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HIPS

Module Guide (UI)

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1 Introduction

1.1 Purpose

The purpose of this document is to provide a detailed view of the design of HIPS-UI Web and HIPS-Core extensions to enable the HIPS-UI Web module to support non-jurisdictional hospitals integrating with the national My Health Record System.

The intended use of this document is to help implementers understand the modules of the HIPS-UI Web product, and the user-oriented functions they provide.

1.2 Scope

This document describes the high-level architectural module and functional makeup of the HIPS-UI Web module. For details of other HIPS modules such as HIPS-Core, consult the document corresponding to that module.

1.3 Assumptions

This document assumes a high-level understanding of health information systems and the terminology used.

2 Product & Module Overview

The HIPS suite consists of the following products:

- **HIPS-Core:** A middleware and communications solution to enable a CIS (Clinical Information System) and a PAS (Patient Administration System) to interact with the national My Health Record System. The solution can interface with an Enterprise Service Bus (ESB) to receive HL7 records from the PAS systems for patient and episode information and IHI lookups, and CDA documents from clinical systems for upload to the My Health Record System. It can also be used as a broker to the My Health Record System without the need of an interface to an ESB for upload and retrieval of documents from the My Health Record System.
- **HIPS-UI:** An extension of the core services provided by the HIPS-Core product, providing a web-based user interface for fulfilling common interaction requirements with the My Health Record System, including features such as My Health Record System Viewing (including Prescriptions), Level 1A Document Uploads (HIPS-Core can support all levels and types of document uploads), My Health Record System Document Removal, My Health Record System Consent Withdrawal, Hidden Record Disclosure, Assisted Registration, HPI-I Search, and Data Integrity.

The HIPS-UI has the following key features to support healthcare facilities integrating with My Health Record:

- **Data Integrity Management**, providing a report that lists patients whose IHI was not found using automated searches with the current demographic data from the PAS. The hospital staff may use this report to identify patients whose demographic information may have been entered incorrectly and confirm their legal name, sex, date of birth and Medicare card or DVA file numbers and make corrections in the PAS.
- **Consent Management**, providing a data-entry form to capture the withdrawal of consent to upload a discharge summary to the My Health Record System. This information will be captured in the HIPS database and HIPS will prevent the upload of the discharge summary if consent has been withdrawn. Withdrawal of consent for other document types is handled in the HIPS-Core component.
- **Disclosure of Hidden Record**, providing a data-entry form to capture the disclosure of the existence of a digital health record whose existence was not automatically flagged on admission to hospital due to the restricted access settings applied to the record by the consumer.
- **Removal of Documents**, providing a capability to select a clinical document that has been uploaded to the My Health Record System by the organisation using HIPS, view the document, record the reason why the document must be removed from the My Health Record System, submit the request to HIPS to remove the document, and verify that the document has been removed successfully.
- **Patient List** provides a searchable list of patients with an advertised digital health record who are currently resident in hospital. Allows selection of a patient to view the

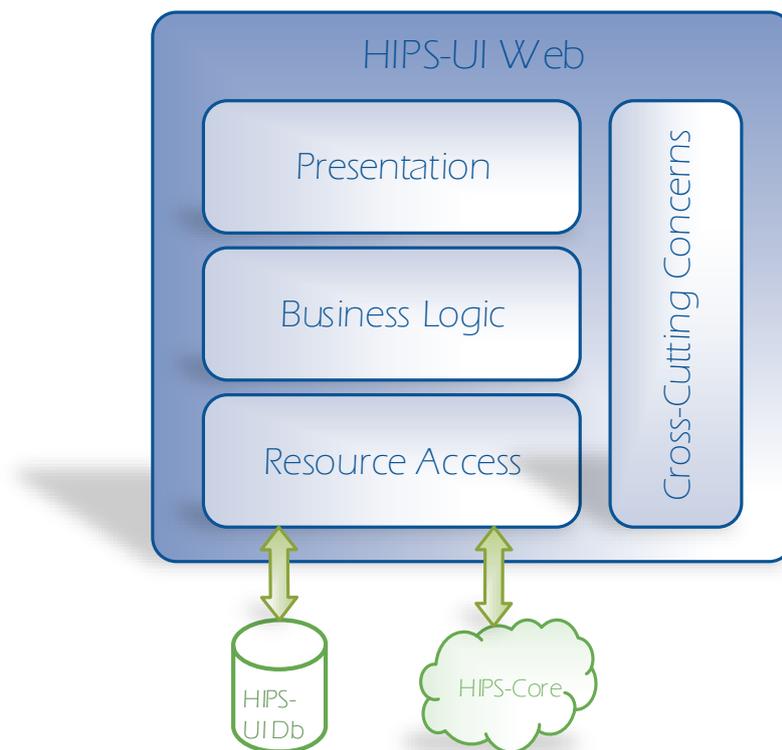
documents and views available in their digital health record via the “Patient Summary” screen.

- **Patient Summary** provides access to the Health Record Overview, Medicare Overview and the Pathology, Diagnostic Imaging and Prescription/Dispense views and the list of Other Documents as components of the screen, as well as a link to Gain Access.
- **Health Record Overview** provides information from the shared health summary and a list of recent documents for the selected patient filtered according to the user’s preferences.
- **Medicare Overview** provides a combined view of the Medicare benefits, pharmaceutical benefits, organ donation and immunisation records for the selected patient.
- **Pathology Report View** provides a list of pathology reports for the selected patient.
- **Diagnostic Imaging Report View** provides a list of imaging reports for the patient.
- **Prescription Dispense View** provides a combined view of the prescription and dispense history for the selected patient available from the NPDR.
- **Other Documents** provides a searchable list of documents available in the selected patient’s digital health record and allows selection of a document to view its contents via the “Document View” screen.
- **Document View** is accessed when a document is selected in a view or list. It provides a rendered view of the selected document’s contents.
- **My Health Record Access Check & Gain Access** checks the current access to the selected patient’s digital health record and if required enables the user to gain access to the selected patient’s digital health record either (a) without code; (b) with code or (c) emergency access.
- **Local Provider Management**, providing an interface to list Local Providers, create or update Local Providers and Activate or Deactivate Local Providers, and to search or validate HPI-I’s for Local Providers.

3 Architectural Detail

3.1 Architecture Overview

The HIPS-UI Web product is architected as a layered web application built with Microsoft technologies, illustrated below.



The layers in the application architecture are:

Layer	Description
Presentation	Provides a web browser based graphical user interface with which users of the application interact.
Business Logic	Encapsulates the business rules, validation, and business processes for the application.
Resource Access	Provides access to external resources such as databases and web services.
Cross-Cutting Concerns	Supports elements of the application architecture that are common requirements across application layers and tiers.
Resources	External resources such as databases and web services with which the application interacts.

The HIPS-UI Web product is built upon the following technology platform:

Role	Technology
Core	
Presentation	ASP.NET MVC 4.0 HTML 5.0 CSS 3.0 Javascript, JSON Bootstrap DataTables jQuery
Business Logic	.NET Framework 4.5.1
Resource Access	Entity Framework 6.1 (database) WCF 4.5 (web services)
Cross-Cutting Concerns	
Configuration	System.Configuration
Security	Active Directory MVC Authorization
Exception Management	IIS 7 Error Handling
Logging & Instrumentation	ELMAH.MVC
Caching	System.Runtime.Caching.MemoryCache
Validation	System.ComponentModel.DataAnnotations
Object Mapping	AutoMapper
Dependency Injection	Ninject
Shared Logic	.NET Framework 4.5.1
Object Serialization	Json.NET

Note: The X-Frame-Options HTTP response header indicates whether or not a browser should be allowed to render a page in a <frame>, <iframe> or <object>. The X-Frame-Options are not used in the HIPS-UI Web product because it has been designed to be embedded within other applications.

3.2 Functions & Navigation

Navigation is done either through the HIPS-UI menu or direct via the embedded pages. Section 3.3 describes the embedded pages.

3.2.1 Home

The “Home” screen is the entry point into the HIPS-UI Web product. It provides a “Clinical Documentation” menu item, “Healthcare Identifiers” and “My Health Record Registration”.

The screenshot shows the HIPS-UI Home page. At the top right, it says "Logged in as hips test1 on behalf of All Facilities" next to a user icon. The main navigation bar includes "Home", "Healthcare Identifiers", "My Health Record Registration", "Clinical Documentation", and "Patient". Below this is a large image of a doctor's face. Underneath the image are four columns of menu items: "Healthcare Identifiers", "My Health Record Registration", "Clinical Documentation", and "Patient". At the bottom right is the "My Health Record" logo with "Privacy Policy | Version 7.0.0".

Callout Boxes:

- “Health Identifiers” menu includes Patients Without IHI, HII-I Validation and Search, Local Providers [and Overridden Demographics](#).**
- “My Health Record Registration” menu allows access to Register Current Patients, New Adult, New Child and Disclose Hidden Record**
- “Clinical Documentation” menu allows access to View Digital Health Record, Withdraw Consent, Remove Document, Discharge Summary**
- “Patient” menu allows access to Advanced Search**
- User Preference Menu. This includes Account setting for Clinical Document Preferences and Log out button.**
- Public version number. Tooltip displays internal version number.**
- Shortcut links**

Menu Item Lists:

- Healthcare Identifiers**
 - Patients Without IHI
 - HPI-I Validation
 - HPI-I Search
 - Local Providers
 - Overridden Demographics
- My Health Record Registration**
 - Register Current Patients
 - Register New Adult
 - Register New Child
 - Disclose Hidden Record
- Clinical Documentation**
 - View My Health Record
 - Withdraw Consent
 - Remove Document
 - Discharge Summary
- Patient**
 - Advanced Search

3.2.2 Patient List

The annotated image below illustrates the functional design for the “Patient List” screen accessed via the “Clinical Documentation” menu item on the “Home” screen.

Patients at All Facilities

No episode type filters have been applied.

Search: Type to search...

Showing 1 to 10 of 18 entries

Name	Date of Birth	Episode Type	Location	MRN	IHI	
BALLARD, RODNEY	18-May-1993	Emergency	RCH:MED::	000000115	8003 6081 6672 7826	[View Patient Summary]
BARRETT, SAM	22-Feb-1983	Emergency	RCH:MED::	000000139	8003 6086 6672 7854	[View Patient Summary]
BATES, ARRABELLA	26-Dec-1977	Inpatient	RCH:MED:R2:B2	000000137	8003 6083 3339 5192	[View Patient Summary]
BOYER, SILAS	17-Oct-1975	Inpatient	RCH:MED:R7:B7	000000131	8003 6081 6672 7867	[View Patient Summary]
BUNN, JAQUIE	18-Mar-1969	Emergency	RCH:MED::	000000138	8003 6085 0006 2245	[View Patient Summary]
CANNON, KAMAHL	15-Apr-1993	Registered	REH	000000101	8003 6088 3339 5338	[View Patient Summary]
CONRAD, ARISTOTLE	28-Oct-1986	Pre-admit	RCH:MED::	000000117	8003 6085 0006 2211	[View Patient Summary]
CROWELL, ROD	15-Oct-1971	Inpatient	RCH:MED:R22:B22	000000128	8003 6086 6672 7839	[View Patient Summary]
DUNCAN, LEN	25-Aug-1966	Inpatient	RCH:MED:R12:B12	000000114	8003 6081 6672 7818	[View Patient Summary]
EVERETT, BERNHARDT	23-Feb-1968	Pre-admit	RCH:MED::	000000120	8003 6085 0006 2229	[View Patient Summary]

Showing 1 to 10 of 18 entries

Lookup by MRN: * Hospital: [MRN] [Select a hospital] [Lookup/Register]

Summary of matching results.

Display format for IHI: nnnn nnnn nnnn nnnn

Paging of results. Page size: 10.

View Patient Summary button displays "Patient Summary" screen for selected patient.

Filtering based on partial match of contents of any text-based column in results.

Displays the Episode Type filter selection from User Preference.

Select "Show My Pinned Patients" to view user's pinned patients only.

Select "Show All Current Patients" to view all current patients.

Title to be "Patients at <Hospital Name>".

Results to display: Name, Date of Birth, Episode Type, Location (Ward, Room, Bed), MRN, IHI.

Sorting of results (asc / desc). Default sort: Name, Date of Birth.

Results contain patients who have an advertised PCEHR and are currently resident in hospital. Results **do not** contain patients with any current alerts.

Definition of "current" to allow for configurable window of discharge – eg not discharged, or discharged within x days of current date, after service per pre-admission.

Results contain patients who have an advertised PCEHR and are currently resident in hospital. Results **do not** contain patients with any current alerts.

Select ☆ to pin a patient and ☆ to unpin a patient.

Summary of matching results.

To search for a patient by MRN, insert the patient's MRN in the MRN textbox and select a hospital then click on the Lookup/Register button.

3.2.3 Lookup By MRN

In View My Health Record page, insert the patient's MRN in the MRN textbox and click on the Lookup/Register button at the bottom of the grid. If a patient is found via the Lookup by MRN against a hospital that has registration enabled but does not have a valid IHI then the View My Health Record button is not displayed but an Update Registration button will be displayed. Otherwise, a Register button will be displayed if the facility allows registration and no patient could be found with the specified MRN.

🔍 Patients at Royal Expose Hospital

ⓘ There is no registered patient with this MRN. Select Register button to register a new patient.

No episode type filters have been applied.

Lookup by MRN: * Hospital: *

000000201 Royal Expose Hospital (DHSIT) ▾

Select Register button to register a new patient.

3.2.4 Register/Update Patient

Register patient allows a user to register a new patient to a specific hospital and update patient allow user to update existing patient registration details.

Register Patient at Royal Expose Hospital
× Close

📌 Patient is successfully saved.

📌 My Health Record found

Patient Details

Family Name *

Given Name(s) *

Sex *

Date of Birth *

Individual Identifier *

Medicare Number

DVA File Number

MRN

IHI

IHI Status

Record Status

View My Health Record
× Close

IHI details will appear after patient is saved.

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3.2.1 Advanced Search

Advanced search allows a user to search for patients and episodes using a range of criteria. Search results are displayed for any matching patients and episodes, with individual search results providing a set of actions applicable to that result (dependent on user authorisation).

Page Title

Search criteria: Hospital, Given Names, Surname, Sex, MRN, IHI, Enterprise ID, Medicare Number, DVA Number, Date of Birth, Episode Type, Status, Ward, In Hospital?, With Valid IHI?, With MyHR?

In Hospital?: Not Specified, Currently in hospital, All. With Valid IHI?: Not Specified, Yes, No. With MyHR?: Not Specified, Yes, No.

Executes search.

Sorting of results. Default sort: Name, Date of Birth.

Results

Showing 1 to 1 of 1 entries

Name	Date of Birth	Episode Type	Hospital	MRN	IHI	Location	Actions
Lee, Shaun	14-Mar-1979	Inpatient	Royal Chamonix Hospital	2950355981	8003 6081 6669 0511	MED::	<ul style="list-style-type: none"> Consent Disclosure Document Upload View MyHR Documents

Showing 1 to 1 of 1 entries

Results display Name, Date of Birth, Episode Type, Hospital, MRN, IHI and Location

Summary of matching results.

Paging of results. Page size: 10

Actions:

- Consent
- Disclosure
- Document Upload
- View MyHR
- Documents

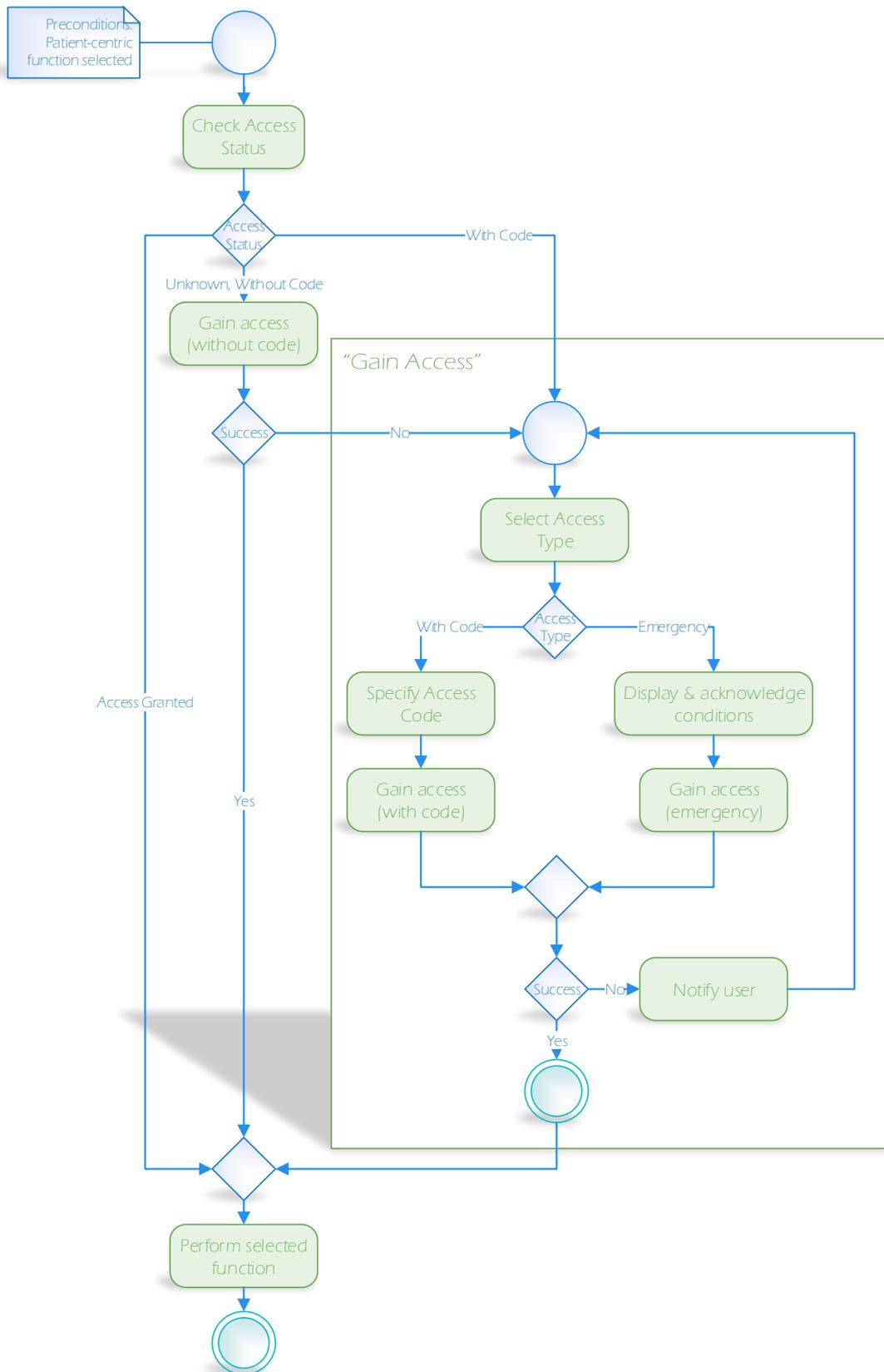
3.2.2 My Health Record Access Check & Gain Access

The “My Health Record Access Check & Gain Access” capability enforces only appropriately authorised access to patient information available within the My Health Record System. It does this by providing two key components:

The “My Health Record Access Check” is used to protect any patient-centric function or capability where interaction with the My Health Record System for that patient is required. It ensures that a check is made for the access of the current HPI-O (via the selected hospital) and takes steps to prevent a user at that HPI-O from accessing information in a patient’s My Health Record without appropriate access if required.

The “Gain Access” screen supports a user explicitly requesting access to a patient’s My Health Record, either through the “with code” or “emergency” gain access functions supported by the My Health Record System.

The diagram below illustrates the logical activities required to support the My Health Record Access Check & Gain Access capability:



The key activities and decisions are:

Activity / Decision	Description	Notes
Check Access Status	Checks the status of access for the current HPI-O (via the selected hospital) to a patient's digital health record.	Via HIPS-Core service PCEHRService.IsPcehrAdvertised
Access Status = "Access Granted"	The HPI-O already has access to the patient's digital health record, so proceed directly to the originally selected patient-centric function.	
Access Status = "Unknown" or "Without Code"	The access status is either unknown or the HPI-O does not already have access to the patient's digital health record, but the My Health Record System has indicated that access can be gained without code.	In either case, attempt to gain access without code.
Gain access (without code)	Automatically gain access to the patient's digital health record without a code.	Via HIPS-Core service PCEHRService.GainAccessWithoutCode
Success	For gain access (without code). In the case of success, proceed to the originally selected patient-centric function. In the case of failure, redirect to the "Gain Access" container to attempt to explicitly gain access through another access mechanism.	
Access Status = "With Code"	The HPI-O does not already have access to the patient's digital health record, and the My Health Record System has indicated that access can be gained with a code if required.	
"Gain Access"	Logical container that is executed as part of the overall "Digital Health Record Access Check" when the patient's access status is "With Code", when access cannot be obtained automatically, or when a user explicitly navigates to the "Gain Access" screen.	
Select Access Type	Provides options for gaining access to the patient's digital health record using "with code" or "emergency".	
Access Type = "With Code"	The user chooses to enter an access code provided by the patient to gain access to their Digital Health Record.	Must conform to "CIS Connecting to the PCEHR System" conformance requirement 019048 "Ability to submit provider access consent codes (PACC or PACCX)".
Specify Access Code	The user enters the access code provided by the patient.	
Gain access (with code)	Gain access to the patient's digital health record using the access code provided by the patient.	Via the HIPS-Core service PCEHRService.GainAccessWithCode

Activity / Decision	Description	Notes
Access Type = "Emergency"	The user chooses to request emergency access to the patient's digital health record.	Must conform to "CIS Connecting to the PCEHR System" conformance requirement 019116 "Conditions of emergency access".
Display & acknowledge conditions	Display the conditions specified as part of conformance requirement 019116 and ensure they are acknowledged by the user.	
Gain access (emergency)	Gain emergency access to the patient's digital health record.	Via the HIPS-Core service PCEHRService.GainAccessEmergency
Success	<p>For gain access (with code) or gain access (emergency).</p> <p>In the case of success, proceed to the originally selected patient-centric function.</p> <p>In the case of failure, notify the user of the failure condition then redirect to the start of the "Gain Access" container to allow retry.</p>	

The annotated image below illustrates the functional design for the “Gain Access” screen accessed via the “Gain Access” button on the “Patient Summary” screen for a selected patient.

Ability to navigate back to “Patient List” or “Patient Summary” screens

Title to be “Gain Access for <Patient Name>”.

Section for gaining access “with code”. Supports “CIS Connecting to the PCEHR System” conformance requirement 019048.

Explanatory text.

Field for entering access code.

Section for gaining “emergency” access.

Required conditions. Supports “CIS Connecting to the PCEHR System” conformance requirement 019116.

“I understand...” button acknowledges conditions and attempts to gain “emergency” access.

Display reason for being redirected (if relevant). Display error information (not shown).

“Submit Code” button attempts to gain access “with code” using the access code specified.

Upon successfully gaining access, automatically redirect to originally selected function or screen. Upon failure, redisplay screen including error information.

3.2.3 Health Record Overview

The annotated image below illustrates the “Health Record View” screen which is served as home screen of the patient summary of selected patient.

The screenshot shows a patient's profile for **BANKS, KENT 27-Mar-1969 Male 000000101**. The page includes navigation tabs for **Health Record Overview**, **Medicare Overview**, **Pathology**, **Diagnostic Imaging**, **Prescription & Dispense**, **Medicines**, and **Others**. A blue button for **Update Registration** is located next to the patient name, and a **Gain Access** button is next to a star icon. A blue box on the right states: **Advance Care Directive Custodian details are available**.

The main content area features a light blue informational box: **This is not a complete view of the individual's health information. For more information about the individual's health record or data, please consult the individual or other healthcare professional as needed.**

Below this is a list of document categories:

- Documents available on the My Health Record since the last Shared Health Summary** (13 Items)
- Shared Health Summary 04-Mar-2016 20:21**
- All Shared Health Summary documents** (13 Items)
- Documents available on the My Health Record in the last 12 months** (1 Item)

Callout boxes provide the following explanations:

- Page title displays patient details for quick identification.** (Points to the patient name)
- "Update Registration" button allows user to update patient details.** (Points to the Update Registration button)
- "Gain Access" button provides access to "Gain Access" screen for selected patient.** (Points to the Gain Access button)
- Select ☆ to pin a patient and ★ to unpin a patient.** (Points to the star icon)
- My health record statement** (Points to the top left of the main content area)
- Expandable section that shows available documents since the last Shared Health Summary for the selected patient.** (Points to the first document category)
- Shared Health Summary details for the selected patient** (Points to the second document category)
- ACDC button: only displays if the patient has an Advance Care Directive Custodian details available.** (Points to the ACDC button)
- All Shared Health Summary documents are included in this section** (Points to the third document category)
- Available documents from the last 12 months** (Points to the fourth document category)

The annotated images below show the details of expanded sections for Health Record Overview.

BANKS, KENT 27-Mar-1969 Male 000000101 Update Registration Gain Access ★

Health Record Overview Medicare Overview Pathology Diagnostic Imaging Prescription & Dispense Medicines Others

Health Record Overview Advance Care Directive Custodian details are available

This is not a complete view of the individual's health information. For more information about the individual's health record or data, please consult the individual or other healthcare professional as needed.

Documents available on the My Health Record since the last Shared Health Summary **10 Items**

No filters have been applied.

Show Event Summaries Only (with Clinical Synopsis if available)

Search: Type to search... First Previous 1 2 Next Last

Showing 1 to 10 of 13 entries

Document Date	Document Type	Author Name	Author Role	Organisation Name	
07-Jun-2018	Discharge Summary	ADRIAN GRIGNON	General Medical Practitioner	DHSITESTORGD46	 
14-Sep-2016	Event Summary	Dr. Susan Brown	General Medical Practitioner 20160914143546+1000	SVT test	 
14-Sep-2016	Advance Care Planning Document	Dr. Ken Jordon	Intensive Care Specialist	SVT test	 
24-Mar-2016	Advance Care Planning Document	KENT BANKS	Not Available	National Consumer Portal	 
08-Mar-2016	Discharge Summary	Simon Biber	Diagnostic and Interventional Radiologist	DHSITESTORGD46	 
04-Mar-2016	Advance Care Planning Document	KENT BANKS	Not Available	National Consumer Portal	 

Showing 1 to 10 of 13 entries First Previous 1 2 Next Last

Shared Health Summary 04-Mar-2016 20:21

All Shared Health Summary documents **13 Items**

Documents available on the My Health Record in the last 12 months **1 Item**

The details about applied filter such as excluded document types or user time preferences settings

Filter icon and button: indicates to the user a filter has been applied and text to show what the filter is. The filter is based on used preferences

User can search through the tables for any keyword within the columns

By selecting this checkbox, the table shows only event summaries

Expand button: only display for Event Summary document types, when clicked will expand the row below to display the Clinical Synopsis.

View documents button: displayed for all documents, when clicked will open the CDA source document rendered using the Agency generic style sheet.

New document icon shows the document is new based on user preferences settings.

← **BANKS, KENT 27-Mar-1969 Male 000000101** Update Registration Gain Access ★

Health Record Overview Medicine Overview Pathology Diagnostic Imaging Prescription & Dispense Medicines Others

Health Record Overview Advance Care Directive: Custodian details are available

This is not a complete view of the individual's health information. For more information about the individual's health record or data, please consult the individual or other healthcare professional as needed.

Documents available on the My Health Record since the last Shared Health Summary **10 Items**

Shared Health Summary 04-Mar-2016 20:21

Author Name	Organisation Name	Address	Phone	Email
Dr. Susan Brown	SVT Text	123 Corbetta St, MAUNSON ACT 2007	0400000000	Susan.Brown@hotmail.com

Allergies and Adverse Reactions **4 Items**

Substance/Agent	Reactions for that Substance/Agent	Reaction type
Prozac allergy	• Vomiting, Rash (moderate)	
Penicillin allergy	• Urticaria	
Tramadol	• Delirium	
Morphine	• Vomiting	

Medicines **2 Items**

Medication	Directions	Clinical Indication	Comment
Lipitor 40mg	One tablet daily		
Zofran 4mg	One tablet daily		

Current and Past Medical History **6 Items**

Description	Onset	Resolved	Comment
Problem Diagnosis 3 Items			
Breast Cancer		04-Jun-2013	
Fertility Treatment		01-Apr-2013	
Out of order partial date test		01-May-2013	

Immunisations **4 Items**

Administered	Vaccine name	Sequence
2014-10-31	Flu vaccination (Comux)	
2014-05-28	Gardasil	
2014-05-27	Avaxim	
2014-05-28	Acelfulor DTP	

Shared Health Summary

Expandable details about Allergies and Adverse Reactions, Medicines, Current and Past Medical History and Immunisations

Sorting icon that can sort the table based on the selected column header

Number of items included in each section.

3.2.4 Medicare Overview

The annotated image below illustrates the functional design for the “Medicare Overview” screen accessed via “Patient Summary” page.

Annotations:

- "Medicare Overview"
- Date the view was downloaded from the My Health Record System.
- Any links rendered in the CDA document will retrieve the clinical document from the My Health Record System and render the clinical document using the Agency generic stylesheet.
- Administrative details section which shows the details related to patient, author and clinical document details.
- Prints the current view page
- Date Range: Result view can be updated by selected "From" dates.
- Patient information and "Medicare Overview" details.

3.2.5 Pathology Report View

The annotated image below illustrates the functional design for the “Pathology Report View” screen accessed via “Patient Summary”.

“Pathology Report View”

← CANNON, KAMAHL 15-Apr-1993 Male 000000101

Update Registration | Print | Gain Access

Health Record Overview | Medicare Overview | **Pathology** | Diagnostic Imaging | Prescription & Dispense | Medicines | Others

Pathology Report View

This is not a complete view of the individual's health information. For more information about the individual's health record or data, please consult the individual or other healthcare professional as needed.

From * 07/11/2016 To 07/11/2018 View

Group results by Organisation

Q Search: Type to search...

Showing 1 to 188 of 188 entries

Specimen Collection	Report Date	Requesting Organisation	Pathology Discipline	Test Result Name	
Burrill Lake Medical					
Oz Health Clinic					
05-Dec-2017	05-Dec-2017		Radiology	Abdomen / Pelvis +(IV)CCT	
Specimen Collection	Report Date	Requesting Organisation	Pathology Discipline	Test Result Name	

Showing 1 to 188 of 188 entries

Print button: opens up print view in a modal dialog.

Result view can be updated by selected dates.

This checkbox groups the documents listing by organisations. If not selected, the results are shown based on Specimen Collection Date.

Link to CDA source button. When clicked will open the source document and render it using the Agency generic stylesheet.

Search the table and shows the corresponding row.

Sorting the results based on selected sorting button.

Name of reporting organisations which the results are grouped by.

3.2.6 Diagnostic Imaging Report View

The annotated image below illustrates the functional design for the “Diagnostic Imaging Report”. This view is accessible from “Patient Summary”.

The screenshot shows the 'Diagnostic Imaging Report View' for patient CANNON, KAMAHL, 15-Apr-1993 Male, ID 000000101. The interface includes a navigation menu with 'Diagnostic Imaging' selected, and buttons for 'Update Registration', 'Print', and 'Gain Access'. A 'View' button is used to filter results by date (From: 07/11/2016, To: 07/11/2018) and a checkbox 'Group results by Organisation' is checked. A table lists imaging entries with columns for Imaging Date, Examination, Modality, Anatomical Region, Anatomical Location, and Laterality. Callout boxes provide details on the print button, date filters, search, sorting, and the 'Group results by Organisation' checkbox.

“Diagnostic Imaging Report View”

Print button: opens up print view in a modal dialog.

Result view can be updated by selected dates.

Search the table and shows the corresponding row.

Sorting the results based on selected sorting button.

Name of reporting organisations which the results are grouped by.

This checkbox groups the documents listing by organisations. If not selected, the results are shown based on Imaging Date.

Imaging Date	Examination	Modality	Anatomical Region	Anatomical Location	Laterality
Burrill Lake Medical					
Oz Health Clinic					
09-Sep-2018	Joint Ultrasound	US		NoInformation	
09-Sep-2018	X-ray of right ankle	CR		NoInformation	
12-Aug-2018	CT Scan of Right Foot	CT Scan		NoInformation	
12-Aug-2018	X-ray of right ankle	CR		NoInformation	
12-Aug-2018	Joint Ultrasound	US		NoInformation	

3.2.7 Prescription Dispense View

The annotated image below illustrates the functional design for the “Prescription Dispense View” component of the “Patient Summary” screen for a specific patient.

The screenshot shows the 'Prescription Dispense View' for patient LEE, Shaun (15-Mar-1979, Male, 000MOV001). The interface includes a navigation bar with tabs for Health Record Overview, Medicare Overview, Pathology, Diagnostic Imaging, Prescription & Dispense (selected), Medicines, and Others. A date range filter is set from 04/08/2014 to 04/08/2016, and the 'Group By' dropdown is set to 'Prescription'. A blue notification bar indicates the document was downloaded from the My Health Record system on 4-Aug-2016 at 16:52:09:30. The main content area is titled 'Prescription and Dispense View' and is grouped by 'Prescription' from 3-Aug-2014 to 4-Aug-2016. It displays patient information (SHAUN LEE, DoB 15-Mar-1979 (37y), SEX Male, IHI 8003 6081 6669 0511) and a table of prescriptions. The table has columns for Prescribed, Medicine Details, First Dispense, Last Dispense, and Dispensed. Three rows are shown, with the second row expanded to show 'Therapeutic Good Generic Name' and other details. Below the table is an 'ADMINISTRATIVE DETAILS' section with fields for Patient Name, Sex, Indigenous Status, Date of Birth, IHI, Postal Address, Author Device Name, and Clinical Document Details (Document Type, Creation Date/Time, Date/Time Attested, Document ID, Document Version, Completion Code). A yellow 'END' bar is at the bottom. Annotations explain that the result view can be updated by selected dates, the date and time of document download is displayed, clicking header rows expands and contracts nested detail rows, the administrative details section shows patient, author, and clinical document details, a drop-down selector refreshes the document to group by different field properties supported by Agency XSLT, warnings are displayed if any are returned from My Health Record System, and document links redirect the browser to view the requested document.

3.2.8 Medicines View

The annotated image below illustrates the functional design for the “Medicines View” component of the “Patient Summary” screen for a specific patient. Note that the logo image is not included in the Medicines View, which in some cases may result in broken logo links. This is by design.

Page title displays patient details for quick identification.

"Medicines View"

Display date & time document was downloaded from My Health Record System.

Rendered Medicines View document using default CDA stylesheet. Any hyperlinks within the document should be displayed

Administrative Details section which shows the details related to patient, author and clinical document details.

Print button: opens up print view in a modal dialog.

Page Title: CANNON, KAMAHL 15-Apr-1993 Male 00000101

Medicines View: Downloaded on 7-Nov-2018 8:58+10:30

Available medicines in this My Health Record - sorted by Date
7 Nov 2018
KAMAHL CANNON DOB: 15 Apr 1993 (25y) SEX: Male PH: 6003 6088 3339 5338

My Health Record
Available medicines in this My Health Record - sorted by Date

View generated on 07-Nov-2018 10:38 for medicines, allergy and adverse reactions found in this record.

Source/Author	Date	Medicine	Brand	Dose/Directions
Healthcare Service by 000181230206	20-Mar-2018 (7 months ago)	penicillin (allergy)	Penicillin	1 tablet once daily
Healthcare Service by 000181230206	22-May-2015 (3 years ago)	Penicillin (allergy)	Penicillin	1 tablet once daily
Healthcare Service by 000181230206	22-May-2015 (3 years ago)	Fluoxetine (disorder)	Fluoxetine	20mg once daily

Administrative Observations

Source/Author	Date	Medicine	Brand	Dose/Directions
Healthcare Service by 000181230206	20-Mar-2018 (7 months ago)	penicillin (allergy)	Penicillin	1 tablet once daily
Healthcare Service by 000181230206	22-May-2015 (3 years ago)	Penicillin (allergy)	Penicillin	1 tablet once daily
Healthcare Service by 000181230206	22-May-2015 (3 years ago)	Fluoxetine (disorder)	Fluoxetine	20mg once daily

Administrative Details

Field	Value	Field	Value
Author	KAMAHL CANNON	Author	Device Name: My Health Record
Site	HHS	Document Type	Medicines View
Indigenous Status	Aboriginal but not Torres Strait Islander origin	Creation Date/Time	7 Nov 2018 10:38+10:00
Date of Birth (UI)	15 Apr 1993 (25y)	Date/Time Attached	Not Provided
Address	8002 OROKEA ST, OROKEA, ACT, 2904	Document ID	2.25.2463100000000403974170300
		Document Version	1
		Completion Code	Final

3.2.9 Other Documents

The annotated image below illustrates the functional design for the “Other Documents” component of the “Patient Summary” screen for a specific patient.

Annotations:

- Page title displays patient details for quick identification.
- “Other Documents”
- My health record statement
- Search the table and shows the corresponding row.
- Sorting the results based on selected sorting button.
- Name of document type which the results are grouped by them.
- “Gain Access” button provides access to “Gain Access” screen for selected patient.
- Result view can be updated by selected dates.
- Link to CDA source button. When clicked will open the source document and render it using the Agency generic stylesheet.

Table Data:

Creation Date	Organisation	Author	Service Start	Service End
Advance Care Planning Document				
14-Sep-2016	SVT test	Jordon , Ken		
Discharge Summary				
e-Referral				
Event Summary				

3.2.10 Document View

The annotated image below illustrates the functional design for the "Document View" screen accessed via the "View Document" button in the "Document List" component for a selected document, or from the "document" link on the "Prescription Dispense View" component.

The screenshot shows a web interface for a document titled "Discharge Summary for LEE, Shaun 15-Mar-1979 Male 000MOV001". The document content includes patient information (SHAUN LEE, DoB 15 Mar 1979, SEX Male, IHI 8003 6081 6669 0511, MRN 2007656), hospital name (Royal Darwin Hospital), author (Dr. Adrian Grignon), and discharge details. A "Document Content" section lists recipients: C.A.T.S. The *Patient (unlisted) and Ms Megan Baldick (Royal Darwin Hospital) (unlisted). The document is dated 3 Jun 2016 and was downloaded from the My Health Record system on 8-Jul-2016 at 16:10+09:30. Annotations describe the UI elements: a modal pop-up for document selection, a title format, HTML content display, a download timestamp, a share button for URL generation, a print button for a printable view, a close button for the modal, embedded image display, and a link for attachments.

Display as modal "pop-up" when a document is selected.

Title to be "<Document Class> for <Patient Name>".

Display document contents as HTML generated from XML source using provided Agency XSLT & CSS.

Downloaded from the My Health Record system on 8-Jul-2016 16:10+09:30.

Share Print Close

"Close" button closes modal pop-up.

"Print" button displays separate window containing a printable view of the document.

"Share" button provides URL for "Document View".

Embedded images will display here.

Link to included attachments (not shown).

Display date & time document was downloaded from My Health Record System.

Display warnings associated with document if returned from PCEHR (not shown). For demographic mismatch warnings, format as (example): "This document and the local patient record have a Different Sex and Different DOB and Different Family Name".

3.2.11 User Preferences

The annotated image below illustrates the functional design for the “User Preferences” screen accessed via the “User Logo” item on the “Home” screen.

User Preferences

Patient List Episode Types Display
You can set your Episode Types filter on the Patient Lists for View My Health Record:

Inpatient Emergency Outpatient Pre-admit

Health Record Overview
You can set your User Preferences to customise how the Health Record Overview is displayed:

New Documents
The ⓘ icon will appear next to New Documents, which are:

- Since patient's last visit
- Since last SHS uploaded by your organisation
- In the past months.

Document Filter
When the Document Filter ▼ is applied to the Health Record Overview, only ⓘ New Documents will be displayed, and only for the following selected document types:

- Advance Care Planning Document
- Discharge Summary
- eReferral
- Event Summary
- Personal Health Summary
- Specialist Letter

Buttons: Reset to Default, Save, Cancel

Callouts:

- Title to be "User Preferences".
- Patient Episode Types to be displayed on the View My Health Record Patient List.
- Time Preferences: The user sets the option to identify the documents as new.
- This option requires a valid number of months as input.
- The document types selection. User can include/exclude the document types that are displayed in Health Record Overview.
- This button resets the settings to default values.
- This button saves the user preferences settings.
- Cancel the current unsaved modifications.

3.2.12 Current Patient List

The annotated image below illustrates the functional design for the “Register Current Patients” screen accessed via the “Register Current Patients” menu item on the “Home” screen.

Register Current Patients

Search [Type to search...]

Name	Date of Birth	Location	IHI	Actions
BANGSUND, KATHY	06/01/1954	W4:R11:	8003 6088 3339 7644	[Person icon]
COLVILLE, WYATT	31/01/1955	W0:R19:	8003 6088 3339 1083	[Person icon]
DACRI, CRISTEN	26/04/1979	W0:R9:	8003 6088 3339 0701	[Person icon]
DREA, KENNETH	23/01/1999	W0:R18:	8003 6088 3339 5517	[Person icon] [Group icon]
GARCHITORENA, SEEMA	15/09/1946	W0:R15:	8003 6088 3339 0178	[Person icon]
PADRICK, BERNICE	11/01/1970	W3:R16:	8003 6088 3339 2686	[Person icon]
POONAWALA, WALKER	14/07/1985	W3:R16:	8003 6088 3339 7120	[Person icon]
TREVORROW, MILA	01/09/2006	W2:R3:	8003 6088 3339 2628	[Group icon]
VANKEUREN, CODY	03/04/1988	W4:R10:	8003 6088 3339 5542	[Person icon]
VELLER, LANE	22/11/1972	M10:.	8003 6088 3339 1365	[Person icon]

Showing 1 to 10 of 11 entries

First Previous 1 2 Next Last

Annotations:

- Title to be “Register Current Patients”.
- Sorting of results (ascending and descending). Default sort: Name
- Results to display: Name, Date of Birth, Location (Ward : Room : Bed), IHI (groups of 4 digits)
- Results contain patients who have an active verified IHI but do not have a digital health record.
- Filtering based on partial match of contents of any text-based column in results.
- “Register” button displays “Patient Registration” screen for selected patient.
- “Register as Dependant” button displays “Dependant Patient Registration” screen for selected patient.
- Paging of results. Page size: 10.

3.2.13 Adult Patient Registration

The annotated image below illustrates the functional design for the “Adult Patient Registration” screen accessed via the “Register” button on the “Current Patients” screen for a selected patient.

Title to be “Register Patient”.



Register Patient

Applicant's Details

Family Name *
BANGSUND

Given Name *
KATHY

Sex
Female

Date of Birth *
06/01/1954

Medicare Card Number
6885536891

Is the individual of Aboriginal or Torres Strait Islander origin? *

No

Yes, Aboriginal

Yes, Torres Strait Islander

Yes, Aboriginal and Torres Strait Islander

Not Stated

Allow selection of the indigenous status of the patient.

Accessing Medicare Information via the My Health Record System (Optional)

Medicare information will not be accessible via the My Health Record system, **UNLESS** the individual chooses the following:

All Medicare Information will be available

OR, only the following types of Medicare information which the individual nominates will be accessible via the My Health Record system:

Medicare Benefits Schedule (MBS)

AND details of any past claims for Medicare Benefits

Pharmaceutical Benefits Scheme (PBS)

AND details of any past claims for Pharmaceutical

Australian Organ Donor Register (AODR)

Australian Childhood Immunisation Register (ACIR)

Allows selection of which information will be accessible in the My Health Record System.

Application Form and Assertions

Identity Verification Method *

Please Select...
▼

Allows selection of the identity verification method used.

Identity Verification Code Delivery

To access the individual's digital health record online, the individual will need an Identity Verification Code (IVC). No IVC will be issued during registration UNLESS the individual chooses ONE of the following options to select their preferred method for receiving the IVC. The user/operator is responsible for ensuring the accuracy of IVC delivery address submitted via the application.

Allows the entry of the IVC code delivery method for the patient.

Display the IVC

Send the IVC by SMS to:

Send the IVC by Email to:

Do not retrieve the IVC

Collection of the patient's acceptance of the terms and conditions.

Apply to Register

The individual declares that the information in this application is correct and any supporting evidence submitted by the individual is correct. The individual consents to records containing their health information being uploaded to the My Health Record system by registered healthcare provider organisations involved in the individual's care, subject to any express advice the individual gives to their healthcare providers not to upload a particular record, a specified class of records, or any records.

Send the digital health record registration to HIPS for processing.

[Submit Application](#)

3.2.14 Dependant Patient Registration

The annotated image below illustrates the functional design for the “Dependant Patient Registration” screen accessed via the “Register as Dependant” button on the “Current Patients” screen for a selected patient.

Register Patient as Dependant

Title to be “Register Patient as Dependant”.

Applicant's Details

Display the selected patient's details:
Name, sex, date of birth, Medicare card number.

Family Name *
DREA

Given Name *
KENNETH

Sex
Male

Date of Birth *
23/01/1999

Medicare Card Number
2530160161

Is the individual of Aboriginal or Torres Strait Islander origin? *

- No
- Yes, Aboriginal
- Yes, Torres Strait Islander
- Yes, Aboriginal and Torres Strait Islander
- Not Stated

Allow selection of the indigenous status of the patient.

Parent or Legal Guardian Representative

Allow entry of the authorised representative's family name, given name, sex and date of birth. The representative must be at least 14 years older than the dependant.

Family Name *
Family Name

Given Name *
Given Name

Sex *
Please Select... ▾

Date of Birth *

Individual Identifier *

Medicare Card Number

Allow entry of the authorised representative's Medicare card number and IRN. The Medicare card number must be the same as the dependant's.

Allow selection of which information will be accessible in the new digital health record.

Accessing Medicare Information via the My Health Record System (Optional)

Medicare information will not be accessible via the My Health Record system, **UNLESS** the individual chooses the following:

All Medicare Information will be available

OR, only the following types of Medicare information which the individual nominates will be accessible via the My Health Record system:

- Medicare Benefits Schedule (MBS)
 - AND details of any past claims for Medicare Benefits
- Pharmaceutical Benefits Scheme (PBS)
 - AND details of any past claims for Pharmaceutical
- Australian Organ Donor Register (AODR)
- Australian Childhood Immunisation Register (ACIR)

Allow selection of the identity verification method used.

Application Form and Assertions

Identity Verification Method *

Please Select... ▼

Allow the entry of a delivery method for an IVC that the authorised representative can use to access the dependant's digital health record online.

Identity Verification Code Delivery

To access the dependant's digital health record online, the authorised representative will need an Identity Verification Code (IVC). No IVC will be issued during registration UNLESS the authorised representative chooses ONE of the following options to select their preferred method for receiving the IVC. The user/operator is responsible for ensuring the accuracy of IVC delivery address submitted via the application.

- Display the IVC
- Send the IVC by SMS to:
- Send the IVC by Email to:
- Do not retrieve the IVC

Collect the authorised representative's declaration of parental responsibility and consent for the dependant's health information to be uploaded to the digital health record.

Apply to Register

The authorised representative declares that the information in this application is correct and any supporting evidence submitted by the authorised representative is correct.

The authorised representative declares that they have parental responsibility for the dependant and would like the System Operator to use the fact that they both appear on the same Medicare card as evidence of this relationship.

The authorised representative consents to records containing the dependant's health information being uploaded to the My Health Record system by registered healthcare provider organisations involved in the dependant's care, subject to any express advice the dependant or their authorised representatives give to their healthcare providers not to upload a particular record, a specified class of records, or any records.

Send the digital health record registration to HIPS for processing.

[Submit Application](#)

3.2.15 New Applicant Registration

The annotated image below illustrates the functional design for the “New Applicant” screen accessed via the “Register New Adult” button on the “Home” screen. This screen is based on the “Adult Patient Registration” screen with additional fields as required.

Title to be “Register New Adult”.

Register New Adult

Applicant's Details

Family Name *

Given Name *

Sex *

Date of Birth *

Is the individual of Aboriginal or Torres Strait Islander origin? *

No

Yes, Aboriginal

Yes, Torres Strait Islander

Yes, Aboriginal and Torres Strait Islander

Not Stated

Individual Identifier *

Medicare Card Number

DVA File Number

Accessing Medicare Information via the My Health Record System (Optional)

Medicare information will not be accessible via the My Health Record system, **UNLESS** the individual chooses the following:

All Medicare Information will be available

OR, only the following types of Medicare information which the individual nominates will be accessible via the My Health Record system:

Medicare Benefits Schedule (MBS)

AND details of any past claims for Medicare Benefits

Pharmaceutical Benefits Scheme (PBS)

AND details of any past claims for Pharmaceutical

Australian Organ Donor Register (AODR)

Australian Childhood Immunisation Register (ACIR)

Collection of the person's details: Name, Sex, Date of Birth, Medicare Number with IRN or DVA file number.

Allow selection of the indigenous status of the person.

Allow selection of which information will be accessible in the new digital health record.

Application Form and Assertions

Allows selection of the identity verification method used.

Identity Verification Method *

Please Select...



Identity Verification Code Delivery

To access the individual's digital health record online, the individual will need an Identity Verification Code (IVC). No IVC will be issued during registration UNLESS the individual chooses ONE of the following options to select their preferred method for receiving the IVC. The user/operator is responsible for ensuring the accuracy of IVC delivery address submitted via the application.

Allows the entry of the IVC code delivery method for the person.

Display the IVC

Send the IVC by SMS to:

Send the IVC by Email to:

Do not retrieve the IVC

Collection of the person's acceptance of the terms and conditions and consent for their health information to be uploaded to the digital health record.

Apply to Register

- The individual declares that the information in this application is correct and any supporting evidence submitted by the individual is correct. The individual consents to records containing their health information being uploaded to the My Health Record system by registered healthcare provider organisations involved in the individual's care, subject to any express advice the individual gives to their healthcare providers not to upload a particular record, a specified class of records, or any records.

Send the digital health record registration to HIPS for processing.

Submit Application

3.2.16 New Dependant Registration

The annotated image below illustrates the functional design for the “New Dependant Registration” screen accessed via the “Register New Child” button on the “Home” screen.

Register New Child

Applicant's Details

Family Name *
Family Name

Given Name *
Given Name

Sex *
Please Select...

Date of Birth *

Is the individual of Aboriginal or Torres Strait Islander origin? *

- No
- Yes, Aboriginal
- Yes, Torres Strait Islander
- Yes, Aboriginal and Torres Strait Islander
- Not Stated

Individual Identifier *

Medicare Card Number

Allow entry of the dependant's Medicare card number and IRN. The Medicare card number must be the same as the authorised

Title to be "Register New Child".

Collection of the dependant's details: Family Name, Given Name, Sex and Date of Birth.

Allow selection of the indigenous status of the dependant.

Parent or Legal Guardian Representative

Allow entry of the authorised representative's family name, given name, sex and date of birth. The representative must be at least 14 years older than the dependant.

Family Name *

Given Name *

Sex *

Date of Birth *

Individual Identifier *

Medicare Card Number

Allow entry of the authorised representative's Medicare card number and IRN. The Medicare card number must be the same as the dependant's.

Accessing Medicare Information via the My Health Record System (Optional)

Medicare information will not be accessible via the My Health Record system, **UNLESS** the individual chooses the following:

All Medicare Information will be available

OR, only the following types of Medicare information which the individual nominates will be accessible via the My Health Record system:

- Medicare Benefits Schedule (MBS)
 - AND details of any past claims for Medicare Benefits
- Pharmaceutical Benefits Scheme (PBS)
 - AND details of any past claims for Pharmaceutical
- Australian Organ Donor Register (AODR)
- Australian Childhood Immunisation Register (ACIR)

Allow selection of which information will be accessible in the new digital health record.

Application Form and Assertions

Identity Verification Method *

Allow selection of the identity verification method used.

Identity Verification Code Delivery

To access the dependant's digital health record online, the authorised representative will need an Identity Verification Code (IVC). No IVC will be issued during registration UNLESS the authorised representative chooses ONE of the following options to select their preferred method for receiving the IVC. The user/operator is responsible for ensuring the accuracy of IVC delivery address submitted via the application.

Allow the entry of a delivery method for an IVC that the authorised representative can use to access the dependant's digital health record online.

- Display the IVC
- Send the IVC by SMS to:
- Send the IVC by Email to:
- Do not retrieve the IVC

Collect the authorised representative's declaration of parental responsibility and consent for the dependant's health information to be uploaded to the digital health record.

Apply to Register

- The authorised representative declares that the information in this application is correct and any supporting evidence submitted by the authorised representative is correct.

The authorised representative declares that they have parental responsibility for the dependant and would like the System Operator to use the fact that they both appear on the same Medicare card as evidence of this relationship.

The authorised representative consents to records containing the dependant's health information being uploaded to the My Health Record system by registered healthcare provider organisations involved in the dependant's care, subject to any express advice the dependant or their authorised representatives give to their healthcare providers not to upload a particular record, a specified class of records, or any records.

Send the digital health record registration to HIPS for processing.

3.2.17 Registration Response

For a successful response the “Registration Response” screen will display.

PCEHR Assisted Registration

Confirmation of successful registration.

PCEHR Registration Successful

The PCEHR Assisted Registration was successful.

Your IVC code is **PnfQ93D** and it expires on **16/01/2014**

IVC code for the patient if requested to be displayed.

For an unsuccessful registration an error message will display:

Displays the reason for the unsuccessful registration.

- Medicare Number must be a valid Medicare Card Number.

3.2.18 Patients Without IHI

3.2.18.1 Description

‘Patients Without IHI’ is a data integrity function allowing users to list patients who are unexpectedly missing an IHI and currently an inpatient at, or recently discharged from, a selected hospital. A report of these patients can subsequently be generated for manual investigation.

3.2.18.2 Process Overview

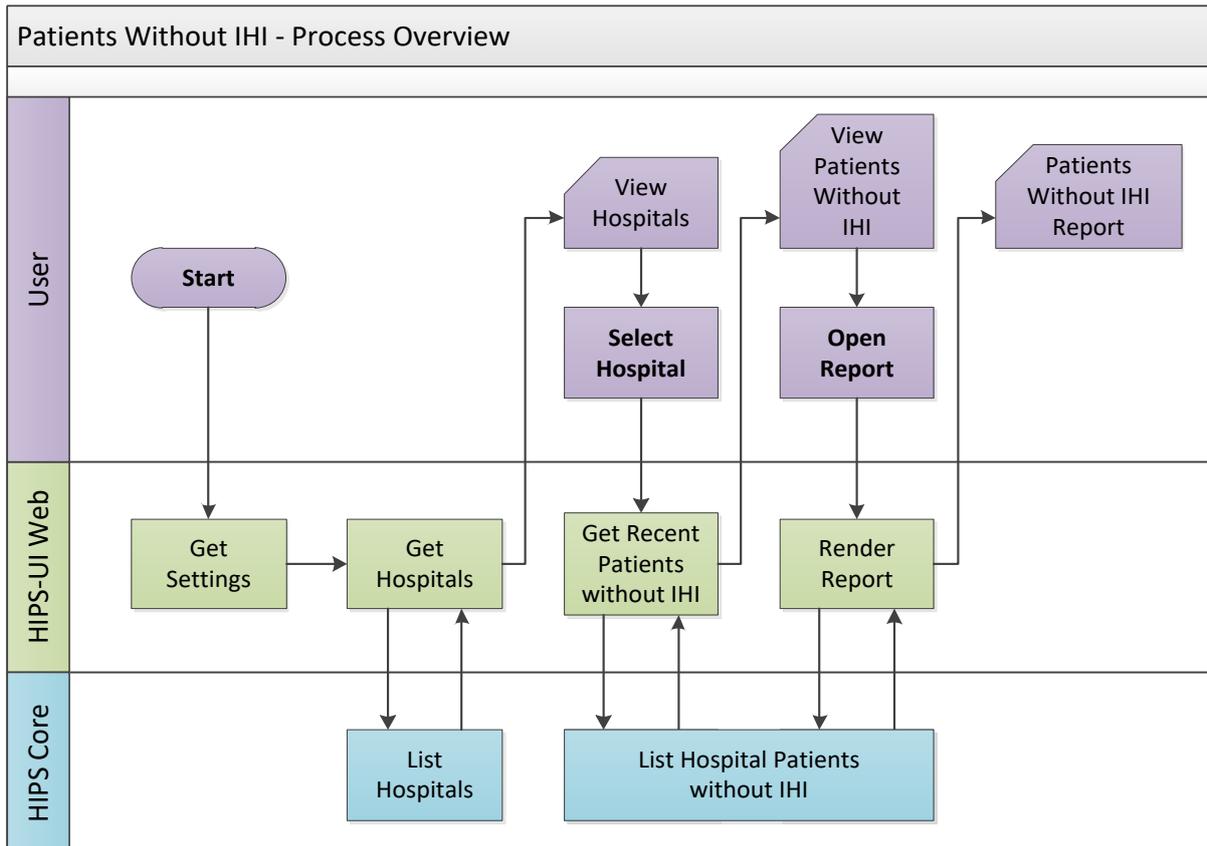


Figure 1 – Patients Without IHI – Process Overview

3.2.18.3 Process Detail

Activity / Decision	Description	Detail / Notes
Prerequisites	User logged in to the HIPS-UI Web application with appropriate security access.	Valid security details are required to login.
Start	User requests the ‘Patients Without IHI’ page.	Located under Data Integrity > Patients Without IHI.
Get Settings	HIPS-UI Web loads configuration settings.	Gets HIPS-UI Web configuration settings from the <i>Settings</i> table of the <i>HIPS-WebDataStore</i> database. Retrieves from cache if present and stores in cache after retrieval.

Activity / Decision	Description	Detail / Notes
Get Hospitals	HIPS-UI Web gets a list of all hospitals in HIPS that are enabled for web administration.	<p>Gets a list of all hospitals from the <i>ListHospitals</i> method of the HIPS <i>ReferenceService</i> web service.</p> <p>Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i>.</p> <p>Filters the hospital list to only include hospitals that have a code in the <i>DefaultHospitalCodeSystem</i> code system.</p> <p>Retrieves from cache if present and stores in cache after retrieval.</p>
List Hospitals	HIPS-Core returns a list of all hospitals in HIPS.	<p>Represents the <i>ListHospitals</i> method of the <i>ReferenceService</i> web service.</p> <p>Returns all <i>Hospitals</i> in HIPS.</p> <p><i>Hospital</i> records include at least the following information:</p> <ul style="list-style-type: none"> Hospital Name Hospital ID HPI-O HPI-O Name Hospital Codes and Code Systems
View Hospitals	User receives a hospital selection screen.	
Select Hospital	User requests the 'Patients Without IHI' page for a selected hospital.	User request includes the following field(s): Hospital Code
Get Recent Patients without IHI	HIPS-UI Web gets a list of patients unexpectedly missing an IHI who are currently an inpatient at, or recently discharged from, the selected hospital.	<p>Refers to loaded configuration settings to determine <i>PatientsWithoutIhiDaysDischarged</i> and <i>DefaultHospitalCodeSystem</i>.</p> <p>Gets a list of patients from the <i>ListPatientsWithoutIhi</i> method of the HIPS <i>PcehrService</i> web service using:</p> <ul style="list-style-type: none"> The Selected Hospital (Code, <i>DefaultHospitalCodeSystem</i>) The <i>PatientsWithoutIhiDaysDischarged</i> value to determine how many days of recently discharged patients are returned <p>Retrieves from cache if present and stores in cache after retrieval.</p>
List Hospital Patients without IHI	HIPS-Core returns a list of patients unexpectedly missing an IHI currently at, or recently discharged from, the specified hospital.	<p>Represents the <i>ListPatientsWithoutIhi</i> method of the <i>PcehrService</i> web service.</p> <p>Receives the following input:</p> <ul style="list-style-type: none"> Hospital Code and Code System Discharge Days number indicating how many days into the past to include discharged patients from <p>Resolves the <i>HospitalId</i> for the provided hospital details.</p> <p>Determines the <i>MinimumDischargeDate</i> by subtracting the provided Discharge Days from the current date and time.</p> <p>Returns patient data for each <i>HospitalPatient</i> in HIPS who meets the following criteria:</p>

Activity / Decision	Description	Detail / Notes
		<p>Associated with the Identified Hospital HospitalId matches the provided HospitalId. No valid IHI assigned PatientMaster/PatientMasterIhi/Ihi field is null or empty. IHI Status is not Service Unavailable PatientMaster/PatientMasterIhi/IhiStatusId is either null or a value other than '103' Currently inpatient at the selected hospital or discharged from the hospital within a configured number of days The most recent Episode for the HospitalPatient has a DischargeDate that is either null or after the MinimumDischargeDate. Aged over 1 month old PatientMaster/DateOfBirth is more than one month ago (e.g. before 1/2/2014 12:23:00 if now is 1/3/2014 12:23:00). Medicare Number is not in the HIPS Medicare Number Exclusions list PatientMaster/MedicareNumber is not present in the MedicareNumber field of the MedicareExclusion table. Most recent episode has not had a completed IHI investigation The most recent Episode for the HospitalPatient does not have a true IhiInvestigationComplete value. Patient data to include the following information (as available): Patient Name Date of Birth Sex MRN Medicare Card Number and IRN DVA File Number Location (Ward, Room, and Bed) of the patient's most recent episode at the selected hospital</p>
View Patients Without IHI	User receives a screen displaying the Patients Without IHI data for the selected hospital.	See View Patients Without IHI View Patients Without IHI .
Open Report	User requests the 'Patients Without IHI' report for a selected hospital.	User request includes the following field(s): Hospital Code
Render Report	Report display for printing the 'Patients Without IHI'.	The report will open as a new window and display the data without pagination (thus a continuous page), the user will then be able to print the report using the standard print functionality of the web browser.
Patients Without IHI Report	User receives a report displaying the requested Patients Without IHI data.	See View Patients Without IHI View Patients Without IHI .

Form

Form

3.2.18.4 Web User Interfaces

View Patients Without IHI

View Patients Without IHI Report a sortable list of the current and recent patients at a selected hospital who do not have an IHI (and are expected to have one).

Errors and feedback to be displayed on top of page.

Search bar to filter across all columns (except actions)

Sortable columns. Default sort Name ASC.

Data to display (as available):

- Name
- Date of Birth
- Sex
- MRN
- Medicare Number
- DVA File Number
- Location (Ward:Room:Bed) of current / most recent episode at the selected hospital.

Summary of matching results.

**Paging of results
Page size: 10.**

Name	Sex	Date of Birth	Location	MRN	Medicare Card Number	DVA File Number
BANGSUND, KATHY	Female	06/01/1954	W4:R11:	000190757	6885 53689 1	
COLVILLE, WYATT	Male	31/01/1955	W0:R19:	000256243	5417 16246 1	
DACRI, CRISTEN	Female	26/04/1979	W0:R9:	000586213	3770 08292 1	
DREA, KENNETH	Male	23/01/1999	W0:R18:	000923678	2530 16016 1	
GARCHITORENA, SEEMA	Female	15/09/1946	W0:R15:	000211962	6082 31662 1	
PADRICK, BERNICE	Female	11/01/1970	W3:R16:	000115629	5701 08717 1	
POONAWALA, WALKER	Male	14/07/1985	W3:R16:	000346042	6258 30455 1	
TREVORROW, MILA	Female	01/09/2006	W2:R3:	000528639	6059 46572 1	
VANKEUREN, CODY	Male	03/04/1988	W4:R10:	000146174	4565 86136 1	
VELLER, LANE	Female	22/11/1972	M10::	000833230	2989 36441 1	

Showing 1 to 10 of 11 entries

First Previous **1** 2 Next Last

View Patients Without IHI Report

View Patients Without IHI Report presents a report of the current and recent patients at a selected hospital who do not have an IHI (and are expected to have one).

Q Patients without IHI at Royal Chamonix Hospital

Name	Sex	Date of Birth	Location	MRN	Medicare Card Number	DVA File Number
VELLER, LANE	Female	22/11/1972	M10::	000833230	2989 36441 1	
COLVILLE, WYATT	Male	31/01/1955	W0:R19:	000256243	5417 16246 1	
DACRI, CRISTEN	Female	26/04/1979	W0:R9:	000586213	3770 08292 1	
DREA, KENNETH	Male	23/01/1999	W0:R18:	000923678	2530 16016 1	
GARCHITORENA, SEEMA	Female	15/09/1946	W0:R15:	000211962	6082 31662 1	
YADO, LAWANA	Female	14/02/1972	W0:R9:	000781324	5408 94772 1	
TREVORROW, MILA	Female	01/09/2006	W2:R3:	000528639	6059 46572 1	
PADRICK, BERNICE	Female	11/01/1970	W3:R16:	000115629	5701 08717 1	
POONAWALA, WALKER	Male	14/07/1985	W3:R16:	000346042	6258 30455 1	
BANGSUND, KATHY	Female	06/01/1954	W4:R11:	000190757	6885 53689 1	
VANKEUREN, CODY	Male	03/04/1988	W4:R10:	000146174	4565 86136 1	
Name	Sex	Date of Birth	Location	MRN	Medicare Card Number	DVA File Number

3.2.19 Disclose Hidden Digital Health Record

3.2.19.1 Description

‘Disclose Hidden Digital Health Record’ is a consent management function allowing users to record explicit disclosure (or rescind disclosure) of a patient’s digital health record status to a specified healthcare provider organisation.

Some patients elect to keep their digital health record hidden (not advertised) by default. Healthcare provider organisations that would like to access digital health records for these non-advertised patients (e.g. to upload a document) must have the digital health record’s existence disclosed by the patient.

The associated capacity to rescind disclosure is required for those circumstances where a patient changes their mind, or a user operator makes a mistake.

Patients can disclose their digital health record (or rescind disclosure) without an associated IHI or digital health record in HIPS.

3.2.19.2 Process Overview

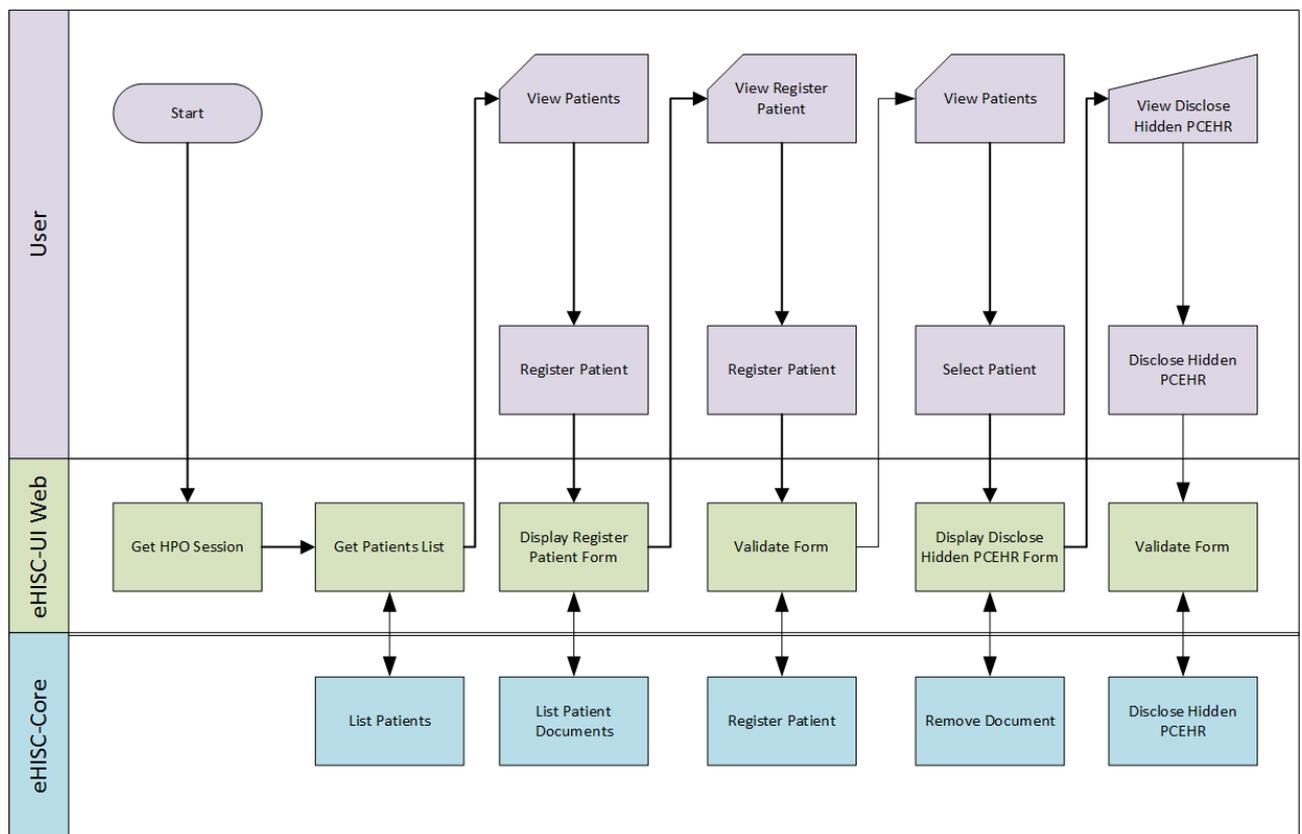


Figure 2 – Disclose hidden digital health record – Process Overview

3.2.19.3 Process Detail

Activity / Decision	Description	Detail / Notes
Prerequisites	User logged in to the HIPS-UI Web application with appropriate security access.	Valid security details are required to login.

Activity / Decision	Description	Detail / Notes
	User has selected a healthcare provider organisation (HPO) and facility.	The controller will redirect to the Select HPO page if the session does not contain a HPO facility selection.
Start	User requests the 'Disclose Hidden Digital Health Record' page.	Located under Patient Registration > Disclose Hidden Record.
Get Settings	HIPS-UI Web loads configuration settings.	Gets HIPS-UI Web configuration settings from the <i>Settings</i> table of the <i>HIPSWebDataStore</i> database. Retrieves from cache if present and stores in cache after retrieval.
Get Patients List	HIPS-UI Web displays all currently admitted patients, patients recently discharged, and patients with recent non-inpatient episodes.	Refers to loaded configuration settings to determine <i>DiscloseHiddenPcehrDaysDischarged</i> , <i>DiscloseHiddenPcehrDaysAfterService</i> and <i>DefaultHospitalCodeSystem</i> . Gets a list of patients from the <i>ListAdmittedPatients</i> method of the HIPS <i>PatientService</i> web service using: The selected HPO facility (<i>Code</i> , <i>DefaultHospitalCodeSystem</i>) The <i>DiscloseHiddenPcehrDaysDischarged</i> value to determine how many days of recently discharged patients are returned The <i>DiscloseHiddenPcehrDaysAfterService</i> value to determine how many days after the non-inpatient episode start date a Patient is returned. Results are not cached.

Activity / Decision	Description	Detail / Notes
List Hospital Patients	<p>HIPS-Core returns a list of all patients (IHI and digital health record not required) currently admitted at, recently discharged from, or recently serviced by the specified HPO facility. The patient list indicates if the patient’s digital health record was found, not found or disclosed.</p>	<p>Represents the <i>ListAdmittedPatients</i> method of the <i>PatientService</i> web service.</p> <p>Receives the following input:</p> <p>Hospital Code and Code System</p> <p>Discharge Days number indicating how many days into the past to include discharged patients from</p> <p>Service Days number, for episode types where the patient will not be discharged (including Pathology and DI episodes) indicates the number of days into the past to include patients after the episode start date.</p> <p>Resolves the <i>HospitalId</i> for the provided HPO facility details.</p> <p>Determines the <i>MinimumDischargeDate</i> by subtracting the provided Discharge Days from the current date and time.</p> <p>Determines the <i>MinimumServiceDate</i> by subtracting the provided Service Days from the current date and time.</p> <p>Returns patient data for each <i>HospitalPatient</i> in HIPS who meets the following criteria:</p> <p>Associated with the identified Hospital</p> <p><i>HospitalId</i> matches the provided <i>HospitalId</i>.</p> <p>Currently inpatient at the selected hospital or discharged from the hospital within a configured number of days</p> <p>The most recent inpatient <i>Episode</i> for the <i>HospitalPatient</i> has a <i>DischargeDate</i> that is either null or after the <i>MinimumDischargeDate</i>.</p> <p>Recent non-inpatient episode at the selected Hospital within a configured number of days</p> <p>The most recent non-inpatient <i>Episode</i> for the <i>HospitalPatient</i> has an <i>AdmissionDate</i> that is after the <i>MinimumServiceDate</i>.</p> <p>Patient data to include the following information (as available):</p> <p>Patient Name</p> <p>Date of Birth</p> <p>MRN</p> <p>Location (Ward, Room, and Bed) of the patient’s most recent episode at the selected hospital</p> <p>Digital health record participation status</p>

Activity / Decision	Description	Detail / Notes
View Patients	User receives a screen displaying the patient list for the selected HPO facility.	<p>The View Patients page is a list of all currently admitted, recently discharged or recently serviced Patients that meet the criteria of number of days after service or number of days after discharge.</p> <p>The user may choose to use the MRN Lookup to attempt to find the Patient they are searching for. The MRN Lookup simply searches for a patient with the matching MRN for the selected HPO facility and ignores the episode dates.</p> <p>If the Patient does not exist within the selected HPO facility the user has the option to Register a Patient.</p> <p>The Register Patient button should not be displayed until the user has performed an MRN Lookup and the Patient has not been found.</p> <p>Implement server-side paging for large result sets.</p> <p>Digital Health Record Participation Status is displayed as follows:</p> <p>“Not Found” for “NoValidIhi” or “PcehrNotAdvertised” “Found” for “PcehrAdvertised” “Disclosed” for “RequestedUpload”</p>
Register Patient	User clicks the <i>Register</i> button to register a new patient into the selected HPO facility.	
Register Patient	HIPS-UI Web validates the form contents.	<p>Validate the Register Patient form contents:</p> <ul style="list-style-type: none"> A Family Name has been entered A Sex has been selected A valid Date Of Birth has been entered An MRN has been entered for the selected HPO facility. <p>Optional information:</p> <ul style="list-style-type: none"> Given Name(s) Either a valid Medicare Care Number or DVA File Number <p>Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i></p>

Activity / Decision	Description	Detail / Notes
Register Patient	HIPS-Core receives the input and registers a new Patient in the selected HPO facility.	<p>Represents the <i>RegisterPatient</i> method of the <i>PatientService</i> web service.</p> <p>Receives the following input:</p> <p>MRN object: MRN, Hospital Code and Code System</p> <p>Demographic object: Family Name, Given Name, Sex Date of Birth Medicare or DVA</p> <p>Returns either a successful response if Register Patient action was successful, otherwise returns failure with an error message.</p>
Register Patient Response	HIPS-UI Web receives and handles the register patient response.	<p>Receive the response message from the <i>RegisterPatient</i> method.</p> <p>If successful close the Register Patient page and display the Disclose Hidden Digital Health Record page.</p> <p>If unsuccessful display a detailed error message to the user.</p>
Select Patient	User selects a patient to disclose a Hidden Digital Health Record or remove the disclosure for a Patient.	<p>User request includes the following field(s):</p> <p>Hospital Code Patient MRN</p>
Get Digital Health Record Disclosure	HIPS-UI Web gets the Digital Health Record Disclosure for the selected patient to determine if they have already disclosed their Digital Health Record.	<p>Gets the Digital Health Record Disclosure Status for the selected patient using the <i>GetPatientDisclosureDetails</i> method of the HIPS <i>ConsentService</i> web service using: The Selected Patient (MRN, Hospital Code, <i>DefaultHospitalCodeSystem</i>)</p> <p>Results are not cached.</p>
Get Digital Health Record Disclosure	HIPS-Core gets the Digital Health Record Disclosure Status and last audit note for the specified patient.	<p>Represents the <i>GetPatientDisclosureDetails</i> method of the <i>ConsentService</i> web service.</p> <p>Returns the Digital Health Record Disclosure Status for the specified patient.</p> <p>Receives the following input: Patient MRN and associated Hospital Code and Code System</p> <p>Returns at least the following information: Digital Health Record Disclosure Status and latest audit note if they have been disclosed before.</p>

Activity / Decision	Description	Detail / Notes
Disclose Form	User receives the disclosure or rescind disclosure form as appropriate.	Patients who have not explicitly disclosed their Digital Health Record (status is 'NoValidIhi', 'PcehrNotAdvertised', or 'PcehrAdvertised') receive a form allowing them to disclose their Digital Health Record. This form requires a notes field and confirmation. Patients who have previously explicitly disclosed their Digital Health Record (status is 'RequestedUpload') receive a form allowing them to rescind their Digital Health Record disclosure. This form requires a notes field and confirmation.
Update Disclosure	User completes the Change Disclosure Form (either to Disclose or Rescind Disclosure) and submits the form.	User request includes the following field(s): Hospital Code Patient MRN Notes Confirmation of Disclosure or Rescind Disclosure Intended Disclosure State (i.e. true to disclose, false to rescind)
Set Digital Health Record Disclosure	HIPS-UI Web records the new disclosure value in HIPS.	Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i> . Records the Patient's Digital Health Record Disclosure state (disclosed or rescinded) for the selected patient using the <i>RecordDisclosure</i> method of the HIPS <i>ConsentService</i> web service using: The Selected Patient (MRN, Hospital Code, <i>DefaultHospitalCodeSystem</i>) Intended Disclosure State (i.e. true to disclose, false to rescind) Notes converted to bytes using UTF8 encoding Results are not cached.
Record Disclosure	HIPS-Core records the new disclosure status.	Represents the RecordDisclosure method of the ConsentService web service. Updates the 'PcehrDisclosed' flag for the specified patient's HealthProviderOrganisationPatient record. Receives the following input: Patient MRN and associated Hospital Code and Code System Intended Disclosure State (i.e. true to disclose, false to rescind) Audit Information (Notes as byte array)
View Result	The User receives a page (updated form) indicating the patient has now successfully disclosed or rescinded disclosure.	As list results are not cached, if the user returns to the list page they will see correct updated data about the patient's disclosure.

3.2.19.4 Web User Interfaces

3.2.19.5 View Patients

A new modal dialogue that allows the user to Register a Patient at the selected Hospital to allow them to upload a Pathology or Diagnostic Imaging Report to the Patient.

Patient Details section, each of the following fields are required (mandatory):

- Family Name
- Sex: drop down of Sex choices
- Date of Birth: date picker
- Hospital MRN

The following fields are optional:

- Given Names
- Medicare Care Number, IRN and DVA Number

Title to include selected HPO Facility Name

Action buttons:

- Register: validates data entered and invokes the RegisterPatient method of PatientService.
- Close: cancels out of form and returns to the View Patients list.

Disclose Digital Health Record

The Disclose Digital Health Record form allows users to disclose the existence of their digital health record if they have not yet done so for the healthcare provider organisation of the selected hospital.

The screenshot shows a web form titled "Disclose Digital Health Record Existence". At the top left is a "Patients" link. The form is divided into sections: "Patient Details" with fields for Patient, Date of Birth, Hospital, and Location; "Administer Request" with a "Reference Notes" text area; and a confirmation section with a checkbox and a "Disclose Digital Health Record" button. Callout boxes provide details for each element.

Patients (Link to navigate back to patients list.)

Disclose Digital Health Record Existence

Patient Details

Patient	SMITH, JANE (SJ123456)
Date of Birth	26/04/1980
Hospital	Royal NEHTA Hospital
Location	Ward1:Room2:Bed3

Administer Request

Reference Notes

Notes is required. Maximum length 5000 characters.

Confirm Digital Health Record Disclosure

Please confirm that the patient wishes to disclose their digital health record

Disclose Digital Health Record (Confirmation text and submit button to refer to "Disclose Digital Health Record")

"Disclose Digital Health Record" marks the patient as having disclosed their digital health record to the healthcare provider organisation, Feedback of the success of this operation is displayed. Repeat submission is disabled until feedback is received and only permitted if the submission was unsuccessful.

Errors and feedback to be displayed on top of page.

Title to be "Disclose Digital Health Record Existence"

3.2.20 Withdraw Consent

3.2.20.1 Description

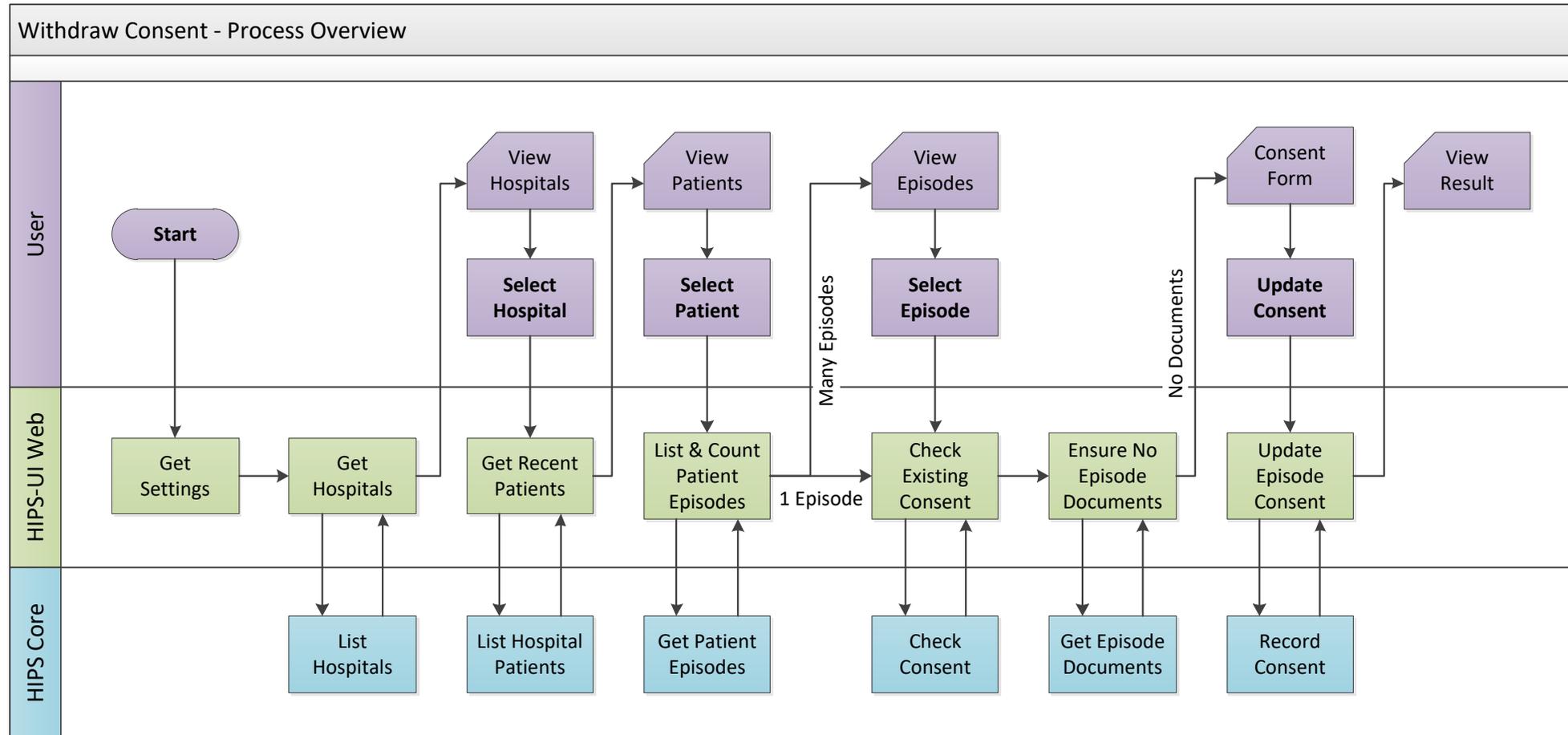
'Withdraw Consent' is a consent management function allowing users to record a patient's intention to withdraw document upload consent (or reinstate withdrawn consent) for documents relating to a single episode at a hospital, this prevents documents being uploaded for a specified episode for patients with an advertised or disclosed digital health record.

Consent cannot be withdrawn if documents have already been uploaded until those documents are removed.

The associated capacity to reinstate withdrawn consent is required for those circumstances where a patient changes their mind, or a user operator makes a mistake.

As patients can change the advertisement or disclosure of their digital health record at any time, but may want to withdraw consent in advance, no associated digital health record or IHI is required in HIPS to withdraw (or reinstate) consent.

3.2.20.2 Process Overview



3.2.20.3 Process Detail

Activity / Decision	Description	Detail / Notes
Prerequisites	User logged in to the HIPS-UI Web application with appropriate security access.	Valid security details are required to login.
Start	User requests the 'Withdraw Consent' page.	Located under Consent Management > Withdraw Consent.
Get Settings	HIPS-UI Web loads configuration settings.	Gets HIPS-UI Web configuration settings from the <i>Settings</i> table of the <i>HIPSWebDataStore</i> database. Retrieves from cache if present and stores in cache after retrieval.
Get Hospitals	HIPS-UI Web gets a list of all hospitals in HIPS that are enabled for web administration.	Gets a list of all hospitals from the <i>ListHospitals</i> method of the HIPS <i>ReferenceService</i> web service. Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i> . Filters the hospital list to only include hospitals that have a code in the <i>DefaultHospitalCodeSystem</i> code system. Retrieves from cache if present and stores in cache after retrieval.
List Hospitals	HIPS-Core returns a list of all hospitals in HIPS.	Represents the <i>ListHospitals</i> method of the <i>ReferenceService</i> web service. Returns all <i>Hospitals</i> in HIPS. <i>Hospital</i> records include at least the following information: Hospital Name Hospital ID HPI-O HPI-O Name Hospital Codes and Code Systems
View Hospitals	User receives a hospital selection screen.	
Select Hospital	User requests the 'Withdraw Consent' page for a selected hospital.	User request includes the following field(s): Hospital Code
Get Recent Patients	HIPS-UI Web gets a list of patients (IHI and Digital Health Record are not required) who are currently an inpatient at, or recently discharged from, the selected hospital.	Refers to loaded configuration settings to determine <i>WithdrawConsentDaysDischarged</i> and <i>DefaultHospitalCodeSystem</i> . Gets a list of patients from the <i>ListAdmittedPatients</i> method of the HIPS <i>ConsentService</i> web service using: The Selected Hospital (Code, <i>DefaultHospitalCodeSystem</i>) The <i>WithdrawConsentDaysDischarged</i> value to determine how many days of recently discharged patients are returned Results are not cached.

Activity / Decision	Description	Detail / Notes
List Hospital Patients	HIPS-Core returns a list of all patients (IHI and Digital Health Record not required) currently at, or recently discharged from, the specified hospital. The patient list indicates indication for each patient of whether consent has been withdrawn for the latest episode.	<p>Represents the <i>ListAdmittedPatients</i> method of the <i>ConsentService</i> web service.</p> <p>Receives the following input:</p> <ul style="list-style-type: none"> Hospital Code and Code System Discharge Days number indicating how many days into the past to include discharged patients from <p>Resolves the <i>HospitalId</i> for the provided hospital details.</p> <p>Determines the <i>MinimumDischargeDate</i> by subtracting the provided Discharge Days from the current date and time.</p> <p>Returns patient data for each <i>HospitalPatient</i> in HIPS who meets the following criteria:</p> <ul style="list-style-type: none"> Associated with the Identified Hospital <i>HospitalId</i> matches the provided <i>HospitalId</i>. Currently inpatient at the selected hospital or discharged from the hospital within a configured number of days The most recent <i>Episode</i> for the <i>HospitalPatient</i> has a <i>DischargeDate</i> that is either null or after the <i>MinimumDischargeDate</i>. <p>Patient data to include the following information (as available):</p> <ul style="list-style-type: none"> Patient Name Date of Birth MRN Location (Ward, Room, and Bed) of the patient's most recent episode at the selected hospital Latest Episode's Consent Withdrawn (True/False)
View Patients	User receives a screen displaying the patient list for the selected hospital.	
Select Patient	User selects a patient to change the upload consent for.	<p>User request includes the following field(s):</p> <ul style="list-style-type: none"> Hospital Code Patient MRN

Activity / Decision	Description	Detail / Notes
List & Count Patient Episodes	<p>HIPS-UI Web gets a list of all episodes (current and historical) at the current hospital for the specified patient.</p> <p>HIPS-UI Web determines whether episode selection is necessary by counting whether there is more than one episode for the patient at the hospital.</p>	<p>Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i>.</p> <p>Gets a list of patient episodes from the <i>ListPatientEpisodesInHospital</i> method of the HIPS <i>PatientService</i> web service using:</p> <p>The Selected Patient (MRN, Hospital Code, <i>DefaultHospitalCodeSystem</i>)</p> <p>Results are not cached.</p> <p>The HIPS-UI retrieves the number of episodes for the patient at the hospital from the <i>ListAdmittedPatients</i> response.</p> <p>If there is more than one episode an episode selection screen is presented (“View Episodes”).</p> <p>Otherwise the current episode is assumed to be the episode to withdraw consent for and the (withdraw/reinstate) consent form is presented (“View Change Consent Form”).</p>
Get Patient Episodes	<p>HIPS-Core gets all episodes (current and historical) for the specified patient and hospital.</p>	<p>Represents the <i>ListPatientEpisodesInHospital</i> method of the <i>PatientService</i> web service.</p> <p>Returns all <i>Episode</i> records for the indicated patient and hospital.</p> <p>Receives the following input:</p> <p>Patient MRN and associated Hospital Code and Code System</p> <p>Returns at least the following information:</p> <p>Admission Date/Time</p> <p>Admission Reason</p> <p>Responsible Provider</p> <p>Episode Consent Status (Unknown, NoConsentRecorded, WithdrewConsent)</p>
View Episodes	<p>User receives a screen displaying the patient’s episodes at a hospital.</p>	<p>Requires more than one episode present (otherwise skips to Consent Form for the single episode).</p> <p>Consent is withdrawn if episode consent status is “WithdrewConsent”, otherwise it is indicated as not withdrawn.</p>
Select Episode	<p>User selects a patient’s episode to change the upload consent for.</p>	<p>User request includes the following field(s):</p> <p>Hospital Code</p> <p>Patient MRN</p> <p>SourceSystemEpisodeId</p>

Activity / Decision	Description	Detail / Notes
Check Existing Consent	HIPS-UI Web gets the upload consent for the selected patient episode to determine if they have already withdrawn upload consent.	<p>Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i>.</p> <p>Gets the upload consent for the selected patient using the <i>ListPatientEpisodesInHospital</i> method of the HIPS <i>PatientService</i> web service using:</p> <p>The Selected Patient (MRN, Hospital Code, <i>DefaultHospitalCodeSystem</i>) Episode Admission Date/Time</p> <p>Results are not cached.</p>
Check Consent	HIPS-Core gets the upload consent for the specified patient episode.	<p>Represents the <i>ListPatientEpisodesInHospital</i> method of the <i>patientService</i> web service.</p> <p>Returns the upload consent for the specified patient episode.</p> <p>Receives the following input:</p> <p>Patient MRN and associated Hospital Code and Code System Episode Admission Date/Time</p> <p>Returns at least the following information:</p> <p>Episode Consent Status (Unknown, NoConsentRecorded, WithdrewConsent)</p>
Ensure No Episode Documents	HIPS-UI Web gets a list of documents uploaded for the selected patient episode.	<p>Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i>.</p> <p>Gets the list of uploaded documents for the selected patient episode using the <i>ListUploadedDocuments</i> method of the HIPS <i>PcehrService</i> web service using:</p> <p>The Selected Patient (MRN, Hospital Code, <i>DefaultHospitalCodeSystem</i>) Episode Admission Date/Time</p> <p>Results are not cached.</p>
Get Episode Documents	HIPS-Core gets the list of documents uploaded via HIPS to the My Health Record System for the selected patient episode.	<p>Represents the <i>ListUploadedDocuments</i> method of the <i>PcehrService</i> web service.</p> <p>Returns a list of documents uploaded via HIPS to the My Health Record System for the specified patient episode.</p> <p>Receives the following input:</p> <p>Patient MRN and associated Hospital Code and Code System Episode Admission Date/Time</p> <p>Returns at least the following information for each document associated with the episode:</p> <p>Document ID</p>

Activity / Decision	Description	Detail / Notes
Consent Form	User receives the withdraw or reinstate consent form as appropriate.	<p>Patients who have not withdrawn consent for the indicated episode (status is 'Unknown' or 'NoConsentRecorded') receive a form allowing them to withdraw consent. This form requires a notes field and confirmation.</p> <p>This form presents an error if documents have already been uploaded for the indicated episode that prevents withdrawing consent until those documents are removed. See Consent Form (Withdraw Consent)Consent Form (Withdraw Consent).</p> <p>Patients who have previously withdrawn consent for the indicated episode (status is 'WithdrewConsent') receive a form allowing them to reinstate upload consent for the indicated episode. This form requires a notes field and confirmation.</p>
Update Consent	User completes the Change Consent Form (either to Withdraw or Reinstate Consent) and submits the form.	<p>User request includes the following field(s):</p> <ul style="list-style-type: none"> Hospital Code Patient MRN Notes Confirmation of Withdraw or Reinstate Consent Intended Withdraw Consent State (i.e. true to withdraw, false to reinstate)
Update Episode Consent	HIPS-UI Web records the new consent value in HIPS for the indicated episode.	<p>Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i>.</p> <p>Records the Patient's Withdraw Consent state (withdrawn or reinstated) for the selected patient episode using the <i>RecordConsent</i> method of the HIPS <i>ConsentService</i> web service using:</p> <ul style="list-style-type: none"> The Selected Patient (MRN, Hospital Code, <i>DefaultHospitalCodeSystem</i>) Intended Withdraw Consent State (i.e. true to withdraw, false to reinstate) Notes converted to bytes using UTF8 encoding Results are not cached.
Record Consent	HIPS-Core records the new withdraw consent status for the indicated episode.	<p>Represents the <i>RecordConsent</i> method of the <i>ConsentService</i> web service.</p> <p>Updates the <i>ConsentWithdrawn</i> flag for the specified patient <i>Episode</i> record.</p> <p>Receives the following input:</p> <ul style="list-style-type: none"> Patient MRN and associated Hospital Code and Code System Episode Admission Date/Time Intended Withdraw Consent State (i.e. true to withdraw, false to reinstate) Audit Information (Notes as byte array)
View Result	The User receives an updated form indicating the patient has now successfully withdrawn or reinstated consent.	As list results are not cached, if the user returns to the list page they will see correct updated data about the patient's consent.

Form

3.2.20.4 Web User Interfaces

View Patients

View Patients screen allows the user to select a patient to change an episode's consent for, either by filtering current/recent patients or searching by MRN.

Sortable columns. Default sort Name ASC.

Errors and feedback to be displayed on top of page.

Search bar to filter across all columns (except actions)

Clicking "Review Consent" link shows the episodes that the selected patient has had at the current healthcare provider organisation (View Episodes).

Data to display (as available):

- Name
- Date of Birth
- MRN
- Location (Ward:Room:Bed) of latest episode at the selected hospital
- Latest Episode Consent

Data not cached so refreshing the page refreshes the data live.

Name	Date of Birth	Location	MRN	Consent Withdrawn	Actions
BANGSUND, KATHY	06/01/1954	W4:R11:	000190757	No	
COLVILLE, WYATT	31/01/1955	W0:R19:	000256243	No	
DACRI, CRISTEN	26/04/1979	W0:R9:	000586213	No	
DREA, KENNETH	23/01/1999	W0:R18:	000923678	No	
GARCHITORENA, SEEMA	15/09/1946	W0:R15:	000211962	No	
PADRICK, BERNICE	11/01/1970	W3:R16:	000115629	No	
POONAWALA, WALKER	14/07/1985	W3:R16:	000346042	No	
TREVORROW, MILA	01/09/2006	W2:R3:	000528639	No	
VANKEUREN, CODY	03/04/1988	W4:R10:	000146174	No	
VELLER, LANE	22/11/1972	M10:.	000833230	No	

Paging of results
Page size: 10.

Summary of matching results.

Lookup by MRN: *

MRN

Lookup by MRN allows exact search on MRN across all time. If result found that patient is selected. Otherwise an error is displayed.

View Episodes

View Episodes screen lists the episodes at the selected hospital for the selected patient.

The screenshot shows a web browser window titled "Episodes at Test Hospital for SMITH, Jane". The page header includes the NEHTA logo and a navigation menu with links: Home, Assisted Registration, HPI-I Search, PCEHR Viewer, Data Integrity, Consent Management, and Document Management. The main content area is titled "Episodes at Test Hospital for SMITH, Jane" and features a search bar. Below the search bar is a table with columns: Admitted, Discharged, Admission Reason, Responsible Provider, Consent Withdrawn, and Actions. The table contains 10 rows of data. At the bottom of the table, it says "Showing 1 to 10 of 33 entries" and a pagination control with buttons for First, Prev, 1, 2, Next, and Last.

Callouts:

- Title to be "Episodes at (Hospital) for (Patient Name)":** Points to the main heading of the page.
- Data to display:**
 - Admission Date/Time
 - Discharge Date/Time (or "-")
 - Admission Reason
 - Responsible Provider
 - Consent Withdrawn
- Sortable columns. Default sort Name ASC.** Points to the column headers of the table.
- Summary of matching results.** Points to the text "Showing 1 to 10 of 33 entries".
- Errors and feedback to be displayed on top of page.** Points to the top of the main content area.
- Search bar to filter across all columns (except actions)** Points to the search input field.
- Link to indicate Reinstate Consent vs Withdraw Consent depending on existing Consent Withdrawn status. Both go to the Consent Form which will display appropriately depending on existing Consent.** Points to the "Reinstate Consent" and "Withdraw Consent" links in the Actions column.
- Paging of results Page size: 10.** Points to the pagination control.

Consent Form (Withdraw Consent)

The Withdraw Consent form allows users to withdraw consent if they have not yet withdrawn consent for the specified episode.

Data to display (as available):

- Name + (MRN)
- Date of Birth
- Hospital
- Location (Ward:Room:Bed)
- Admission Date/Time
- Discharge Date/Time
- Responsible Provider
- Admission Reason

Notes is required. Maximum length 5000 characters.

Confirmation required.

"Withdraw Consent" marks the current episode as consent withdrawn in HIPS. Feedback of the success of this operation is displayed. Repeat submission is disabled until feedback is received and only permitted if the submission was unsuccessful.

Title to be "Withdraw Consent for Episode"

Errors and feedback to be displayed on top of page.

Null fields (e.g. not discharged yet) to display "(None)"

Confirmation text and submit button to refer to "Withdraw Consent"

Form Content:

Withdraw Consent for Episode

Patient Details

Patient	BANGSUND, KATHY (000190757)	Responsible Provider	Dr. Adrian GRIGNON Jr.
Date of Birth	06/01/1954	Admission Reason	Sore Foot
Hospital	Royal Chamonix Hospital	Admission Date	18/02/2016 10:46:30
Location	W4:R11:	Discharge Date	(None)

Administer Request

Reference Notes

Confirm Withdraw Consent

Please confirm that the patient wishes to withdraw consent to upload documents to their digital health record for the indicated episode.

Withdraw Consent

Reinstate Consent for Episode

The patient has already withdrawn consent to upload documents for this episode (notes below).
Please complete the form below if you are sure you would like to reinstate consent.

Withdraw Consent Notes:
Patient requested withdrawal of consent.

Patient Details	
Patient	BANGSUND, KATHY (000190757)
Date of Birth	06/01/1954
Hospital	Royal Chamonix Hospital
Location	W4:R11:
Responsible Provider	Dr. Adrian GRIGNON Jr.
Admission Reason	Sore Foot
Admission Date	18/02/2016 10:46:30
Discharge Date	(None)

Administer Request

Reference Notes

Confirm Reinstate Consent

Please confirm that you want to reinstate uploads to the digital health record for the indicated episode.

[Reinstate Consent](#)

Data to display (as available):

- Name + (MRN)
- Date of Birth
- Hospital
- Location (Ward:Room:Bed)
- Admission Date/Time
- Discharge Date/Time
- Responsible Provider
- Admission Reason

Title to be "Reinstate Consent for Episode"

Errors and feedback to be displayed on top of page.

Page to start with warning indicating that the current patient has previously withdrawn consent and include the Notes from the withdrawal.

Notes is required. Maximum length 5000 characters.

Confirmation required.

Null fields (e.g. not discharged yet) to display "(None)"

Confirmation text and submit button to refer to "Reinstate Consent"

"Reinstate Consent" marks the current episode as no longer consent withdrawn in HIPS. Feedback of the success of this operation is displayed. Repeat submission is disabled until feedback is received and only permitted if the submission was unsuccessful.

3.2.21 Remove Document

3.2.21.1 Description

'Remove Document' is a document management function allowing users to remove a document that has been uploaded by the current healthcare provider organisation to the My Health Record System.

This functionality can be required in a number of scenarios:

A document was uploaded for the wrong individual (reason 'Incorrect Identity').

A document was uploaded after the patient had signed a consent withdrawal, however the consent withdrawal has not yet been actioned within HIPS (reason 'Withdrawn').

A patient forgot to ask a document not be uploaded and has requested the document be removed (reason 'Withdrawn'). This scenario is less likely as patients should do this themselves using the client portal.

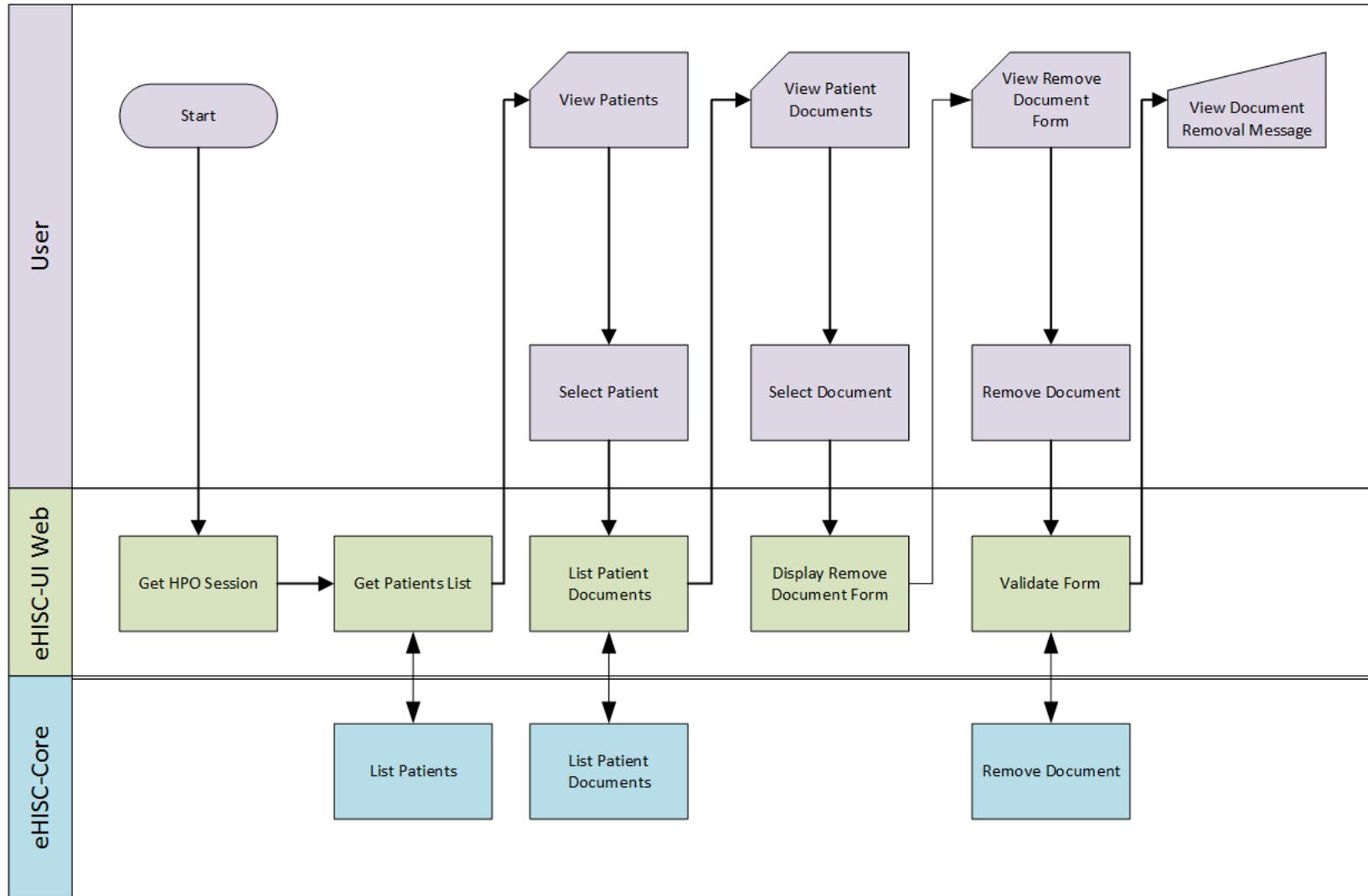
Information in a document is incorrect and clinical staff need to remove it prior to a corrected version being uploaded rather than superseding (reason 'Withdrawn').

Users are able to view all of the documents a healthcare provider organisation has uploaded for a patient who has a digital health record and is either currently in hospital or recently discharged. Users can also find past patients via their MRN at the current hospital or via their IHI.

Only documents uploaded via HIPS for the indicated patient by the selected hospital will be displayed. Prior to removal, documents can be viewed to see the contents of the document as originally uploaded, unless the document has been purged from the HIPS database. If the document has been purged, limited metadata is available, and removal is still possible.

Removal of documents requires a chosen reason and notes describing the reason for removal.

3.2.21.2 Process Overview



3.2.21.3 Process Detail

Activity / Decision	Description	Detail / Notes
Prerequisites	User logged in to the HIPS-UI Web application with appropriate security access.	Valid security details are required to login.
	User has selected the healthcare provider organisation facility that uploaded the document.	The controller will redirect to the Select HPO page if the session does not contain a HPO facility selection.
Start	User requests the 'Remove Document' page.	Located under Clinical Documentation > Remove Document.
Get Settings	HIPS-UI Web loads configuration settings.	Gets HIPS-UI Web configuration settings from the <i>Settings</i> table of the <i>HIPSWebDataStore</i> database. Retrieves from cache if present and stores in cache after retrieval.
Get Patients List	HIPS-UI Web displays all currently admitted patients, patients recently discharged, and patients with recent PDI episodes.	Refers to loaded configuration settings to determine <i>RemoveDocumentDaysDischarged</i> , <i>RemoveDocumentDaysAfterService</i> and <i>DefaultHospitalCodeSystem</i> . Gets a list of patients from the <i>ListAdmittedPatients</i> method of the HIPS <i>PatientService</i> web service using: The Selected HPO facility (<i>Code</i> , <i>DefaultHospitalCodeSystem</i>) The <i>RemoveDocumentDaysDischarged</i> value to determine how many days after the discharge date patients are returned The <i>RemoveDocumentDaysAfterService</i> value to determine how many days after the episode start date patients are returned. Results are not cached.

Activity / Decision	Description	Detail / Notes
List Hospital Patients	<p>HIPS-Core returns a list of all patients (IHI and Digital Health Record not required) with recent episodes at the specified HPO facility. The patient list indicates if the patient has a Digital Health Record.</p>	<p>Represents the <i>ListAdmittedPatients</i> method of the <i>PatientService</i> web service.</p> <p>Receives the following input:</p> <ul style="list-style-type: none"> Hospital Code and Code System Discharge Days number indicating how many days after the episode end date to include patients. Service Days number, for episode types where the patient will not be discharged (including outpatient, pathology and DI episodes) indicates the number of days after the episode start date to include patients. <p>Resolves the <i>HospitalId</i> for the provided HPO facility details.</p> <p>Determines the <i>MinimumDischargeDate</i> by subtracting the provided Discharge Days from the current date and time.</p> <p>Determines the <i>MinimumServiceDate</i> by subtracting the provided Service Days from the current date and time.</p> <p>Returns patient data for each <i>HospitalPatient</i> in HIPS who meets the following criteria:</p> <ul style="list-style-type: none"> Associated with the Identified Hospital <i>HospitalId</i> matches the provided <i>HospitalId</i>. Currently inpatient at the selected Hospital or discharged from the Hospital within a configured number of days The most recent inpatient <i>Episode</i> for the <i>HospitalPatient</i> has a <i>DischargeDate</i> that is either null or after the <i>MinimumDischargeDate</i>. Recent non-inpatient episode at the selected Hospital within a configured number of days The most recent non-inpatient <i>Episode</i> for the <i>HospitalPatient</i> has an <i>AdmissionDate</i> that is after the <i>MinimumServiceDate</i>. <p>Patient data to include the following information (as available):</p> <ul style="list-style-type: none"> Patient Name Date of Birth MRN Location (Ward, Room, and Bed) of the patient's most recent episode at the selected hospital Digital Health Record participation status
View Patients	<p>User receives a screen displaying the patient list for the selected hospital.</p>	

Activity / Decision	Description	Detail / Notes
Select Patient	User selects a patient to remove a document from.	<p>If the Patient the user is looking for is not in the Patient's list the user may:</p> <p>Use the "Lookup by MRN" field on the Patient List page to select the patient.</p> <p>Use the "Lookup by IHI" field on the Patient List page to select the patient.</p> <p>User request includes the following field(s):</p> <p>Hospital Code</p> <p>Patient MRN or Patient IHI</p>
List Patient Documents	HIPS-UI Web displays a list of locally updated documents for the selected Patient and Hospital.	<p>Refers to loaded configuration settings to determine if DefaultRemoveDocumentTab is either "General", "Pathology" or "DiagnosticImaging".</p> <p>Refers to loaded configuration settings to determine DefaultHospitalCodeSystem.</p> <p>Gets a list of uploaded documents from:</p> <p>The ListUploadedGeneralDocuments method of the HIPS DocumentService web service</p> <p>The ListUploadedPathologyReports method of the HIPS DocumentService web service</p> <p>The ListUploadedDiagnosticImagingReports method of the HIPS DocumentService web service</p> <p>using:</p> <p>The User, Patient Identifier (MRN, Hospital Code, DefaultHospitalCodeSystem), IHI</p> <p>Results are cached and may be refreshed by user actions.</p>

Activity / Decision	Description	Detail / Notes
List Patient Documents	<p>HIPS-Core returns a list of</p> <ul style="list-style-type: none"> Pathology reports Diagnostic imaging reports All other documents uploaded for the specified patient or any patient record with the specified IHI. 	<p>Represents the ListUploadedGeneralDocuments, ListUploadedPathologyReports and ListUploadedDiagnosticImagingReports methods of the DocumentService web service.</p> <p>Returns all locally stored successfully uploaded documents for the indicated patient and hospital, or the indicated IHI and hospital (refer to the <i>PathologyReport</i>, <i>DiagnosticImagingReport</i>, <i>ClinicalDocument</i>, <i>ClinicalDocumentStatus</i>, and <i>ClinicalDocumentVersion</i> tables).</p> <p>Receives the following input:</p> <ul style="list-style-type: none"> User, Patient Identifier (MRN and associated Hospital Code and Code System), IHI (optional) <p>Returns at least the following information:</p> <ul style="list-style-type: none"> Associated Episode Admission Date/Time Associated Episode Discharge Date/Time Responsible Provider Name Status (Uploaded, Pending Remove, Removed, Failed Remove) Document ID Document Type <p>For Pathology Reports, also the Report ID, Specimen Collection Date/Time, Report Date/Time, Department List and Test Result Name List.</p> <p>For Diagnostic Imaging Reports, also the Accession ID, Imaging Date/Time, Report Date/Time, Modality List and Examination List.</p>
View Patient Document List	<p>User receives a screen displaying the patient's documents at the current healthcare facility.</p>	
Select Document to Remove	<p>User selects the document to remove for the selected Patient.</p>	<p>User request includes the following field(s):</p> <ul style="list-style-type: none"> Hospital Code Patient MRN Document ID
Display Remove Document Form	<p>HIPS-UI Web displays the remove document modal for the selected document.</p>	<p>If the document is uploaded to an episode that is not an inpatient episode:</p> <ul style="list-style-type: none"> Change "Hospital" to "Facility" Change "Admission Reason" to "Service" Change "Admission Date" to "Service Date" Hide "Discharge Date" <p>If the document is a pathology report:</p> <ul style="list-style-type: none"> Display the Report ID, Specimen Collection Date/Time, Report Date/Time, Department List and Test Result Name List. <p>If the document is a diagnostic imaging report:</p> <ul style="list-style-type: none"> Display the Accession ID, Imaging Date/Time, Report Date/Time, Modality List and Examination List.

Activity / Decision	Description	Detail / Notes
View Remove Document Form	User receives the remove document form for the selected document.	
Remove Document	User completes and submits the remove document form.	User request includes the following field(s): Hospital Code Patient MRN Document ID Reason Notes Confirmation of Removal
Remove Document	HIPS-UI Web removes an uploaded document from the My Health Record System.	Refers to loaded configuration settings to determine DefaultHospitalCodeSystem. Remove an uploaded document from the My Health Record system using the RemoveDocument method of the HIPS PcehrService web service using: The Selected Patient (MRN, Hospital Code, DefaultHospitalCodeSystem) Document Set ID, Admission Date/Time, Removal Reason, Audit Notes
Remove My Health Record System Document	HIPS-Core adds the RemoveDocument action onto the My Health Record System queue.	Represents the <i>RemoveDocument</i> method of the <i>PcehrService</i> web service. Removes a document from the My Health Record System. Receives the following input: User, Patient Identifier (MRN and associated Hospital Code and Code System), Document Set ID, Admission Date/Time, Removal Reason, Audit Notes
View Result	The User receives an updated form page indicating the patient has now successfully placed a request to remove the document.	The user can click the Refresh button to refresh the document list and display the latest document state. The row that was previously selected remains highlighted with a coloured border to avoid mistaking which row was actioned.

3.2.21.4 Web User Interfaces

View Patients

View Patients screen allows the user to select a patient to remove documents from, either by filtering current/recent patients or searching by MRN.

The screenshot shows a web interface for removing documents at Royal Chamonix Hospital. The breadcrumb trail includes Home, Healthcare Identifiers, My Health Record Registration, and Clinical Documentation. The main heading is "Remove Document at Royal Chamonix Hospital".

Key features and callouts include:

- Data to display (as available):** Name, Date of Birth, MRN.
- Search bar:** A search bar to filter across all columns (except actions).
- Errors and feedback:** A box for errors and feedback to be displayed on top of the page.
- Sortable columns:** Name, Date of Birth, MRN, and Actions. Default sort is Name ASC.
- Clicking "View Uploaded Documents":** This link shows documents uploaded by the current healthcare provider organisation for the selected patient ('Document List').
- Paging of results:** Page size is 10.
- Summary of matching results:** A box indicating the number of results found.
- Lookup by MRN:** Allows exact search on MRN across all time. If a result is found, the patient is selected; otherwise, an error is displayed.
- Lookup by IHI:** Allows exact search on IHI across all time. If a result is found, the patient is selected; otherwise, an error is displayed. If multiple records have the same IHI, a warning is displayed and reports from all patient records with the entered IHI are listed.

Name	Date of Birth	MRN	Actions
CANNON, KAMAHL	15-Apr-1993	000000226	

Document List – General Tab

The General tab displays a list of documents, except pathology or imaging reports, uploaded by the selected hospital for the selected patient.

The screenshot shows a web interface for viewing documents. At the top, there are navigation tabs: Home, Healthcare Identifiers, My Health Record Registration, and Clinical Documentation. Below this is a breadcrumb trail: Patients > Documents Uploaded by Royal Chamonix Hospital for CARVER, NEVIN. A 'Refresh' button is located to the right of the title. Below the title are three tabs: General (selected), Pathology, and Diagnostic Imaging. A search bar is positioned above the table. The table has columns for Type, Admitted, Discharged, Responsible Provider, Status, and Actions. Two rows of 'Discharge Summary' documents are visible. Below the table is a summary of matching results and a second set of pagination controls. Callout boxes provide details on various UI features.

Title to be "Documents Uploaded by (Hospital) for (Patient Name)"

Data to display:

- Document Type
- Admission Date/Time
- Discharge Date/Time (or "(None)")
- Responsible Provider
- Status

Sortable columns. Default sort Name ASC.

Search bar to filter across all columns (except actions).

Refresh button to reload the document list with updated status.

Errors and feedback to be displayed on top of page.

Clicking "View" opens the document for viewing ('View Document'). Clicking "Remove" opens the document removal form ('Remove Document').

Summary of matching results.

**Paging of results
Page size: 10.**

Document List – Pathology Tab

The Pathology tab displays a list of pathology reports uploaded by the selected hospital for the selected patient.

The screenshot shows the 'Pathology Report View' interface. At the top, there is a breadcrumb trail: Home > Healthcare Identifiers > My Health Record Registration > Clinical Documentation > Patients. Below this, the title reads 'Documents Uploaded by Royal Chamonix Hospital for CANNON, KAMAHL'. A search bar is present with the text 'Search bar to filter across all columns (except actions)'. A 'Refresh' button is located to the right of the title. Below the title, there are tabs for 'General', 'Pathology', and 'Diagnostic Imaging'. The main content area is titled 'Pathology Report View' and contains a search bar with the text 'Search: Type to search...'. Below the search bar, there is a pagination control showing 'Showing 1 to 5 of 24 entries' and a list of page numbers (1, 2, 3, 4, 5, Next, Last). The main table displays a list of pathology reports with columns for Report ID, Specimen Collection, Report Date, Department, Test Result Name, Status, and Actions. The table is sorted by Report Date in descending order. Below the table, there is another pagination control showing 'Showing 1 to 5 of 24 entries' and a list of page numbers (1, 2, 3, 4, 5, Next, Last). Callouts provide additional information: 'Title to be "Documents Uploaded by (Hospital) for (Patient Name)"', 'Data to display: Report ID, Specimen Collection, Report Date, Department, Test Result Name, Status', 'Sortable columns. Default sort on Report Date, descending.', 'Summary of matching results.', 'Refresh button to reload the document list with updated status.', 'Errors and feedback to be displayed on top of page.', 'Clicking "View" opens the document for viewing ("View Document"). Clicking "Remove" opens the document removal form ("Remove Document").', and 'Paging of results Page size: 5.'

Document List – Diagnostic Imaging Tab

The Diagnostic Imaging tab displays a list of diagnostic imaging reports uploaded by the selected hospital for the selected patient.

Patients

Documents Uploaded by Royal Chamonix Hospital for CANNON, KAMAHL

Refresh

General Pathology Diagnostic Imaging

Search bar to filter across all columns (except actions).

Refresh button to reload the document list with updated status.

Title to be "Documents Uploaded by (Hospital) for (Patient Name)"

- Data to display:
- Accession ID
 - Imaging Date
 - Report Date
 - Modality Examination
 - Status

Sortable columns. Default sort on Report Date, descending.

Summary of matching results.

Diagnostic Imaging Report View

Search: Type to search...

First Previous 1 2 3 4 5 6 Next Last

Errors and feedback to be displayed on top of page.

Showing 1 to 5 of 27 entries

Accession ID	Imaging Date	Report Date	Modality Examination	Status	Actions
18-00020000902-979-2	23 Jul 2018 21:36:16+0930	26 Jul 2018 18:36:16+1000	CR X-ray of right ankle	Uploaded	
18-00020000901-978-2	23 Jul 2018 21:35:46+0930	25 Jul 2018 19:35:46+1000	CR, US X-ray of right ankle, Joint Ultrasound	Uploaded	
18-00020000900-977-1	23 Jul 2018 21:35:16+0930	25 Jun 2018 20:35:16+1000	CR, US, CT Scan X-ray of right ankle, Joint Ultrasound, CT Scan of Rig...	Uploaded	
18-00020000898-975-2	23 Jul 2018 21:34:16+0930	24 Jun 2018 22:34:16+1000	CR, US X-ray of right ankle, Joint Ultrasound	Uploaded	
18-00020000899-976-2	23 Jul 2018 21:34:46+0930	24 Jun 2018 21:34:46+1000	CR X-ray of right ankle	Uploaded	
Accession ID	Imaging Date	Report Date	Modality Examination	Status	Actions

Clicking "View" opens the document for viewing ('View Document'). Clicking "Remove" opens the document removal form ('Remove Document').

Paging of results
Page size: 5.

Showing 1 to 5 of 27 entries

First Previous 1 2 3 4 5 6 Next Last

Remove Document – General Document

Remove Document screen is displayed as a modal and allows removal from the My Health Record system of a document the current healthcare provider organisation uploaded.

The screenshot shows a modal window titled "Remove [Report Type] for GIBBS, GEORGE". It contains several sections: "Patient Details" with fields for Patient, Date of Birth, Hospital, Document Type, Responsible Provider, Admission Reason, Admission Date, and Discharge Date; "Administer Request" with radio buttons for "Removal Reason" (Incorrect Identity, Withdrawn); a "Reference Notes" text area; a "Confirm Remove Clinical Document" section with a checkbox and a confirmation message; and a "Remove Document" button. Callouts provide details for each section.

Modal Title: Remove [Document Type] for [Patient Name]

Patient Details section:

- Patient Name & MRN
- Date of Birth
- Hospital or Facility
- Document Type
- Responsible Provider
- Admission Reason or Service
- Admission Date or Service Date
- Discharge Date
-

Removal Reason:

- Incorrect Identity
- Withdrawn
-

Reference Notes: Text area for user to enter Removal Reason description.

Confirmation checkbox:

Remove Document button: triggers the Remove Document event to be sent to the My Health Record System Service

Remove Document – Pathology Report

Remove Document screen is displayed as a modal and allows removal from the My Health Record system of a pathology report that the current healthcare provider organisation uploaded.

The screenshot shows a modal window titled "Remove eHealth Pathology Report for CANNON, KAMAHL". The modal is divided into several sections:

- Patient Details section:** Contains fields for Patient Name & MRN, Date of Birth, Hospital or Facility, and Document Type.
- Report Details section:** Contains fields for Report ID, Specimen Collection Date, Report Date, Department List, and Test Result Name List (no truncation).
- Administer Request section:** Includes a "Removal Reason" section with radio buttons for "Incorrect Identity" and "Withdrawn", and a "Reference Notes" text area for user input.
- Confirmation section:** A "Confirm Remove Clinical Document" section with a checkbox and the text "Please confirm that you want to remove the patient's clinical document from their digital health record."
- Remove Document button:** A blue button labeled "Remove Document" that triggers the removal operation.

Callout boxes provide additional information:

- Modal Title: Remove [Document Type] for [Patient Name]
- Patient Details section: Patient Name & MRN, Date of Birth, Hospital or Facility, Document Type
- Report Details section: Report ID, Specimen Collection Date, Report Date, Department List, Test Result Name List (no truncation)
- Removal Reason: Incorrect Identity, Withdrawn
- Confirmation checkbox
- Remove Document button: triggers the Remove Document operation to be added to the HIPS queue for processing.
- Reference Notes: Text area for user to enter Removal Reason description.

Remove Document – Diagnostic Imaging Report

Remove Document screen is displayed as a modal and allows removal from the My Health Record system of a diagnostic imaging report that the current healthcare provider organisation uploaded.

Modal Title: Remove [Document Type] for [Patient Name]

Patient Details section:

- Patient Name & MRN
- Date of Birth
- Hospital or Facility
- Document Type

Report Details section:

- Accession ID
- Imaging Date
- Report Date
- Modality List
- Examination List (no truncation)

Removal Reason:

- Incorrect Identity
- Withdrawn

Confirmation checkbox

Remove Document button: triggers the Remove Document operation to be added to the HIPS queue for processing.

Reference Notes: Text area for user to enter Removal Reason description.

Modal Content:

Remove eHealth Diagnostic Imaging Report for CANNON, KAMAHL [Close]

Patient Details

Patient: CANNON, KAMAHL (000000226)
 Date of Birth: 15 Apr 1993
 Facility: Royal Chamonix Hospital
 Document Type: eHealth Diagnostic Imaging Report

Report Details

Accession ID: 18-00020000900-977-1
 Imaging Date: 23 Jul 2018 21:35:16+0930
 Report Date: 25 Jun 2018 20:35:16+1000
 Modality: CR, US, CT Scan
 Examination: X-ray of right ankle, Joint Ultrasound, CT Scan of Right Foot

Administer Request

Removal Reason
 Incorrect Identity
 Withdrawn

Reference Notes
 [Text area for user to enter Removal Reason description]

Confirm Remove Clinical Document
 Please confirm that you want to remove the patient's clinical document from their digital health record.

[Remove Document] [Close]

3.2.22 Upload PDF Discharge Summary

3.2.22.1 Description

'Upload PDF Discharge Summary' is a clinical documentation function allowing users to take a PDF file containing a discharge summary document and upload it to a patient's digital health record.

3.2.22.2 Process Overview

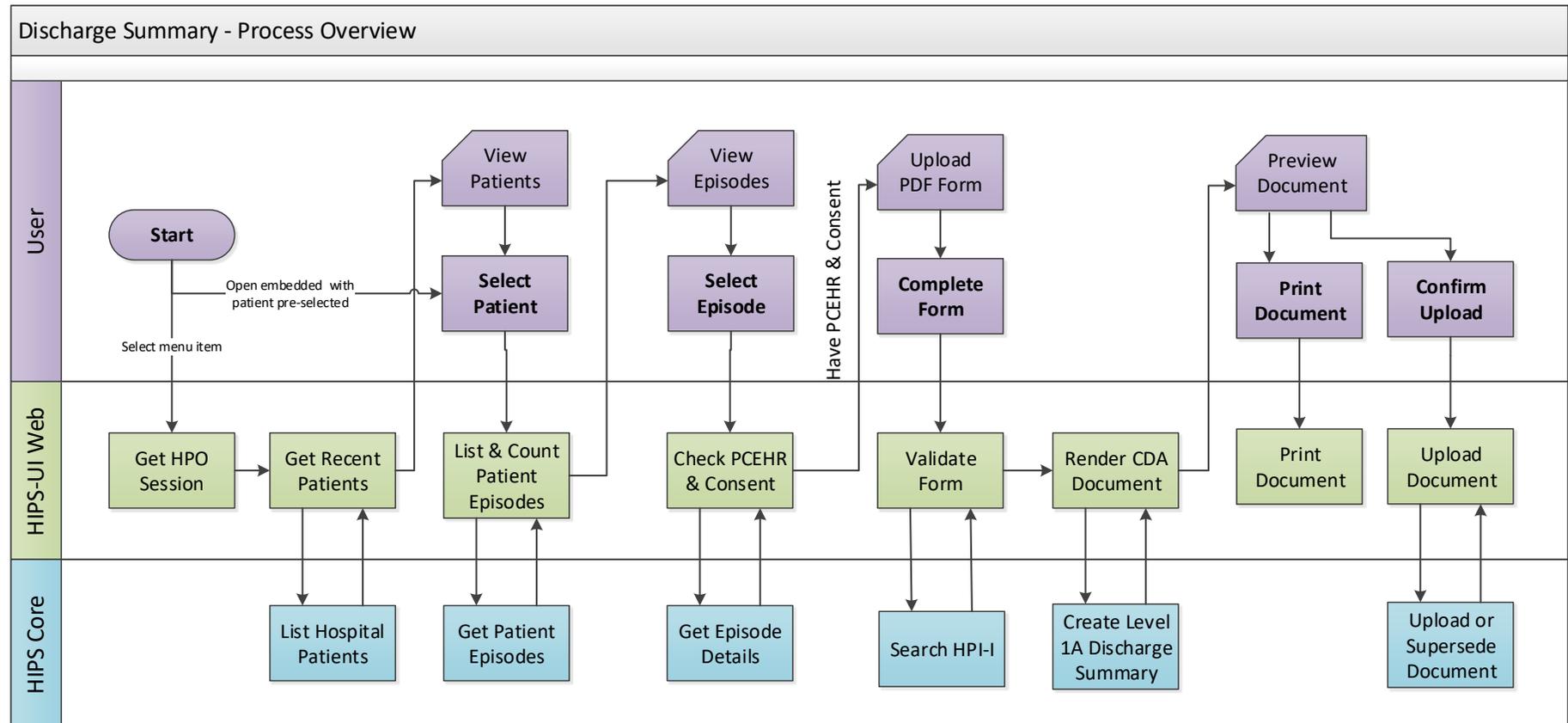


Figure 3 – Discharge Summary – Process Overview

3.2.22.3 Process Detail

Activity / Decision	Description	Detail / Notes
Prerequisites	User logged in to the HIPS-UI Web application with appropriate security access.	Valid security details are required to login.
	User has selected a hospital OR hospital code supplied in the embedded URL format.	Hospital code specified in URL will be resolved using 'DefaultHospitalCodeSystem' setting and set the hospital selection for the session. The controller will redirect to the Select HPO page if the session does not contain a hospital selection.
Start	User requests the 'Discharge Summary' page. OR External system links to embedded version with patient pre-selected.	A menu item for this feature will be located under Clinical Documentation > Discharge Summary. The embedded process skips to step "Select Patient".
Get HPO Session - Settings	HIPS-UI Web loads configuration settings.	Gets HIPS-UI Web configuration settings from the <i>Settings</i> table of the <i>HIPSWebDataStore</i> database. Retrieves from cache if present and stores in cache after retrieval.
Get Recent Patients	HIPS-UI Web gets a list of patients (IHI and Digital Health Record are not required) who are currently an inpatient at, or recently discharged from, the selected hospital.	Refers to loaded configuration settings to determine <i>DischargeSummaryPatientListDaysDischarged</i> and <i>DefaultHospitalCodeSystem</i> . Gets a list of patients from the <i>ListAdmittedPatients</i> method of the HIPS <i>PatientService</i> web service using: The Selected Hospital (Code, <i>DefaultHospitalCodeSystem</i>) The <i>DischargeSummaryPatientList DaysDischarged</i> value to determine how many days of recently discharged patients are returned Results are not cached.

Activity / Decision	Description	Detail / Notes
List Hospital Patients	<p>HIPS-Core returns a list of all patients (IHI and Digital Health Record not required) currently at, or recently discharged from, the specified hospital. The patient list indicates if the patient has a Digital Health Record.</p>	<p>Represents the <i>ListAdmittedPatients</i> method of the <i>PatientService</i> web service.</p> <p>Receives the following input:</p> <ul style="list-style-type: none"> Hospital Code and Code System Discharge Days number indicating how many days into the past to include discharged patients from <p>Resolves the <i>HospitalId</i> for the provided hospital details.</p> <p>Determines the <i>MinimumDischargeDate</i> by subtracting the provided Discharge Days from the current date and time.</p> <p>Returns patient data for each <i>HospitalPatient</i> in HIPS who meets the following criteria:</p> <ul style="list-style-type: none"> Associated with the Identified Hospital <i>HospitalId</i> matches the provided <i>HospitalId</i>. Currently inpatient at the selected hospital or discharged from the hospital within a configured number of days The most recent <i>Episode</i> for the <i>HospitalPatient</i> has a <i>DischargeDate</i> that is either null or after the <i>MinimumDischargeDate</i>. <p>Patient data to include the following information (as available):</p> <ul style="list-style-type: none"> Patient Name Date of Birth MRN Location (Ward, Room, and Bed) of the patient's most recent episode at the selected hospital Digital Health Record participation status
View Patients	<p>User receives a screen displaying the patient list for the selected hospital.</p>	<p>See view patients screen. There will not be an embedded version of this screen.</p>
Select Patient	<p>User selects a patient to upload or supersede a document.</p> <p>OR</p> <p>External system links to embedded version of this page.</p>	<p>Request includes the following fields:</p> <ul style="list-style-type: none"> Hospital Code Patient MRN <p>or</p> <ul style="list-style-type: none"> Hospital Code Registered Enterprise Patient ID

Activity / Decision	Description	Detail / Notes
List & Count Patient Episodes	HIPS-UI Web gets a list of all episodes (current and historical) at the current hospital for the specified patient, up to a configured number of days in the past (typically 365 days, one year is sufficient).	<p>Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i>.</p> <p>Gets a list of patient episodes from the <i>ListPatientEpisodesInHospital</i> method of the HIPS <i>PatientService</i> web service using:</p> <p>The Selected Patient (MRN, Hospital Code, <i>DefaultHospitalCodeSystem</i>)</p> <p>The <i>DischargeSummaryEpisodeList DaysDischarged</i> value to determine how many days of recently discharged episodes are returned</p> <p>Include Documents setting which defines if the method should return information about previously uploaded documents</p> <p>Document Code value which limits the type of documents returned by the method.</p> <p>Results are not cached.</p> <p>An episode selection screen is presented (“View Episodes”).</p>
Get Patient Episodes	HIPS-Core gets all episodes (current and historical) for the specified patient and hospital.	<p>Represents the <i>ListPatientEpisodesInHospital</i> method of the <i>PatientService</i> web service.</p> <p>Returns all <i>Episode</i> records for the indicated patient and hospital.</p> <p>Receives the following input:</p> <p>Patient MRN and associated Hospital Code and Code System</p> <p>Days Discharged value.</p> <p>Include Documents setting.</p> <p>Document Code value</p> <p>Returns at least the following information:</p> <p>Admission Date/Time</p> <p>Discharge Date/Time</p> <p>Admission Reason</p> <p>Responsible Provider</p> <p>Consent Withdrawn</p> <p>Document Status (None, Uploaded, Removed)</p>
View Episodes	User receives a screen displaying the patient’s episodes at a hospital.	See view episodes screen.
Select Episode	User selects a patient’s episode to upload or supersede the discharge summary for.	<p>Request includes the following fields:</p> <p>Hospital Code</p> <p>Patient MRN</p> <p>SourceSystemEpisodeId</p> <p>OR</p> <p>Hospital Code</p> <p>Registered Enterprise Patient ID</p> <p>SourceSystemEpisodeId</p>

Activity / Decision	Description	Detail / Notes
<p>Check Digital Health Record & Consent (including Get Episode Details)</p>	<p>HIPS-UI Web gets the details of the episode.</p>	<p>Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i>, <i>DischargeSummaryAuthor</i> and <i>DischargeSummaryRHP</i>.</p> <p>Gets the list of values for Clinical Specialty from the <i>ClinicalSpecialty</i> table of the <i>HIPSWebDataStore</i> database.</p> <p>Gets the details for the selected patient episode using the <i>GetEpisodeDetails</i> method of the HIPS <i>PatientService</i> web service using:</p> <p>The Selected Patient (MRN, Hospital Code, <i>DefaultHospitalCodeSystem</i>) Source System Episode ID</p> <p>Returns at least the following information:</p> <p>Admission Date/Time Discharge Date/Time Admission Reason Responsible Provider Name and ID Discharge Summary Status (None, Uploaded, Removed)</p>
<p>Get Episode Details</p>	<p>HIPS-Core gets details for the selected patient episode.</p>	<p>Represents the <i>GetEpisodeDetails</i> method of the <i>PatientService</i> web service.</p> <p>Returns details of the specified patient episode.</p> <p>Receives the following input:</p> <p>Patient MRN and associated Hospital Code and Code System Source System Episode ID</p> <p>Returns at least the following information for each document associated with the episode:</p> <p>Document ID Document Type Document Status (Uploaded / Removed)</p>
<p>Upload PDF Form</p>	<p>User receives the upload form showing upload or supersede as appropriate.</p>	<p>For patient episodes that have no discharge summary uploaded, the user receives a form allowing them to upload a PDF discharge summary.</p> <p>For patient episodes that have a discharge summary uploaded (status is Uploaded or Removed), the user receives a form allowing them to select another PDF to supersede the discharge summary for the indicated episode.</p> <p>Author and RHP are pre-populated with current user or the responsible provider of the episode, depending on <i>DischargeSummaryAuthor</i> and <i>DischargeSummaryRHP</i> settings.</p> <p>These forms require metadata and confirmation.</p>

Activity / Decision	Description	Detail / Notes
Complete Form	User completes the Upload PDF Discharge Summary form (either to Upload or Supersede) and submits the form.	User request includes the following field(s): Discharge Date/Time (Can be set as date only value by ticking the Date Only Discharge Date checkbox) Hospital Code MRN or Registered Enterprise Patient ID Source System Episode ID Document Author (ID, names, HPI-I) Responsible Health Professional at Time of Discharge (ID, names, HPI-I) Attached file names and contents (Body PDF, Images, Logo) Document Status Mode of Separation Clinical Specialty Date and Time of Completion Confirmation of intent to upload
Validate Form (Upload PDF)	HIPS-UI Web validates the form contents.	Validates the form contents. Validates the HPI-I of the Author and Responsible Health Professional (if entered) using the <i>HpiiValidation</i> method of the HIPS <i>HpiiService</i> web service using: HPI-I number Family Name Given Name Results are not cached.

Activity / Decision	Description	Detail / Notes
Render CDA Document	HIPS-UI Web creates a CDA wrapper for the PDF discharge summary document and renders it for viewing.	<p>Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i>.</p> <p>Gets a CDA wrapper for the document from the <i>CreateDischargeSummaryLevel1A</i> method of the HIPS <i>CdaService</i> web service using:</p> <ul style="list-style-type: none"> The Selected Patient (MRN, Hospital Code, <i>DefaultHospitalCodeSystem</i>) Admission and Discharge Date/Time (Discharge Date/Time can be date only) Document Author (ID, names, HPI-I) Responsible Health Professional at Time of Discharge (ID, names, HPI-I) Attached file names and contents (Body PDF, Images, Logo) Document Status Mode of Separation Clinical Specialty Date and Time of Completion <p>Stores in cache after creation, using these keys:</p> <ul style="list-style-type: none"> Hospital Code Patient MRN Document Set ID Document ID <p>Rendering leverages and extends existing My Health Record System Web Viewer functionality to render the document CDA package using the Agency stylesheet.</p>
Create Level 1A Discharge Summary	HIPS-Core creates a CDA wrapper for the PDF document.	<p>Represents the <i>CreateDischargeSummaryLevel1A</i> method of the <i>CdaService</i> web service.</p> <p>Creates a CDA discharge summary document that wraps a PDF document body.</p> <p>Receives the following input:</p> <ul style="list-style-type: none"> PDF document Patient identifier CDA header metadata Attachment files <p>Returns at least the following information:</p> <ul style="list-style-type: none"> CDA document Attachment files
Preview Document	User views the rendered document as it would be shown on the My Health Record System.	Leverages and adapts existing My Health Record System Web Viewer functionality. See view document screen.

Activity / Decision	Description	Detail / Notes
Print Document	User clicks the Print button on the view document modal window.	User request includes the following field(s): Hospital Code Patient MRN Document Set ID Document ID
Print Document	HIPS-UI Web renders the document in a new window for printing.	Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i> . Retrieve the document from the cache. Views the document in a new window and invokes the print function of the browser.
Confirm Upload	User clicks the Upload button on the view document modal window.	User request includes the following field(s): Hospital Code Patient MRN Document Set ID Document ID
Upload Document	HIPS-UI Web uploads the document to the My Health Record System.	Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i> . Retrieve the document from the cache. Upload the document to the My Health Record System using the <i>UploadOrSupersedeDocument</i> method of the HIPS <i>PcehrService</i> web service using: The Selected Patient (MRN, Hospital Code, <i>DefaultHospitalCodeSystem</i>) CDA document Attachment files Document Format code for Level 1A Discharge Summary
Upload Document to My Health Record System	HIPS-Core uploads or supersedes the document to the My Health Record System.	Represents the <i>UploadOrSupersedeDocument</i> method of the <i>PcehrService</i> web service. Uploads a document to the My Health Record System. Receives the following input: Patient MRN and associated Hospital Code and Code System CDA document Attachment files Document format code
View Result	The User receives an updated form page indicating the patient has now successfully placed a request to upload the document.	The episode list can be refreshed to retrieve the latest document state.

3.2.22.4 Web User Interfaces

View Patients

View Patients screen allows the user to select a patient, either by filtering current/recent patients or searching by MRN.

The screenshot shows the 'Discharge Summary - Patients' interface. At the top, there's a browser address bar and a search icon. Below that, the page title 'HIPS-UI Version 4.11' and a login status 'Logged in as NAME on behalf of HOSPITAL (HPO NAME)' are displayed. A navigation menu includes links for Home, Healthcare Identifiers, Patient Registration, Clinical Documentation, and Secure Messaging. The main content area features a search bar and a table of patients. The table has columns for Name, Date of Birth, MRN, Location, Has PCEHR, and Actions. Below the table, there's a pagination control showing 'Showing 1 to 10 of 33 entries' and buttons for 'First', 'Prev', '1', 'Next', and 'Last'. At the bottom, there's a 'Lookup by MRN' section with an input field and a 'Lookup' button. Callout boxes provide detailed explanations for these elements.

Sortable columns. Default sort Name ASC.

Data to display (as available):

- Name
- Date of Birth
- MRN
- Location (Ward:Room:Bed) of latest episode at the selected hospital
- PCEHR Status

Link to Select HPO to change hospital.

Errors and feedback to be displayed on top of page.

Search bar to filter across all columns (except actions).

Clicking "Select" link shows the episodes that the selected patient has had at the current healthcare provider organisation ("View Episodes").

**Paging of results
Page size: 10.**

Lookup by MRN allows exact search on MRN across all time. If result found, episodes for that patient are shown. Otherwise an error is displayed, and another patient can be selected.

Summary of matching results.

Name	Date of Birth	MRN	Location	Has PCEHR	Actions
JONES, Betty	2/3/1980	JONES123	Ward 3.Room 4:	Yes	Select
SMITH, Andrew	1/4/1990	56ASQ	Ward 2:..	No	Select
SQUIRE, Lily	1/2/1960	SQ123L	W1R2.Bed3	No	Select
JONES, Betty	2/3/1980	JONES123	Ward 3.Room 4:	Yes	Select
SMITH, Andrew	1/4/1990	56ASQ	Ward 2:..	No	Select
SQUIRE, Lily	1/2/1960	SQ123L	W1R2.Bed3	No	Select
JONES, Betty	2/3/1980	JONES123	Ward 3.Room 4:	Yes	Select
SMITH, Andrew	1/4/1990	56ASQ	Ward 2:..	No	Select
SQUIRE, Lily	1/2/1960	SQ123L	W1R2.Bed3	No	Select
JONES, Betty	2/3/1980	JONES123	Ward 3.Room 4:	Yes	Select

View Episodes

View Episodes screen lists the episodes at the selected hospital for the selected patient. Also available as embedded without header/footer.

Discharge Summary - Episodes

HIPS-UI Version 4.1.1
Logged in as Dr Nila Batel on behalf of Test Hospital (Test Org)

Home | Healthcare Identifiers | Patient Registration | Clinical Documentation | Secure Messaging

Discharge Summary - Episodes for SMITH, Jane

Search

Admitted	Discharged	Admission Reason	Responsible Provider	Discharge Summary	Actions
10/4/2014 11:22	-	Arm Injury	Dr Test Test	None	Upload
5/4/2014 22:03	6/4/2014 11:30	Leg Pain	Dr Test Test	Uploaded	Supersede
24/3/2014 12:22	25/3/2014 11:20	Arm Injury	Dr Test Test	None	Upload
12/3/2014 11:22	13/3/2014 11:10	Arm Injury	Dr Test Test	None	Upload
6/3/2014 23:22	7/3/2014 11:00	Arm Injury	Dr Test Test	None	Upload
3/3/2014 09:22	4/3/2014 10:50	Arm Injury	Dr Test Test	None	Upload
16/2/2014 10:03	20/2/2013 10:40	Leg Pain	Dr Test Test	Uploaded	Supersede
8/2/2014 11:22	10/2/2014 10:30	Arm Injury	Dr Test Test	None	Upload
4/2/2014 14:22	6/2/2014 10:20	Arm Injury	Dr Test Test	Removed	Supersede
2/2/2014 01:22	3/2/2014 10:10	Arm Injury	Dr Test Test	None	Upload

Showing 1 to 10 of 33 entries

First Prev 1 2 Next Last

Page size: 10.

Upload or Supersede PDF

Upload or Supersede PDF screen allows entry of the metadata and selection of the files to upload. Also available as embedded without header/footer.

Discharge Summary - Upload PDF

Patient
FARMER, HAROLD (tc-ehisc08-01b)

Hospital
Royal Chamonix Hospital

Responsible Provider: Unknown

Admission Reason:

Document Author

User ID *
Given Name *
Family Name *
HPI-I

Date of Birth: 19/12/1991

Upload Status: None

Admission Date: 10/02/2016 10:13

Discharge Date *

Date Only Discharge Date

Responsible Health Professional

User ID *
Given Name *
Family Name *
HPI-I

Attached Files

Type	File Name	Size	Actions
Body	dischargesummary.pdf	17.53 KB	Remove
Logo	logo.png	11.42 KB	Remove

Source Document Status *

Clinical Specialty *

Confirm Upload Clinical Document
 Please confirm that you want to upload the discharge summary to the patient's digital health record.

Date and Time of Completion *

[Select Discharge Summary PDF...](#)

[Preview Document](#)

[Add Attached Image...](#)

Title to be "Discharge Summary – Upload PDF" unless there is already a discharge summary uploaded for this episode, in which case "Discharge Summary – Supersede PDF".

Details of selected patient and episode appear at the top.

Author's ID and names are pre-populated from current user or episode (configurable).

- Table to display:
- Type (Body PDF, Image or Logo)
 - File Name
 - Size (KB or MB)

Button to select discharge summary body. Accepts PDF up to 10 MB. User must select a body PDF before completing the form.

Drop-down to select document status.

Drop-down field to enter clinical specialty (configurable list).

Validates form, calls Create Level 1A and displays the document in a modal window.

Validation errors and feedback to be displayed on top of page.

Upload status shows whether the discharge summary for this episode has been uploaded or removed. (None / Uploaded / Removed)

Prepopulate discharge date/time from episode if not null, otherwise require user to enter.

Checkbox to indicate the discharge date/time is a date only value.

RHP's ID and names are pre-populated from the user or responsible provider of the episode (configurable).

HPI-I fields can be left empty otherwise must start with "800361", pass Luhn check, and HPI-I search.

Link to remove item from table.

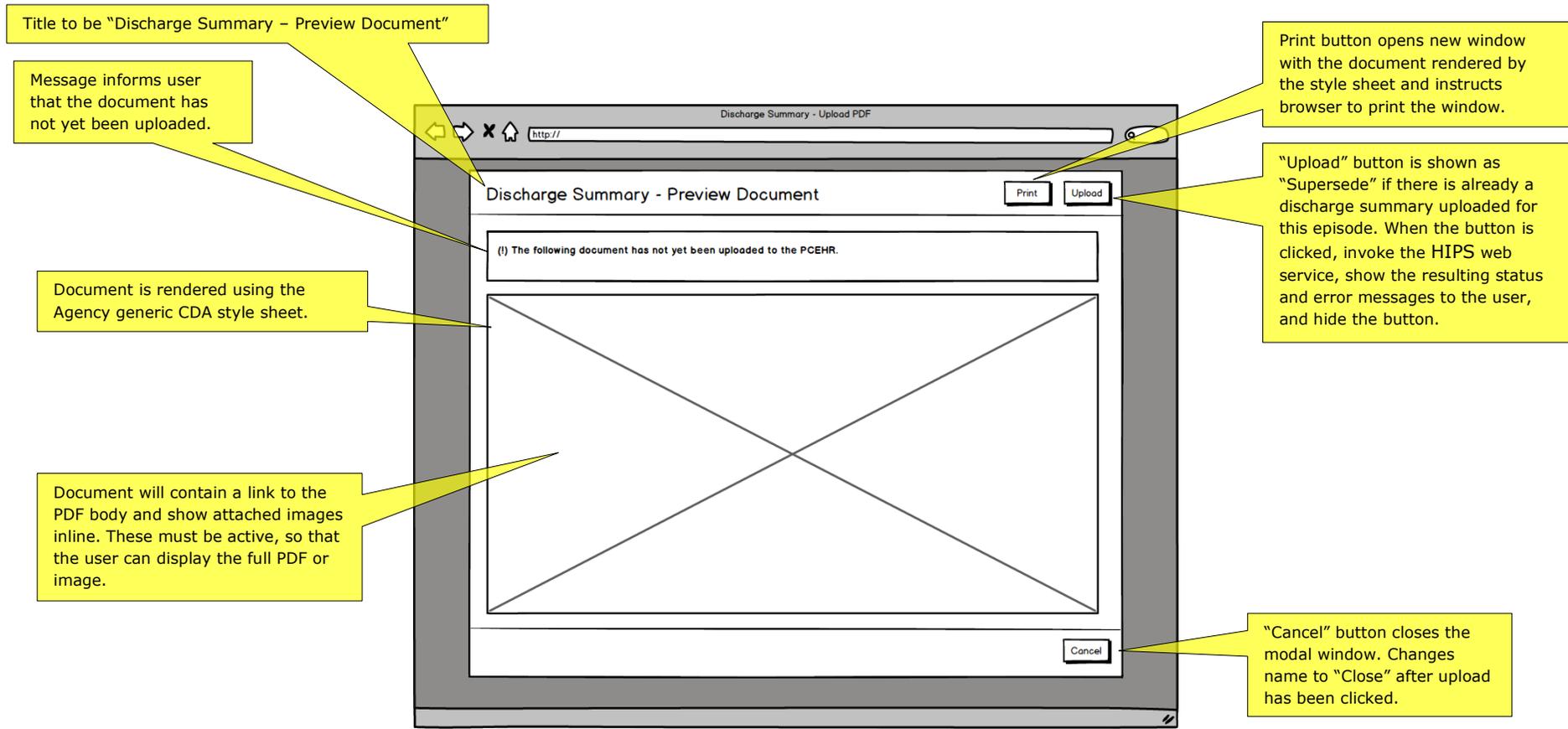
Button to add image attachment. Accept JPG or PNG up to 10 MB. Note: Internet Explorer 8 will not support multiple attachments.

Drop-down to select mode of separation.

User must confirm upload and enter the document's completion date and time.

Preview Document

Preview Document modal pop-up allows user to confirm the document contents before printing and uploading the document.

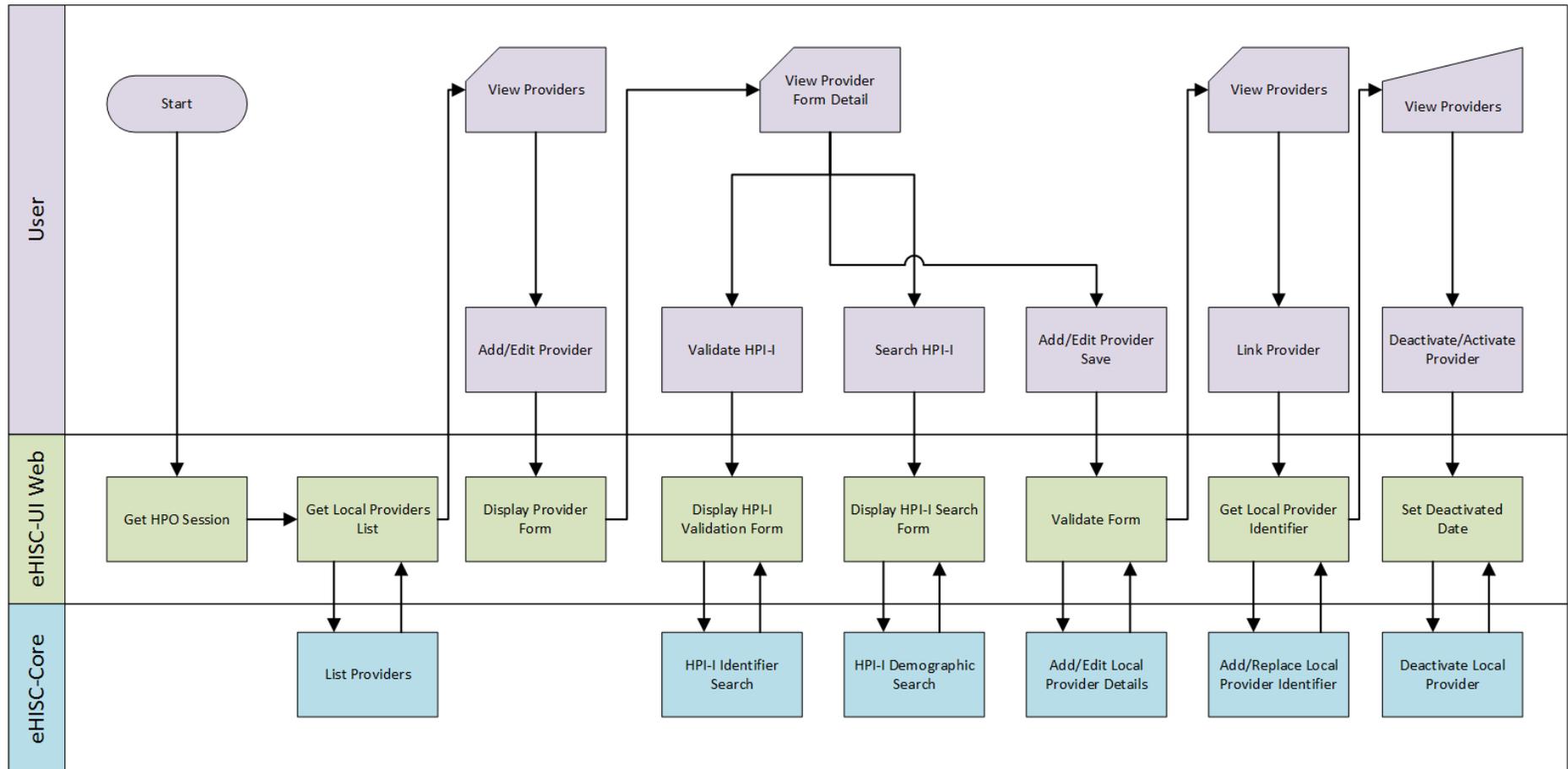


3.2.23 Manage Local Providers

3.2.23.1 Description

Provides an interface to list Local Providers, create or update Local Providers and Activate or Deactivate Local Providers, and to search or validate HPI-I's for Local Providers.

3.2.23.2 Process Overview



3.2.23.3 Process Detail

Activity / Decision	Description	Detail / Notes
Prerequisites	User logged in to the HIPS-UI Web application with appropriate security access.	Valid security details are required to login.
	User has selected a healthcare provider organisation (HPO) and facility.	The controller will redirect to the Select HPO page if the session does not contain a HPO facility selection.
Start	User requests the 'Local Providers' page.	Located under Healthcare Identifiers > Local Providers.
Get Settings	HIPS-UI Web loads configuration settings.	No changes required to the current functionality.
Get Local Providers List	HIPS-UI Web displays local providers for all HPO facilities.	Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i> . Gets a list of local providers from the <i>ListLocalProviders</i> method of the HIPS <i>HpiiService</i> web service Results are not cached.
List Providers	HIPS-Core returns a list of all providers.	Represents the <i>ListLocalProviders</i> method of the <i>HPIIService</i> web service. Provider data to include the following information (as available): Local Provider Code Full Name HPI-I HPI-I Status Local Provider Status List of Local Provider Identifiers
View Providers	User receives a screen displaying the providers list for all hospitals.	Implement server-side paging for large result sets.
Add or Edit Provider	User clicks the <i>Add</i> button to create a new provider or the <i>Edit</i> icon in the action column next to an existing Provider.	A new page is displayed .
Display Provider form	HIPS-UI Web displays the Add or Edit Provider form.	Refers to Action. If <i>Add</i> then loads an empty form. If <i>Edit</i> then loads the form with the details of the Provider selected retrieved from the Providers List.
AHPRA or HPI-I Search	User clicks the <i>AHPRA or HPI-I Search</i> button on the Add or Edit Provider page.	The HPI-I Identifier Search page is loaded in a modal dialogue. This page is the same as the existing HPI-I Validation page in HIPS-UI.

Activity / Decision	Description	Detail / Notes
Display the HPI-I Identifier Search form	HIPS-UI Web displays the HPI-I Identifier Search form.	<p>Opens the HPI-I Identifier Search page in a modal dialogue.</p> <p>If the following fields have been entered into the Add Provider screen they should be passed through to the HPI-I Identifier Search page:</p> <p>HPI-I Family Name Given Name(s)</p>
HPI-I Identifier Search	User clicks the <i>Search by Identifier</i> button.	Submits the HPI-I Identifier Search form.
HPI-I Identifier Search	HIPS-UI Web invokes the HPI-I Web service, SearchByIdentifier method.	<p>Searches for the provider's HPI-I using the SearchByIdentifier method of the HpiiService web service using:</p> <p>The current HPO facility (HPI-O) The Identifier search query. Results are not cached.</p>
HPI-I Identifier Search	HIPS-Core returns Search Result message.	<p>Represents the <i>HpiIdentifierSearch</i> method of the <i>HpiiService</i> web service.</p> <p>HpiIdentifierSearch response data to include the following information (as available):</p> <p>Error details HPI-I</p>
HPI-I Identifier Search Response	HIPS-UI Web receives the HPI-I SearchByIdentifier response and handles it.	<p>Receives the HpiIdentifierSearch response.</p> <p>If the search was unsuccessful and the Provider's HPI-I was not found, then display the response message.</p> <p>If the search was successful and the Provider's HPI-I was found, then the modal dialogue should close and the HPI-I number should be returned to the Add or Edit Provider page.</p>
Demographic Search for HPI-I	User clicks the <i>Demographic Search</i> button on the Add or Edit Provider page.	The HPI-I Demographic Search page is loaded in a modal dialogue. This page is the same as the existing HPI-I Search page in HIPS-UI Web.
Display the HPI-I Demographic Search form	HIPS-UI Web displays the HPI-I Demographic Search form.	<p>Opens the HPI-I Demographic Search page in a modal dialogue.</p> <p>If the following fields have been entered into the Add Provider screen, they should be passed through to the HPI-I Validation page:</p> <p>Family Name Given Name(s)</p>
HPI-I Search	User clicks the <i>Search by Demographics</i> button.	Enters the required details and submits the HPI-I search form.

Activity / Decision	Description	Detail / Notes
HPI-I Search	HIPS-UI Web invokes the Core service, SearchByDemographics method.	Searches for the provider's HPI-I using the <i>SearchByDemographics</i> method of the <i>HpiiService</i> web service using: The current HPO facility (HPI-O) The Demographics search query. Results are not cached.
HPI-I Search	HIPS-Core returns Search Result message.	Represents the <i>HpiiDemographicsSearch</i> method of the <i>HpiiService</i> web service. <i>HpiiDemographicsSearch</i> response data to include the following information (as available): Error details HPI-I
HPI-I Search Response	HIPS-UI Web receives the HPI-I web service's SearchByDemographics response and handles it.	Receives the <i>HpiiDemographicsSearch</i> response. If the search was unsuccessful and the Provider's HPI-I was not found, then display the response message. If the search was successful and the Provider's HPI-I was found, then the modal dialogue will close and the HPI-I number will be returned to the Add or Edit Provider page.
Add or Edit Provider - Save	User clicks on the <i>Save</i> button of the Add or Edit Provider form.	User enters all of the details for the provider and clicks on the Save button.
Add or Edit Provider - Save	HIPS-UI Web validates the data and calls the appropriate web service methods from the <i>HpiiService</i> .	Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i> . Validates: the Provider's Family Name has been entered if a HPI-I has been entered it is in the correct format. Invokes a request to the <i>AddEditLocalProvider</i> method of the <i>HpiiService</i> web service using: The current HPO facility (Code, <i>DefaultHospitalCodeSystem</i>) Family Name Given Names Suffix Title HPI-I Local Provider Identifier
Add or Edit Provider - Save	HIPS-Core validates the request and returns a response.	Represents the new <i>AddEditLocalProvider</i> method of the <i>HpiiService</i> web service. Checks if the Provider exists already if a Local Identifier has been passed through. If a Provider does not exist a new Provider will be created. If the Provider exists, then the existing Provider will be updated. Responds with a successful response type or an unsuccessful response type.

Activity / Decision	Description	Detail / Notes
Add or Edit Provider – Save Response	HIPS-UI Web receives the Add or Edit Provider response.	Receives the AddEditLocalProvider response. Displays the successful response or unsuccessful response with any error messages.
Add or Edit Provider – Save Response	User will receive either a successful message or unsuccessful message and any error messages as part of the response.	Notifies the user if the Save action was successful. If the Save action was unsuccessful a message stating such should be displayed and any detailed error messages.
Link Provider	User clicks on the <i>Link</i> Provider icon in the Action column of the View Providers List.	The Link Provider icon will only be displayed if the Provider does not have a Local Identifier for the User's selected HPO facility.
Link Provider	HIPS-UI Web displays a text box for the user to enter a Local Identifier.	The user needs to enter the Local Identifier to link this Provider to their selected HPO facility. Invokes a request to the <i>AddReplaceLocalProviderIdentifier</i> method of the <i>HpiiService</i> web service using: Existing Local Provider Identifier The selected HPO facility (Code, <i>DefaultHospitalCodeSystem</i>) New Local Provider Identifier
Link Provider	HIPS-Core links the Provider and returns a response.	Represents the new <i>AddReplaceLocalProviderIdentifier</i> method of the <i>HpiiService</i> web service. Checks if the Provider is already linked to the Hospital, if it does an error is returned. Otherwise add the new Local Identifier to the Provider for the selected Hospital. Responds with a successful response type or an unsuccessful response type.
Link Provider - Response	HIPS-UI Web will handle the <i>AddReplaceLocalProviderIdentifier</i> response.	Receives the AddReplaceLocalProviderIdentifier response. If the Provider is linked successfully the View Providers List should refresh to display the Provider with the new Local Identifier. If an error was returned, then display the error message and details to the user.
Deactivate/Activate Provider	User clicks on the <i>Deactivate</i> or <i>Activate</i> Provider icon in the Action column of the View Providers List.	The Deactivate icon is only displayed if the Provider has a Local Identifier set for the user's selected hospital and the Local Provider is currently Active. If Deactivate Provider is clicked the user will need to enter a Deactivated Date and Time, this will default to the current date and time. The Activate icon is only displayed if the Providers has a Local Identifier set for the user's selected hospital and the Local Provider is currently Inactive.

Activity / Decision	Description	Detail / Notes
Deactivate/Activate Provider	HIPS-UI Web invokes the <i>DeactivateLocalProvider</i> method of the <i>HpiiService</i> web service.	Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i> . Invokes a request to the <i>DeactivateLocalProvider</i> method of the <i>HpiiService</i> web service using: The Selected HPO facility (Code, <i>DefaultHospitalCodeSystem</i>) Local Provider Identifier Deactivated DateTime (set to null if Provider is to be re-activated)
Deactivate/Activate Provider	HIPS-Core will either Activate or Deactivate the Provider based on the current status and using the Local Provider Identifier.	Represents the new <i>DeactivateLocalProvider</i> method of the <i>HpiiService</i> web service. Sets the deactivated date on the Provider, if a null date is sent as part of the request for Deactivated DateTime then the Provider is activated. This method Activates and Deactivates the Provider across all HPO facilities, not just the selected HPO facility. Responds with a successful response type or an unsuccessful response type.
Deactivate/Activate Provider - Response	HIPS-UI Web will handle the <i>DeactivateLocalProvider</i> response.	Receives the <i>DeactivateLocalProvider</i> response. If the Provider activation or deactivation is successful, the View Providers List should refresh to display the Provider with the new Status and Actions. If an error was returned, then display the error message and details to the user.
View Provider List	User views the refreshed Providers List.	

3.2.23.4 Web User Interfaces

View Providers

Lists all the Local Providers and allows the user to Add, Edit, Activate, or Deactivate.

Local Providers

Page title is 'Local Providers' as list if for all providers not just the ones associated with the User's HPO facility.

User can search on any of the column data to easily find the Provider they want.

Search: Type to search...

Name	Local Identifier	HPI-I	Status	Actions
Anna JONES		8003615833334118	Active	
BLACK		8003619166667441	Active	
Dr Adrian Grignon Jr	GRIG01	8003611566666859	Active	
Dr Clinton Kaplan	kapl01	8003618233359172	Inactive	
Dr Fred Mason	FREDM	8003616566697807	Active	
Dr GINA GOUSHMAN	GG01	8003616566696830	Inactive	
GORDON CHANDLER		8003618233359164	Active	
John Smith			Active	
Dr Paul Hill	PHILL01		Active	

Retired

Showing 1 to 10 of 13 entries

First Previous 1 2 Next Last

Add

Add button: Opens the Add or Edit Provider page with empty fields to allow the User to Add a new Local Provider.

List details:

- Name: always displayed
- Local Identifier: only displays the Local Identifier for the User's selected HPO facility, can be empty if the Provider is not yet linked to the User's selected hospital.
- HPI-I: can be empty.
- Status: always displayed as Active or Inactive.
- Actions: dependent on Provider Status and whether they are linked or not to User's HPO facility.

Link action icon: only displayed if local identifier is empty for the User's HPO facility.

Edit action icon: only displayed if Provider is a Local Provider and has a Status of Active.

Alert icon: displayed when the Hpii Status returned is not 'Active'. When user mouses over a tool tip should display stating the Hpii Status string value.

Activate action icon: only displayed if the Provider is a Local Provider and has a status of Inactive

Deactivate action icon: only displayed if Provider is a Local Provider and has a Status of Active. Once clicked the user should be prompted to enter a deactivation date and time, this should default to the current date and time but allow the user to change.

Add or Edit Provider

Allows users to add a new local provider, edit an existing local provider, search and associate a local provider with a HPI-I.

New Provider for Royal Chamonix Hospital

Provider Details

Title
Please Select... ▾

Family Name *
Family Name

Given Name
Given Name

Suffix
Please Select... ▾

Healthcare Provider Identifier Individual

HPI-I
800361

AHPRA or HPI-I Search **Demographic Search**

Save

Form details:

- Title: drop down of configured Titles
- Family Name: mandatory text box
- Given Name(s): text box
- Suffix: drop down of configured suffixes

Page title is either 'New' or 'Edit', depending on user's previous action, 'Provider for' append user's selected HPO facility

HPI-I: text box validated against HPI-I format.

Demographic Search button: opens the HPI-I Demographic Search form in a modal dialog.

AHPRA or HPI-I search button: opens the HPI-I Identifier Search form in a modal dialog.

Save button: validates the form. If valid details are submitted to *HpiiService.AddEditLocalProvider*. If invalid, validation messages should be displayed.

3.2.24 HPI-I Search

The Provider Individual Search page allows users to find a Provider Individual. It initially presents a simplified selection of common search filters. The section is accessible in HPI-I Search, which is located in the Health Identifiers section.

The screenshot shows the 'HPI-I Search' form with the following sections and callouts:

- Demographic Details:** Includes fields for Family Name, Given Name(s), Sex, and Date of Birth. A callout states: "Any validation errors to be presented on page under the subtitle."
- Australian Address:** Includes fields for Postal Delivery Type, Postal Delivery Number, Unit Type, Unit Number, Level Type, Level Number, Site/Building Name, Street Number, Lot Number, Street Name, Street Type, and Street Suffix. Callouts include: "Additional search criteria" (pointing to the Unit and Level Type dropdowns), "Populated from Postal Delivery Types reference data." (pointing to the Postal Delivery Type dropdown), "Populated from Unit Types reference data." (pointing to the Unit Type dropdown), "Populated from Level Types reference data." (pointing to the Level Type dropdown), and "Populated from Street Types reference data." (pointing to the Street Type dropdown).
- Suburb and State:** Includes fields for Suburb, Postcode, and State. A callout states: "Additional search criteria" (pointing to the State dropdown).
- International Address:** Includes fields for Address Line, State / Province, Postcode, and Country. A callout states: "Clicking 'Search by Demographics' performs a search using the provided parameters and displays the results as per Search Results." (pointing to the 'Search by Demographics' button).

3.3 Embedded Pages

The embedded pages allow for the HIPS-UI to be accessed directly from other systems where applicable. The following section describes the embedded pages links. In all the embedded pages, no main site header or footer will be displayed.

3.3.1 Adult Patient Registration

The Adult Patient Registration page as described in Section 3.2.13 can be accessed directly using the URLs below.

URL	Description
http://[WebSite]:[Port]/EmbeddedAssistedRegistration/Hospitals/[Hospital Code]/Patients/[MRN]/Register	This URL should be used when each facility has a separate MRN and the patient records are not linked between facilities.
http://[WebSite]:[Port]/EmbeddedEnterpriseAssistedRegistration/Hospitals/[Hospital Code]/Patients/[MRN]/Register	This URL should be used when multiple facilities use a single MRN for each patient across the enterprise.
http://[WebSite]:[Port]/EmbeddedEnterpriseAssistedRegistration/Hospitals/[Hospital Code]/Patients/[MRN]/[StatePatientId]/Register	This URL should be used when multiple facilities each create an MRN for each patient, but there is a single patient ID that links the MRNs across the enterprise.

Where:

[WebSite]:[Port] is the configured website address and port number for HIPS-UI.

[Hospital Code] is a code identifying the healthcare facility where the patient is being registered.

[MRN] is a local patient ID issued by the healthcare facility.

[StatePatientId] is an enterprise-wide patient ID that links multiple facility MRN's to one master patient record.

3.3.2 Dependent Patient Registration

The Dependent Patient Registration page as described in Section 3.2.14 can be accessed directly using the URLs below.

URL	Description
http://[WebSite]:[Port]/EmbeddedAssistedRegistration/Hospitals/[Hospital Code]/Patients/[MRN]/RegisterDependent	This URL should be used when each facility has a separate MRN and the patient records are not linked between facilities.
http://[WebSite]:[Port]/EmbeddedEnterpriseAssistedRegistration/Hospitals/[Hospital Code]/Patients/[MRN]/RegisterDependent	This URL should be used when multiple facilities use a single MRN for each patient across the enterprise.

URL	Description
http://[WebSite]:[Port]/EmbeddedEnterpriseAssistedRegistration/Hospitals/[Hospital Code]/Patients/[MRN]/[StatePatientId]/RegisterDependent	This URL should be used when multiple facilities each create an MRN for each patient, but there is a single patient ID that links the MRNs across the enterprise.

Where:

[WebSite]:[Port] is the configured website address and port number for HIPS-UI.

[Hospital Code] is a code identifying the healthcare facility where the patient is being registered.

[MRN] is a local patient ID issued by the healthcare facility.

[StatePatientId] is an enterprise-wide patient ID that links multiple facility MRN's to one master patient record.

3.3.3 Patient Summary

The Patient Summary page as described in Section 3.2.3 can be accessed directly using the URLs below.

URL	Description
http://[WebSite]:[Port]/EmbeddedPcehrView/Hospitals/[Hospital Code]/Patients/[MRN]/PatientSummary	This URL should be used when each facility has a separate MRN and the patient records are not linked between facilities.
http://[WebSite]:[Port]/EmbeddedEnterprisePcehrView/Hospitals/[Hospital Code]/Patients/[MRN]/PatientSummary	This URL should be used when multiple facilities use a single MRN for each patient across the enterprise.
http://[WebSite]:[Port]/EmbeddedEnterprisePcehrView/Hospitals/[Hospital Code]/Patients/[MRN]/[StatePatientId]/PatientSummary	This URL should be used when multiple facilities each create an MRN for each patient, but there is a single patient ID that links the MRNs across the enterprise.

Where:

[WebSite]:[Port] is the configured website address and port number for HIPS-UI.

[Hospital Code] is a code identifying the healthcare facility accessing the My Health Record.

[MRN] is a local patient ID issued by the healthcare facility.

[StatePatientId] is an enterprise-wide patient ID that links multiple facility MRN's to one master patient record.

3.3.4 Upload PDF Discharge Summary

The Upload PDF Discharge Summary page as described in Section 3.2.22 can be access directly using the URLs below.

URL	Description
http://[WebSite]:[Port]/EmbeddedDocumentUpload/Hospitals/[Hospital Code]/Patients/[MRN]/Episodes	This URL should be used when each facility has a separate MRN and the patient records are not linked between facilities. This URL will display the View Episodes page for the given Patient as per section 0.
http://[WebSite]:[Port]/EmbeddedDocumentUpload/Hospitals/[Hospital Code]/Patients/[MRN]/Episodes/[Episode ID]/Upload	This URL should be used when each facility has a separate MRN and the patient records are not linked between facilities. This URL will display the Upload or Supersede PDF page for the given Patient and Episode as per section 0.
http://[WebSite]:[Port]/EmbeddedEnterpriseDocumentUpload/Hospitals/[Hospital Code]/Patients/[MRN]/Episodes	This URL should be used when multiple facilities use a single MRN for each patient across the enterprise. This URL will display the View Episodes page for the given Patient as per section 0.
http://[WebSite]:[Port]/EmbeddedEnterpriseDocumentUpload/Hospitals/[Hospital Code]/Patients/[MRN]/Episodes/[Episode ID]/Upload	This URL should be used when multiple facilities use a single MRN for each patient across the enterprise. This URL will display the Upload or Supersede PDF page for the given Patient and Episode as per section 0.
http://[WebSite]:[Port]/EmbeddedEnterpriseDocumentUpload/Hospitals/[Hospital Code]/Patients/[MRN]/[StatePatientId]/Episodes	This URL should be used when multiple facilities each create an MRN for each patient, but there is a single patient ID that links the MRNs across the enterprise. This URL will display the View Episodes page for the given Patient as per section 0.
http://[WebSite]:[Port]/EmbeddedEnterpriseDocumentUpload/Hospitals/[Hospital Code]/Patients/[MRN]/[StatePatientId]/Episodes/{Episode ID}/Upload	This URL should be used when multiple facilities each create an MRN for each patient, but there is a single patient ID that links the MRNs across the enterprise. This URL will display the Upload or Supersede PDF page for the given Patient and Episode as per section 0.

Where:

[WebSite]:[Port] is the configured website address and port number for HIPS-UI.

[Hospital Code] is a code identifying the healthcare facility.

[MRN] is a local patient ID issued by the healthcare facility.

[StatePatientId] is an enterprise-wide patient ID that links multiple facility MRN's to one master patient record.

[EpisodeId] is the visit number for the episode of care for the patient in the facility.

3.4 Security Model

Security is implemented using a combination of IIS Windows Security or JSON Web Tokens for authentication and the MVC Authorisation package for authorisation.

3.4.1 Active Directory Authentication

When a user first navigates to the HIPS-UI Web site they will be presented with a log in page.



Log in

<p>User name <input type="text"/></p> <p>Password <input type="password"/></p> <p><input type="button" value="Log in"/></p>	<p>Log in with current user account</p> <p><input type="button" value="Windows"/></p>
---	---

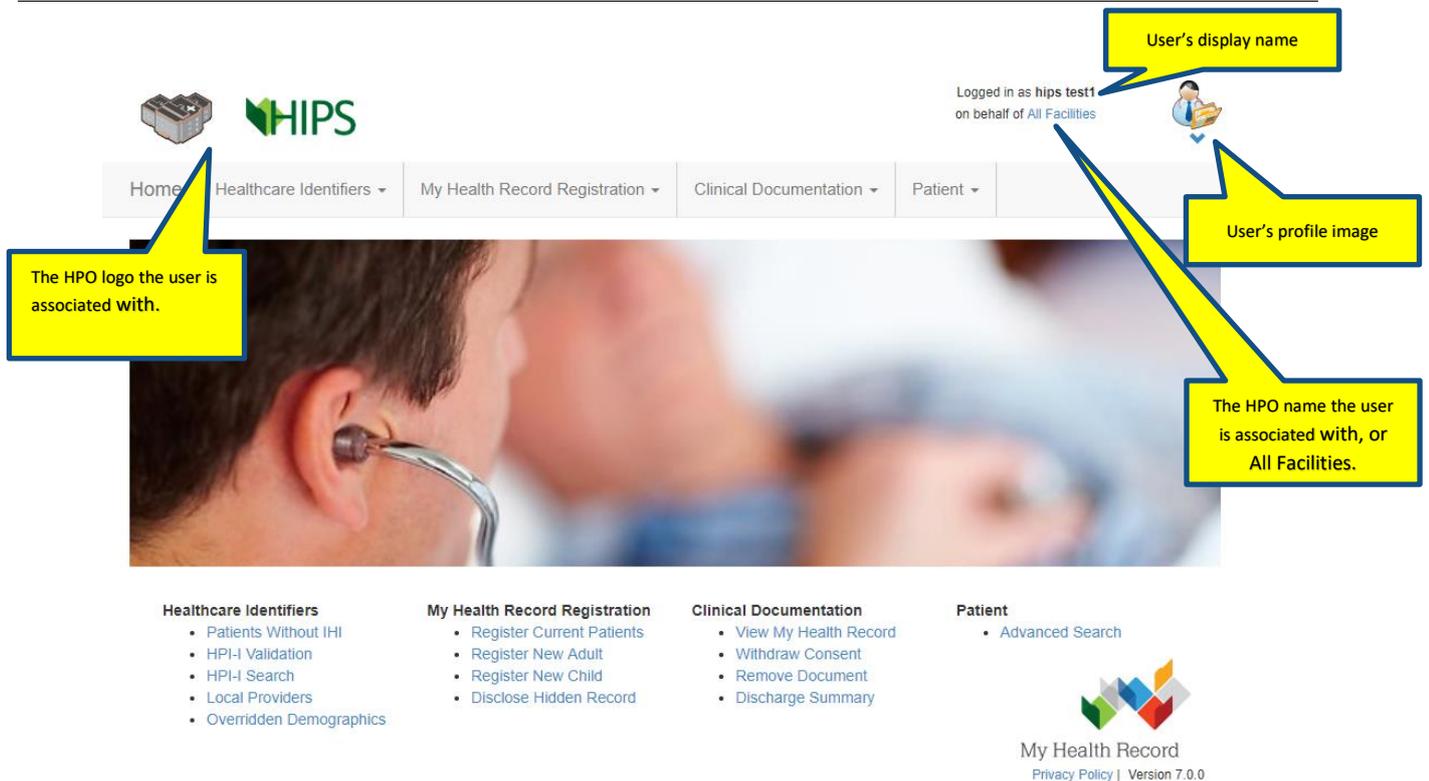


My Health Record
[Privacy Policy](#) | Version 7.0.0

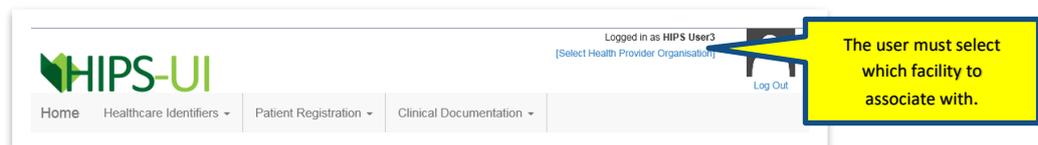
The user has the options of logging in to the HIPS-UI Web by entering their Active Directory username and password and clicking Log in or by logging in with the user account that is currently logged onto the PC.

The Windows Identity is then validated against Active Directory to determine if the user can be authenticated.

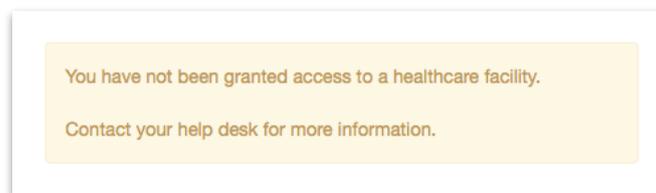
If Active Directory authentication passes then the user groups are retrieved for authorisation, the user’s profile image (if available), and first name and surname from Active Directory. The user’s authorised healthcare facilities (hospitals) are retrieved from the HIPS-Core database. If only one facility is associated to the user then the HIPS-UI Web banner is updated to display the facility logo and name.



If the user is authorised to access HIPS-UI on behalf of more than one facility then the HIPS-UI Web banner is updated to display the user’s name and profile image and a hyperlink for the user to click to select which facility they want to be associated with for the current session. If the UI is running in the embedded mode and if configured the user will simply see a ‘Log Out’ link at the top of the window as the banner and footer is hidden in the embedded pages.



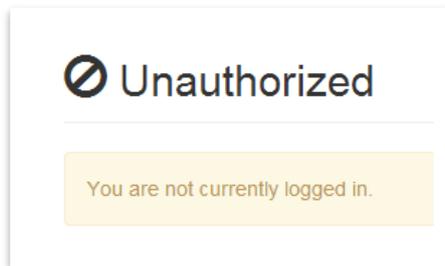
If the user is not authorised to access on behalf of any facilities the user will be presented with the following message and not be granted access to any of the HIPS-UI Web functions.



Once authenticated the user has the option of logging out of the HIPS-UI Web application by clicking on the Log Out link in the banner. This will log the user out of the session and return them to the Log in screen.

If the HIPS-UI Web application is inactive for a period of minutes specified in the web.config file the user will be automatically logged out of the HIPS-UI Web application and the will need to log back in to continue.

If Active Directory authentication fails, the user is presented with a page indicating they are unauthenticated.



3.4.2 JSON Web Token Authentication

The JSON Web Token Authentication method allows a software vendor to integrate their clinical information system with HIPS-UI so that the CIS user identity is passed through to the HIPS-UI automatically. This mechanism avoids users needing to authenticate to HIPS-UI with an Active Directory account.

When the user requests a patient’s My Health Record, the clinical information system issues a token to identify the user. The token is added to the URL for launching the Embedded View of the My Health Record.

3.4.2.1 Token Payload

A valid token payload consists of the following entries in a JSON dictionary:

family_name	Family name of the user.
given_name	Given name of the user.
sub	Subject: a unique identifier of the user.
jti	JWT ID: a unique identifier for the token.
role	Roles: A list of security permissions belonging to the user, equivalent to the Active Directory group names that control functional permissions and facility permissions.
nbf	Not Before: Unix timestamp before which the token should not be accepted.
exp	Expiry: Unix timestamp after which the token should not be accepted.
iat	Issued At: Unix timestamp for when the token was issued.
iss	Issuer: an identifier of the system that issued the token.
aud	Audience: an identifier of the system that the token is intended for.

3.4.2.2 Token Signing

The claims in the JWT are encoded as a JSON object that is used as the payload of a JSON Web Signature (JWS) structure.

The token must be signed with the RSA-SSA-PKCS version 1.5 algorithm, using the SHA-256 digest of the token payload and the RSA private key of an X.509 v3 certificate.

The signed token is made of the following 3 parts in compact representation, which is the URL-safe base-64 encoding of each part, joined with dots.

Header	<p>The fixed JSON string:</p> <pre>{"alg": "RS256", "typ": "JWT"}</pre> <p>The “RS256” represents the signature algorithm RSA-SSA-PKCS-v1.5 using SHA-256. The “JWT” represents that the payload is a JSON Web Token.</p>
Payload	<p>The JWT token payload, for example:</p> <pre>{ "family_name": "Smith", "given_name": "Sam", "sub": "ssmith", "jti": "216a93db-0a96-4e8a-9d42-1086a5a67a4f", "role": ["ViewMyHealthRecord", "AssistedRegistration"], "nbf": 1470814350, "exp": 1470814360, "iat": 1470814350, "iss": "CIS", "aud": "HIPS" }</pre>
Signature	<p>The digital signature produced using the signature algorithm.</p>

3.4.2.3 Token Encryption

The encoded JWS structure is used as the plaintext of a JSON Web Encryption (JWE) structure, enabling the claims to be digitally encrypted with a pre-shared encryption key.

The token is encrypted with a direct pre-shared symmetric key, using AES-256-CBC with an HMAC-SHA-512 authentication tag, to prove that the data is correctly decrypted. The shared secret key for this encryption method must be 512 bits (64 bytes).

The encrypted token is made of the following 5 parts in Compact representation, which is the URL-safe Base64 encoding of each part, joined with dots.

Protected Header	<p>The fixed JSON string:</p> <pre>{"alg": "dir", "enc": "A256CBC-HS512"}</pre> <p>The “dir” represents that there is no key wrapping algorithm but rather a direct pre-shared symmetric key. The “A256CBC-HS512” represents that encryption is performed using AES-256-CBC with an HMAC-SHA-512 authentication tag.</p>
Encrypted Key	<p>Empty because the key is pre-shared.</p>
Initialisation Vector	<p>128 bits of random data from a random number generator.</p>
Cipher Text	<p>The result of performing AES-256-CBC on the plaintext, where the 256-bit encryption key is the second half of the 512-bit shared secret key.</p>

Protected Header	<p>The fixed JSON string: <pre>{"alg":"dir","enc":"A256CBC-HS512"}</pre> </p> <p>The “dir” represents that there is no key wrapping algorithm but rather a direct pre-shared symmetric key. The “A256CBC-HS512” represents that encryption is performed using AES-256-CBC with an HMAC-SHA-512 authentication tag.</p>
Authentication Tag	<p>The 256-bit first half of the HMAC-SHA-512 of the concatenation of AAD, IV, Ciphertext and AAD Length, where the 256-bit HMAC key is the first half of the 512-bit shared secret key.</p> <p>The Additional Authentication Data (AAD) is the URL-safe base-64 representation of the Protected Header.</p> <p>The AAD Length is the length of the AAD in bits, represented as a 64-bit big endian integer.</p>

3.4.2.4 Authentication Endpoint

The token authentication endpoint can be accessed using the URL below:

[http://\[WebSite\]:\[Port\]/Account/Token?Token=\[Token\]&ReturnUrl=\[Return URL\]](http://[WebSite]:[Port]/Account/Token?Token=[Token]&ReturnUrl=[Return URL])

Where:

[WebSite]:[Port] is the configured website address and port number for HIPS-UI

[Token] is the JSON Web Token after performing signing and encryption operations

[Return URL] is the path of the Embedded View to be displayed if the token authentication succeeds.

Any of the Embedded Pages described in section 3.3 of this guide may be used in the Return URL parameter. In order to view the My Health Record for a patient using the patient MRN, the Return URL will be of this form:

[/EmbeddedPcehrView/Hospitals/\[Hospital Code\]/Patients/\[MRN\]/PatientSummary](/EmbeddedPcehrView/Hospitals/[Hospital Code]/Patients/[MRN]/PatientSummary)

Where:

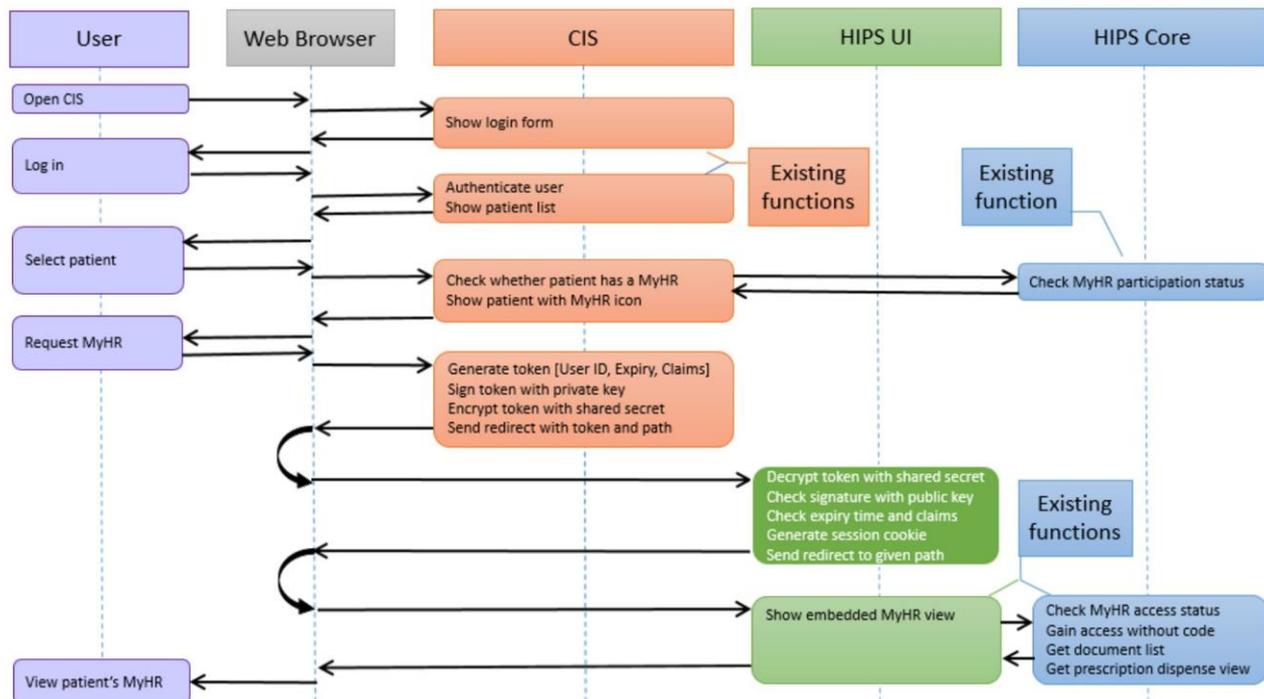
[Hospital Code] is a code identifying the healthcare facility where the patient is being registered.

[MRN] is a local patient ID issued by the healthcare facility.

[StatePatientId] is an enterprise-wide patient ID that links multiple facility MRN’s to one master patient record.

3.4.2.5 Process

The annotated image below shows the Token Authentication process.



3.4.3 Authorisation

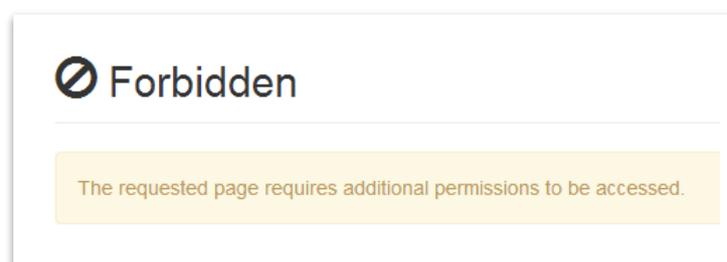
The MVC Authorization package enables security to be configured in a web.config configuration file on a per-controller or per-action basis, as well as additional policies such as 'deny anonymous users'. The configuration is loaded statically – updates to the configuration require an AppPool restart as would typically occur when changing the web.config file.

Typically, this configuration will specify an Active Directory group that executing users must be a member of in order to view the desired path.

By default, HIPS-UI Web specifies an MVC Authorization package which requires users to not be anonymous. However, this policy is overridden on error pages to allow anonymous users to see a user-friendly error if appropriate.

An additional feature of the MVC Authorization package is the inclusion of HTML Helpers that prevent rendering of Action Links (e.g. in the menu system) if the user has insufficient access.

If the user is authenticated via Active Directory, but not a member of the Active Directory group required to access the intended functionality (fails authorisation check), the user is presented with a page indicating they require additional permissions.



Acronyms

Acronym	Description
AAD	Additional Authentication Data
AHPRA	Australian Health Practitioner Regulation Agency
B2B	business-to-business
CDA	Clinical Document Architecture
CIS	clinical information system
CSP	contracted service provider
DI	diagnostic imaging
DVA	Department of Veterans' Affairs
ESB	Enterprise Service Bus
HI	Healthcare Identifier (IHI, HPI-I or HPI-O)
HL7	Health Level Seven
HMAC	hash-based message authentication code
HPI-I	Healthcare Provider Identifier for Individual
HPI-O	Healthcare Provider Identifier for Organisation
HPO	Healthcare Provider Organisation
IHI	individual healthcare identifier
IIS	Internet Information Services
JSON	JavaScript Object Notation
JWE	JSON Web Encryption
JWS	JSON Web Signature
JWT	JSON Web Token
LIS	laboratory information system
MRN	Medical Record Number
MVC	Model-View-Controller
PACC	Provider Access Consent Codes
PAS	patient administration system
PCEHR	personally controlled electronic health (eHealth) record
PDI	pathology and diagnostic imaging
RHP	responsible healthcare provider
RIS	radiology information system
RSA	Rivest–Shamir–Adleman public-key cryptosystem.
UI	user interface

Acronym	Description
XML	eXtensible Markup Language

Glossary

Term	Meaning
Australian Health Practitioner Regulation Agency	Assigns registration numbers to registered individual healthcare providers.
business-to-business	Describes a gateway between systems operated by different organisations.
clinical information system	Generates clinical documents.
contracted service provider	An organisation that can access the HI Service or the My Health Record System on behalf of an HPO.
Enterprise Service Bus	Integration hub for routing and transforming messages within and between healthcare facilities.
individual healthcare identifier	The national identifier for a subject of care.
laboratory information system	Generates pathology reports.
Medical Record Number,	Identified by the code "MR" in PID-3. Ideally one MRN is allocated by each health facility for each patient, though it is common to temporarily allocate a new MRN for new patients until their identity is confirmed. These temporary MRNs should be merged back to the original MRN for the patient using an A36 Merge MRN message. This number is stored in HospitalPatient.Mrn and is the primary identifier used to find the existing patient records in the HIPS database.
personally controlled electronic health (eHealth) record	This name has been replaced with <i>My Health Record system</i> (do not abbreviate this name).
radiology information system	Generates diagnostic imaging reports.