Quick Start Guide

MyHealthLink – Receiving and Submitting Messages

This guide has been created to show you the key steps involved in receiving and submitting electronic messages within MyHealthLink (the HealthLink Online Portal).

Action	Screen-shot
1. Login Navigate to the URL that has been provided to access MyHealthLink. Enter your MyHealthLink username and password, and select the Login button.	Mission 2000 288 887 (KZ) 1900 125 035 (AUS) hepdeak@nealthink.net Contact Us Login Here Please enter your username and password in the fields below and dick the login button. If you are new to HealthLink click on the New User link below ACC MMEx acc32phy
 View received messages On login you will be presented with the MyHealthLink Inbox. Review the list of received messages, and if necessary choose a message to view or download attachments. 	Contact Us Contact Us Forms ////////////////////////////////////
 3. View attachments Use the View Attachments screen to view and download attachments. Click on the download button to access a copy of the attachment. 	Centainty Contact Us too Forms Contact Us too I nbox(2) Parked I nbox(2) <t< td=""></t<>

Action

4. Compose a new message

Click on the Compose button to start a new message.

The HealthLink home page will display. Select the Service you want to launch.

n-shot		
Certainty in Care	0800 288 887 (NZ) 1800 125 036 (AUS) helpdesk@healthlink.net	Contact Us logout
		Welcome
Certainty in Care 100	0 288 887 (NZ) 0 125 036 (AUS) 0 desk@healthlink.net	^
Specialist and Allied Health Referrals		
CareSelect Enter keywords, e.g. Name, Speciality, Procedure	Q near Anywhere Clear	
General Services		
Health Pages Healthp NHI Lookup NZ Guid	sint eines Group	
Referred Services		
ACC Secure Document Transfer		
	_	
	Certainty Certainty In Care Will Health Certainty In Care Specialist and Allied Health Referrals CareSelect Enter Services Health Pages Net Lookup Referred Services MCC Sacue Document Transfer	Cartainty Description Cartainty Description Cartainty Description Cartainty Description Cartainty Description Cartainty Description Specialist and Allied Health Referrals Certainty CareSelect Extension Intersection Ref Healthpage Not Content Not Content Structes Healthpage Referred Services Extension Model Social Structures Model Social Structures

5. Complete the form

The form will display

Complete the relevant fields under each tab on the left including patient details, selection of the relevant recipient and any attachments required. Fields which are mandatory to be completed will be marked with a *.

When necessary, the form will be *preceded* by a Patient's Details page, where the user can enter the patient's details on one page.

600 CareConnect	General Medicine								HL
eReferrals	Referral for Outpatient App	ointment				<u>S</u> ubmit	Preview	Park	<u>H</u> elp▼
Clinical Information	Previously Referred								
No referral information provided	ACC	Not Specified	•						
Attachments / Reports	Urgent								
No reports selected No files attached	Generic Referral Details	-							_
Medications / Warnings No long term medications specified No medications specified No medical warnings specified	Reason / provisional diagnosis	•13							_
Medical History No medical history specified	Relevant history & physical ex	amination findings• 🕑							
Patient Information Mickey Mouse, JDR1234 35yrs Disability not specified									_
Recipient / Referrer 📴	Measurement Details		1	.	0.1		_		
No DHB Specified Referred by: Tricia Hurrell	Date Code Height	value		Date	BMI	value	-		
NO UNIVERSITE Regular GP	Weight				BP				

inter Patient's Details					
HI Number *		Date of Birth *			
irst Name *		Last Name *			
iender * Select One •		Ethnicity *	Select One		•
Residential Address:					
ddress Line 1 *					
ddress Line 2					
uburb					
ity *					
ostcode					
Postal Address: Same as residential * Yes	5				
Contact Details:					
ome	Work				
łob	Email				
				Next Cancel	

Action

6. Submit the ACC Secure Document Transfer Select the 'Submit' button when you are ready to send

your message. The form will be sent electronically via HealthLink.

If you want to print a copy of the message, select 'Print' at the end of your submitted form, remembering to select your default printer.



Hints and Tips



Click on the row to view the record		Items	Items per page 10			Page 1 of 4 - 31		
Reference ID	To	Patient's Name	NHI	Description	Туре	▼Date Submit		
AR-262311	aklreref	aaas white	AAA0985	General Medicine	aklreref	25/05/2015		
AR-263097	aklreref	Micky Mouse	HUX8660	General Medicine	aklreref	22/05/2015		
AR-263987	aklreref	a a	jdr1234	General Medicine	aklreref	21/05/2015		
AR-263986	aklreref	a a	jdr1234	General Medicine	aklreref	21/05/2015		
AR-263098	aklreref	Bob Flanders	HUX8660	General Medicine	aklreref	01/05/2015		
AR-263092	aklreref	Mandy Toobad	HUX8660	Cardiology	aklreref	28/04/2015		
AR-263056	akireref	dasf dsfa	HUX8660	General Medicine	aklreref	24/04/2015		
AR-263089	aklreref	micky mpoise	HUX8660	General Medicine	aklreref	24/04/2015		
AR-263080	aklreref	g g	HUX8660	General Medicine	aklreref	23/04/2015		
AR-263079	aklreref	Trici Bing	HUX8660	General Medicine	aklreref	23/04/2015		