c	,					1.

The button **Browse for Consultation Note** will give you access to the clinical notes in 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 medical records captured from the last six months. Or you can browse for files stored in Medical Director or in your local computer's file system.months. Or you can browse for files stored in Medical Director or in your local computer's file system.





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.

fmater health	General Surgery	- Dr C Pyke			<u>S</u> ubmit	Pre <u>v</u> iew <u>P</u> ark	Help V
Requested Information	Long Term Medic	ations 🚺					
	Date 👻	Details	Dose	Units	Instructions	0	
Attachmente / Departs	No records found	1.					
Attachments / <u>Reports</u> No reports selected No files attached	Other Medication	s ii					
	Date 👻	Details	Dose	Units	Instructions	0	
Medications / <u>W</u> arnings No long term medications	No records found.						
specified No medications specified No medical warnings specified	Medical Warnings	\$					
Medical History	Date 👻	Description			Comments	4	
No medical history specified	No records found.						
	Clinical Medicatio	on Comments					
Patient Information No patient name No patient ID available No date of birth							1.
Referrer Information Lawrence Peterson 0401732B							

7. Ensure patient and referrer information is correct

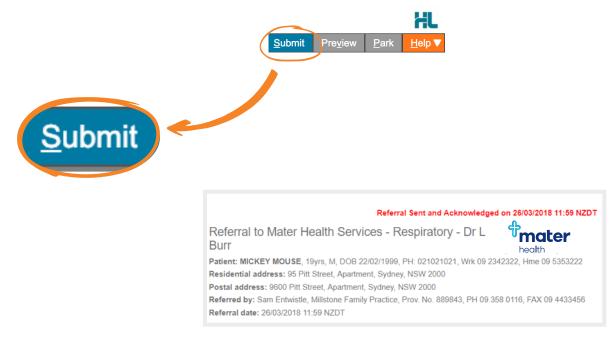
With the Patient Information and Referrer Details tabs, you simply need to ensure that the information is correct. If a piece of required information is incomplete or incorrect, the form will notify you to complete or correct it.

Please fix the following errors: • Patient Date Of Birth is	a required field
Patient Information	
Medicare Number*	Date of birth*
6288253443 1	
Medicare Expiry	IHI 🖑
DVA Number	Pension Number



8. Submit the Form

Click on **Submit** when you are ready to send your form. This will safely and securely send the form electronically via HealthLink and you will see a copy of the completed form containing an acknowledgement of receipt. If needed, you can print a copy by right-clicking on any area of the submitted forms and choosing **Print**. Note that it is not necessary for the printed copy to be sent or taken to the hospital.





Access parked forms

To access a parked form from the patient's record, select HealthLink Form's under the **View** menu. From the available listing, double-click on the parked form you would like to open.

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Start Date: 19/	06/2016 15 Provider: A		Location: All	Status: All	v
Created Date	Patient	Subject	Provider	Addressee	Status
14/09/2016	MICKEY MOUSE	Chris O'Brien Lifebouse	Dr Ross Handry	lifeteet	Darked
28/02/2017	MICKEY MOUSE	Chris O'Brien Lifehouse	Dr Ross Hendry	lifetest	Parked

You can also use this area to see previously submitted or deleted forms.

Accessing Submitted Forms

A copy of the submitted form can be found in the Correspondence out section of the patient clinical record. The entry will not display automatically in this area until you have exited and come back into the patient record. You can refresh the correspondence out section if you wish to view the sent referral straight away by pressing the F5 key on the keyboard.

📕 en	Mr Alfre 💽 📋 Idridge	
File Open Request Clinical View Utilities My Health	Necord Help	
	🔊 💠 😢 🌑 M Z 💿 🔐 🔖 Family members: 🔍 Jump Open	
Name: Alfred Charles Aldridge	D.O.B.: 24/01/1908 Age: 110 yrs Sex: Male 19m 45s	
Address: Lazy Lakes Nursing Home, 4 King St Launceston 725		
Medicare No: 5500064971 - 1 07/07 Record No.: 781	DVA No.: TX4687 Comment:	
Occupation	Tobacco: Acohol: Elte sports: Ethnicity: Advance Health Directive:	
	Advance Heath Directive:	
1 WE WARD IN		_
tem Reaction Severity Not recorded	Type Due Reason Outstanding requests 29/03/2004 There is 1 outstanding request for this patient! Preventive health 21/08/2018 Influenza vaccination is due!	
	Preventive health 21/08/2018 Vaccination against pneumococccus is due! Preventive health 21/08/2018 Vaccination against shingles should be considered!	
	There are unchecked regots for this statest	-
Expand Collapse	Add View Delete Print < Previous Next > Back to list	-
- R Mr Alfred Charles Aldridge	30	
	-	
Today's notes	Referral Sent and Acknowledged on 14/08/2018 10:50 AEST	
⊞ Past visits	Concept Surgery, Dr.O. Buke	
B Gurrent Rx	General Surgery - Dr C Pyke	
— Accupril 10mg Tablet 1 Twice a day	Encaptional People. Encaptional Gare.	
	Patient: Alfred Charles Aldridge, 110yrs, M, DOB 24/01/1908, PH: Hme 03 96781510	
Distrand 3 125mg Tablet 1 Twice a da	Residential address: 4 King St, Lazy Lakes Nursing Home, Launceston, TAS 7250	
	Postal address: same as residential address Referred by: Best Practice, Main surgery, Prov. No. 0000000Y, PH 07474015650	
	Referrad og: best Fractice, main surgery, Froz. No. 00000001, FH 07474015650 Referral date: 14/08/2018 10.50 A EST	
Normison 10mg Tablet 1 Before bed p.4	Refer to the second s	
	Clinical Referral Information	
Past restory		
	Referral Date: 14/08/2018	
🗉 🚔 Investigation reports 🛛 💡	Referral Continuation: New	
	Referral Period: 12 months	
Correspondence out	Feedback Requested: Yes	
— > 04/08/2004 Recal letter	Interpreter Required: No	
- D 14/08/2018 materfm Mater Health Se	Consider for Telehealth No consultation:	
B- Past prescriptions	Reason for Patient Referral:	
- Observations	Date: 13/08/2018 00:00 00 Examination:	
Family/Social history	General	
	BP (sitting): 130/90 BP (standing): 110/70	
7 - · · · · · · · · · · · · · · · · · ·	BP (lying): 120/80	
"urrently logged in: Dr Best Practice (Main surgery)	Pulse: 92 Regular	

HealthLink helps over 30,000 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

HealthLink Level 17, 9 Castreagh Street, Sydney NSW 2000

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