Interstate GP Visit

Patient

Jeramy Ezra Banks

DOB: 14 May 1951 (73yo)

1. Health Record Management

Comfortable with basic technology, Jeramy uses a smartphone app to manage his healthcare records.

2. Interstate Travel

Jeramy travels interstate to Queensland for a holiday. Jeramy checks that his patient summary has been updated by his usual GP following a recent admission to hospital prior to travelling.

3. GP Visit

Feeling unwell, Jeramy books an appointment with a Queensland GP.

4. Begin GP Consultation

During GP consultation, Jeramy provides access to his updated patient summary

5. Patient Summary Retrieval

The GP retrieves Jeramy's up to date patient summary from his usual GP.

6. Continue GP Consultation

The GP uses the patient summary to support care decisions during the consultation.

7. Patient Summary Update

The interstate GP provides an updated patient summary, if required, along with writing to Jeramy's usual GP.

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Emergency Hospital Attendance

Patient

Charlotte Morris

DOB: 11 Nov 1994 (30yo)

1. Ambulance Attendance

Charlotte is taken to hospital via ambulance following a car accident. Presenting with various injuries, Charlotte is stable but unconscious

2. Ambulance Transfer

Ambulance staff access Charlotte's patient summary and note that Charlotte has an allergy to opioids & latex.

3. Hospital System Request

During handover, the ED Multidisciplinary Team (MDT) is alerted to Charlotte's opioid and latex allergies and also requests the most recent collated patient summary data.

4. Patient Summary Retrieval

The system retrieves the patient summary from Charlotte's usual GP.

5. Patient Summary Review

Dr Hickson and the ED MDT review the patient summary to see information on allergies, pregnancy status, vaccinations status, current medications and other health information.
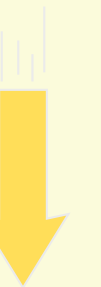
6. Hospital Treatment

This allows Dr Hickson and the ED MDT to treat the accident-related injuries while minimising the risk of complications from underlying health conditions.

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Referral to Specialist & Allied Health

Patient

Joyce Johnson

DOB: 06 Feb 1985 (39yo)

1. Referral Creation

Dr Burrows shares care of Joyce, who is pregnant and has recently been diagnosed with gestational diabetes. Dr Burrows decides to send electronic referrals to an endocrinologist and a dietitian for further evaluation & support.

2. Referral Received

Each health care provider receives a referral, which allows access to the patient summary at time of referral. The practice nurse or dietitian opens their referral and retrieves patient summary.

3. Referral Triaged

Using the information in the electronic referral and the most recent patient summary from Dr Burrows, each health care provider triages their referral.

4. Endocrinologist Consultation

During the consultation, the endocrinologist accesses the patient summary embedded in their referral to view and confirms the most recent patient summary, including current medications and relevant medical history. The endocrinologist decides to increase Joyce's insulin dose.

5. Patient Summary Update

The endocrinologist writes a letter to update Joyce's usual GP and her midwife. The endocrinologist also updates a patient summary for Joyce to include the increase to her insulin dose.

6. Dietitian Consultation

During the consultation, the dietitian accesses the patient summary embedded in their referral to view and confirm the most recent patient summary, which has been updated with the increased dosage.

7. Patient Summary Update

The dietitian updates a patient summary for Joyce and writes a letter to update Joyce's usual GP and midwife.

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Hospital to Aged Care Interstate Transfer

Patient

Eleanore Nielsen

DOB: 12 Apr 1945 (79yo)

1. Patient Discharge

Eleanore is preparing for discharge from the hospital following a hip fracture. No longer able to live in her own home in NSW, Eleanore will be going to an aged care facility in Canberra close to where her daughter lives.

2. Information Handover

Hospital staff update Eleanore's patient summary and discharge information, which will be transferred to her new aged care facility.

3. Aged Care Arrival

Eleanore arrives at the new aged care facility, greeted by the staff who already have her relevant health information on hand.

4. Pharmacy Review

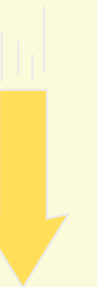The aged care pharmacist reviews and reconciles Eleanore's current medications.

5. GP Consultation at Aged Care Facility

During the consultation with Eleanore and her daughter, Eleanore's new GP requests her patient summary from her previous GP. They review the hospital discharge summary and patient summary from the previous GP to reconcile her medication and care requirements, confirming her patient summary information is correct and up to date.

6. Provide Patient Care

Eleanore's updated patient information is available to the healthcare providers in her new local area, including her new pharmacy when dispensing her medications.

Sparked

Pre-operative Surgical Journey

Patient

Tristan Simpson

DOB: 27 Sep 1950 (74yo)

1. Initial Consultation

Tristan has been experiencing gradually worsening vision, particularly trouble with reading and seeing clearly at night. After assessing Tristan, the optometrist suspects cataracts and decides to refer Tristan to an ophthalmologist for further evaluation.

2. Referral

The ophthalmologist's rooms receive the referral, which allows access to the patient summary at time of referral. The ophthalmologist requests the most recent patient summary from the Tristan's usual GP.

3. Patient Consultation

The ophthalmologist performs a comprehensive eye assessment and determines a diagnosis of cataracts. After discussing his treatment options, the ophthalmologist schedules Tristan for a pre-operative assessment with a nurse to ensure Tristan is ready for surgery.

4. Pre-operative Assessment Delayed

Tristan's initial pre-operative assessment is delayed and is rescheduled to a later date. In the meantime, Tristan has to be started on anti-coagulants due to a diagnosis of arrhythmia.

5. Pre-operative Assessment

The pre-operative team accesses Tristan's patient summary that was created at time of referral and his most recent patient summary. From the most recent patient summary, the team identify that Tristan has now been started on anti-coagulant medication.

6. Ready for surgery

The pre-operative team prioritises and schedules a telehealth call with Tristan to confirm the details that have changed and to advise Tristan to cease his anti-coagulants 48hrs prior to surgery. A surgical date is set to remove Tristan's cataracts.

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