

Using MEDrefer Manager & Urgent Care Handover eForm

Sole GP

(Medical Director, Zendesk & Genie Users)

October 2019 v2

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If you have any trouble following or understanding the following instructions, please contact our Support Team on **1800 556 022 (between 9:00am – 5:00pm AEST (GMT Standard +10hours)**. If you require assistance outside these hours you can either leave a message or email <u>support@medrefer.com.au</u>.



How to Use This Guide

This guide is intended for admin staff and GPs participating in the WA Urgent Care GP pilot program. Depending on the structure of your practice, various roles may perform the tasks described within. This version of the guide focuses on practices using <u>Medical Director, Zedmed</u> <u>or Genie</u>, with a single Urgent Care GP and the support of an Admin team; if this does not describe your practice, please contact <u>urgentcare@wapha.org.au</u> who can supply you with another version more suited to your practice.

For GP or Admin Staff to Complete

Create Your Own Profile

- 1. Go to the MEDrefer website at www.medrefer.com.au
- 2. Click on Register.



3. Select your role within the practice as a GP.

Abou	t You		
What	is your role within	the practice?*	
MEDre	efer allows GPs to i	ssue referrals. Specialists and Allie	d Health Professionals can issue as well
as acc	ept referrals. We a	lso allow Practice Managers to acc	ept referrals on behalf of a Specialist or
Allied	Health Professional		
GF	Specialist	Allied Health Professional	Practice Manager/Receptionist
lame *			
les annais			
	-		
Dr			

4. Enter your name, email address and a password (minimum 6-characters). Click the Captcha box and Sign up.





5. A confirmation email will be sent to the entered email address with a link that will take you to the sign in page.



6. Enter your email address and password, then click Sign in.

Login	
Email htomas@yahoo.com	 Need Help?
Password	Forgot your password? Didn't receive confirmation instructions?

Remember me	
Sign in	

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Complete Your Practice Profile

Once you login you will enter the practice profile page.

Practice Details	
Clinic/Hospital/Practice Name *	Manager's Name
Dr Hailey Tomas	Practice or Office Manager's Name
IPI-O	Clinical Software
NEHTA Organisational Id	e.g. Best Practice, Genie etc.
Address *	
Address Line 2	
Mistlethorpe	WA 🗾 6089
Practice Phone *	Fax
08 9639 3176	08 9639 3179
Practice Email	Website
iess@mvpractice.com.au	Website

Enter all the requested details including an email address and fax number to create your practice. Click Create Practice.



Complete Your Practitioner Profile

1. Enter your practitioner details, making sure to complete all sections marked with a red asterisk (*).

You may also, if you wish, attached an electronic signature to your profile. This will automatically attach to the bottom of any referrals you create via MEDrefer Manager.

N.B. – For the signature to load to the account, it will need to be in a JPEG or PNG format.

Dr Hailey	Thomas
Gender	
Female	•
Select Your Practitioner Typ	e *
© GP	Specialist Specialist Allied Health
Qualifications	
Medical Registration *	MED0000852963
Provider Number *	
356241L	
Scanned Signature Image	

P 1800 556 022 E mail@MEDrefer.com.au 5/135 Margaret St Toowoomba Q 4350 MEDrefer Pty Ltd ABN 18143 778 545 **MEDrefer.com.au**



2. The screen will change to your personalised Dashboard. Here you will be able to create referrals and see all the referrals you have created in the past and their status.

MEDrefer ⁺ ۹	My Referrals Favourites	Hailey Tomas Dr Hailey Tomas
Search For e.g. Psychology, Dr Name etc.	near e.g. Brisbane or 4170	SEARCH
Dr Hailey Tomas REFERRAL S CREATED 0 Issued 0 Reversed	Accepted O Replied	Recent Activity View All Nothing to see here yet. This is where we'll list your recent referral activity and transactions.

3. To finish verifying your account, click on your name at the top of the screen next to the home icon.



4. This will take you to your Details pages – Practitioner Details, Practice Details, Preferences.

Practitioner Details About Specialities	About Ms Jessica Daniels
Practice Details About Availability	Ms Jessica Daniels Gender Female Qualifications
Preferences Email	Your qualifications and memberships (separate with commas) e.g. MBBS, FRACS Medical Registration AHPRA PSY0000159756



Click through each of the sections to check all details entered are correct and add any details that are missing or incomplete, such as gender, qualifications, timezone, telehealth options, languages and signature which will be automatically added to the bottom of any referrals created.

N.B. – For the signature to load to the account, it will need to be in a JPEG or PNG format.

- **5.** Once details in each section are complete, click the blue Update button before moving to the next section.
- 6. When all sections have been completed, click on the MEDrefer Logo to return to the Dashboard page or the home icon to return to the Launchpad page.





MEDrefer Manager Installation (to be completed on GPs desktop)

N.B. – If your practice runs on a **Remote Access Connection**, please see document <u>Running</u> <u>MEDrefer Manager over Remote Access Connection</u> before downloading MEDrefer Manager.

- 1. If not already logged into a GPs MEDrefer Profile, go to the MEDrefer website (<u>www.medrefer.com.au</u>) and login to it.
- 2. From the dashboard screen, click on the Home icon at the top of the screen.



3. Click on the green 'Download MEDrefer Manager for Windows' link to take you to the MEDrefer Manager page.



4. Click on the green 'Download MEDrefer Manager' link.



This may take a few minutes to complete.

5. Once the download is complete click the executable at the bottom left hand corner of the screen to launch the program.





6. When the Open File pop-up appears, click on Run.

Do you	want to ru	n this file?
	Name:	C:\Users\Anne-Marie\Downloads\setup.exe
	Publisher:	MEDrefer Pty Ltd
	Туре:	Application
	From:	C:\Users\Anne-Marie\Downloads\setup.exe
		Run Cancel
🗸 Alwa	ys ask before	opening this file
۲	While files fr potentially have	om the Internet can be useful, this file type can arm your computer. Only run software from publishers hat is the risk?

7. When the Application Install pop-up appears, click on Install.

1 4 1 1 1 1 H	23
	Ŷ
nain):	
Install	Don't Install
	main):

This may take a few minutes to complete.



8. MEDrefer Manager will appear in the bottom right-hand corner of the screen, with instructions and a red arrow to show where to click next – on the Settings icon.



9. In the Users tab, add the unique email address and password of a practitioner who has already been registered, then click Link User.

ME Dr efer*	\$ -	MEDrefer ⁺
Change Change	e your Settings	Change your Settings
Users General Message Provider		Users General Message Provider
Email Address keith+gp1@medrefer.com.au	Password	Only a single user can be added. If you need a different user, click the cross next to the current user below to remove it. If you need more than one user, please contact support (Phone 1800 556 022, Email support@medrefer.com.au).
	Link User 🕂	Dr K Gp1
	~	*



10. In the General tab, determine whether you want the eForms/referrals to be downloaded as a PDF file or a HL7 file (or both if desirable) and tick the appropriate box. Click on the ellipses (3 dots) button, to select where to download the referrals to, then click Ok.





Your setup has now been completed. Click on Home to go to the main screen.



MEDrefer Manager will reside within the taskbar (hidden or visible) and can be maximised and/or minimised as required.

*	+ 🖻 🖞 🐠	2:36 PM 13/09/2019	
		15/05/2015	





Urgent Care GP Handover eForm

Submit an Urgent Care GP Handover eForm

- **1.** Have patient file open in your EMR/PMS. The form will auto-populate from the active patient record for Best Practice, Medical Director, with Zedmed and Genie.
- **2.** Open MEDrefer Manager app from your system tray in the bottom right of Windows Desktop.



N.B. - If you have not yet installed the application, refer to <u>MEDrefer Manager Installation</u> for instructions on how to do this.

3. Click on the Submit an eForm button.





4. The Urgent Care Handover eForm will appear. Patient data will automatically complete sections of the form.

Jrgent Car	e GP Handover	Form	
	Urger	nt Care GP Handover F	Clinical Data Source (eMR) Form Ø Best Practice Connected
Patient			
Name:* Ms	Zeroch	Abbagale	
Phone:	Mobile:	Email:	
Address:* 45 To	ne Cr		
Somew	here	4350	
Patient DOB:* 02/	02/1995 Age: 24	Gender:* Female	×
Indigenous Status	Neither Aboriginal nor Torre	s Strait Islander origin	•
Employment Statu	us:* <select one=""></select>	Disability Support Pension:*	<st <b="">v</st>

N.B. - The first time you access the form, you may be presented with a prompt to authorise access to your clinical data. Click on Accept to authorise (Once authorised, you won't be prompted again).





N.B - If no patient record is open, a prompt to open a record will be shown. After opening the relevant patient record in your EMR click refresh in the eForm window to load their data to the form.

Urgent Care GP	Handover Form	
	Urgent Care GP Handover Form	Clinical Data Source (eMR)
Patient		No patient record open. retry

5. Check the form has been fully completed, adding/selecting data as required. Make sure all sections marked with a red asterisk (*) have been completed as the eForm will not send until they are.

N.B. - Appointment *end* date/time will only autofill if 'Finalise Visit' has been clicked already. If completing form during patient visit, this entry must be made manually.

6. Enter the usual GP's details, ensuring that the fax number is correct.

Name:" Title First Name Last Name	Practice Name:* Practice Name				
Email: Email	Address: Address				
		City	State	Postc	
Phone: Phone				1	
Fax:* Fax					
Irgent Care Practitioner					
Name: Dr Ann Smiley	Provider	No.: 2316	54P		
Diffull Office		2010	041		
Address: Suite 4, 15 Erin Street	Phone:				
Mt Tyson 4380	Fax: 07 9	654 2966			

7. Click Submit Form.

N.B. - If there are any compulsory sections (those marked with a red asterisk (*) that have not been completed your screen will move to the topmost section to be completed.



8. A pop-up will list receiving GPs name, clinic name and fax number. Double-check that these details are correct and click Submit eForm.

Con	firm Recipier	nt Details X
A Y y d	ou are about to submit yo ou have entered into this letails are correct before p	our patient's clinical information to the practitioner whose information form. Please make sure that their details, especially the contact proceeding.
Re	cipient Details	
	Dr Charlotte Mackenzie	
*	Midland Medical & Family Practice	
₽	08 9657 1258	
	not entered	
Sub	mit eForm	

9. A final copy of the form will appear. Click on the Download PDF button to download or print.

Form Submitte	ed	
Download PDF	lover Form	
	Urgent	: Care GP Handover Form
Patient		
Patient Name: Ms	Zeroch	Abbagale
Patient Name: Ms Phone:	Zeroch Mobile:	Abbagale Email:
Patient Name: Ms Phone: Address: 45 Tone Cr Somewhere	Zeroch Mobile:	Abbagale Email: 4350
Patient Name: Ms Phone: Address: 45 Tone Cr Somewhere Patient DOB: 02/02/1995	Zeroch Mobile: Age: 24	Abbagale Email: 4350 Gender: Female
Patient Name: Ms Phone: Address: 45 Tone Cr Somewhere Patient DOB: 02/02/1995 Indigenous Status: Neithe	Zeroch Mobile: Age: 24 r Aboriginal nor Torres Strait Islander origir	Abbagale Email: 4350 Gender: Female
Patient Name: Ms Phone: Address: 45 Tone Cr Somewhere Patient DOB: 02/02/1995 Indigenous Status: Neithe Employment Status: Full T	Zeroch Mobile: Age: 24 r Aboriginal nor Torres Strait Islander origir Fime	Abbagale Email: 4350 Gender: Female 1 Disability Support Pension: No

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View Your Sent Handover eForms

1. Click eForm Submissions.



A table of the submissions made will appear. Click on the unique 6-digit code to re-open eform to download or print again.

Past e	eForm Submissions			
Code	Patient	Recipient	eForm	Created On
0PX-M4K	Ms Zeroch Abbagale	Dr James Alexander	Urgent Care GP Handover Form	2019-10-22 15:15:40 +1000
ZJK-2D9	Mr Joe BloggsBP	Dr Hannah Mitchell	Urgent Care GP Handover Form	2019-10-22 15:59:55 +1000
Q0F-P0Z	Miss Emerald Ruby	Dr Davey Simmons	Urgent Care GP Handover Form	2019-10-22 16:11:48 +1000





Send a Test Handover Form

- 1. Create your GP profile, either through the Website or Best Practice
- 2. Install MEDrefer Manager and link your profile to the app.
- 3. Open a test/dummy patient record in your EMR.
- **4.** Access the Handover form via the MEDrefer Manager icon in your system tray (bottom right of Windows desktops).





- 5. Click 'Submit an eForm'.
- **6.** Try adding some realistic clinical information beyond that which was auto-populated from the test/dummy patient record.
- 7. For the regular GP's details, use your own practice details, including fax number.

Name:* Title First Name	Last Name	Practice N	Name:* Pr	actice Name	
Email: Email		Address:	Address		
Dhono: Dhono			City	State	Postc
Phone: Phone					
Fax:* Fax					

- **8.** Retrieve the fax and review its format this is what the usual GP will receive when you start sending real Handover Forms.
- **9.** For the Practice Manager: When all Urgent Care GPs have successfully sent a test Handover Form, please notify the WA PHA on <u>urgentcare@wapha.org.au</u>.