

# Comprehensive Guide

Sending e-Referrals  
with Best Practice &  
Integrating Medmate



**I-MED Radiology  
Network**

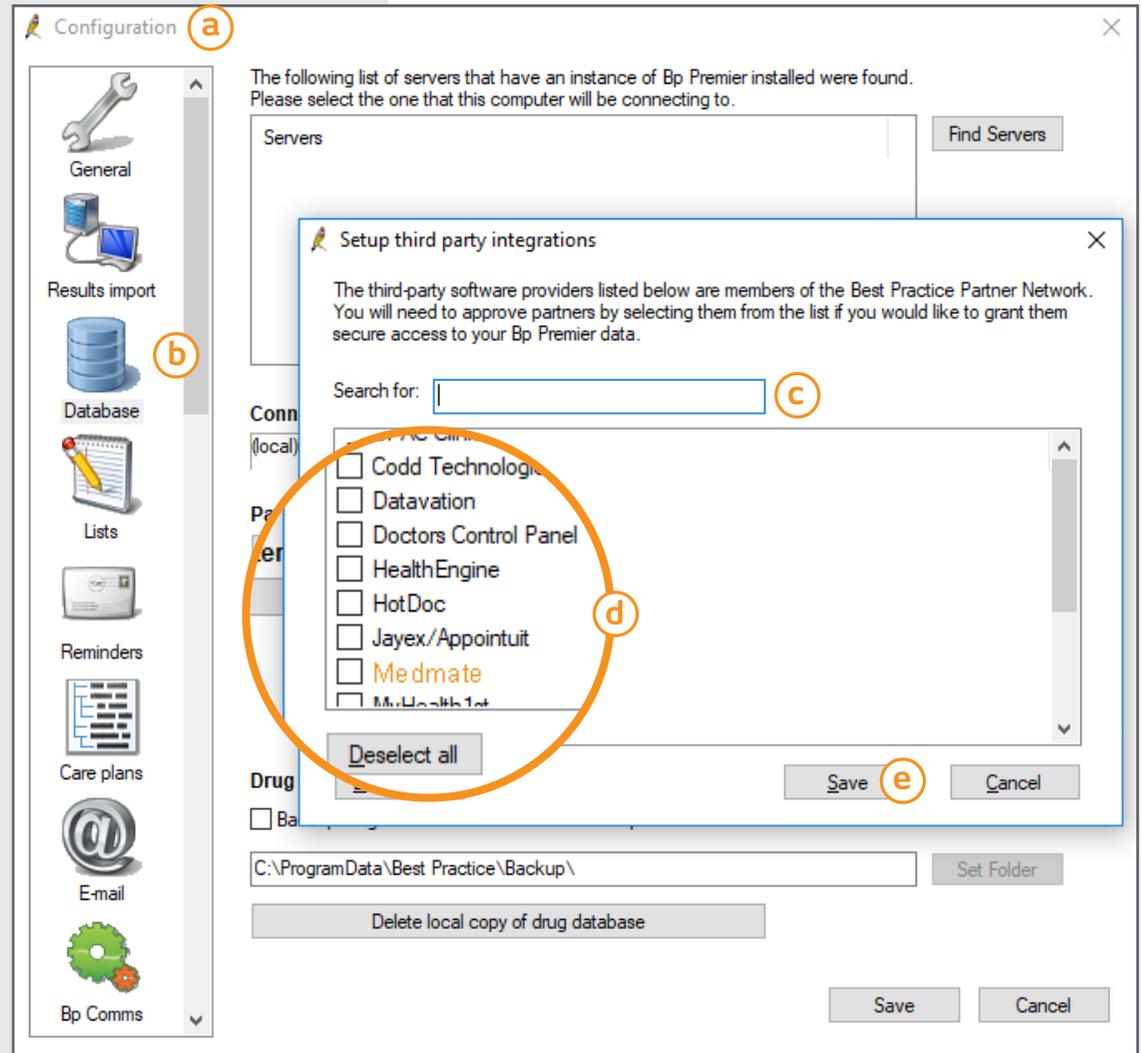
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## **Key Sections**

1. Approve Medmate as third-party integrator
2. How to send an e-Referral
3. What happens next?
4. Important things to note
5. Support

# 1. Approve Medmate as third-party integrator

- a. From the main screen navigate to **Setup > Configuration**. The Configuration window appears.
- b. Click **Database** from the left-hand menu and then the **Setup third-party integrations** button. The Setup third-party integrations window appears.
- c. Use the **Search for** text box to find the third-party provider.
- d. Check the **Medmate** box next to the third-party provider.
- e. Click **Save**. The Setup third party integrations window closes.



## 2. How to send an e-Referral

### Step 1

- Open up your Patient Record in Best Practice.
- Please make sure that the patient's record has a mobile number or an email address.
- This is so they can receive a digital copy of their request and proceed to book their appointment online (for most examinations).
- Press 'Save'.

**Edit patient**

Title: Mrs. Family name: Abbott Given name: Alan Middle name: Preferred name: Alan Date of Birth: 30/06/1945 Age: 73 yrs Sex: Female Ethnicity: Both Aboriginal and Torres Strait Islander

Health Identifier: HI Status: Medicare No. 4133180467 IRN: 1 Expiry: 12/28 Pension/HCC No.: 2 Expiry: 1/11/2018 Pension card type: Pensioner Concession Card DVA No.: Safety Net No.: Record No.: 101 Patient ID: 2 Usual doctor: Dr Frederick Findacure Deny access to other users Usual visit type: Usual account: Direct Bill

Address Line 1: 12 John St Address Line 2: City/Suburb: Woodlane Postcode: 4035 Postal Address: City/Suburb: Home phone: Mobile phone: 0400111000

Consents to: Appointments, Reminders, Clinical Comm Email: \* These name fields are used for Health ID Update address of all family members Update address of all currently at orig

Created By: Practice Created On: 11/02/2004

Address Line 1: 12 John St Address Line 2: City/Suburb: Woodlane Postcode: 4035 Postal Address: City/Suburb: Postcode: Home phone: Work phone: Mobile phone: 0400111000 Contact via: SMS

## Step 2

- Once you've returned to the patient's record, click on the 'Imaging request' icon.
- Alternatively, press the Shift + F6 keys to open the 'Imaging request' window.

Mr Test Patient

File Open Request Clinical View Utilities Settings Help

Name: Test Patient D.O.B.: 17/10/1990 Age: 31 yrs Birth Sex: Male 12m 10s Finalise

Address: 122 Anne Raod Knoxfield 3180 Phone: (m) 0475953697

Medicare No.: Record No.: Pension No.: Comment:

Occupation: Tobacco: Alcohol: Elite sports: Advance Care Direc

Blood Group:

Allergies / Adverse Drug Reactions: Reactions Notifications:

Item	Reaction	Severity	Type	Due	Reason
Not recorded			Preventive health	10/11/2021	A smoking history should be recorded!

Expand Collapse Add Edit Delete Print

Script date: 10/11/2021 Tick the boxes of the items that you want to print  
Items in red have been calculated to have been fully used Select all

Drug name	Strength	Dose	Quantity	Rpts.	Script
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Mr Test Patient  
Today's notes  
Past visits

### Step 3

- Select I-MED Radiology in the drop-down field titled, 'Laboratory'.
- Note, depending on the software version running, 'Laboratory' may appear as 'Provider'.

### Step 4

#### Enter clinical information.

- a. Select imaging modality (e.g., Plain X-ray)
- b. Select the Region (e.g., Cervical Spine).
- c. The modality and region will appear in the field 'Requests to be printed on form'.
- d. You can add any special instructions, additional clinical information or urgent requests in the free text field, 'Details to be printed on form'.

Imaging request

Request date: 8/15/2022 Laboratory: I-MED Radiology e-Referral

Plain X-Ray  
 Special X-Ray  
 Ultrasound  
 Duplex ultrasound  
 CT  
 MRI  
 Mammography  
 Bone densitometry  
 Nuclear medicine  
 User defined

Left  Right

Region  
Abdomen  
Ankle  
Cervical spine  
Chest  
Clavicle  
Coccyx  
Elbow  
Eye  
Facial Bones  
Femur  
Finger, 2nd  
Finger, 3rd

Other region: Add

Clinical details:  
? Avascular necrosis  
? Bowel obstruction  
? Cholelithiasis  
? Crush fracture  
? Discitis  
? Dislocation  
? Fracture  
? Greater trochanteric bursitis  
? Impingement syndrome

Requests to be printed on form: Plain X-ray - Chest

Other test:

Details to be printed on form: Test patient

Add an entry to the actions database Due on: 8/15/2022

Print Cancel

## Step 5

Click on 'Print' to finalise e-Referral.

## Step 6

A message box will appear that says, 'Ensure that the correct paper is in the printer'.

Click 'Ok' to send e-Referral.

The screenshot shows the 'Imaging request' application window. At the top, it displays 'Request date: 8/15/2022' and 'Laboratory: I-MED Radiology e-Referral'. The main area contains several sections: 'Plain X-Ray' (selected), 'Special X-Ray', 'Ultrasound', 'Duplex ultrasound', 'CT', 'MRI', 'Mammography', 'Bone densitom', 'Nuclear medici', and 'User defined'. There are also checkboxes for 'Left' and 'Right'. A 'Region' list includes Abdomen, Ankle, Cervical spine, Chest, and Clavicle. A 'Requests to be printed on fom:' field contains 'Plain X-ray - Chest'. A 'Clinical details:' list includes '? Avascular necrosis', '? Bowel obstruction', '? Cholelithiasis', '? Crush fracture', '? Discitis', '? Dislocation', '? Fracture', '? Greater trochanteric bursitis', and '? Impingement syndrome'. A 'Test patient:' field contains 'Test patient|'. At the bottom, there is a checkbox for 'Add an entry to the actions database', a 'Due on:' field with '8/15/2022', and 'Print' and 'Cancel' buttons. A modal dialog box is overlaid on the center, titled 'Imaging request' with a circled '6' icon. The dialog contains the text 'Ensure that the correct paper is in the printer!' and 'OK' and 'Cancel' buttons.

### 3. What happens next?

- Once you press 'Ok', your image request is encrypted and sent to us.
- The file is then generated as an image request for the Contact Centre.
- Where a mobile or email was provided, the patient will receive an SMS or email containing a link to view their e-Referral and book their appointment online where available.



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#### Patient information

Name	Callback Test	Date of Birth	01/01/1970
Email	testpatient@test.com	Gender	M
Phone	0412345678	Worker's compensation	
Address	12 John St, Woodlane NSW 2371		
Pregnancy status		Renal disease	
Contrast allergy		Diabetes metformin treatment	
Medicare number	4133180467		

Exam requested

Clinical details

#### Referring Practitioner

Name	Frederick Findacure	Provider Number	*****
Requester Number		AHPRA	
Phone	07 11122233		
Practice Name	Sorsix Test ORG		
Address			

#### Cc Doctor

Name		Provider Number	
Email		Requester Number	
Phone		AHPRA	
Practice Name			
Address			

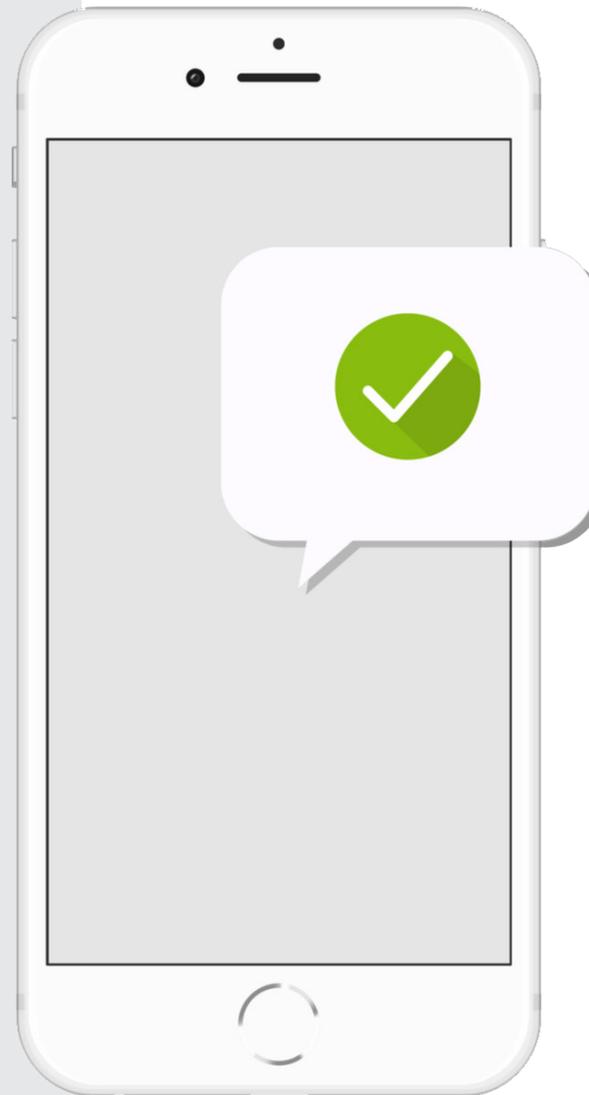
#### Signature

Name	<i>This digital referral has been submitted via an authenticated channel and is considered to be signed digitally.</i>
Date	24/03/2021

Your doctor has recommended that you use I-MED Radiology Network. You are free to choose your own diagnostic imaging provider. However, if your doctor has specified a diagnostic imaging provider on clinical grounds, a Medicare rebate will only be payable if that diagnostic imaging provider performs the service. You should discuss this with your doctor.

#### 4. Important things to note

- I-MED Radiology will notify your patients by text message (or email if mobile number is not provided) shortly after the e-referral has been sent (i.e., within 10 minutes).
- This message will include a digital copy of the imaging request and a link that integrates with I-MED's booking system, so they can arrange their appointment online (applicable for most examinations).
- Please get in touch if your patients are not receiving their text message/email confirmation.
- I-MED Radiology will make every attempt to follow-up within 48 hours if their appointment has not been scheduled.





## 5. Support

If you have difficulties setting up your I-MED Radiology e-Referrals with Best Practice, our Referrer Success Team will be happy to help.

Please download TeamViewer ([www.teamviewer.com](http://www.teamviewer.com)) so that we can assist you remotely.

Make an appointment with our Referrer Success Team by calling **1300 147 852** or emailing us at [referrer.success@i-med.com.au](mailto:referrer.success@i-med.com.au)



To support you effectively, we'll need to share your screen - please download TeamViewer before your appointment.

Visit [www.teamviewer.com](http://www.teamviewer.com)



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