## Interstate GP Visit

#### **Patient**

**Jeramy Ezra Banks** 

DOB: 14 May 1951 (73yo)

**Sparked** 

### 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.

### 4. Begin GP Consultation

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

#### 3. GP Visit

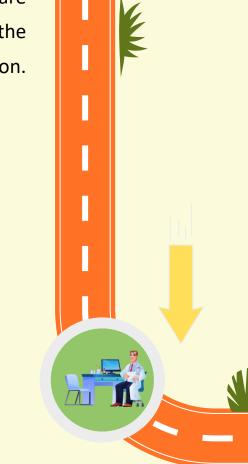
Feeling unwell, Jeramy books an appointment with a Queensland GP.

#### 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.

# **Emergency Hospital Attendance**

3. Hospital System

During handover, the ED

is alerted to Charlotte's

Multidisciplinary Team (MDT)

opioid and latex allergies and

also requests the most recent

collated patient summary

Request

data.

#### **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

## **Transfer**

### **5. Patient Summary Review**

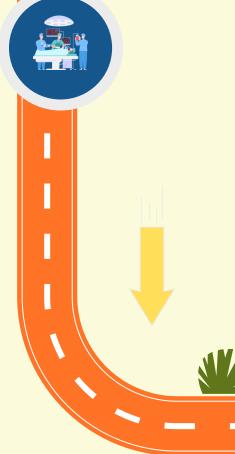
Dr Hickson and the ED MDT review the patient summary to see information on allergies, pregnancy status, vaccinations status, current medications and other health information.

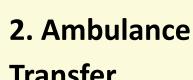
### 4. Patient Summary Retrieval

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

# **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.





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



# 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.



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.

## 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.



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.

### 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.

## 7. Patient Summary Update

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





## Hospital to Aged Care Interstate Transfer

3. Aged Care Arrival

Eleanore arrives at the

new aged care facility,

health information on

hand.

greeted by the staff who

already have her relevant

#### **Patient**

**Eleanore Nielsen** 

DOB: 12 Apr 1945 (79yo)

### 1. Patient Discharge

**Sparked** 

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.

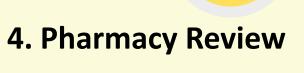
## 5. GP Consultation at Aged Care Facility

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.

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



## **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.



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

4. Pre-operative

**Assessment Delayed** 

Tristan's initial pre-operative

assessment is delayed and is

meantime, Tristan has to be

diagnosis of arrhythmia.

rescheduled to a later date. In the

started on anti-coagulants due to a

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

### 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 anticoagulants 48hrs prior to surgery. A surgical date is set to remove Tristan's cataracts.

**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.







