



**eHISC v6.0.0**  
**Module Guide (UI)**

31 May 2016

Approved for external use

**National E-Health Transition Authority Ltd**

Level 25, 56 Pitt Street

Sydney, NSW 2000

Australia

[www.nehta.gov.au](http://www.nehta.gov.au)

**Acknowledgements****Council of Australian Governments**

The National E-Health Transition Authority is jointly funded by the Australian Government and all State and Territory Governments.

**HL7 International**

This document includes excerpts of HL7™ International standards and other HL7 International material. HL7 International is the publisher and holder of copyright in the excerpts. The publication, reproduction and use of such excerpts is governed by the HL7 IP Policy (see <http://www.hl7.org/legal/ippolicy.cfm>) and the HL7 International License Agreement. HL7 and CDA are trademarks of Health Level Seven International and are registered with the United States Patent and Trademark Office.

**Disclaimer**

The National E-Health Transition Authority Ltd (NEHTA) makes the information and other material ('Information') in this document available in good faith but without any representation or warranty as to its accuracy or completeness. NEHTA cannot accept any responsibility for the consequences of any use of the Information. As the Information is of a general nature only, it is up to any person using or relying on the Information to ensure that it is accurate, complete and suitable for the circumstances of its use.

**Document control**

This document is maintained in electronic form and is uncontrolled in printed form. It is the responsibility of the user to verify that this copy is the latest revision.

**Copyright © 2016 National E-Health Transition Authority Ltd**

This document contains information which is protected by copyright. All Rights Reserved. No part of this work may be reproduced or used in any form or by any means—graphic, electronic, or mechanical, including photocopying, recording, taping, or information storage and retrieval systems—without the permission of NEHTA. All copies of this document must include the copyright and other information contained on this page.

# Document information

## Key information

---

<b>Owner</b>	Head of Delivery
<b>Contact for enquiries</b>	NEHTA Help Centre
	t: 1300 901 001
	e: <a href="mailto:help@nehta.gov.au">help@nehta.gov.au</a>

## Product version history

---

Product version	Date	Release comments
1.0	February 2014	Initial release (HIPS 4.1.0).
2.0	February 2015	See release note (NEHTA-2040:2015) for details of changes and bug fixes.
2.0.1		Unpublished updates.
2.0.2		
2.0.3	February 2016	See release note (NEHTA-2185:2016) for details of changes and bug fixes.
6.0.0	May 2016	See release note (NEHTA-2263:2016) for details of changes and bug fixes.

---

# Table of contents

<b>1. Introduction .....</b>	<b>6</b>
1.1 Purpose.....	6
1.2 Scope.....	6
1.3 Assumptions .....	6
1.4 Definitions and Acronyms .....	6
<b>2. Product &amp; Module Overview.....</b>	<b>8</b>
<b>3. Architectural Detail.....</b>	<b>10</b>
3.1 Architecture Overview .....	10
3.2 Functions & Navigation .....	12
3.2.1 Home .....	12
3.2.2 Patient List.....	13
3.2.3 Digital Health Record Access Check & Gain Access .....	14
3.2.4 Patient Summary .....	19
3.2.5 Document List .....	20
3.2.6 Prescription Dispense View.....	21
3.2.7 Document View .....	22
3.2.8 Current Patient List .....	23
3.2.9 Adult Patient Registration.....	24
3.2.10 Dependant Patient Registration.....	26
3.2.11 New Applicant Registration.....	28
3.2.12 New Dependant Registration .....	30
3.2.13 Registration Response .....	33
3.2.14 Patients Without IHI.....	34
3.2.14.1 Description.....	34
3.2.14.2 Process Overview .....	34
3.2.14.3 Process Detail .....	34
3.2.14.4 Web User Interfaces .....	38
3.2.15 Disclose Hidden Digital Health Record.....	40
3.2.15.1 Description.....	40
3.2.15.2 Process Overview .....	40
3.2.15.3 Process Detail .....	40
3.2.15.4 Web User Interfaces .....	46
3.2.16 Withdraw Consent.....	48
3.2.16.1 Description.....	48
3.2.16.2 Process Overview .....	49
3.2.16.3 Process Detail .....	50
3.2.16.4 Web User Interfaces .....	56
3.2.17 Remove Document.....	61
3.2.17.1 Description.....	61
3.2.17.2 Process Overview .....	62
3.2.17.3 Process Detail .....	63
3.2.17.4 Web User Interfaces .....	67

3.2.18	Upload PDF Discharge Summary .....	70
3.2.18.1	Description .....	70
3.2.18.2	Process Overview .....	70
3.2.18.3	Process Detail .....	71
3.2.18.4	Web User Interfaces .....	78
3.2.19	Manage Local Providers .....	83
3.2.19.1	Description .....	83
3.2.19.2	Process Overview .....	83
3.2.19.3	Process Detail .....	83
3.2.19.4	Web User Interfaces .....	88
3.3	Embedded Pages .....	89
3.3.1	Adult Patient Registration.....	89
3.3.2	Dependent Patient Registration.....	90
3.3.3	Patient Summary .....	90
3.3.4	Upload PDF Discharge Summary .....	91
3.4	Security Model .....	92
3.4.1	Authentication .....	92
3.4.2	Authorisation.....	94

# 1. Introduction

## 1.1 Purpose

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

The intended use of this document is to assist implementers to understand the modules of the eHISC-UI Web product and the user-oriented functions it provides.

## 1.2 Scope

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

## 1.3 Assumptions

During the development of this document the following assumptions have been made:

- The document audience have a high level understanding of health information systems and the terminology used.

## 1.4 Definitions and Acronyms

The following acronyms have been used through the document.

Item	Definition
AHPRA	Australian Health Practitioner Regulation Agency, assigns registration numbers to registered individual healthcare providers.
B2B	Business-to-business, describes a gateway between systems operated by different organisations.
CDA	Clinical Document Architecture
CIS	Clinical Information System, generates clinical documents
CSP	Contracted Service Provider, an organisation that can access the HI Service or the My Health Record System system on behalf of an HPO.
DI	Diagnostic Imaging
eHISC	eHealth Integration Sample Code
ESB	Enterprise Service Bus – integration hub for routing and transforming messages within and between healthcare facilities.
HI	Healthcare Identifier (IHI, HPI-I or HPI-O)
HL7	Health Level Seven
HPI-I	Healthcare Provider Identifier for Individual
HPI-O	Healthcare Provider Identifier for Organisation
HPO	Healthcare Provider Organisation

Item	Definition
IHI	Individual Healthcare Identifier, the national identifier for a subject of care
LIS	Laboratory Information System, generates pathology reports
MRN	<p>Medical Record Number, identified by the code "MR" in PID-3. Ideally one MRN is allocated by the hospital for each patient, though it is common to temporarily allocate a new MRN for emergency 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.</p> <p>This number stored in HospitalPatient.Mrn and is the primary identifier used to find the existing patient records in the eHISC database.</p>
PDI	Pathology and Diagnostic Imaging
RIS	Radiology Information System, generates diagnostic imaging reports
XML	Extensible Mark-up Language

## 2. Product & Module Overview

The eHISC suite consists of the following products:

- **eHISC-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 the clinical systems for upload to 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.
- **eHISC-UI:** An extension of the core services provided by the eHISC-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 (eHISC Core can support all levels and types of document uploads), My Health Record System Document Removal, My Health Record System Consent Withdrawal, Hidden Digital Health Record Disclosure, Assisted Registration, HPI-I Search and Data Integrity.

The eHISC UI has the following key features to support hospitals integrating with national Digital 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 eHISC database and eHISC will prevent the upload of the discharge summary if consent has been withdrawn. Withdrawal of consent for other document types is handled in the eHISC Core component.
- **Disclosure of Digital Health 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 eHISC, view the document, record the reason why the document must be removed from the My Health Record system, submit the request to eHISC 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 prescription dispense view available through their Digital Health Record via the "Patient Summary" screen.
- **Patient Summary**, Provides access to "Document List" and "Prescription Dispense View" as components of the screen and to "Gain Access" separately.

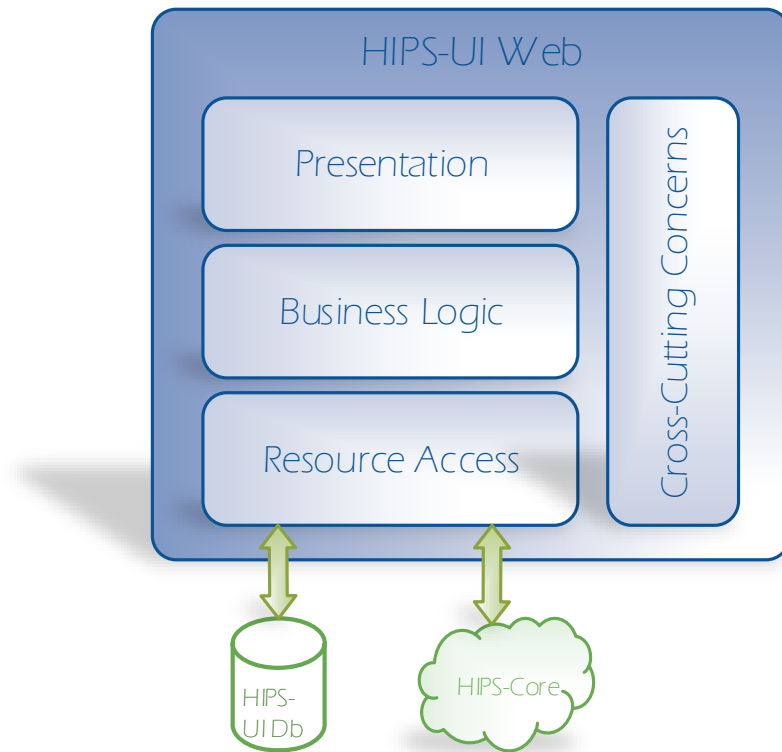


- **Document List**, Provides a searchable list of documents available through the selected patient's Digital Health Record. Allows selection of a document to view its contents via the "Document View" screen.
- **Document View**, Accessed from the "Document List" or "Prescription Dispense View" component when a document is selected. Provides a rendered view of the selected document's contents.
- **Prescription Dispense View**, Provides a combined view of the prescription and dispense history for the selected patient available via the NPDR.
- **Digital 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 (a) without code; (b) with code; (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 eHISC-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 eHISC-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 <a href="#">Bootstrap</a> <a href="#">DataTables</a> <a href="#">jQuery</a>
Business Logic	.NET Framework 4.5
Resource Access	Entity Framework 6.1 (database) WCF 4.5 (web services)
Cross-Cutting Concerns	
Configuration	System.Configuration
Security	Active Directory <a href="#">MVC Authorization</a>
Exception Management	IIS 7 Error Handling
Logging & Instrumentation	<a href="#">ELMAH.MVC</a>
Caching	System.Runtime.Caching.MemoryCache
Validation	System.ComponentModel.DataAnnotations
Object Mapping	<a href="#">AutoMapper</a>
Dependency Injection	<a href="#">Ninject</a>
Shared Logic	.NET Framework 4.5
Object Serialization	<a href="#">Json.NET</a>

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 eHISC-UI Web product because it has been designed to be embedded within other applications.

## 3.2 Functions & Navigation

Navigation is done either through the eHISC-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 eHISC-UI Web product. It provides a “Clinical Documentation” menu item to access the My Health Record System Web Viewer feature.

The screenshot shows the nehta HIPS Home screen. At the top, the nehta HIPS logo is on the left, and the user is logged in as HIPS USER1 on behalf of Hospital Name (Organisation Name) on the right. A navigation bar contains links for Home, Healthcare Identifiers, Patient Registration, Clinical Documentation, and Secure Messaging. Below the navigation bar is a large image of a doctor examining a patient's ear. Underneath the image are four columns of menu items: Healthcare Identifiers (Patients Without IHI, HPI-I Validation, HPI-I Search, Local Providers), Patient Registration (Register Current Patients, Register New Adult, Register New Child, Disclose Hidden Digital Health Record), Clinical Documentation (View Digital Health Record, Withdraw Consent, Remove Document, Discharge Summary), and Secure Messaging (Delegates, Payload Schemes, Areas of Interest, Message Delivery, Message Receipt). At the bottom right is the My Health Record logo and version 6.0.0. Three callouts provide additional information: one points to the version number, another to the Clinical Documentation menu, and a third to the available menus.

Public version number. Tooltip displays internal version number.

“Clinical Documentation” menu allows access to the “Patient List” screen.

Available menus (features) are controlled by security configuration.

### 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 Royal Chamonix Hospital**

Q Search Type to search...

Name	Date of Birth	Location	MRN	IHI	Actions
DUNCAN, ALEXANDER	05/05/2009	AG::	TEST-CCA_13	8003 6034 5679 9528	
FORDE, FREDERICK	16/01/1928	AG::B3	TEST-PCEHR_22	8003 6045 7063 1431	
GIBBS, GEORGE	20/03/1990	AG::B2	TEST-PCEHR_23	8003 6067 9186 4386	
HOBBS, LUDWIG PHILIP	26/04/1995	W1::B3	RENDERING	8003 6083 3334 5684	
JONES, LILY MAY	30/08/1990	W5::B2	TEST-PCEHR_24	8003 6067 8912 9891	
LAM, BERNARD	13/01/1972	W5::B4	TEST-IHI_4	8003 6081 6670 8479	

Showing 1 to 6 of 6 entries

First Previous 1 Next Last

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.

Results to display:  
Name, Date of Birth,  
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.

Summary of  
matching  
results.

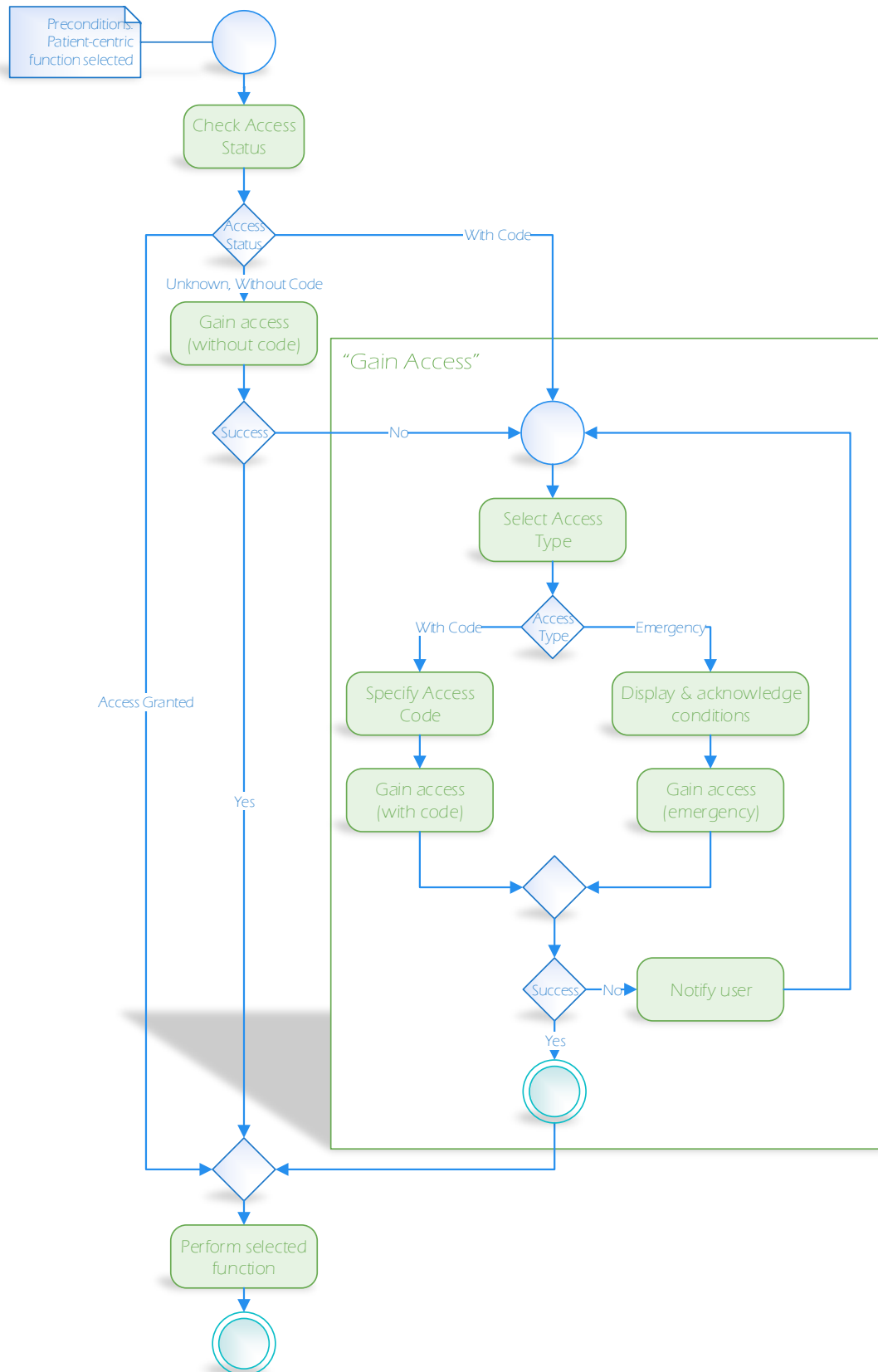
Title to be "Patients at  
<Hospital Name>".

### **3.2.3 Digital Health Record Access Check & Gain Access**

The “Digital 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 “Digital 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 current status of access for 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 Digital Health Record without appropriate access if required.
- The “Gain Access” screen supports a user explicitly requesting access to a patient’s Digital 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 Digital 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 eHISC-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 eHISC-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, but 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.	



Activity / Decision	Description	Notes
Gain access (with code)	Gain access to the patient's Digital Health Record using the access code provided by the patient.	Via the eHISC-Core service PCEHRService.GainAccessWithCode
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 eHISC-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.

The image shows a web interface for gaining access to a patient's eHealth Record. The page title is "Gain Access for LAM, BERNARD". It features two main sections: "Access Code" and "Emergency Access".

**Annotations:**

- Ability to navigate back to "Patient List" or "Patient Summary" screens:** Points to the breadcrumb navigation at the top: "Patients at Royal Chamonix Hospital / Patient Summary for LAM, BERNARD".
- Title to be "Gain Access for <Patient Name>":** Points to the page title "Gain Access for LAM, BERNARD".
- Section for gaining access "with code". Supports "CIS Connecting to the PCEHR System" conformance requirement 019048.** Points to the "Access Code" section.
- Explanatory text.** Points to the text: "Individuals may set a Record Access Code (RAC) or Limited Document Access Code (LDAC) on their eHealth Record's restricted settings screen."
- Field for entering access code.** Points to the "Access Code" input field.
- Section for gaining "emergency" access.** Points to the "Emergency Access" section.
- Required conditions. Supports "CIS Connecting to the PCEHR System" conformance requirement 019116.** Points to the text: "By selecting the Emergency Access option, you are declaring that access to this eHealth Record is necessary to lessen or prevent a serious threat to an individual's life, health or safety or to public health or public safety and your patient's consent cannot be obtained. This will override any access controls set by the individual and will permit access to all active documents for five days. Your Emergency Access will be recorded on the eHealth Record's audit log and the individual may be notified."
- "I understand..." button acknowledges conditions and attempts to gain "emergency" access.** Points to the button: "I understand and require emergency access to this eHealth record".
- Display reason for being redirected (if relevant). Display error information (not shown).** Points to the error message: "A code is required to access the patient's PCEHR."
- "Submit Code" button attempts to gain access "with code" using the access code specified.** Points to the "Submit Code" button.
- Upon successfully gaining access, automatically redirect to originally selected function or screen. Upon failure, redisplay screen including error information.** Points to the bottom of the page.

### 3.2.4 Patient Summary

The annotated image below illustrates the functional design for the "Patient Summary" screen accessed via the "View Patient Summary" button on the "Patient List" screen for a selected patient.

**Patient Summary for DUNCAN, ALEXANDER**

Discharge Summary **8** | Shared Health Summary **1** | Prescription & Dispense View **69**

Search: Type to search...

Service Start	Service End	Creation	Organisation	Author	Actions
17/05/2013	29/05/2013	14/06/2013	DHSITESTORGD6	Paul, McKee	[Print]
17/05/2013	29/05/2013	14/06/2013	DHSITESTORGD6	Paul, McKee	[Print]
17/05/2013	29/05/2013	14/06/2013	DHSITESTORGD9	McKee, Paul	[Print]
17/05/2013	29/05/2013	14/06/2013	DHSITESTORGD9	McKee, Paul	[Print]
15/05/2014	02/06/2014	24/05/2013	DHSITESTORGD9	Simon, Biber	[Print]
31/07/2012	08/08/2012	21/09/2012	DHS5670	Massey, Gordon	[Print]
31/07/2012	08/08/2012	20/09/2012	DHSITESTORGD9	Biber, Simon	[Print]
31/07/2012	08/08/2012	20/09/2012	DHS5670	Biber, Simon	[Print]
<b>Service Start</b>	<b>Service End</b>	<b>Creation</b>	<b>Organisation</b>	<b>Author</b>	<b>Actions</b>

Showing 1 to 8 of 8 entries

First Previous **1** Next Last

**Callouts:**

- "Ability to navigate back to "Patient List"."
- Title to be "Patient Summary for <Patient Name>".
- Tabs or menus group each document type (and count of documents of that type) available through the patient's PCEHR (asc alpha sort). Selecting an item displays documents of that document type. Refer to the "Document List" component. In addition, the "Prescription & Dispense View" item provides access to the Prescription Dispense View. Refer to the "Prescription Dispense View" component.
- "Gain Access" button provides access to "Gain Access" screen for selected patient.
- "Print" button (not shown) displays separate window containing a printable view. Only available when the "Prescription & Dispense View" tab is selected.

### 3.2.5 Document List

The annotated image below illustrates the functional design for the "Document List" component of the "Patient Summary" screen for a selected patient.

Results to display: Creation Date, Organisation, Author. For Discharge Summary also display Service Start & End Date.

Sorting of results (asc / desc). Default sort: Creation Date desc.

Results exclude Dispense & e-Prescription documents.

Summary of matching results.

Showing 1 to 8 of 8 entries

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

"View Document" button displays "Document View" screen for selected document.

Paging of results  
Page size: 10.

Service Start	Service End	Creation	Organisation	Author	Actions
17/05/2013	29/05/2013	14/06/2013	DHSITESTORGD6	Paul, McKee	
17/05/2013	29/05/2013	14/06/2013	DHSITESTORGD6	Paul, McKee	
17/05/2013	29/05/2013	14/06/2013	DHSITESTORGD9	McKee, Paul	
17/05/2013	29/05/2013	14/06/2013	DHSITESTORGD9	McKee, Paul	
15/05/2014	02/06/2014	24/05/2013	DHSITESTORGD9	Simon, Biber	
31/07/2012	08/08/2012	21/09/2012	DHS5670	Massey, Gordon	
31/07/2012	08/08/2012	20/09/2012	DHSITESTORGD9	Biber, Simon	
31/07/2012	08/08/2012	20/09/2012	DHS5670	Biber, Simon	
Service Start	Service End	Creation	Organisation	Author	Actions

Q Search Type to search...

First Previous 1 Next Last

### 3.2.6 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 displays the "Prescription Dispense View" for patient JAKE F BERMAN. The interface includes a date range selector at the top, a group-by dropdown, a list of prescriptions, and administrative details. Callouts provide functional details for various elements:

- From/To Date:** "From" date defaults to 24 months ago. "To" date defaults to today. Require "From" and "To" dates to be selected then click View to retrieve the view for the specified dates.
- Group By:** Drop-down selector refreshes the document to group by different field properties supported by NEHTA XSLT. These fields are "Prescription" (Default), "Generic Name", "PBS Item Code", and "Brand Name".
- Warning:** Display warnings (if any) returned from the system.
- Date Selection:** Date selection allows dd/mm/yyyy text entry, or selection from a Date Picker control. Date Picker control allows the user to pick a year (navigating by decade) then a month and day.
- Prescription List:** Display prescription and dispense view contents as HTML generated from XML source using provided NEHTA XSLT & CSS.
- Administrative Details:** Clicking header rows expands and contract nested detail rows.
- Document Links:** Document links redirect the browser to view the requested document (require rewriting from NEHTA source).
- Printability:** View is printable, refer to "Print" button on "Patient Summary" screen.
- Document Content:** Display date & time document was downloaded from PCEHR (not shown).
- Scrollbars:** Ensure nested displayed view does not show any scrollbars (horizontal or vertical).

**Prescription and Dispense View Details:**

Grouped by PBS Item Code			From 3-Feb-2010	To 6-Dec-2013
<b>JAKE F BERMAN</b> DoB 8-Jun-1962 (51y) SEX Male IHI 8003 6080 0000 2519				
<b>START</b>				
This view is not a complete record of the individual's medicines information.				
PBS Item Code: 2845R				
3-Nov-2012	Prescribed	PERINDOPRIL with INDAPAMIDE HEMIHYDRATE — COVERSYL PLUS 5MG/1.25MG — 5mg/1.25mg — One tablet daily — Supply 30 — Dispense original and 4 repeats		
	Dispensed	PERINDOPRIL with INDAPAMIDE HEMIHYDRATE — COVERSYL PLUS 5MG/1.25MG — 5mg/1.25mg — One tablet daily — Supply 30 — Original dispense		

**ADMINISTRATIVE DETAILS**

Patient		Author	
Name	JAKE F BERMAN	Device Name	PCEHR
Sex	Male		
Date of Birth	8-Jun-1962 (51y)		
IHI	8003 6080 0000 2519		
Address	No Fixed Address		

**Clinical Document Details**

Document Type	PCEHR Prescription and Dispense View
Creation Date/Time	6 Dec 2013 15:11+1100
Date/Time Attested	Not Provided
Document ID	2.25.28901529694678024567933857149173559973
Document Version	1

### 3.2.7 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.

**Discharge Summary for DUNCAN, ALEXANDER**

Downloaded from the PCEHR System on 4-Feb-2014 9:58+10:30.

**Discharge Summary (Interim v0.3)**  
29 May 2013

ALEXANDER DUNCAN DoB 5 May 2009 (32y) SEX Male IHI 8003 6034 5679 9528 MRN TEST-CCA\_13

**START OF DOCUMENT**

**Queensland Health**  
Author Paul McKee (Health Professionals nfd)  
Phone (07) 4796 1111  
Discharge Usual Residence/Other  
To

**Tasmania**  
Explore the possibilities

Department of Health and Human Services

**Event**  
Details of stay

**Annotations:**

- 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 NEHTA XSLT & CSS.
- Display date & time document was downloaded from PCEHR.
- 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".
- "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".
- Display embedded images.
- Link to included attachments (not shown).

### 3.2.8 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	[Register]
COLVILLE, WYATT	31/01/1955	W0:R19:	8003 6088 3339 1083	[Register]
DACRI, CRISTEN	26/04/1979	W0:R9:	8003 6088 3339 0701	[Register]
DREA, KENNETH	23/01/1999	W0:R18:	8003 6088 3339 5517	[Register] [Register as Dependant]
GARCHITORENA, SEEMA	15/09/1946	W0:R15:	8003 6088 3339 0178	[Register]
PADRICK, BERNICE	11/01/1970	W3:R16:	8003 6088 3339 2686	[Register]
POONAWALA, WALKER	14/07/1985	W3:R16:	8003 6088 3339 7120	[Register]
TREVORROW, MILA	01/09/2006	W2:R3:	8003 6088 3339 2628	[Register]
VANKEUREN, CODY	03/04/1988	W4:R10:	8003 6088 3339 5542	[Register]
VELLER, LANE	22/11/1972	M10::	8003 6088 3339 1365	[Register]

Showing 1 to 10 of 11 entries

First Previous 1 2 Next Last

**Annotations:**

- Title to be "Register Current Patients".
- Filtering based on partial match of contents of any text-based column in results.
- 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.
- "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.



### 3.2.9 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

Displays the selected patient's details:  
Name, sex, date of birth, Medicare card number or DVA File Number.

**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.

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

**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 the identity verification method used.

**Application Form and Assertions**

**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.

☐ Display the IVC

☐ Send the IVC by SMS to:

☐ Send the IVC by Email to:

☐ Do not retrieve the IVC

## 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.

[Submit Application](#)

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

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

Send the digital health record registration to eHISC for processing.

### 3.2.10 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.

Title to be “Register Patient as Dependant”.

Register Patient as Dependant

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

**Applicant's Details**

**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.

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.

**Parent or Legal Guardian Representative**

**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 eHISC for processing.

Submit Application

### 3.2.11 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”.

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.

Register New Adult

---

#### Applicant's Details

**Family 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**

**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)

## 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 eHISC for processing.

Submit Application

### 3.2.12 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.

Title to be “Register New Child”.

 Register New Child

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

**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

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 \*

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.

## 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:

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

☐ 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)

## Application Form and Assertions

Identity Verification Method \*

Please Select...

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.

☐ Display the IVC

☐ Send the IVC by SMS to:

☐ Send the IVC by Email to:

☐ Do not retrieve the IVC

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.

## 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.

[Submit Application](#)

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.

Send the digital health record registration to eHISC for processing.



### 3.2.13 Registration Response

For a successful response the "Registration Response" screen will display.

The screenshot shows the 'PCEHR Assisted Registration' header with a checkmark icon. Below it, the title 'PCEHR Registration Successful' is displayed. A yellow callout box on the left points to the title and contains the text 'Confirmation of successful registration.' The main content area contains two lines of text: 'The PCEHR Assisted Registration was successful.' and 'Your IVC code is **PnfQ93D** and it expires on **16/01/2014**'. A second yellow callout box on the right points to the IVC code and contains the text 'IVC code for the patient if requested to be displayed.'

Confirmation of successful registration.

## PCEHR Assisted 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:

The screenshot shows a red error message box with a single bullet point: 'Medicare Number must be a valid Medicare Card Number.' A yellow callout box on the left points to the error message and contains the text 'Displays the reason for the unsuccessful registration.'

Displays the reason for the unsuccessful registration.

- Medicare Number must be a valid Medicare Card Number.

### 3.2.14 Patients Without IHI

#### 3.2.14.1 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.

#### 3.2.14.2 Process Overview

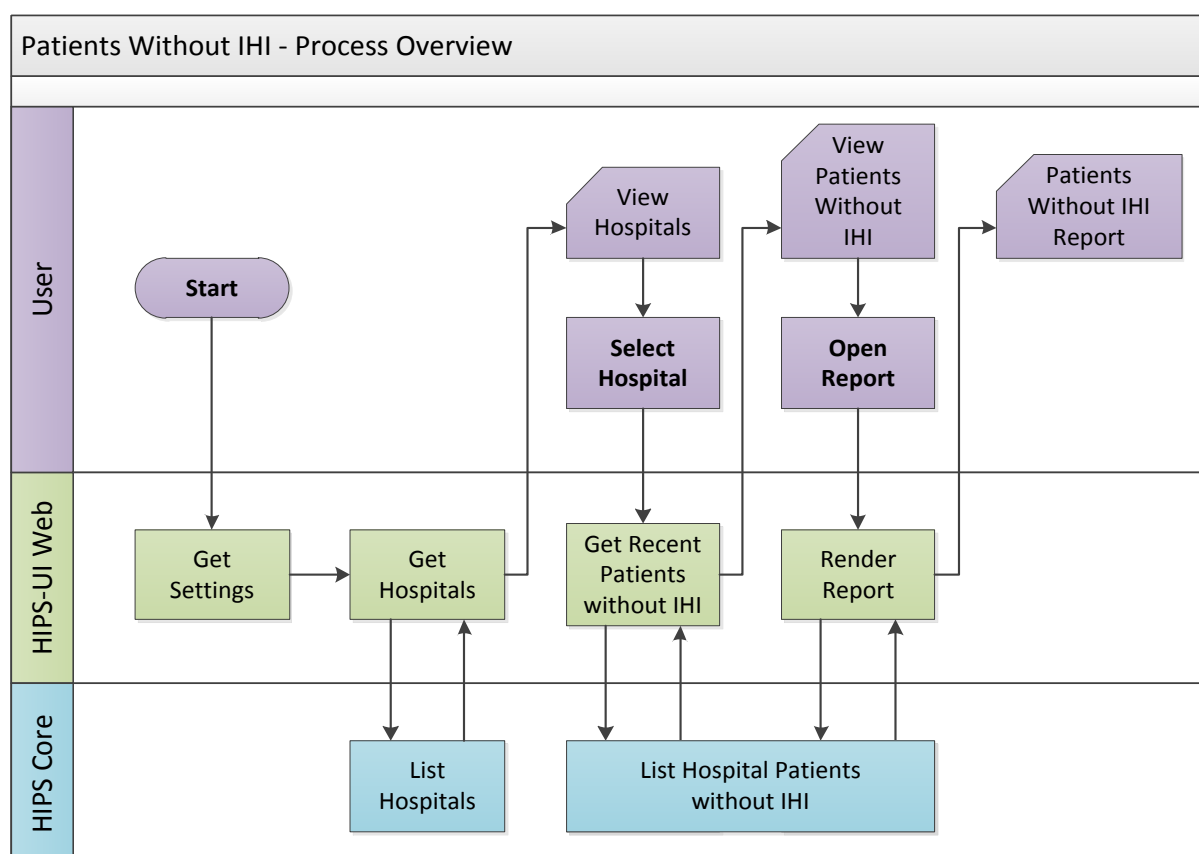


Figure 1 – Patients Without IHI – Process Overview

#### 3.2.14.3 Process Detail

Activity / Decision	Description	Detail / Notes
Prerequisites	User logged in to the eHISC-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	eHISC-UI Web loads configuration settings.	Gets eHISC-UI Web configuration settings from the <i>Settings</i> table of the <i>eHISC-WebDataStore</i> database. Retrieves from cache if present and stores in cache after retrieval.

Activity / Decision	Description	Detail / Notes
Get Hospitals	eHISC-UI Web gets a list of all hospitals in eHISC that are enabled for web administration.	Gets a list of all hospitals from the <i>ListHospitals</i> method of the eHISC <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	eHISC Core returns a list of all hospitals in eHISC.	Represents the <i>ListHospitals</i> method of the <i>ReferenceService</i> web service. Returns all <i>Hospitals</i> in eHISC. <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 'Patients Without IHI' page for a selected hospital.	User request includes the following field(s): Hospital Code
Get Recent Patients without IHI	eHISC-UI Web gets a list of patients unexpectedly missing an IHI who are currently an inpatient at, or recently discharged from, the selected hospital.	Refers to loaded configuration settings to determine <i>PatientsWithoutIhiDaysDischarged</i> and <i>DefaultHospitalCodeSystem</i> . Gets a list of patients from the <i>ListPatientsWithoutIhi</i> method of the eHISC <i>PcehrService</i> web service using: The Selected Hospital (Code, <i>DefaultHospitalCodeSystem</i> ) The <i>PatientsWithoutIhiDaysDischarged</i> value to determine how many days of recently discharged patients are returned Retrieves from cache if present and stores in cache after retrieval.
List Hospital Patients without IHI	eHISC Core returns a list of patients unexpectedly missing an IHI currently at, or recently discharged from, the specified hospital.	Represents the <i>ListPatientsWithoutIhi</i> method of the <i>PcehrService</i> web service. Receives the following input: Hospital Code and Code System Discharge Days number indicating how many days into the past to include discharged patients from Resolves the <i>HospitalId</i> for the provided hospital details.

Activity / Decision	Description	Detail / Notes
		<p>Determines the MinimumDischargeDate by subtracting the provided Discharge Days from the current date and time.</p> <p>Returns patient data for each HospitalPatient in eHISC who meets the following criteria:</p> <ul style="list-style-type: none"> <li>Associated with the Identified Hospital</li> <li>HospitalId matches the provided HospitalId.</li> <li>No valid IHI assigned</li> <li>PatientMaster/PatientMasterIhi/Ihi field is null or empty.</li> <li>IHI Status is not Service Unavailable</li> <li>PatientMaster/PatientMasterIhi/IhiStatusId is either null or a value other than '103'</li> <li>Currently inpatient at the selected hospital or discharged from the hospital within a configured number of days</li> <li>The most recent Episode for the HospitalPatient has a DischargeDate that is either null or after the MinimumDischargeDate.</li> <li>Aged over 1 month old</li> <li>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).</li> <li>Medicare Number is not in the eHISC Medicare Number Exclusions list</li> <li>PatientMaster/MedicareNumber is not present in the MedicareNumber field of the MedicareExclusion table.</li> <li>Most recent episode has not had a completed IHI investigation</li> <li>The most recent Episode for the HospitalPatient does not have a true IhiInvestigationComplete value.</li> <li>Patient data to include the following information (as available):</li> <ul style="list-style-type: none"> <li>Patient Name</li> <li>Date of Birth</li> <li>Sex</li> <li>MRN</li> <li>Medicare Card Number and IRN</li> <li>DVA File Number</li> <li>Location (Ward, Room, and Bed) of the patient's most recent episode at the selected hospital</li> </ul> </ul>
View Patients Without IHI	User receives a screen displaying the Patients Without IHI data for the selected hospital.	See <a href="#">View Patients Without IHI</a> .

Activity / Decision	Description	Detail / Notes
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 <a href="#">View Patients Without IHI</a> .

### 3.2.14.4 Web User Interfaces

#### 3.2.14.4.1 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).

**Patients without IHI at Royal Chamonix Hospital**

Errors and feedback to be displayed on top of page.

Search bar to filter across all columns (except actions)

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.

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	
PADRIK, 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	
Name	Sex	Date of Birth	Location	MRN	Medicare Card Number	DVA File Number

Sortable columns. Default sort Name ASC.

Summary of matching results.

Showing 1 to 10 of 11 entries

Paging of results  
Page size: 10.

First Previous 1 2 Next Last

### 3.2.14.4.2 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).

#### 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

### 3.2.15 Disclose Hidden Digital Health Record

#### 3.2.15.1 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 eHISC.

#### 3.2.15.2 Process Overview

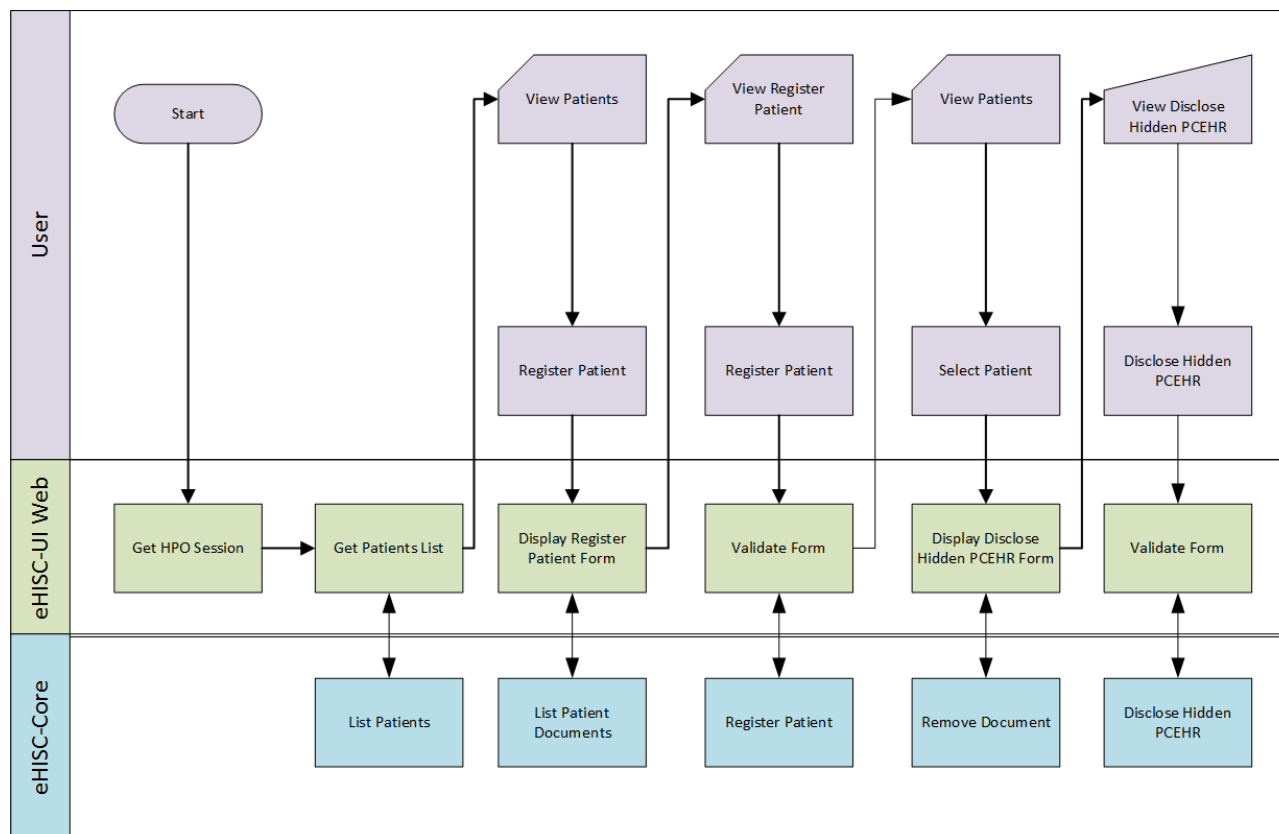


Figure 2 – Disclose Hidden DIGITAL HEALTH RECORD – Process Overview

#### 3.2.15.3 Process Detail

Activity / Decision	Description	Detail / Notes
Prerequisites	User logged in to the eHISC-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 Digital Health Record
Get Settings	eHISC-UI Web loads configuration settings.	Gets eHISC-UI Web configuration settings from the <i>Settings</i> table of the <i>eHISCWebDataStore</i> database. Retrieves from cache if present and stores in cache after retrieval.
Get Patients List	eHISC-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 eHISC <i>PatientService</i> web service using: The selected HPO facility (Code, <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	eHISC 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>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"> <li>Hospital Code and Code System</li> <li>Discharge Days number indicating how many days into the past to include discharged patients from</li> <li>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.</li> </ul> <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 eHISC who meets the following criteria:</p> <ul style="list-style-type: none"> <li>Associated with the identified Hospital</li> <li><i>HospitalId</i> matches the provided <i>HospitalId</i>.</li> <li>Currently inpatient at the selected hospital or discharged from the hospital within a configured number of days</li> <li>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>.</li> <li>Recent non-inpatient episode at the selected Hospital within a configured number of days</li> <li>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>.</li> </ul> <p>Patient data to include the following information (as available):</p> <ul style="list-style-type: none"> <li>Patient Name</li> <li>Date of Birth</li> <li>MRN</li> <li>Location (Ward, Room, and Bed) of the patient's most recent episode at the selected hospital</li> <li>Digital Health Record participation status</li> </ul>

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. 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"</p> <p>"Found" for "PcehrAdvertised"</p> <p>"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	eHISC-UI Web validates the form contents.	<p>Validate the Register Patient form contents:</p> <p>A Family Name has been entered</p> <p>A Sex has been selected</p> <p>A valid Date Of Birth has been entered</p> <p>An MRN has been entered for the selected HPO facility.</p> <p>Optional information:</p> <p>Given Name(s)</p> <p>Either a valid Medicare Care Number or DVA File Number</p> <p>Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i></p>

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

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	eHISC-UI Web records the new disclosure value in eHISC.	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 eHISC <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	eHISC Core records the new disclosure status.	Represents the <i>RecordDisclosure</i> method of the <i>ConsentService</i> web service. Updates the 'PcehrDisclosed' flag for the specified patient's <i>HealthProviderOrganisationPatient</i> 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.

### 3.2.15.4 Web User Interfaces

#### 3.2.15.4.1 View Patients

A new modal dialog 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.

**Register New Patient at Royal Chamonix Hospital** × Close

**Patient Details**

Family Name\*

Given Name(s)

Sex \*

Select...

Date of Birth\*

**Individual Identifier**

Medicare Card Number

DVA File Number

MRN\*

000123456

Register × Close

**Callout 1 (Left):** 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

**Callout 2 (Top):** Title to include selected HPO Facility Name

**Callout 3 (Right):** 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.

#### 3.2.15.4.2 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 with a back arrow icon. The form is divided into sections: "Patient Details", "Administer Request", and "Reference Notes". The "Patient Details" section contains a table with patient information. The "Administer Request" section includes a "Reference Notes" text area and a "Confirm Digital Health Record Disclosure" checkbox. At the bottom is a blue "Disclose Digital Health Record" button. Callout boxes provide additional context for various elements.

**Patients**

**Disclose Digital Health Record Existence**

**Patient Details**

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

**Administer Request**

**Reference Notes**

**Confirm Digital Health Record Disclosure**

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

**Disclose Digital Health Record**

**Callout Boxes:**

- Link to navigate back to patients list.
- Data to display (as available):
  - Name + (MRN)
  - Date of Birth
  - Hospital
  - Location (Ward:Room:Bed) for current/most recent episode
- Notes is required. Maximum length 5000 characters.
- Confirmation required.
- "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"
- Confirmation text and submit button to refer to "Disclose Digital Health Record"

## **3.2.16 Withdraw Consent**

### **3.2.16.1 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.

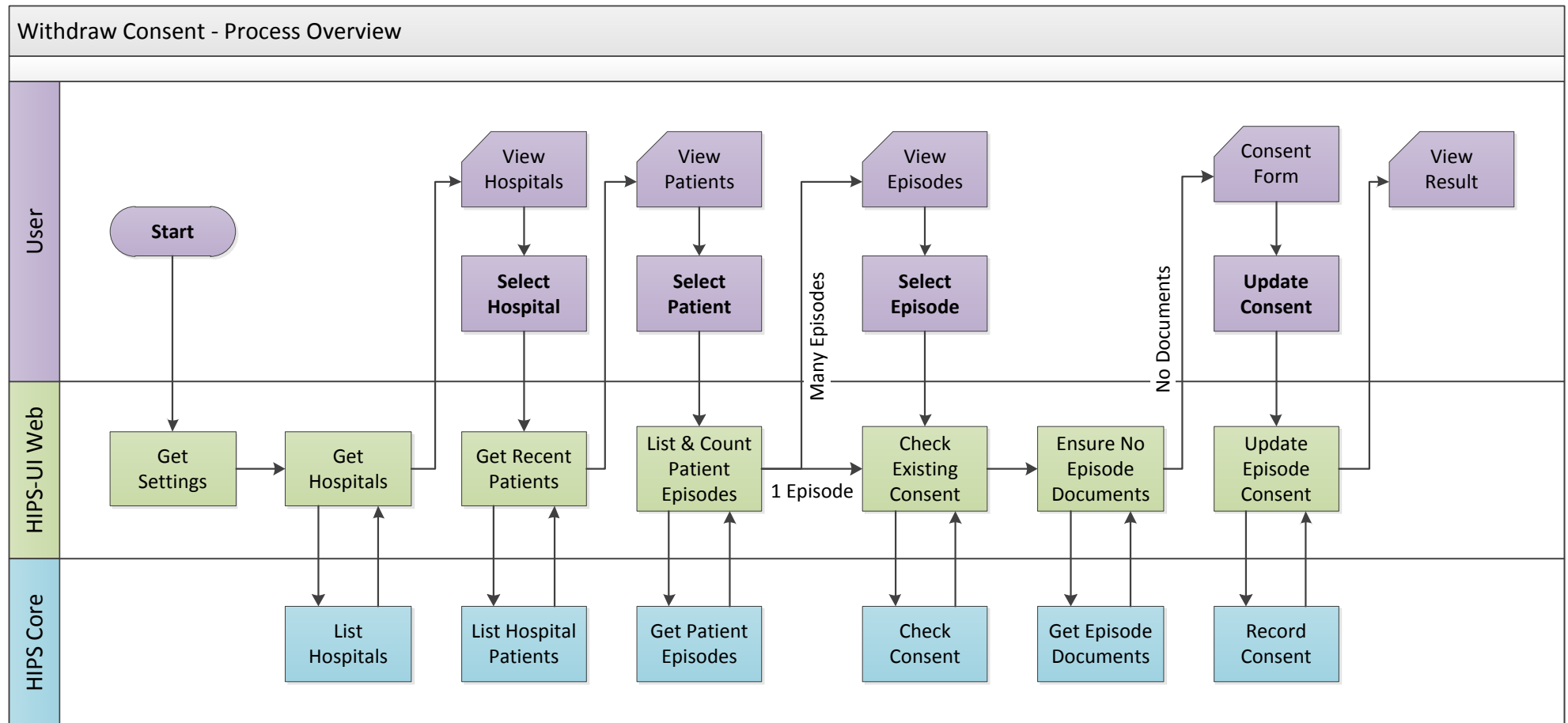
Consent cannot be withdrawn if documents have already been uploaded until those documents are removed.

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 eHISC to withdraw (or reinstate) consent.



### 3.2.16.2 Process Overview



### 3.2.16.3 Process Detail

Activity / Decision	Description	Detail / Notes
Prerequisites	User logged in to the eHISC-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	eHISC-UI Web loads configuration settings.	Gets eHISC-UI Web configuration settings from the <i>Settings</i> table of the <i>eHISCWebDataStore</i> database.  Retrieves from cache if present and stores in cache after retrieval.
Get Hospitals	eHISC-UI Web gets a list of all hospitals in eHISC that are enabled for web administration.	Gets a list of all hospitals from the <i>ListHospitals</i> method of the eHISC <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	eHISC Core returns a list of all hospitals in eHISC.	Represents the <i>ListHospitals</i> method of the <i>ReferenceService</i> web service.  Returns all <i>Hospitals</i> in eHISC.  <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

Activity / Decision	Description	Detail / Notes
Get Recent Patients	eHISC-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 eHISC <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.
List Hospital Patients	eHISC 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.	Represents the <i>ListAdmittedPatients</i> method of the <i>ConsentService</i> web service. Receives the following input: Hospital Code and Code System Discharge Days number indicating how many days into the past to include discharged patients from Resolves the <i>HospitalId</i> for the provided hospital details. Determines the <i>MinimumDischargeDate</i> by subtracting the provided Discharge Days from the current date and time. Returns patient data for each <i>HospitalPatient</i> in eHISC who meets the following criteria: Associated with the Identified Hospital HospitalId matches the provided HospitalId. 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> . Patient data to include the following information (as available): 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.	User request includes the following field(s): Hospital Code Patient MRN

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

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 <a href="#">Consent Form (Withdraw Consent)</a>.</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> <p>Hospital Code</p> <p>Patient MRN</p> <p>Notes</p> <p>Confirmation of Withdraw or Reinstate Consent</p> <p>Intended Withdraw Consent State (i.e. true to withdraw, false to reinstate)</p>
Update Episode Consent	eHISC-UI Web records the new consent value in eHISC 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 eHISC <i>ConsentService</i> web service using:</p> <p>The Selected Patient (MRN, Hospital Code, <i>DefaultHospitalCodeSystem</i>)</p> <p>Intended Withdraw Consent State (i.e. true to withdraw, false to reinstate)</p> <p>Notes converted to bytes using UTF8 encoding</p> <p>Results are not cached.</p>
Record Consent	eHISC 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> <p>Patient MRN and associated Hospital Code and Code System</p> <p>Episode Admission Date/Time</p> <p>Intended Withdraw Consent State (i.e. true to withdraw, false to reinstate)</p> <p>Audit Information (Notes as byte array)</p>

<b>Activity / Decision</b>	<b>Description</b>	<b>Detail / Notes</b>
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.

### **3.2.16.4 Web User Interfaces**

#### **3.2.16.4.1 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.



**Withdraw Consent at Royal Chamonix Hospital**

Search: Type to search...

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	<a href="#">Review Consent</a>
COLVILLE, WYATT	31/01/1955	W0:R19:	000256243	No	<a href="#">Review Consent</a>
DACRI, CRISTEN	26/04/1979	W0:R9:	000586213	No	<a href="#">Review Consent</a>
DREA, KENNETH	23/01/1999	W0:R18:	000923678	No	<a href="#">Review Consent</a>
GARCHITORENA, SEEMA	15/09/1946	W0:R15:	000211962	No	<a href="#">Review Consent</a>
PADRICK, BERNICE	11/01/1970	W3:R16:	000115629	No	<a href="#">Review Consent</a>
POONAWALA, WALKER	14/07/1985	W3:R16:	000346042	No	<a href="#">Review Consent</a>
TREVORROW, MILA	01/09/2006	W2:R3:	000528639	No	<a href="#">Review Consent</a>
VANKEUREN, CODY	03/04/1988	W4:R10:	000146174	No	<a href="#">Review Consent</a>
VELLER, LANE	22/11/1972	M10::	000833230	No	<a href="#">Review Consent</a>

Summary of matching results.

Showing 1 to 10 of 11 entries

Paging of results  
Page size: 10.

First Previous 1 2 Next Last

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.

### 3.2.16.4.2 View Episodes

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

**Episodes at Test Hospital for SMITH, Jane**

Home | Assisted Registration | HPI-I Search | PCEHR Viewer | Data Integrity | Consent Management | Document Management

Search:

Admitted	Discharged	Admission Reason	Responsible Provider	Consent Withdrawn	Actions
2/3/2014 12:03:00	-	Leg Pain	Dr Test Test	Yes	<a href="#">Reinstate Consent</a>
2/2/2014 02:22:33	22/2/2014 10:30:02	Arm Injury	Dr Test Test	No	<a href="#">Withdraw Consent</a>
2/2/2014 02:22:33	22/2/2014 10:30:02	Arm Injury	Dr Test Test	No	<a href="#">Withdraw Consent</a>
2/2/2014 02:22:33	22/2/2014 10:30:02	Arm Injury	Dr Test Test	No	<a href="#">Withdraw Consent</a>
2/2/2014 02:22:33	22/2/2014 10:30:02	Arm Injury	Dr Test Test	No	<a href="#">Withdraw Consent</a>
2/2/2014 02:22:33	22/2/2014 10:30:02	Arm Injury	Dr Test Test	No	<a href="#">Withdraw Consent</a>
2/3/2014 12:03:00	-	Leg Pain	Dr Test Test	Yes	<a href="#">Reinstate Consent</a>
2/2/2014 02:22:33	22/2/2014 10:30:02	Arm Injury	Dr Test Test	No	<a href="#">Withdraw Consent</a>
2/2/2014 02:22:33	22/2/2014 10:30:02	Arm Injury	Dr Test Test	No	<a href="#">Withdraw Consent</a>
2/2/2014 02:22:33	22/2/2014 10:30:02	Arm Injury	Dr Test Test	No	<a href="#">Withdraw Consent</a>

Showing 1 to 10 of 33 entries

First Prev 1 2 Next Last

**Callouts:**

- Title to be "Episodes at (Hospital) for (Patient Name)"
- Data to display:
  - Admission Date/Time
  - Discharge Date/Time (or "-")
  - Admission Reason
  - Responsible Provider
  - Consent Withdrawn
- Sortable columns. Default sort Name ASC.
- Summary of matching results.
- Errors and feedback to be displayed on top of page.
- Search bar to filter across all columns (except actions)
- 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.
- Paging of results  
Page size: 10.

### 3.2.16.4.3 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 eHISC. 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 Structure:**

- Withdraw Consent for Episode** (Title)
- 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** (Text area)
  - 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** (Submit button)

**Reinstate Consent for 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

**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**

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

**Administer Request**

**Reference Notes**

Notes is required. Maximum length 5000 characters.

Confirmation required.

**Confirm Reinstate Consent**

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

**Reinstate Consent**

"Reinstate Consent" marks the current episode as no longer consent withdrawn in eHISC. 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 "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.

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

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

## **3.2.17 Remove Document**

### **3.2.17.1 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:

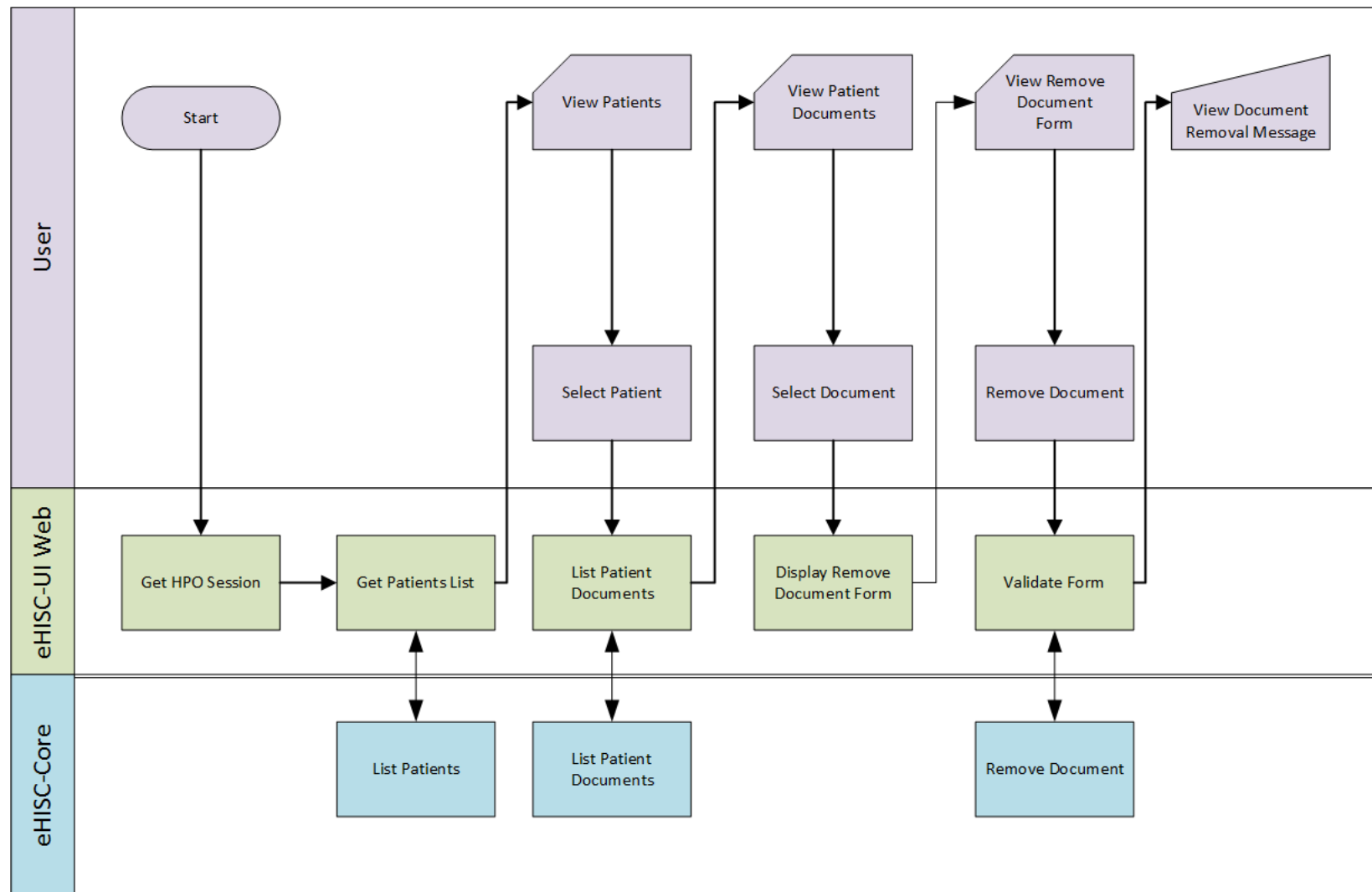
- A document was uploaded for the wrong individual (reason 'Incorrect Identity').
- A document was uploaded after the patient had signed a consent withdrawal, however the consent withdrawal has not yet been actioned within eHISC (reason 'Withdrawn').
- A patient forgot to ask a document not be uploaded 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 patients via their MRN at the current hospital.

Only documents uploaded via eHISC 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.

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

### 3.2.17.2 Process Overview



### 3.2.17.3 Process Detail

Activity / Decision	Description	Detail / Notes
Prerequisites	User logged in to the eHISC-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	eHISC-UI Web loads configuration settings.	Gets eHISC-UI Web configuration settings from the <i>Settings</i> table of the <i>eHISCWebDataStore</i> database.  Retrieves from cache if present and stores in cache after retrieval.
Get Patients List	eHISC-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 eHISC <i>PatientService</i> web service using:  The Selected HPO facility (Code, <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	eHISC 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>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 after the episode end date to include patients.</p> <p>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> <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 eHISC 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>
View Patients	User receives a screen displaying the patient list for the selected hospital.	



Activity / Decision	Description	Detail / Notes
Select Patient	User selects a patient to remove a document from.	If the Patient the user is looking for is not in the Patient's list the user may use the "Lookup MRN" field on the Patient List page to return the Patient they are searching for. User request includes the following field(s): Hospital Code Patient MRN
List Patient Documents	eHISC-UI Web displays a list of locally updated documents for the selected Patient and Hospital.	Refers to loaded configuration settings to determine DefaultHospitalCodeSystem. Gets a list of uploaded documents from the ListUploadedDocuments method of the eHISC PcehrService web service using: The Selected Patient (MRN, Hospital Code, DefaultHospitalCodeSystem) Results are not cached.
List Patient Documents	eHISC Core returns a list of all uploaded documents for a defined Patient in the local document store.	Represents the <i>GetUploadedDocuments</i> method of the <i>PcehrService</i> web service. Returns all locally stored successfully uploaded documents for the indicated patient and hospital (refer to <i>ClinicalDocument</i> , <i>ClinicalDocumentStatus</i> , and <i>ClinicalDocumentVersion</i> tables). Receives the following input: Patient MRN and associated Hospital Code and Code System Returns at least the following information: Associated Episode Admission Date/Time Associated Episode Discharge Date/Time Responsible Provider Name Status (Uploaded, Pending Remove, Removed, Failed Remove) Document ID Document Type
View Patient Document List	User receives a screen displaying the patient's documents at a hospital.	
Select Document to Remove	User selects the document to remove for the selected Patient.	User request includes the following field(s): Hospital Code Patient MRN Document ID
Display Remove Document Form	eHISC-UI Web displays the remove document modal for the selected document.	If the document is uploaded to an episode that is not an inpatient episode: Change "Hospital" to "Facility" Change "Admission Reason" to "Service" Change "Admission Date" to "Service Date" Hide "Discharge Date"

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	eHISC-UI Web removes an uploaded document from the My Health Record System.	Refers to loaded configuration settings to determine DefaultHospitalCodeSystem. Remove an uploaded documents from the My Health Record System using the RemoveDocument method of the eHISC PcehrService web service using: The Selected Patient (MRN, Hospital Code, DefaultHospitalCodeSystem) Document ID
Remove My Health Record System Document	eHISC 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: Patient MRN and associated Hospital Code and Code System Document ID
View Result	The User receives an updated form page indicating the patient has now successfully placed a request to remove the document.	The document list can be refreshed to retrieve the latest document state.

## 3.2.17.4 Web User Interfaces

### 3.2.17.4.1 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 the 'Remove Document' web interface. At the top is a navigation bar with links: Home, Assisted Registration, HPI-1 Search, PCEHR Viewer, Data Integrity, Consent Management, and Document Management. Below this is a 'Remove Document' section with a 'Hospital' dropdown menu (currently showing 'Hospitals') and a 'Search' input field. A table displays patient data with columns: Name, Date of Birth, MRN, and Actions. The table contains 10 rows of data. Below the table, it says 'Showing 1 to 10 of 33 entries' and has pagination controls: First, Prev, 1, Next, Last. At the bottom, there is a 'Lookup by MRN' section with an input field and a 'Lookup' button. Callouts provide additional information: 'Data to display (as available):' lists Name, Date of Birth, and MRN. 'Sortable columns. Default sort Name ASC.' points to the table headers. 'Errors and feedback to be displayed on top of page.' points to the top of the page. 'Hospital Selector to change hospital.' points to the Hospital dropdown. 'Search bar to filter across all columns (except actions)' points to the Search input field. 'Clicking "View Uploaded Documents" link shows the documents that have been uploaded by the current healthcare provider organisation for the selected patient ("Document List").' points to the 'View Uploaded Documents' link in the Actions column. 'Paging of results Page size: 10.' points to the pagination controls. 'Lookup by MRN allows exact search on MRN across all time. If result found that patient is selected. Otherwise an error is displayed.' points to the 'Lookup' button.

NEHTA

Home | Assisted Registration | HPI-1 Search | PCEHR Viewer | Data Integrity | Consent Management | Document Management

### Remove Document

Hospital  
Hospitals

Search:

Name	Date of Birth	MRN	Actions
JONES, Betty	2/3/1980	JONES123	<a href="#">View Uploaded Documents</a>
SMITH, Andrew	1/4/1990	56ASQ	<a href="#">View Uploaded Documents</a>
SQUIRE, Lily	1/2/1960	SQ123L	<a href="#">View Uploaded Documents</a>
JONES, Betty	2/3/1980	JONES123	<a href="#">View Uploaded Documents</a>
SMITH, Andrew	1/4/1990	56ASQ	<a href="#">View Uploaded Documents</a>
SQUIRE, Lily	1/2/1960	SQ123L	<a href="#">View Uploaded Documents</a>
JONES, Betty	2/3/1980	JONES123	<a href="#">View Uploaded Documents</a>
SMITH, Andrew	1/4/1990	56ASQ	<a href="#">View Uploaded Documents</a>
SQUIRE, Lily	1/2/1960	SQ123L	<a href="#">View Uploaded Documents</a>
JONES, Betty	2/3/1980	JONES123	<a href="#">View Uploaded Documents</a>

Showing 1 to 10 of 33 entries

First Prev 1 Next Last

Lookup by MRN:

Lookup

Data to display (as available):

- Name
- Date of Birth
- MRN

Sortable columns. Default sort Name ASC.

Errors and feedback to be displayed on top of page.

Hospital Selector to change hospital.

Search bar to filter across all columns (except actions)

Clicking "View Uploaded Documents" link shows the documents that have been uploaded by the current healthcare provider organisation for the selected patient ("Document List").

Paging of results  
Page size: 10.

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

### 3.2.17.4.2 Document List

Document List displays a list of documents uploaded by the selected hospital for the selected patient.

The screenshot shows a web browser window titled "Documents Uploaded by Test Hospital for SMITH, Jane". The browser address bar shows "http://". The NEHTA logo is at the top left. A navigation bar contains links: Home, Assisted Registration, HPI-I Search, PCEHR Viewer, Data Integrity, Consent Management, and Document Management. Below the navigation bar is the page title "Documents Uploaded by Test Hospital for SMITH, Jane". A search bar is located above the table. The table has columns: Type, Admitted, Discharged, Responsible Provider, Status, and Actions. The table contains 10 rows of data. At the bottom of the table, it says "Showing 1 to 10 of 33 entries". A pagination bar at the bottom right shows "First", "Prev", "1", "2", "Next", and "Last".

**Callouts:**

- Title to be "Documents Uploaded by (Hospital) for (Patient Name)"
- Data to display:
  - Document Type
  - Admission Date/Time
  - Discharge Date/Time (or "-")
  - Responsible Provider
  - Status
- Sortable columns. Default sort Name ASC.
- Summary of matching results.
- Errors and feedback to be displayed on top of page.
- Search bar to filter across all columns (except actions)
- Clicking "View" opens the document for viewing ("View Document"). Clicking "Remove" opens the document removal form ("Remove Document").
- Paging of results  
Page size: 10.

Type	Admitted	Discharged	Responsible Provider	Status	Actions
Prescription	2/3/2014 12:03:00	-	Dr Test Test	Uploaded	<a href="#">View</a> <a href="#">Remove</a>
Discharge Summary	2/2/2014 02:22:33	22/2/2014 10:30:02	Dr Test Test	Uploaded	<a href="#">View</a> <a href="#">Remove</a>
Prescription	2/2/2014 02:22:33	22/2/2014 10:30:02	Dr Test Test	Pending Remove	<a href="#">View</a> <a href="#">Remove</a>
Prescription	2/2/2014 02:22:33	22/2/2014 10:30:02	Dr Test Test	Uploaded	<a href="#">View</a> <a href="#">Remove</a>
Prescription	2/2/2014 02:22:33	22/2/2014 10:30:02	Dr Test Test	Uploaded	<a href="#">View</a> <a href="#">Remove</a>
Prescription	2/2/2014 02:22:33	22/2/2014 10:30:02	Dr Test Test	Uploaded	<a href="#">View</a> <a href="#">Remove</a>
Prescription	2/2/2014 02:22:33	22/2/2014 10:30:02	Dr Test Test	Uploaded	<a href="#">View</a> <a href="#">Remove</a>
Prescription	2/2/2014 02:22:33	22/2/2014 10:30:02	Dr Test Test	Uploaded	<a href="#">View</a> <a href="#">Remove</a>
Prescription	2/2/2014 02:22:33	22/2/2014 10:30:02	Dr Test Test	Uploaded	<a href="#">View</a> <a href="#">Remove</a>
Prescription	2/2/2014 02:22:33	22/2/2014 10:30:02	Dr Test Test	Uploaded	<a href="#">View</a> <a href="#">Remove</a>

### 3.2.17.4.3 Remove 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'. The modal contains several sections: 'Patient Details', 'Administer Request', and a confirmation section. Callouts provide details about each part of the interface.

**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

**Patient Details:**

Patient	GIBBS, GEORGE (0000CHX65)	Responsible Provider	Dr SMILY R BANANA
Date of Birth	20/03/1990	Admission Reason	REASON 1
Hospital	Royal Chamonix Hospital	Admission Date	03/06/2014 03:29:00
Document Type	[Report Type]	Discharge Date	04/06/2014 03:29:00

**Administer Request**

**Removal Reason**

- Incorrect Identity
- Withdrawn

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

**Confirmation checkbox:**

Confirm Remove Clinical Document

☐ Please confirm that you want to remove the patient's clinical document from their National eHealth Record (PCEHR).

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

### 3.2.18 Upload PDF Discharge Summary

#### 3.2.18.1 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.

#### 3.2.18.2 Process Overview

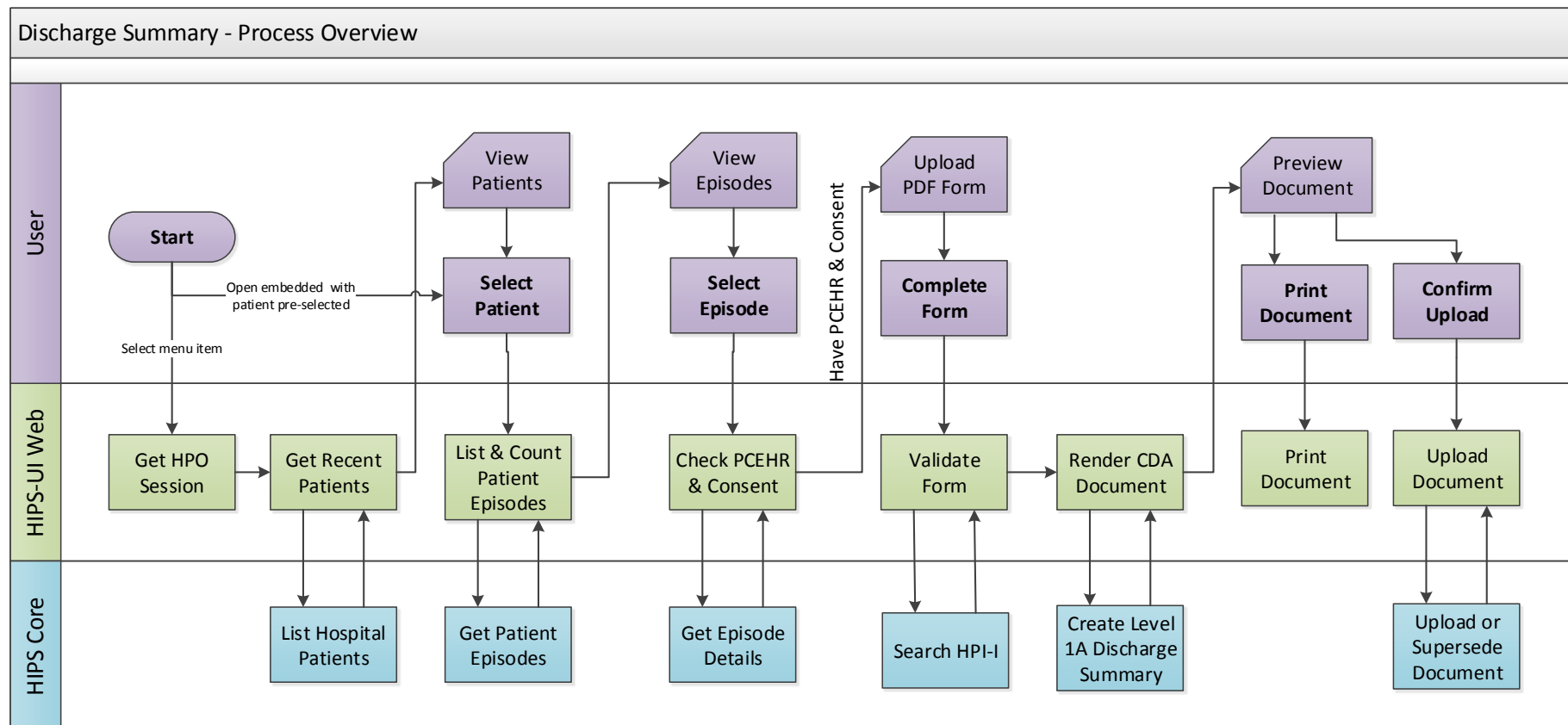


Figure 3 – Discharge Summary – Process Overview

### 3.2.18.3 Process Detail

Activity / Decision	Description	Detail / Notes
<i>Prerequisites</i>	User logged in to the eHISC-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.
<b>Start</b>	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	eHISC-UI Web loads configuration settings.	Gets eHISC-UI Web configuration settings from the <i>Settings</i> table of the <i>eHISCWebDataStore</i> database. Retrieves from cache if present and stores in cache after retrieval.
Get Recent Patients	eHISC-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 eHISC <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	eHISC 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>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"> <li>Hospital Code and Code System</li> <li>Discharge Days number indicating how many days into the past to include discharged patients from</li> </ul> <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 eHISC who meets the following criteria:</p> <ul style="list-style-type: none"> <li>Associated with the Identified Hospital</li> <li><i>HospitalId</i> matches the provided <i>HospitalId</i>.</li> <li>Currently inpatient at the selected hospital or discharged from the hospital within a configured number of days</li> <li>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>.</li> </ul> <p>Patient data to include the following information (as available):</p> <ul style="list-style-type: none"> <li>Patient Name</li> <li>Date of Birth</li> <li>MRN</li> <li>Location (Ward, Room, and Bed) of the patient's most recent episode at the selected hospital</li> <li>Digital Health Record participation status</li> </ul>
View Patients	User receives a screen displaying the patient list for the selected hospital.	See view patients screen. There will not be an embedded version of this screen.
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"> <li>Hospital Code</li> <li>Patient MRN</li> </ul> <p>or</p> <ul style="list-style-type: none"> <li>Hospital Code</li> <li>Registered Enterprise Patient ID</li> </ul>



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

Activity / Decision	Description	Detail / Notes
Check Digital Health Record & Consent (including Get Episode Details)	eHISC-UI Web gets the details of the episode.	<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>eHISCWebDataStore</i> database.</p> <p>Gets the details for the selected patient episode using the <i>GetEpisodeDetails</i> method of the <i>eHISC PatientService</i> web service using:</p> <p>The Selected Patient (MRN, Hospital Code, <i>DefaultHospitalCodeSystem</i>)</p> <p>Source System Episode ID</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 Name and ID</p> <p>Discharge Summary Status (None, Uploaded, Removed)</p>
Get Episode Details	eHISC Core gets details for the selected patient episode.	<p>Represents the <i>GetEpisodeDetails</i> method of the <i>PatientService</i> web service.</p> <p>Returns a details of the specified patient episode.</p> <p>Receives the following input:</p> <p>Patient MRN and associated Hospital Code and Code System</p> <p>Source System Episode ID</p> <p>Returns at least the following information for each document associated with the episode:</p> <p>Document ID</p> <p>Document Type</p> <p>Document Status (Uploaded / Removed)</p>
Upload PDF Form	User receives the upload form showing upload or supersede as appropriate.	<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
<b>Complete Form</b>	User completes the Upload PDF Discharge Summary form (either to Upload or Supersede) and submits the form.	User request includes the following field(s): 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)	eHISC-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 eHISC <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	eHISC-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 eHISC <i>CdaService</i> web service using:</p> <ul style="list-style-type: none"> <li>The Selected Patient (MRN, Hospital Code, <i>DefaultHospitalCodeSystem</i>)</li> <li>Admission and Discharge Date/Time</li> <li>Document Author (ID, names, HPI-I)</li> <li>Responsible Health Professional at Time of Discharge (ID, names, HPI-I)</li> <li>Attached file names and contents (Body PDF, Images, Logo)</li> <li>Document Status</li> <li>Mode of Separation</li> <li>Clinical Specialty</li> <li>Date and Time of Completion</li> </ul> <p>Stores in cache after creation, using these keys:</p> <ul style="list-style-type: none"> <li>Hospital Code</li> <li>Patient MRN</li> <li>Document Set ID</li> <li>Document ID</li> </ul> <p>Rendering leverages and extends existing My Health Record System Web Viewer functionality to render the document CDA package using the NEHTA stylesheet.</p>
Create Level 1A Discharge Summary	eHISC 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"> <li>PDF document</li> <li>Patient identifier</li> <li>CDA header metadata</li> <li>Attachment files</li> </ul> <p>Returns at least the following information:</p> <ul style="list-style-type: none"> <li>CDA document</li> <li>Attachment files</li> </ul>
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
<b>Print Document</b>	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	eHISC-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.
<b>Confirm Upload</b>	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	eHISC-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 eHISC <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	eHISC 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.

### 3.2.18.4 Web User Interfaces

#### 3.2.18.4.1 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 window with the URL 'http://'. Below the browser, the page title is 'HIPS-UI Version 4.1.1' and it says 'Logged in as NAME on behalf of HOSPITAL (HPO NAME)'. A navigation bar contains links: Home, Healthcare Identifiers, Patient Registration, Clinical Documentation, and Secure Messaging. The main section is titled 'Discharge Summary - Patients' and features a search bar. Below the search bar is a table with columns: Name, Date of Birth, MRN, Location, Has PCEHR, and Actions. The table lists several patients, including JONES, Betty and SMITH, Andrew. Each row has a 'Select' link in the Actions column. Below the table, it says 'Showing 1 to 10 of 33 entries' and includes pagination buttons: First, Prev, 1, Next, Last. At the bottom, there is a 'Lookup by MRN' section with a text input field and a 'Lookup' button.

**Annotations:**

- Link to Select HPO to change hospital.** Points to the 'HOSPITAL (HPO NAME)' text in the login area.
- Errors and feedback to be displayed on top of page.** Points to the top of the page content area.
- Search bar to filter across all columns (except actions)** Points to the search bar.
- Clicking "Select" link shows the episodes that the selected patient has had at the current healthcare provider organisation ("View Episodes").** Points to a 'Select' link in the table.
- Paging of results Page size: 10.** Points to the pagination buttons.
- 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.** Points to the 'Lookup' button.
- Summary of matching results.** Points to the 'Showing 1 to 10 of 33 entries' text.
- Sortable columns. Default sort Name ASC.** Points to the column headers in the table.
- Data to display (as available):**
  - Name
  - Date of Birth
  - MRN
  - Location (Ward:Room:Bed) of latest episode at the selected hospital
  - PCEHR Status

### 3.2.18.4.2 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**

Version 4.11  
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	<a href="#">Upload</a>
5/4/2014 22:03	6/4/2014 11:30	Leg Pain	Dr Test Test	Uploaded	<a href="#">Supersede</a>
24/3/2014 12:22	25/3/2014 11:20	Arm Injury	Dr Test Test	None	<a href="#">Upload</a>
12/3/2014 11:22	13/3/2014 11:10	Arm Injury	Dr Test Test	None	<a href="#">Upload</a>
6/3/2014 23:22	7/3/2014 11:00	Arm Injury	Dr Test Test	None	<a href="#">Upload</a>
3/3/2014 09:22	4/3/2014 10:50	Arm Injury	Dr Test Test	None	<a href="#">Upload</a>
16/2/2014 10:03	20/2/2013 10:40	Leg Pain	Dr Test Test	Uploaded	<a href="#">Supersede</a>
8/2/2014 11:22	10/2/2014 10:30	Arm Injury	Dr Test Test	None	<a href="#">Upload</a>
4/2/2014 14:22	6/2/2014 10:20	Arm Injury	Dr Test Test	Removed	<a href="#">Supersede</a>
2/2/2014 01:22	3/2/2014 10:10	Arm Injury	Dr Test Test	None	<a href="#">Upload</a>

Showing 1 to 10 of 33 entries

First Prev **1** 2 Next Last

**Callouts:**

- Title to be "Discharge Summary - Episodes for (Patient Name)"
- Errors and feedback to be displayed on top of page.
- Search bar to filter across all columns (except actions)
- Link to indicate Upload vs Supersede depending on existing Discharge Summary status. Both go to the Upload Form which will display appropriately depending on existing status.
- Paging of results  
Page size: 10.
- Summary of matching results.
- Sortable columns. Default sort Admitted DESC.
- Data to display:
  - Admission Date/Time
  - Discharge Date/Time (or "-")
  - Admission Reason
  - Responsible Provider
  - Discharge Summary (None, Uploaded, Removed)

### 3.2.18.4.3 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** BANKS, KENT (00123KENT) **Date of Birth** 27/03/1969

**Hospital** Royal Chamonix Hospital **Upload Status** None

**Responsible Provider** Dr. Adrian GRIGNON Jr. **Admission Date** 18/02/2016 14:58

**Admission Reason** Broken Leg **Discharge Date \***

**Document Author** **Responsible Health Professional**

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

**Attached Files**

Type	File Name	Size	Actions
Body	Discharge Summary.pdf	399.79 KB	<a href="#">Remove</a>
Logo	logo.png	5.58 KB	<a href="#">Remove</a>

[Select Discharge Summary PDF...](#) [Add Attached Image...](#)

**Source Document Status \*** Please Select... **Mode of Separation \*** Please Select...

**Clinical Specialty \*** Please Select...

**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 \*** 19/02/2016 2:13:18 PM

[Preview Document](#)

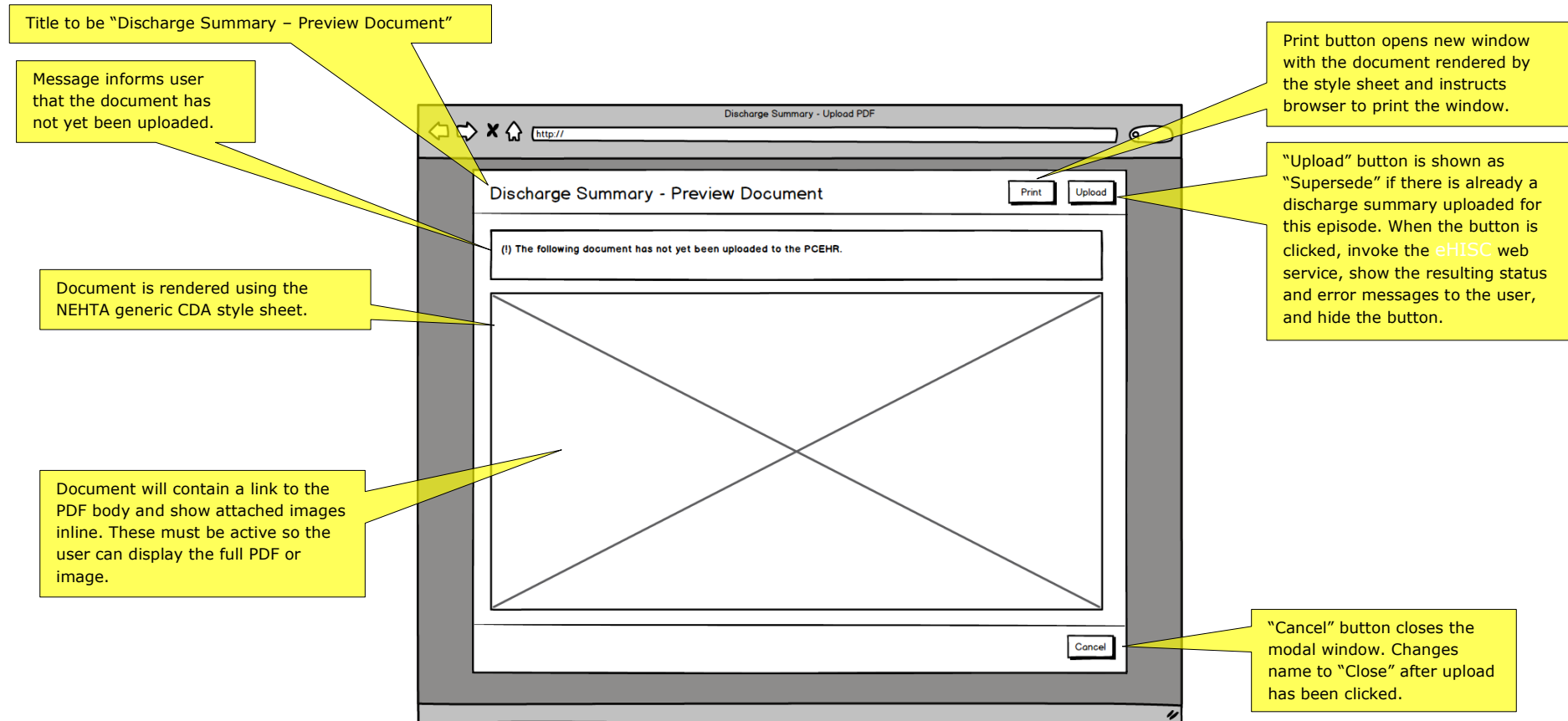
**Annotations:**

- 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.
- 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.



### 3.2.18.4.4 Preview Document

Preview Document modal popup allows user to confirm the document contents before printing and uploading the document.



**Provider Individual Search**

Individual Details for JONES, Sarah Jane

Name: JONES, Sarah Jane  
a.k.a. JONES, Sally

Gender: Female

Linked Organisations:

Name	Location	Postcode	Actions
Very Local GP	LOCALE	VIC 3033	<a href="#">Subscribe</a>
Other Local GP	SUBURB	VIC 3050	<a href="#">Subscribe</a>
New Local GP	PLACE	VIC 3070	<a href="#">Subscribe</a>
Great Local GP	CITY	NSW 2200	<a href="#">Subscribe</a>
Superb Local GP	TOWN	VIC 2400	<a href="#">Subscribe</a>

Showing 1 to 5 of 23 entries

Services: Generalist Medical Practitioners  
 • General Medical Practitioner / General Practitioner  
 Podiatrists  
 • Podiatrist  
 • Podiatric Surgeon  
 Dental Practitioners  
 • Dental Specialist

Registrations: General (AHPRA)  
 GM1234-1234-1234  
 Specialist (AHPRA)  
 SPD7777-7777-7777  
 Specialist (AHPRA)  
 SPP3333-7777-7777

Address: 123 Address St  
 SOMETOWN, NSW 2999

Email: sally@example.com (Business)  
 sally-home@example.com (Personal)  
 Mobile: 0400 000 000 (Business)

Contact(s) listed with Contact Medium as label, value formatted as provided by HIPS, and the Contact Usage following in brackets.

Clicking outside the modal, clicking Close, or pressing ESC all close the modal.

Gender displayed verbatim from HIPS.

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

Postcode presented as State then Postcode

Location column contains the Suburb/Town/Locality

'Subscribe' adds a subscription for this individual AND organisation (the link is disabled and displays a loading indicator while processing). If successful the link is replaced by a success indicator. If unsuccessful the link returns and an error message is placed on the page. This must support multiple subscriptions.

Paging of results Page size: 5.

Registration(s) displayed as Type (Authority) then new line with identifier.

Contact(s) listed with Contact Medium as label, value formatted as provided by HIPS, and the Contact Usage following in brackets.

Clicking outside the modal, clicking Close, or pressing ESC all close the modal.

Title to be "Individual Details for (Surname, Capitalised), (Given Name)

Name displayed as Surname (capitalised) then Given Name. Any Also Known As name is also displayed on a second line preceded by "a.k.a."

Typing search characters filters the data table (across all columns except action).

Linked Provider Organisations presented as data table with Name, Location, and Postcode.

Name is presented verbatim (may not be preferred name).

Summary of matching results.

Services listed as nested lists of Provider Type(s), Specialty Type(s), and Specialisation(s).

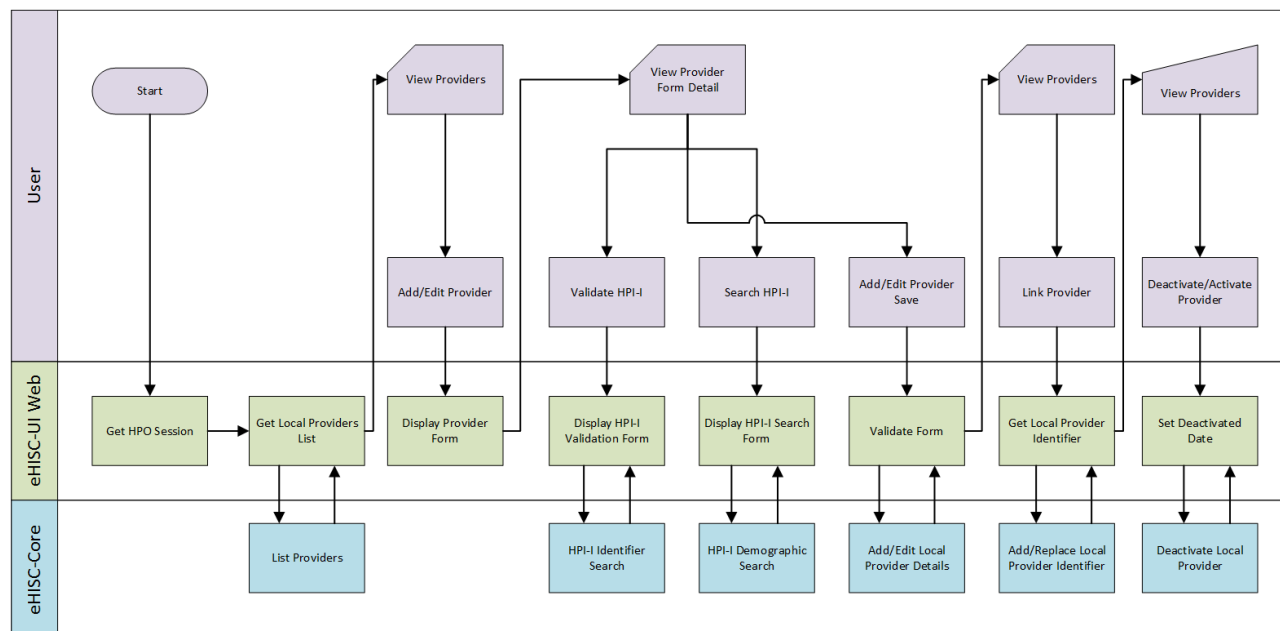
Address(es) listed with numeric indices (if more than one) and displayed in "Flat Address Format" without name (see 'Common' Interface Requirements).

## 3.2.19 Manage Local Providers

### 3.2.19.1 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.

### 3.2.19.2 Process Overview



### 3.2.19.3 Process Detail

Activity / Decision	Description	Detail / Notes
<i>Prerequisites</i>	User logged in to the eHISC-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.
<b>Start</b>	User requests the 'Local Providers' page.	Located under Healthcare Identifiers > Local Providers
Get Settings	eHISC-UI Web loads configuration settings.	No changes required to the current functionality.
Get Local Providers List	eHISC-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 eHISC <i>HpiiService</i> web service Results are not cached.

Activity / Decision	Description	Detail / Notes
List Providers	eHISC-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.
<b>Add or Edit Provider</b>	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	eHISC-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.
<b>AHPRA or HPI-I Search</b>	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 dialog. This page is the same as the existing HPI-I Validation page in eHISC-UI.
Display the HPI-I Identifier Search form	eHISC-UI Web displays the HPI-I Identifier Search form	Opens the HPI-I Identifier Search page in a modal dialog. If the following fields have been entered into the Add Provider screen they should be passed through to the HPI-I Identifier Search page: HPI-I Family Name Given Name(s)
<b>HPI-I Identifier Search</b>	User clicks the <i>Search by Identifier</i> button	Submits the HPI-I Identifier Search form
HPI-I Identifier Search	eHISC-UI Web invokes the HPII Web service, SearchByIdentifier method	Searches for the provider's HPI-I using the SearchByIdentifier method of the HpiiService web service using: The current HPO facility (HPI-O) The Identifier search query. Results are not cached.

Activity / Decision	Description	Detail / Notes
HPI-I Identifier Search	eHISC-Core returns Search Result message	Represents the <i>HpiiIdentifierSearch</i> method of the <i>HpiiService</i> web service. HpiiIdentifierSearch response data to include the following information (as available): Error details HPI-I
HPI-I Identifier Search Response	eHISC-UI Web receives the HPII SearchByIdentifier response and handles it.	Receives the HpiiIdentifierSearch 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 dialog should close and the HPI-I number should be returned to the Add or Edit Provider page.
<b>Demographic Search for HPI-I</b>	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 dialog. This page is the same as the existing HPI-I Search page in eHISC-UI Web.
Display the HPI-I Demographic Search form	eHISC-UI Web displays the HPI-I Demographic Search form	Opens the HPI-I Demographic Search page in a modal dialog. If the following fields have been entered into the Add Provider screen they should be passed through to the HPI-I Validation page: Family Name Given Name(s)
<b>HPI-I Search</b>	User clicks the <i>Search by Demographics</i> button	Enters the required details and submits the HPI-I search form
HPI-I Search	eHISC-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	eHISC-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	eHISC-UI Web receives the HPI-I web service's SearchByDemographics response and handles it.	Receives the HpiiDemographicsSearch 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 dialog will close and the HPI-I number will be returned to the Add or Edit Provider page.

Activity / Decision	Description	Detail / Notes
<b>Add or Edit Provider - Save</b>	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 <i>Save</i> button.
Add or Edit Provider - Save	eHISC-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	eHISC-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.
Add or Edit Provider – Save Response	eHISC-UI Web receives the Add or Edit Provider response	Receives the <i>AddEditLocalProvider</i> 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 <i>Save</i> action was successful. If the <i>Save</i> action was unsuccessful a message stating such should be displayed and any detailed error messages.
<b>Link Provider</b>	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.

Activity / Decision	Description	Detail / Notes
Link Provider	eHISC-UI Web displays a text box for the user to enter a Local Identifier	<p>The user needs to enter the Local Identifier to link this Provider to their selected HPO facility.</p> <p>Invokes a request to the <i>AddReplaceLocalProviderIdentifier</i> method of the <i>HpiiService</i> web service using:</p> <p>Existing Local Provider Identifier</p> <p>The selected HPO facility (Code, <i>DefaultHospitalCodeSystem</i>)</p> <p>New Local Provider Identifier</p>
Link Provider	eHISC-Core links the Provider and returns a response	<p>Represents the new <i>AddReplaceLocalProviderIdentifier</i> method of the <i>HpiiService</i> web service.</p> <p>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.</p> <p>Responds with a successful response type or an unsuccessful response type</p>
Link Provider - Response	eHISC-UI Web will handle the <i>AddReplaceLocalProviderIdentifier</i> response	<p>Receives the <i>AddReplaceLocalProviderIdentifier</i> response.</p> <p>If the Provider is linked successfully the View Providers List should refresh to display the Provider with the new Local Identifier.</p> <p>If an error was returned then display the error message and details to the user.</p>
<b>Deactivate/Activate Provider</b>	User clicks on the <i>Deactivate</i> or <i>Activate</i> Provider icon in the Action column of the View Providers List.	<p>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.</p> <p>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.</p>
Deactivate/Activate Provider	eHISC-UI Web invokes the <i>DeactivateLocalProvider</i> method of the <i>HpiiService</i> web service	<p>Refers to loaded configuration settings to determine <i>DefaultHospitalCodeSystem</i>.</p> <p>Invokes a request to the <i>DeactivateLocalProvider</i> method of the <i>HpiiService</i> web service using:</p> <p>The Selected HPO facility (Code, <i>DefaultHospitalCodeSystem</i>)</p> <p>Local Provider Identifier</p> <p>Deactivated DateTime (set to null if Provider is to be re-activated)</p>

Activity / Decision	Description	Detail / Notes
Deactivate/Activate Provider	eHISC-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	eHISC-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	

### 3.2.19.4 Web User Interfaces

#### 3.2.19.4.1 View Providers

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

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.

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.

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.

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

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

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

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

Showing 1 to 10 of 13 entries

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	80036182333359172	Inactive	
Dr Fred Mason	FREDM	8003616566697807	Active	
Dr GINA GOUSHMAN	GG01	8003616566696830	Inactive	
Dr IVAN DICKERSON		80036182333359164	Active	
GORDON CHANDLER		8003611566692962	Active	
John Smith			Active	
ar Hill	PHILL01		Active	

First Previous 1 2 Next Last



### 3.2.19.4.2 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.

**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 *HpiService AddEditLocalProvider*. If invalid, validation messages should be displayed.

## 3.3 Embedded Pages

The embedded pages allow for the eHISC-UI to be accessed directly from other systems where applicable. The following section describes the embedded pages links. In all of 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 3.2.9 can be access directly using the URLs below.

URL	Description
<a href="http://[WebSite]:[Port]/EmbeddedAssistedRegistration/Hospitals/[Hospital Code]/Patients/[MRN]/Register">http://[WebSite]:[Port]/EmbeddedAssistedRegistration/Hospitals/[Hospital Code]/Patients/[MRN]/Register</a>	This URL should be used when each HPO has a separate MRN and they are not shared between HPO's.
<a href="http://[WebSite]:[Port]/EmbeddedEnterpriseAssistedRegistration/Hospitals/[Hospital Code]/Patients/[MRN]/Register">http://[WebSite]:[Port]/EmbeddedEnterpriseAssistedRegistration/Hospitals/[Hospital Code]/Patients/[MRN]/Register</a>	This URL should be used when multiple HPO's have a single MRN for each Patient across the Enterprise
<a href="http://[WebSite]:[Port]/EmbeddedEnterpriseAssistedRegistration/Hospitals/[Hospital Code]/Patients/[MRN]/[StatePatientId]/Register">http://[WebSite]:[Port]/EmbeddedEnterpriseAssistedRegistration/Hospitals/[Hospital Code]/Patients/[MRN]/[StatePatientId]/Register</a>	This URL should be used when multiple HPO's each create an MRN for each Patient, but there is a single Patient Id which links the MRN across the Enterprise

Where:

- [WebSite]:[Port] is the configured WebSite address and Port number for the eHISC-UI
- [Hospital Code] is the Health Provider Organisation (HPO) Code from where the Patient is being registered from.

- [MRN] is the Patient's MRN for the HPO.
- [StatePatientId] is the Enterprise or State Patient Id that links multiple MRN's to one Patient.

### 3.3.2 Dependent Patient Registration

The Dependent Patient Registration page as described in Section 3.2.10 can be access directly using the URLs below.

URL	Description
http://[WebSite]:[Port]/EmbeddedAssistedRegistration/Hospitals/[Hospital Code]/Patients/[MRN]/RegisterDependent	This URL should be used when each HPO has a separate MRN and they are not shared between HPO's.
http://[WebSite]:[Port]/EmbeddedEnterpriseAssistedRegistration/Hospitals/[Hospital Code]/Patients/[MRN]/RegisterDependent	This URL should be used when multiple HPO's have a single MRN for each Patient across the Enterprise
http://[WebSite]:[Port]/EmbeddedEnterpriseAssistedRegistration/Hospitals/[Hospital Code]/Patients/[MRN]/[StatePatientId]/RegisterDependent	This URL should be used when multiple HPO's each create an MRN for each Patient, but there is a single Patient Id which links the MRN across the Enterprise

Where:

- [WebSite]:[Port] is the configured WebSite address and Port number for the eHISC-UI
- [Hospital Code] is the Health Provider Organisation (HPO) Code from where the Patient is being registered from.
- [MRN] is the Patient's MRN for the HPO.
- [StatePatientId] is the Enterprise or State Patient Id that links multiple MRN's to one Patient.

### 3.3.3 Patient Summary

The Patient Summary page as described in Section 3.2.4 can be access directly using the URLs below.

URL	Description
http://[WebSite]:[Port]/EmbeddedPcehrView/Hospitals/[Hospital Code]/Patients/[MRN]/PatientSummary	This URL should be used when each HPO has a separate MRN and they are not shared between HPO's.
http://[WebSite]:[Port]/EmbeddedEnterprisePcehrView/Hospitals/[Hospital Code]/Patients/[MRN]/PatientSummary	This URL should be used when multiple HPO's have 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 HPO's each create an MRN for each Patient, but there is a single Patient Id which links the MRN across the Enterprise

Where:

- [WebSite]:[Port] is the configured WebSite address and Port number for the eHISC-UI

- [Hospital Code] is the Health Provider Organisation (HPO) Code from where the Patient is being registered from.
- [MRN] is the Patient's MRN for the HPO.
- [StatePatientId] is the Enterprise or State Patient Id that links multiple MRN's to one Patient.

### 3.3.4 Upload PDF Discharge Summary

The Upload PDF Discharge Summary page as described in Section 3.2.18 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 HPO has a separate MRN and they are not shared between HPO's.  This URL will display the View Episodes page for the given Patient as per section 3.2.18.4.2.
http://[WebSite]:[Port]/EmbeddedDocumentUpload/Hospitals/[Hospital Code]/Patients/[MRN]/Episodes/[Episode ID]/Upload	This URL should be used when each HPO has a separate MRN and they are not shared between HPO's.  This URL will display the Upload or Supersede PDF page for the given Patient and Episode as per section 3.2.18.4.3.
http://[WebSite]:[Port]/EmbeddedEnterpriseDocumentUpload/Hospitals/[Hospital Code]/Patients/[MRN]/Episodes	This URL should be used when multiple HPO's have a single MRN for each Patient across the Enterprise  This URL will display the View Episodes page for the given Patient as per section 3.2.18.4.2.
http://[WebSite]:[Port]/EmbeddedEnterpriseDocumentUpload/Hospitals/[Hospital Code]/Patients/[MRN]/Episodes/[Episode ID]/Upload	This URL should be used when multiple HPO's have 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 3.2.18.4.3.
http://[WebSite]:[Port]/EmbeddedEnterpriseDocumentUpload/Hospitals/[Hospital Code]/Patients/[MRN]/[StatePatientId]/Episodes	This URL should be used when multiple HPO's each create an MRN for each Patient, but there is a single Patient Id which links the MRN across the Enterprise  This URL will display the View Episodes page for the given Patient as per section 3.2.18.4.2.

URL	Description
http://[WebSite]:[Port]/EmbeddedEnterpriseDocumentUpload/Hospitals/[Hospital Code]/Patients/[MRN]/[StatePatientId]/Episodes/{Episode ID}/Upload	<p>This URL should be used when multiple HPO's each create an MRN for each Patient, but there is a single Patient Id which links the MRN across the Enterprise</p> <p>This URL will display the Upload or Supersede PDF page for the given Patient and Episode as per section 3.2.18.4.3..</p>

Where:

- [WebSite]:[Port] is the configured WebSite address and Port number for the eHISC-UI
- [Hospital Code] is the Health Provider Organisation (HPO) Code from where the Patient is being registered from.
- [MRN] is the Patient's MRN for the HPO.
- [StatePatientId] is the Enterprise or State Patient Id that links multiple MRN's to one Patient
- [EpisodeId] is the Episode Id for the Patient in the HPO.

## 3.4 Security Model

Security is implemented using a combination of IIS Windows Security for authentication and the MVC Authorization package for authorisation.

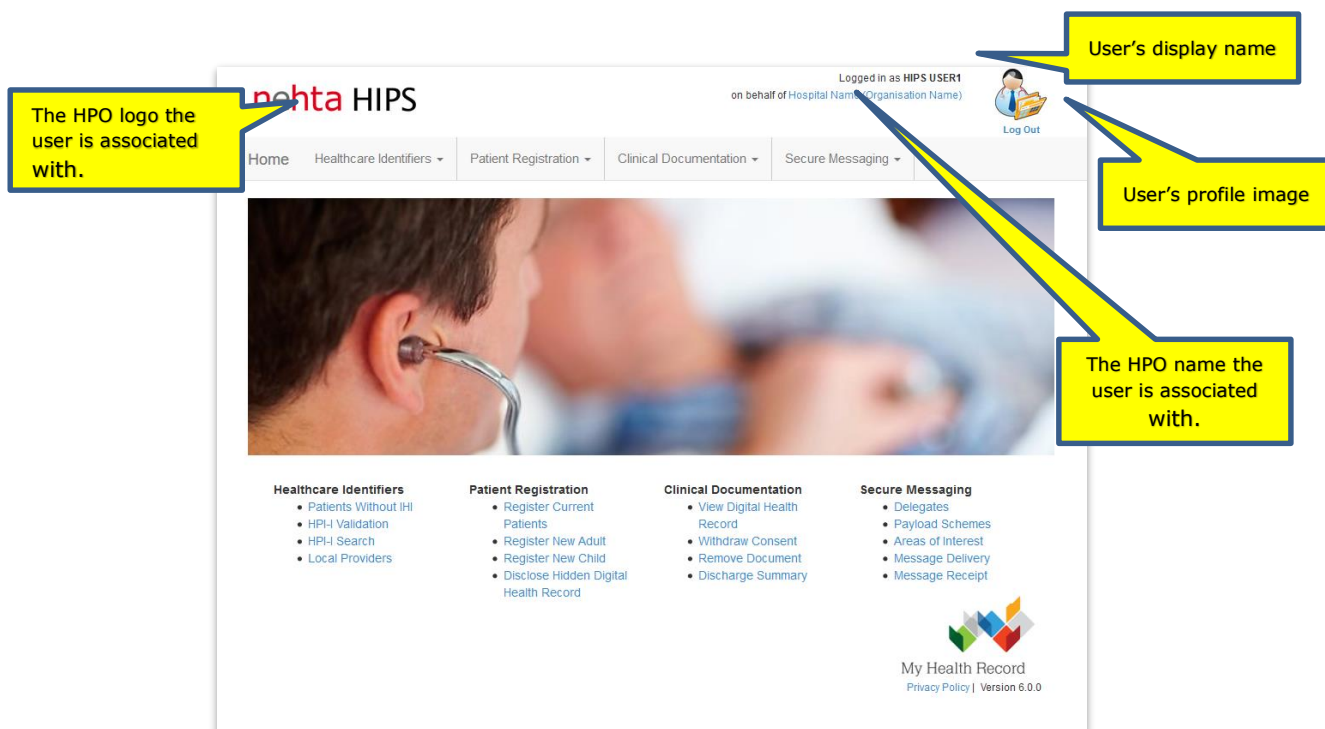
### 3.4.1 Authentication

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

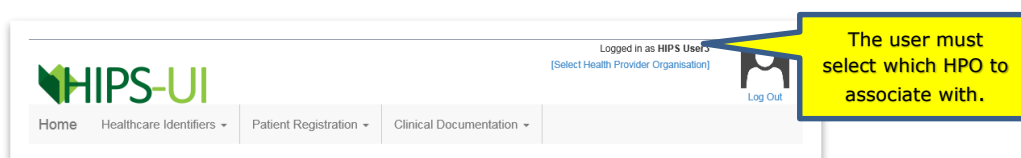
The user has the options of logging in to the eHISC-UI Web by entering a username and password and clicking Log in or by logging in with the user account that is currently logged onto the PC.

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 associated HPO(s) are retrieved from the eHISC-Core database. If only one HPO is associated to the user then the eHISC-UI Web banner is updated to display the HPO logo and name.



If the user has more than one HPO associated with them then the eHISC-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 HPO 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 has no HPO's associated with their access groups they will be presented with the following message and not be granted access to any of the eHISC-UI Web functions.



You have not been granted access to a Hpo.  
Contact your help desk for more information.

Once authenticated the user has the option of logging out of the eHISC-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 eHISC-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 eHISC-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.



 Unauthorized

You are not currently logged in.

### 3.4.2 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 eHISC-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.



 Forbidden

The requested page requires additional permissions to be accessed.