

# HealthLink SmartForms for Medtech Artia

Welcome to HealthLink SmartForms. The smartest way for health professionals to submit Fitness to Drive medical assessments to Transport for New South Wales.

For best performance it's recommended for your practice to run Medtech Artia 2.0 and above



# Submitting HealthLink SmartForms from Medtech Artia

SmartForms enable **Medtech Artia** users to easily refer and engage with all HealthLink SmartForm service providers including Hospitals, Private Specialist, Transport for NSW and My Aged Care.

SmartForms are designed to speed up the service you can provide for your patients. They give you confidence that your form has been securely delivered to the service provider, and a copy has been saved to your Practice Software.

Step 1:

**Accessing HealthLink SmartForms**

Step 2:

**Launching a new form**

Step 3:

**Completing the form**

Step 4:

**Previewing, Submitting and Parking**

Step 5:

**Accessing parked and patient forms**

Step 6:

**Accessing all submitted forms**

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## HealthLink Technical Support

Email: [helpdesk@healthlink.net](mailto:helpdesk@healthlink.net)

Phone: 1800 125 036

## Step 1: Accessing HealthLink SmartForms

To access the forms within your  
Medtech software...

- A First, search for the patient and open their electronic medical record.
- B Then from the menu click **Module**
- C **Advanced Forms > New Form**
- D Then under the **HealthLink Forms** folder select **Aduro Forms**
- E Click **OK**.

The screenshot shows the Medtech Evolution Medtech-Aduro application. The 'Patient' menu is open, showing options like Search (F2), Family (Shift+F2), Close active patient, and Open last active patient. An arrow points from the 'Search' option to the 'Search Patient/Company' dialog box. The dialog box has a 'Quick' tab and an 'Advanced' tab. The 'Name/Pat No/Medicare No' field contains 'TEST'. There are 'Search' and 'Swipe Card' buttons. Below the search fields, there are checkboxes for 'Patients Only', 'A/c Holders Only', 'Companies Only', and 'Include Inactive'. A table below shows search results:

Name	Address	Prov	Age	DOB	A/c	Balance
TEST Medtech		ADM	R 64y	23 Jan 1959	P	
TEST Tester (152)	2345 Test Street	TESP	R 4y	3 Sep 2019	P	45.00

Patient record open.

The screenshot shows the patient record for 'TEST Medtech'. The patient's details are displayed at the top: R 2428 77813 2, May 26, TESP, P, Aboriginal but not Torres Strait. The patient's address is 1 Testing Street, WOONONA. The patient's date of birth is 30 Jan 1981, 42 yrs, Male, Indian, 0.00.

The screenshot shows the Medtech Evolution Medtech-Aduro application. The 'Module' menu is open, showing options like Accounts, Advanced Forms, Alerts, Appointments, Clinical, Extended Primary Care, Medical Device Interface, Medical Calculator, Immunisations, AIR Submissions, AIR Individual Details, Inbox, Labels, Outbox, Patient Register, Status Screen, Recall/Screening, Task Manager, Send SMS, Provider Dashboard, and Theatre List. An arrow points from the 'Advanced Forms' option to the 'New Patient Form' dialog box. The dialog box has a title bar 'New Patient Form' and a message 'Select the form type to create for this patient :-'. It shows a tree view of form types: Common Forms, My Forms, Manage My Health, Corporate Health Group, HealthLink Forms, and Aduro Forms. The 'Aduro Forms' option is selected. There are 'OK' and 'Cancel' buttons at the bottom.

## Step 2: Launching a new form

Now you're on the HealthLink home page...

A

Here you'll find a list of available services to refer patients.

B

Within the **Referred Services** section, click on the link named **Transport for NSW**

### HealthLink

Make a referral

Update referrals

#### Specialists, Allied Health Providers and GPs



**Specialists+Referrals** Refer to Private Specialist

Contact other health providers

#### General Services

NSW Certificate of Capacity

Compose a Letter or Report  
ReturnToWorkSA Work Capacity Certificate

#### Referred Services

ACT Public Outpatient and Community  
Austin Health  
Banyule Community Health  
Chris O'Brien Lifeline Services  
Eastern Health  
Hearing Australia Medical Certificate  
Mercy Hospital for Women  
My Aged Care Referral  
Northern NSW LHD - eReferrals  
NSW Health Outpatient Referrals  
NSW Health Outpatient referrals - Far West LHD  
NSW Health Outpatient referrals - Western Sydney LHD  
NSW Health Outpatient referrals - South Eastern Sydney LHD  
Radiology Referrals  
Spectrum Medical Imaging  
Sydney Local Health District Services  
Tasmanian Mental Health and Alcohol and Other Drugs  
Transport for NSW - MASP

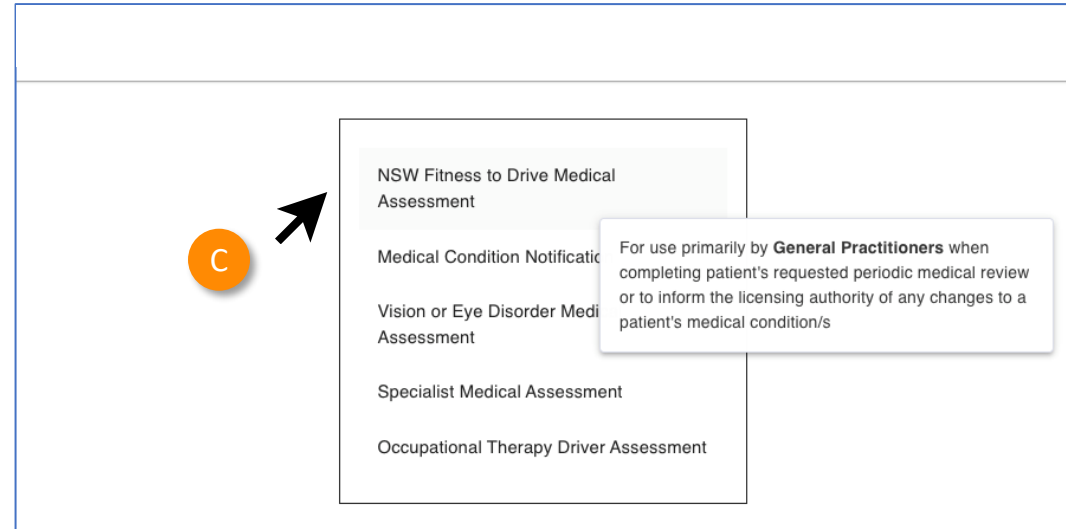
Application for ACT Approval to Prescribe Controlled Medicines  
Austin Health eReferrals  
ccCHIP - Cardiometabolic Health in Psychosis  
DPV Community Health  
Head to Health  
Medicare Mental Health (1800 595 212)  
Monash Health  
Northern Health  
Northern Sydney Local Health District Services  
NSW Health Outpatient referrals - Central Coast LHD  
NSW Health Outpatient referrals - Western NSW LHD  
NSW Health Outpatient referrals - Illawarra Shoalhaven LHD  
PRP Diagnostic Imaging  
SA Health  
Sydney LHD Women's Health and RPA Hospital Services  
Tasmanian Health Service  
Transport for NSW  
Wentworth Medical

B

## Step 2: Launching a new form

C

To launch the SmartForm, select the **NSW Fitness to Drive Medical Assessment** form from the list of available forms.



NSW Fitness to Drive Medical Assessment

Medical Condition Notification

Vision or Eye Disorder Medical Assessment

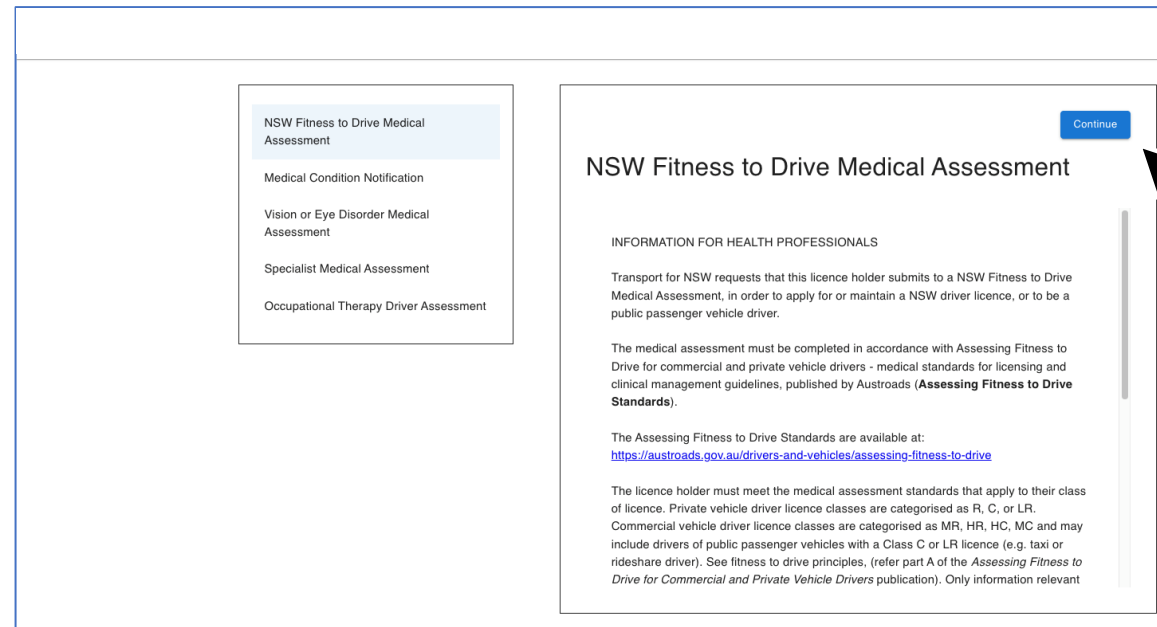
Specialist Medical Assessment

Occupational Therapy Driver Assessment

For use primarily by **General Practitioners** when completing patient's requested periodic medical review or to inform the licensing authority of any changes to a patient's medical condition/s

D

A pop-up information box for Health Professionals will appear next. Once you have read the information, click the **continue** box.



NSW Fitness to Drive Medical Assessment

Medical Condition Notification

Vision or Eye Disorder Medical Assessment

Specialist Medical Assessment

Occupational Therapy Driver Assessment

**NSW Fitness to Drive Medical Assessment**

INFORMATION FOR HEALTH PROFESSIONALS

Transport for NSW requests that this licence holder submits to a NSW Fitness to Drive Medical Assessment, in order to apply for or maintain a NSW driver licence, or to be a public passenger vehicle driver.

The medical assessment must be completed in accordance with Assessing Fitness to Drive for commercial and private vehicle drivers - medical standards for licensing and clinical management guidelines, published by Austroads (**Assessing Fitness to Drive Standards**).

The Assessing Fitness to Drive Standards are available at:  
<https://austroads.gov.au/drivers-and-vehicles/assessing-fitness-to-drive>

The licence holder must meet the medical assessment standards that apply to their class of licence. Private vehicle driver licence classes are categorised as R, C, or LR. Commercial vehicle driver licence classes are categorised as MR, HR, HC, MC and may include drivers of public passenger vehicles with a Class C or LR licence (e.g. taxi or rideshare driver). See fitness to drive principles, (refer part A of the *Assessing Fitness to Drive for Commercial and Private Vehicle Drivers* publication). Only information relevant

Continue

## Step 3: Completing the form

Now you've loaded the form to complete and submit.

A

The **SmartForm layout** provides a consistent, easy-to-use tabular structure on the left, with the main action window on the right.

B

**Mandatory Fields** must be completed prior to submitting the SmartForm and are each highlighted with a red asterisk.

You'll notice SmartForms are **responsive**: They will pre-populate all available patient and referrer data and contain logic to request more specific patient information based on your selections.

**Note:** Once you have ticked on the **patient consent obtained** box – the form will validate your patient's driver license number, and you will be able to proceed to their medical

NSW Fitness to Drive Medical Assessment

Medical Assessment Information Required

Attachments / Reports 0 files attached (0 KB)

Patient Information No patient name No patient ID available No date of birth

Recipient / Referrer

Driver Licence Verification

☒ Driver licence number ☐ Customer number

Driver licence number \* Date of birth \*

☐ Patient consent obtained \* Validate / Retrieve Patient surname \*

Current medical assessment information

Name Date of birth Licence number Licence class Field of Practice \* General Practitioner Medical standard Assessing medical standard \*

Address Reason for medical

Consider the need for a medical assessment.

Continue with Medical Assessment

NSW Fitness to Drive Medical Assessment

Medical Assessment Information Required

Attachments / Reports 0 files attached (0 KB)

Patient Information No patient name No patient ID available No date of birth

Recipient / Referrer

Driver Licence Verification

☒ Driver licence number ☐ Customer number

Driver licence number \* Date of birth \*

☒ Patient consent obtained \* Validate / Retrieve Patient surname \*

Current medical assessment information

Name Date of birth Licence number Licence class Field of Practice \* General Practitioner Medical standard Assessing medical standard \*

Address Reason for medical

Consider the need for a medical assessment.

Continue with Medical Assessment

**Patient Consent**

You confirm that you have obtained your patient's consent:


a. to complete this Transport for NSW medical form  
b. to disclose their personal and health information to Transport for NSW and/or to other medical professionals nominated by Transport for NSW.

OK

## Step 3: Completing the form


C

Once your patient's driver license number has been validated you will be able to continue with the **Medical Assessment**.


**Medical Assessment**   
Licence class: C  
Medical standard: Private

**Attachments / Reports**  
0 files attached (0 KB)

**Patient Information**

**Recipient / Referrer** 

### NSW Fitness to Drive Medical Assessment


**Driver Licence Verification** 

☒ Driver licence number ☐ Customer number

Driver licence number \*  
45232285

Date of birth \*  
01/01/1980

Patient surname \*  
Name

☒ Patient consent obtained \*  Validate / Retrieve

**Current medical assessment information**

Name  
Patient Name

Date of birth  
01/01/1980

Licence number  
45232285

Licence class  
C



Field of Practice \*  
General Practitioner

Medical standard  
Private

Assessing medical standard \*  
Private

Address  
100 BUNGARRIBEE ROAD  
BLACKTOWN NSW 2148

Reason for medical  
Congenital Disorders

 Consider the nature of the driving task when performing this assessment. 

Continue with Medical Assessment

C


©HealthLink

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## Step 3: Completing the form


D

The SmartForm is responsive, and it will indicate which questions are mandatory as you move through your patient's medical assessment.

**Medical Assessment**   
Licence class: C  
Medical standard: Private

**Attachments / Reports**  
0 files attached (0 KB)


**Patient Information**

**Recipient / Referrer** 

NSW Fitness to Drive Medical Assessment


Driver Licence Verification

**VISION**


Does the patient have a current vision or eye disorder? 

☐ Yes ☐ No

**CARDIOVASCULAR DISEASE**

Does the patient have a cardiovascular condition(s)? 

☒ Yes ☐ No

Please select the relevant condition(s) 

☐ Acute Myocardial Infarction

☐ Aneurysms (Abdominal and Thoracic)


☐ Angina

☐ Anticoagulant Therapy

☐ Atrial Fibrillation

☐ Cardiac Arrest

☒ Complicated Congenital Disorder

 A person may drive without restriction and without reporting to the driver licensing authority if they have **uncomplicated** congenital heart disease and there are no or minimal symptoms relevant to driving.

☐ Coronary Artery Bypass Grafting

☐ Dilated Cardiomyopathy

☐ Heart Failure

☐ Heart Transplant

☐ Hypertension

☐ Hypertrophic Cardiomyopathy

☐ Implantable Cardiac Defibrillator (ICD)

☐ Pacemaker

☐ Paroxysmal Arrhythmias

☐ Percutaneous Coronary Intervention (PCI)

Submit

Preview

Park

Help

©HealthLink

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## Step 3: Completing the form

### Attachments / Reports

- E** The **Attachments / Reports** tab will give you access to all the supporting documents that you may wish to attach to the form.
- F** You can select any item from the **table** – showing you patient medical records captured from the **last six months**.
- Or you can **browse for files...**
  - G** stored in your Practice Management Software by clicking the **Browse** button .
  - H** **Note:** Make sure to update the date parameters if you want to see files that are older than six months.

NSW Fitness to Drive Medical Assessment

Medical Assessment  
Licence class: C  
Medical standard: Private

Attachments / Reports  
0 reports selected (0 KB)  
0 files attached (0 KB)

Patient Information  
No patient ID available  
01/01/1990

Recipient / Referrer

**Diagnostic Reports / Patient Documents**  
Supports file types: doc, docx, jpeg, pdf, rtf, tiff, txt

Caution: larger attachments may take significant time to preview

Name	Date ↑	Comments	Type	Size (KB)
RTF # 2.RTF	11/07/2025	RTF # 2	rtf	60
JPG # 2.JPG	11/07/2025	JPG # 2	jpg	99
PDF #2.PDF	11/07/2025	PDF #2	pdf	214

**Local File Attachments**  
Supports files that end in types: doc, docx, jpeg, jpg, pdf, rtf, tiff, txt  
Note: Files without a file extension are not accepted. Please save with an appropriate file type, then try again.

Name	Date ↑	Comments	Type	Size (KB)
No Local Files Selected Click "Browse" button to add local files				

NSW Fitness to Drive Medical Assessment

Medical Assessment  
Licence class: C  
Medical standard: Private

Attachments / Reports  
0 reports selected (0 KB)  
0 files attached (0 KB)

Patient Information  
No patient ID available  
01/01/1990

Recipient / Referrer

**Diagnostic Reports / Patient Documents**  
Supports file types: doc, docx, jpeg, pdf, rtf, tiff, txt

Caution: larger attachments may take significant time to preview

Name	Date ↑	Comments	Type	Size (KB)
RTF # 2.RTF	11/07/2025	RTF # 2	rtf	60
JPG # 2.JPG	11/07/2025	JPG # 2	jpg	99
PDF #2.PDF	11/07/2025	PDF #2	pdf	214

**Local File Attachments**  
Supports files that end in types: doc, docx, jpeg, jpg, pdf, rtf, tiff, txt  
Note: Files without a file extension are not accepted. Please save with an appropriate file type, then try again.

**Browse Diagnostic Reports / Patient Documents**  
Please select the report(s) to be submitted with this referral.

Search Options:  
Search File Name:  Date From: 15/06/2025 Date To: 15/07/2025

Name	Date ↑	Comments	Type	Size (KB)
No files loaded Enter Search Options and click "Search"				

### Step 3:

# Completing the form

## Attachments / Reports

- I Another option to add attachments is the ability to browse for files in your local computer's file by clicking the **Browse** button.
- J Select the file for your local computer file and select **Open**.

NSW Fitness to Drive Medical Assessment

Medical Assessment ▲  
Licence class: C  
Medical standard: Private

Attachments / Reports  
0 reports selected (0 KB)  
0 files attached (0 KB)

Patient Information

Recipient / Referrer

**Diagnostic Reports / Patient Documents**  
Supports file types: doc, docx, jpeg, pdf, rtf, ttf, txt

Caution: larger attachments may take significant time to preview

<input type="checkbox"/>	Name	Date ↑	Comments	Type	Size (KB)
<input type="checkbox"/>	RTF # 2.RTF	11/07/2025	RTF # 2	rtf	60
<input type="checkbox"/>	JPG # 2.JPG	11/07/2025	JPG # 2	jpg	99
<input type="checkbox"/>	PDF # 2.PDF	11/07/2025	PDF # 2	pdf	214

**Local File Attachments**  
Supports files that end in types: doc, docx, jpeg, jpg, pdf, rtf, ttf, txt, ttf, txt  
Note: Files without a file extension are not accepted. Please save it with an appropriate file type, then try again.

<input type="checkbox"/>	Name	Date ↑	Comments	Type	Size (KB)
No Local Files Selected Click "Browse" button to add local files					

**Browse**

NSW Fitness to Drive Medical Assessment

Medical Assessment ▲  
Licence class: C  
Medical standard: Private

Attachments / Reports  
0 reports selected (0 KB)  
0 files attached (0 KB)

Patient Information

Recipient / Referrer

**Diagnostic Reports / Patient Documents**  
Supports file types: doc, docx, jpeg, pdf, rtf, ttf, txt

Caution: larger attachments may take significant time to preview

**Open**

File name: Downloads

Custom file

**Open** **Cancel**

**Browse**

## Step 3: Completing the form


### Patient information

**K** Patient information will be pre-populated by the SmartForm in the **Patient information** tab.



NSW Fitness to Drive Medical Assessment


Submit Preview Park Help

Medical Assessment   
Licence class: C  
Medical standard: Private


Attachments / Reports  
0 reports selected (0 KB)  
0 files attached (0 KB)


**Patient Information**

No patient ID available  
01/01/1980


Recipient / Referrer 

**Patient Information**

Medicare number Date of birth\* 01/01/1980  Pension number

**Name** Patient Name   

First name\* Last name\*  
Patient Name

**Residential Address:** 13 Test Street, Sydney, NSW, 2000  
*Please add only the following State or Territory codes, ACT, NSW, NT, QLD, SA, TAS, VIC, WA in the State field*   

Address line 1\*  
13 Test Street


Address line 2

Suburb  
Sydney

State\*  
NSW

Postcode  
2000

**Postal Address**  
Same as residential  
☐ Yes ☒ No

**Postal Address:** 13 Test Street, Sydney, NSW, 2000  
*Please add only the following State or Territory codes, ACT, NSW, NT, QLD, SA, TAS, VIC, WA in the State field*   

Address line 1\*  
13 Test Street

## Step 3: Completing the form

### Recipient / Referrer

**L** Recipient / Referrer information will be pre-populated by the SmartForm in the **Recipient / Referrer** tab.

**Note:** Before submitting please double check your medical practitioner information is correct.

You can assess a person's fitness to drive in NSW if you're a registered medical practitioner or specialist. This includes general practitioners, specialists, optometrists, ophthalmologists and allied health professionals.



HL

NSW Fitness to Drive Medical Assessment

Submit Preview Park Help

Medical Assessment  
Information Required ▲

Attachments / Reports  
0 reports selected (0 KB)  
0 files attached (0 KB)

Patient Information  
Patient Correct ▲

**Recipient / Referrer**  
Patient Name  
0000000Y

**Medical Practitioner Information**

Medicare Provider Number \*  
0000000

Medical Registration Number

Full Name: Patient Name ⓘ

**Name:** Patient Name ^

First name \*  
Patient

Last name \*  
Name

Practice name \*  
HealthLink Townsville

**Practice Address:** 13 Test Street, Suite, Sydney, NSW, 2000 ^

Address line 1 \*  
13 Test Street

Address line 2  
Suite

Suburb  
Sydney

State \*  
NSW

Postcode  
2000

Practice telephone \*  
0244015650

Email \*  
name@patient.com

Practice fax  
0244015651

FNI

## Step 4: Previewing, Submitting and Parking

### Previewing

**A** When you are ready to review your form, check the **Declaration** tick box.

## NSW Fitness to Drive Medical Assessment

HL

Submit

Preview

Park

Help

Review period recommendation

TfNSW Default

**i** TfNSW Default means that TfNSW will determine the review frequency based on the patient's medical condition(s), the AFTD or age-related policy. Alternatively, you can select a bespoke review period.

### Driving assessment recommendation/s (if applicable)

- ☐ Transport for NSW practical driving test
- ☐ Occupational Therapist Driver assessment
- ☒ None

### Recommended licence condition/s (if applicable)

- ☐ Downgrade to a lower class of licence
- ☐ Daylight hours only
- ☒ May only drive automatic vehicles
- ☐ Radius restrictions

Recommend other licence condition/s:

### Specialist review recommendation/s (if applicable)

Recommend other specialist/s review:

Ophthalmologist

TfNSW will create an immediate request for a specialist review to be conducted. Please arrange a referral/s.

- ☐ Any additional comments on conditions likely to affect driving? **i**

**i** NOTE: Additional comments not required if condition(s) has already been assessed on this form

## DECLARATION

- ☒ Applicant declaration read and accepted. **i**

**A** Advise the Customer that the Medical Report can be printed for them, emailed to them or that a copy can be obtained on application from a Service NSW centre.

## Step 4: Previewing, Submitting and Parking

### Previewing

- B** You can verify that the form has been completed correctly by clicking **Preview** allowing you to review the details before submitting.
- C** If a piece of required information is incomplete or incorrect, the form will notify you to complete or correct it. You can click on each error in the **please fix the following errors** box and the form will take you directly to the required field.
- D** You can scroll through any errors by using the **Go to Error** function on the bottom left hand corner of the SmartForm.

HL

SubmitPreviewParkHelp

## NSW Fitness to Drive Medical Assessment

Please fix the following errors:

**Medical Assessment**

- [Seizure or Epilepsy]: Does the patient have epilepsy? is a required field
- [Neurological Condition]: Does the patient have vestibular, neurological or other neurodevelopmental disorders? is a required field
- [Sleep Disorder]: Does the patient have established sleep apnoea syndrome, narcolepsy, or excessive sleepiness? is a required field
- [Mental Health]: Does the patient have a chronic psychiatric condition of such severity that may impact safe driving? is a required field
- [Musculoskeletal Disorder]: Does the patient have a musculoskeletal disorder that may impact on safe driving? is a required field
- [Substance Use Disorder]: Does the person have an alcohol use disorder such as alcohol dependence or heavy frequent alcohol use or a substance use disorder such as substance dependence or other substance use that is likely to impair safe driving? is a required field
- [Medications]: Is the patient taking multiple medications that may affect driving? is a required field
- [Treatment History]: When did you first treat the patient? is a required field
- [Treatment History]: When did the patient first attend this practice? is a required field
- [Treatment History]: Did you have any knowledge of the patient's medical history before undertaking this assessment? is a required field
- [Recommendations]: Please complete the Recommendations section
- [Declaration]: Applicant declaration read and accepted is a required field

**Recipient / Referrer**

- Medicare Provider Number is a required field

**SEIZURE OR EPILEPSY**

Does the patient have epilepsy? \* ⓘ

☐ Yes ☐ No

**NEUROLOGICAL CONDITION**

Does the patient have vestibular, neurological or other neurodevelopmental disorders? \* ⓘ

☐ Yes ☐ No

**SLEEP DISORDER**

Does the patient have established sleep apnoea syndrome, narcolepsy, or excessive sleepiness? \* ⓘ

☐ Yes ☐ No

Goto Error:

< Previous

Current

Next >

## Step 4:

# Previewing, Submitting and Parking

## Previewing / Parking

**E** Click Preview. A pop-up **Preview** will appear for your review.

A copy of the form is saved directly to the patient file.

**F** And if you need more information to complete the form, you can **Park** the form to save what you've done so far and come back to it later.

## NSW Fitness to Drive Medical Assessment

[Submit](#)[Preview](#)[Park](#)[Help](#)

The screenshot displays the 'NSW Fitness to Drive Medical Assessment' form. A 'Preview' pop-up window is open, showing a summary of the assessment. The pop-up includes a 'Print' button, a 'Submit' button, and a 'Close' button. The main form in the background shows the 'Medical Assessment' section with a 'No Errors Found' message. The 'Medical Practitioner Information' section includes fields for 'Medical Practitioner Number' (000000000), 'Full Name' (Brett Mitchell), 'Name' (Brett Mitchell), 'Practice name' (Furious Five Psych), and 'Practice Address' (4/69 eyre Street). The 'Patient Information' section includes fields for 'Patient Name' (HLLGAECTNJR), 'Medical Standard' (Private), 'No patient ID available' (01/01/1980), and 'Recipient / Referrer'. The 'Preview' pop-up contains the following text: 'The responsibility for issuing, renewing (or refusing to issue or renew), suspending or cancelling a person's licence (including conditional licence) lies with Transport for NSW. Licensing decisions are based on a full consideration of relevant factors relating to health and driving performance. The medical assessment information captured below will be reviewed by Transport for NSW who will issue a letter if further medical information is required or based on the medical information captured below it is determined that you do not meet the medical standards to hold a driver licence or public passenger driver authority.' Below this is the 'Assessment Statement' and 'Privacy Statement' sections. The 'Assessment Statement' states: 'This assessment has been completed in accordance with 'Assessing Fitness to Drive'. The standards can be viewed at <https://www.austroads.gov.au>'. The 'Privacy Statement' states: 'Your personal and health information collected in this form will be held by Transport for NSW at 20-44 Ennis Road, Milsome Point NSW 2061. You may request access to and / or correction of this information. Your personal and health information is being collected and will be retained and used for the purpose of verifying your fitness to drive and to hold a driver licence or public passenger driver authority. You are required to provide this information under Road Transport and Passenger Transport legislation. Failure to do so may result in your driver licence or public passenger driver authority being refused, suspended or cancelled, or conditions being placed on them. The health information which Transport for NSW collects may be used to determine your medical fitness to hold a driver licence (or type of driver licence, including any endorsements or conditions therein) or public passenger driver authority, and if you hold a Mobility Parking Scheme permit (MPS permit) to determine your eligibility to hold an MPS permit. Your personal and health information held by Transport for NSW may be disclosed in order to verify it to any medical practitioner in respect of ascertaining or reviewing your fitness to drive or to hold a driver licence, in respect of a motor accident or other litigation enquiries and to other transport regulators, driver licensing and vehicle registration agencies. If your application relates to a public passenger driver authority we may also disclose your personal information or health information where relevant to accredited operators, networks, booking or rideshare service providers under the Passenger Transport Act 2014 (or other related legislation) and also to Transport for NSW in connection with the administration of any such legislation. Otherwise it will not be disclosed unless permitted by law.' Below the statements is the 'NSW Fitness to Drive Medical Assessment - Transport for NSW' section, which includes fields for 'Patient' (45yrs, DOB 01/01/1980), 'Residential address', 'Postal address', and 'Referred by'. The 'Medical Assessment Information' section is also visible. The 'Driver Licence Verification' section includes the 'Driver licence number' (45232285). The 'Preview' pop-up also has a 'Print' button, a 'Submit' button, and a 'Close' button. The main form in the background has a 'Goto Error' button at the bottom left.

## Step 4: Previewing, Submitting and Parking

### Submitting

- G** When you are ready to send your form, click **Submit**.
- H** This will safely and securely send the form electronically via HealthLink, and you will see a copy of the completed form with a **date stamp**.

**A copy of the submitted form is saved directly to the patient file.**

Preview

Print

Submit

Close

The responsibility for issuing, renewing (or refusing to issue or renew), suspending or cancelling a person's licence (including conditional licence) lies with Transport for NSW. Licensing decisions are based on a full consideration of relevant factors relating to health and driving performance. The medical assessment information captured below will be reviewed by Transport for NSW who will issue a letter if further medical information is required or based on the medical information captured below it is determined that you do not meet the medical standards to hold a driver licence or public passenger driver authority.

G

Submitted

Print

H

Form sent on 04/07/2025 09:34 AEDT

#### Assessment Summary

Report has been forwarded to Transport for NSW for processing.

*For any enquires please contact Service NSW on 132213*

The responsibility for issuing, renewing (or refusing to issue or renew), suspending or cancelling a person's licence (including conditional licence) lies with Transport for NSW. Licensing decisions are based on a full consideration of relevant factors relating to health and driving performance. The medical assessment information captured below will be reviewed by Transport for NSW who will issue a letter if further medical information is required or based on the medical information captured below it is determined that you do not meet the medical standards to hold a driver licence or public passenger driver authority.



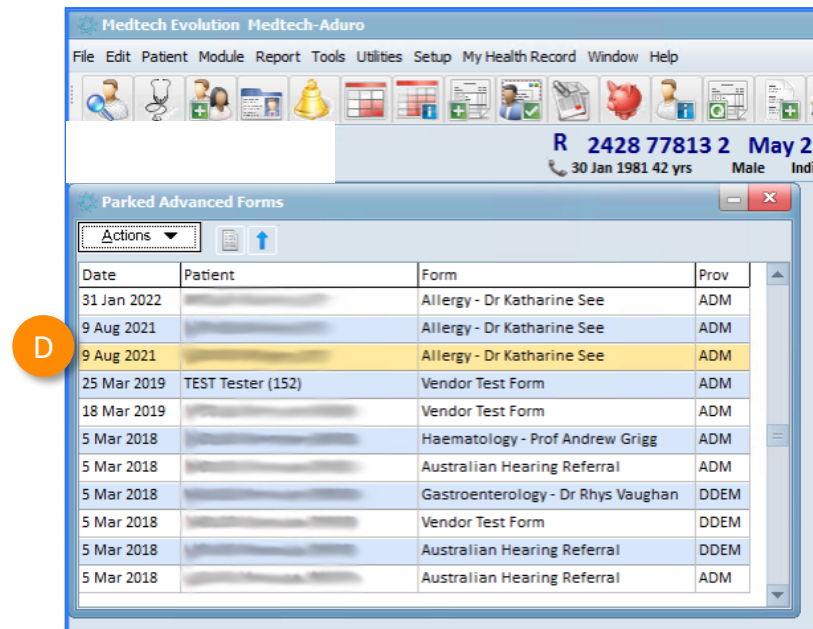
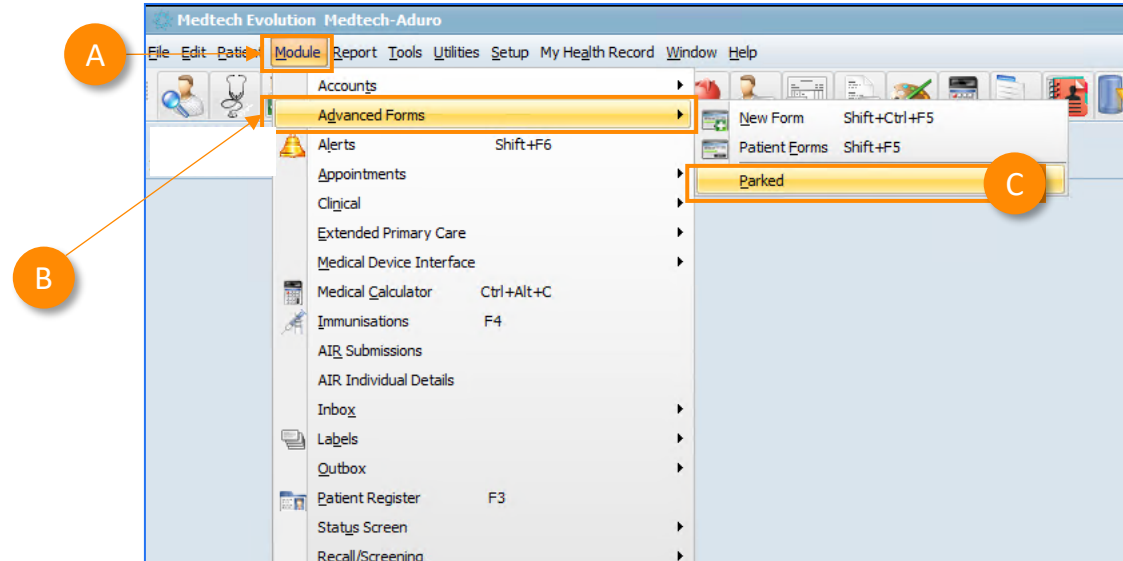
## Step 5: Accessing parked and patient forms

### Accessing all parked forms

To access all parked forms to be completed and submitted...

- A In the menu, click **Module** -
- B **Advanced Forms** -
- C Then click **Parked**.
- D You'll see a list of parked forms created for patients at your practice. Forms for the patient you have open will display first.

**Note:** when returning to a parked or auto-saved form, due to security policy, any previously added attachments will need to be re-added.



## Step 5:

# Accessing parked and patient forms

## Accessing a specific patient's forms

To view forms for a specific patient, once the patient file is open...

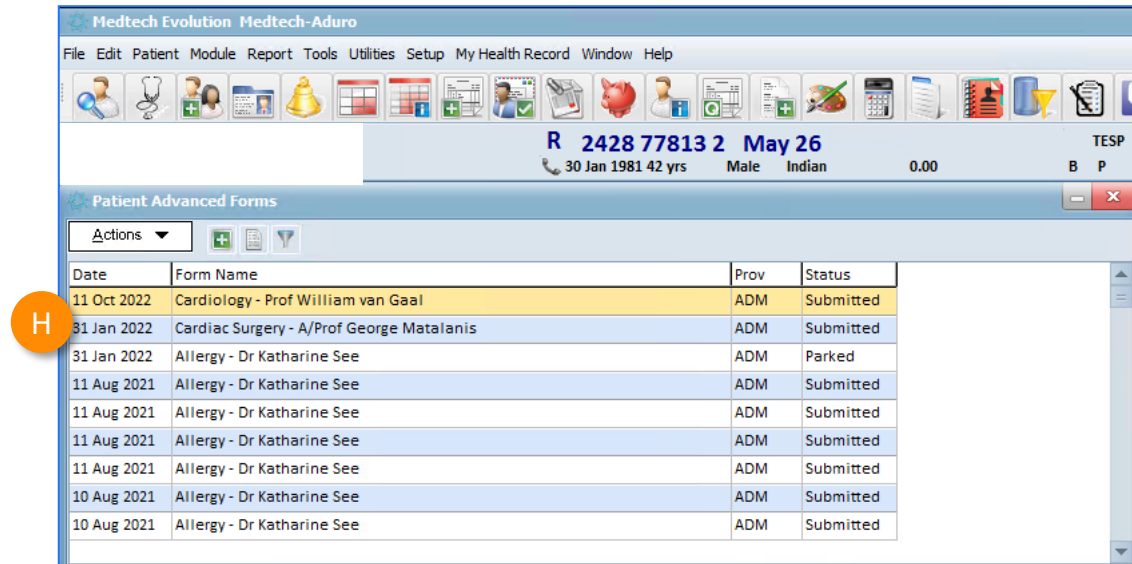
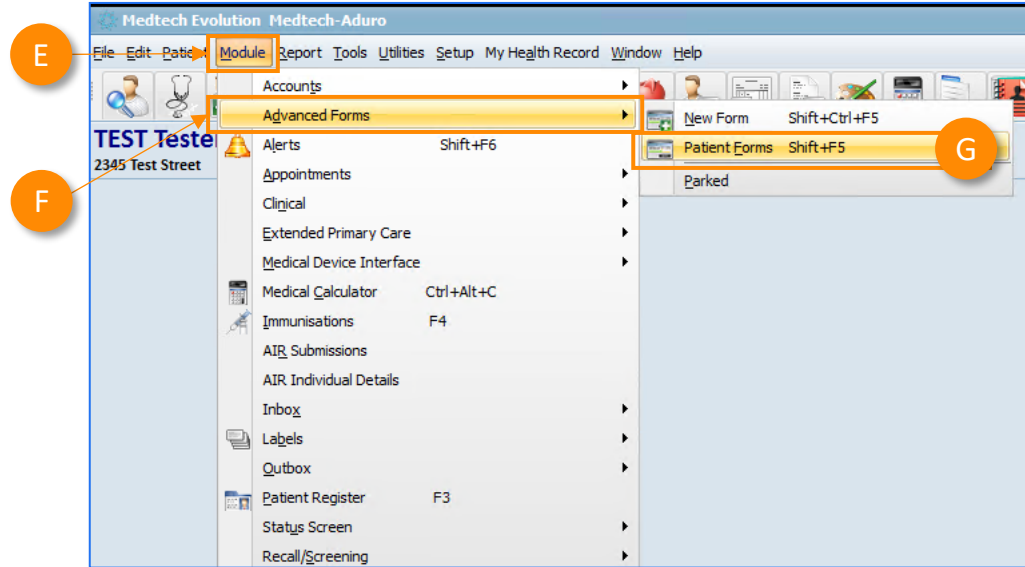
**E** In the menu, click **Module** -

**F** **Advanced Forms** -

**G** Then click **Patient Forms**.

**H** You'll see a list of parked and submitted forms specific to this patient.

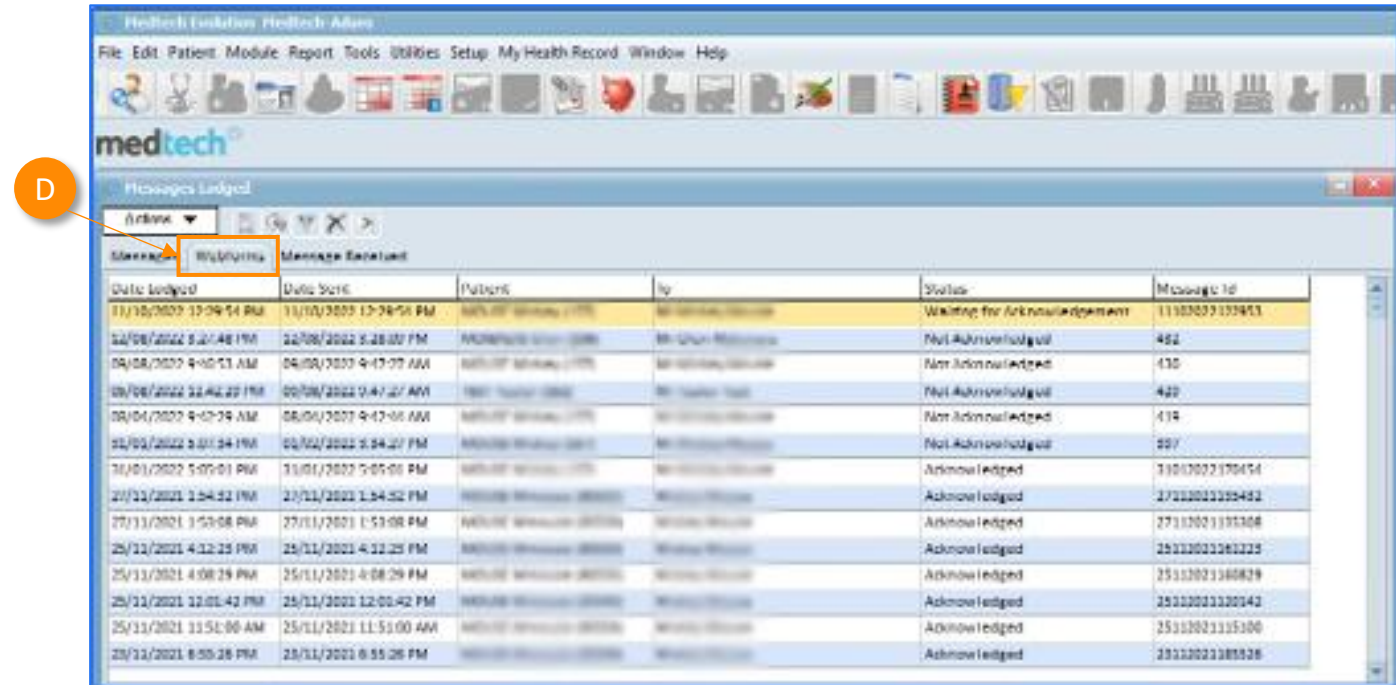
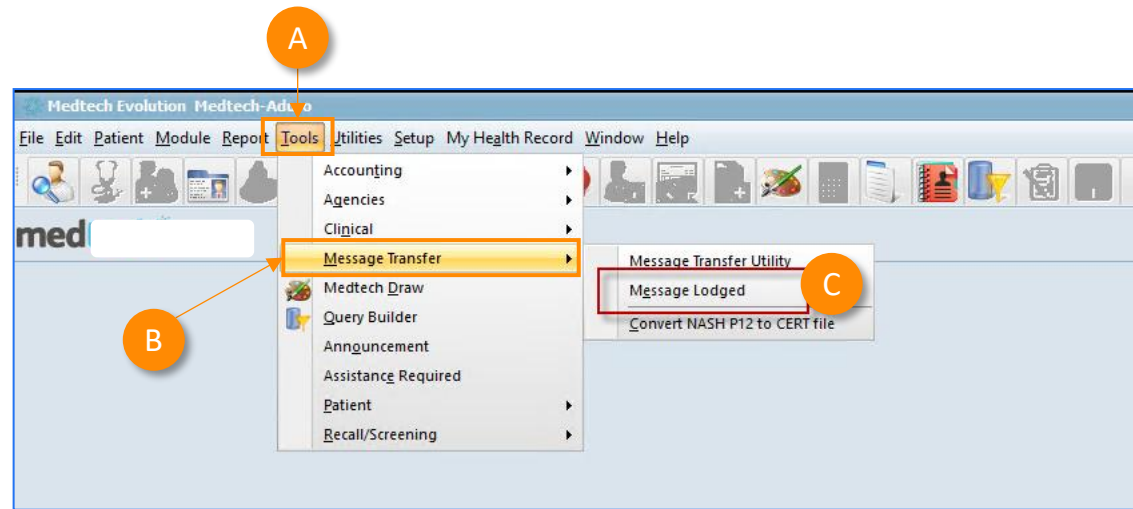
**Note:** when returning to a parked or auto-saved form, due to security policy, any previously added attachments will need to be re-added.



## Step 6: Accessing all submitted forms

To view all submitted forms...

- A In the menu, go to **Tools**
- B Then **Message Transfer**
- C Now click **Message Lodged**
- D From Message Lodged screen click on **Webforms** tab to view list of all submitted forms.



## Technical Support

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Monday to Friday (Except Public Holidays)

8:00am – 6:00pm

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