

Write a CDA/Specialist letter

Last Modified on 09/05/2023 1:03 pm AEST

Write a Specialist Letter or eReferral using a CDA form in the Referrals module. For specialists, the CDA format is selected by default, while doctors will need to select it. The CDA format opens a form that is uploaded to My Health Record (MHR) so the information is available for other practitioners. See the [My Health Record guide](#) to learn more about MHR uploads.

For specialists, **Quick Documents** can also be used to write letters back to referrers. To learn more, see the [Letter writer article](#).

Considerations when using CDA letters to upload to MHR:

- The patient must be registered for My Health Record.
- The patient must have a valid IHI Number.
- The Addressee must have an HPI-I in the [Address Book](#).
- CDA is enabled by the **Send as CDA/eReferral** tick box, which is selected by default.
- CDA can be deselected by default in Clinical's Tools > My Options > My Health Record > Referrals.

Write a CDA referral or letter

This section explains how to write a Specialist Letter or Referral using a CDA form. If you are a specialist, the headings and CDA content will be for a Specialist Letter, and if you are a doctor, the headings and CDA content will be for a Referral.

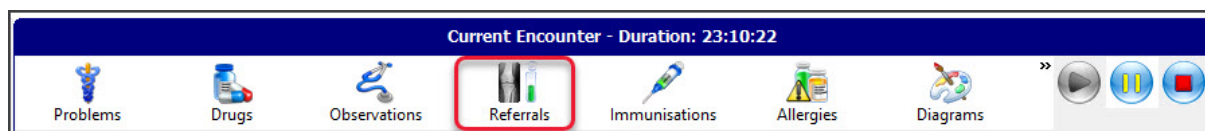
To use the CDA format:

1. Start an encounter with the patient.

For a detailed explanation of how to do this, see the [Start an encounter article](#).

When the encounter starts, the **Current Encounter** pane will open and display the clinical modules.

2. Select **Referrals** from the **Current Encounter** menu.



This will open the **Referrals** screen.

3. Select the **Specialist Letter / Referral Letter** tab.
4. In the **Addressee** field, add the referrer the letter is for.

Enter the name in the field provided then select the search icon and double-click the addressee's name from the list. You can also select the search icon with a blank field, then select **Find** and **Yes** to view all addressees.

5. Use the **Copy to** field if you want to cc another practitioner.
6. Use **Letter Subject** to add an internal description to the referral. This will not be included in the letter itself.
7. Check that **Send as CDA/e-Letter** is selected.
8. Select **Write Letter**.

Referrals for: Holloway, Mr Knut

Referral Selection

Past Referrals New Referral

Pathology Radiology Specialist Letter

Address

☐ Free Text Addressee

Tester1, Mack

Address

107 ADRIATIC CCT CLYDE
3978

Copy To

Templates

Document Ref Letter - Standard

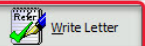
Summary (None)

Letter Subject:

Other

☐ No Result Expected

☒ Send as CDA / e-Letter

 Write Letter

Today's referrals

Addressee	Details	Problem

Current Encounter

Undefined Problem

RFE: ☐ Use Coded RFEs Management Plan

Print Referrals Print Referrals and Close

Help OK Cancel

- The form will open with the title **Specialist Letter** (for specialists) and **eReferral** (for doctors).
9. Enter the information, including the **Response Details** (for specialists) or **Referral Reason** (for doctors)

eReferral

Doctors

Patient Details

Name MCINTYRE, Goldie IHI ☒ 8003 6086 6689 3235 File No 65 Phone 0422 555555 ATSI Not Recorded

DOB 25/04/1959 Sex Female Address 46 Hiram Cir, BOCOBRA, 2865 Email

Medicare Card 29532965711 DVA

Source Allergies Medicine

Specialist Letter

Specialists

Patient Details

Name: Holloway, Mr Knut IHI: ☒ 8003 6083 3339 0375 File No: 4 Phone: 0491 570 006 ATSI: Not Recorded
DOB: 19/05/1952 Sex: Male Address: 5 Jacob Pl, BUGLE RANGES, 5251 Email: rickd@zedmed.com.au
Medicare Card: 5950286142 DVA:

Jump to -> [Source](#) [Allergies](#) [Medicine](#) [History](#) [Diagnostic](#)

Document Author

Doctor Name: Eason, Augustus (AE) HPI: Healthcare Role: General Medical Practitioner
Clinic Name: Albany Road Clinic HPI-O: 8003 6282 3336 7349 Clinic Address: 343 Albany Road SOUTH MELBOURNE 3205
☐ Is Usual GP Clinic Phone: 03 5550 3256 Clinic Fax:

Usual GP

[Address Book](#) [Treating Doctors](#)

Doctor Name: HPI: Healthcare Role: General Medical Practitioner
Clinic Name: HPI-O: Address:
Phone: Fax:

Referrer

[Address Book](#) Doctor Name: Mack Tester1 Address: 107 ADRIATIC CCT CLYDE 3978
HPI: 8003614900040781 Organisation: General Practice North Phone: 0422555555 Fax:

CC to: Doctor Name: Phone: Address:
[Add](#) [Del](#)

Response Details

Date of Letter: 8/05/2023

Mandatory Field

Response:

Allergies and Adverse Reactions

Reason for nothing listed / selected:

Agent	Reaction Description
<input checked="" type="checkbox"/> Penicillin V Potassium Tablets, USP (Rising Health)	Adverse reaction
<input checked="" type="checkbox"/> Cows Milk	Adverse reaction
<input checked="" type="checkbox"/> Carmoseptine	Adverse reaction. Burns skin
<input checked="" type="checkbox"/> aspirin	(Mild)
<input checked="" type="checkbox"/> Luvox	(Mild)

Medicine

Reason for nothing: ☒

[Save Draft](#) [Next \(preview\)](#) [Cancel](#)

Save Draft will save the letter in **Summary Views > Referrals** with a D (draft) icon. Right-click > **Edit** the letter to resume.

10. Select **Next (preview)**.

The **Specialist letter/eReferral** will open. The example below shows an eReferral.

11. Review the letter's content.

12. Select **Confirm Content and Send**.

- **Confirm Content Without Sending** saves the eReferral to **Summary Views > Referrals** with an A (Approved draft) icon.

- **Right-click > Send to My Health Record** will reopen the eReferral at the **Confirm Content and Send** step.

13. Select **OK** on the **Referrals** screen to close and exit.

eReferral

Goldie MCINTYRE DoB 25 Apr 1959 (63y*) SEX Female IHI 8003 6086 6689 3235

16 Feb 2023

START OF DOCUMENT

Albany Road Clinic

Author Dr Phillip Davis (General Medical Practitioner)
Phone 03 5550 3256

Referral Detail

Reason for Referral

Test reply to referred for MHR

Date and Duration

Date	Duration
16 Feb 2023 15:32:09+1100	16 Feb 2023 -> 16 Aug 2023

Adverse Reactions

No Adverse Reactions are supplied

Medications

Medications

Medication	Directions
Temazepam 10mg Oral Tablet 10mg [25]	TAKE 1 NOCTE

Medical History

This section contains no entries.

ADMINISTRATIVE DETAILS

Patient		Author	
Name	Goldie MCINTYRE	Name	Dr Phillip Davis (General Medical Practitioner)
Sex	Female	Organisation	Albany Road Clinic
Indigenous Status	Not stated/inadequately described	Work Place	343 Albany Road, SOUTH MELBOURNE, VIC, 3205, Australia
Date of Birth	25 Apr 1959 (63y) * Age is calculated from date of birth	Phone	03 5550 3256 (Workplace)
IHI	8003 6086 6689 3235	Clinical Document Details	
Entitlements	29532965711 (Medicare Benefits)	Document Type	e-Referral
Home Address	46 Hiram Cir, BOCOBRA, NSW, 2865, Australia	Creation Date/Time	16 Feb 2023 15:33+1100
Phone	0422 555555 (Mobile Contact)		

☐ Upload a copy to the My Health Record.

Actions

Back Confirm Content Without Sending **Confirm Content and Send** Close

If the requirements listed at the start of this guide are met, the letter will be:

- Uploaded to the patient's My Health Record.
You can check the upload in the **My Health Record Document UI**
- Sent to the addressee via a secure messaging service.

You can check the Addressee received the eReferral in the **Outbox viewer**.

14. Print the letter out if required.

While the encounter is open, the letter can be printed by right-clicking it and selecting **Reprint Referral**.

Summary Views definitions

The Summary Views **Documents** and **Referrals** tabs contain saved and completed referrals, and actions can be performed based on the referral's status.

- **Blue text** means the document has not been uploaded to My Health Record
- **Black text** means the document has been uploaded to My Health Record

Icon	Meaning	Key <u>right-click</u> options
	Zedmed Open referral waiting for a response	Change Status Reprint Referral Request
	Zedmed Closed referral	Change Status Reprint Referral Request
	MHR Draft (saved) - still being worked on	Edit (Reopen) No Consent to upload
	MHR Processed - blue/black text = upload status	Remove from My Health Record Resend to Recipients
	MHR Approved (Complete) - to be manually sent	Send to My Health Record Send to Recipients

Summary Views

Problems

Referrals

Results

Immunisations

Allergies

Images/ECG

Documents

Attachments

Measurements

Medications

Incoming Documents

14/02/2023 Letter to Dr Brenda Reed

18/01/2023 Asthma plan

22/12/2022 Holloway, Mr Knut_4.rtf

24/11/2022 Ref Letter - Standard - Dr Brenda Reed

15/11/2022 Letter

15/11/2022 Patient report

11/11/2022 Full History

26/09/2022 Letter test

21/09/2022 Medical Certificate

15/08/2022 EPC Referral

Referral Letters

17/02/2023 eReferral - Mack Tester1 v1

17/02/2023 eReferral - Mack Tester1 v1

16/02/2023 eReferral - Mack Tester1 v1

02/02/2023 Ref Letter - Standard - Dr Brenda Reed

27/09/2022 Ref Letter - Standard - Letter to Patient

25/07/2022 Ref Letter - Standard - Dr Vivian Mortier

My Health Record Summaries

16/02/2023 Event Summary v1

20/01/2023 Shared Health Summary

20/01/2023 Event Summary v1

20/01/2023 Event Summary v1

18/01/2023 Event Summary v1

Summary Views

Problems

Referrals

Results

Immunisations

Allergies

Images/ECG

Documents

Attachments

Measurements

Medications

Incoming Documents

Pathology Investigations

25/11/2022 Histopathology - Gribbles Pathology

27/09/2022 Reticulocyte count - Gribbles Pathology

09/08/2022 U&E - Gribbles Pathology

Radiology Investigations

09/08/2022 X-Ray (Chest) - RADPLUS Radiology

Letters

17/02/2023 eReferral - Mack Tester1 v1

17/02/2023 eReferral - Mack Tester1 v1

16/02/2023 eReferral - Mack Tester1 v1

02/02/2023 Ref Letter - Standard - Dr Brenda Reed

27/09/2022 Ref Letter - Standard - Letter to Patient

25/07/2022 Ref Letter - Standard - Dr Vivian Mortier