

HealthLink



User Guide

25.02.2026 MT

HealthLink SmartForms for Medtech Artia

Welcome to HealthLink SmartForms. The smartest way for health professionals to refer their patients to Grampians Health.



Your practice must be running Medtech Evolution 10.4.4 or above to access the HealthLink SmartForms.

Submitting eReferrals from Medtech Artia

Using HealthLink SmartForms

SmartForms enable **Medtech Artia** users to easily refer and engage with all HealthLink SmartForm service providers including Grampians Health, NSW LHDs, 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 (eReferrals)

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

Step 7:
What happens after a referral has been made?

HealthLink Technical Support

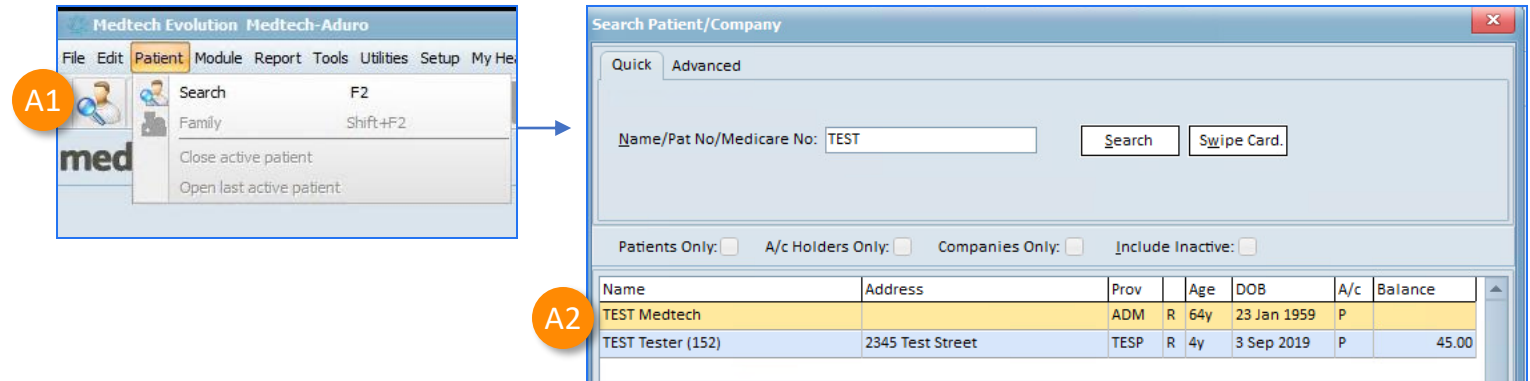
Email: helpdesk@healthlink.net

Phone: 1800 125 036

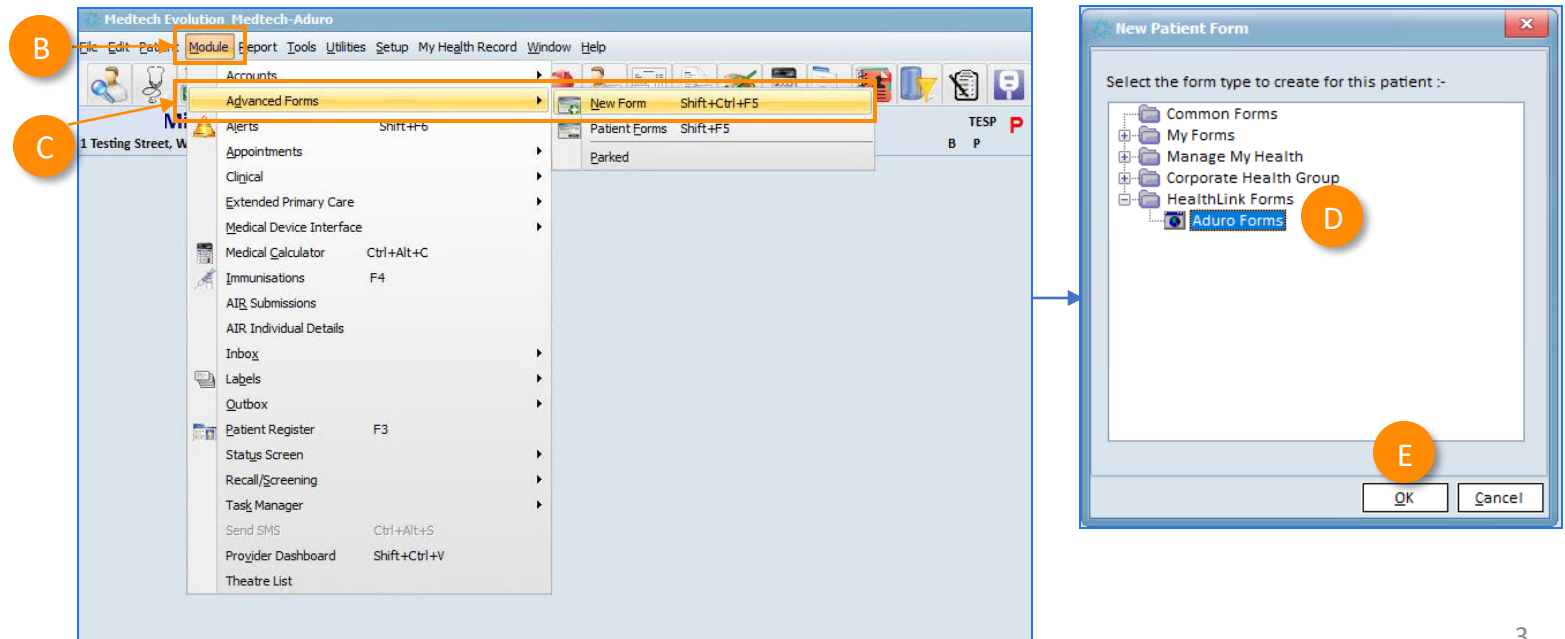
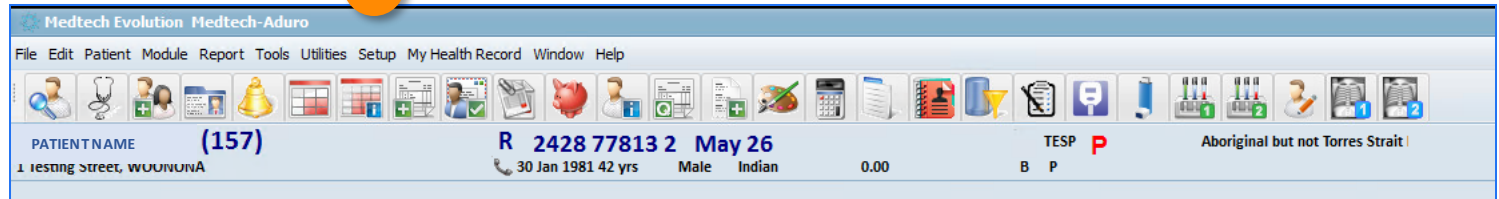
Step 1: Accessing HealthLink SmartForms (eReferrals)

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**.



Patient record open.



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 **Grampians Health**.

To launch the SmartForm, **Grampians Health** require you to then:

- C** • **select a specific service** and
- D** • **facility** (only if there's multiple facilities for that service)
- E** Then click **Continue** to launch the form.

For more information on Grampians Health referred services, go to: www.gh.org.au/services

The screenshot displays the HealthLink PRO interface. At the top, there are navigation links for 'Create', 'Update', and 'Support', and the 'HealthLink | PRO' logo. Below this is a 'Search a Directory' section with a search bar containing 'Specialists+Referrals Refer to Private Specialist' and a 'HL HealthLink Direct' button. The main content area is divided into sections: 'Konnect NET', 'ReturnToWorkSA Work Capacity Certificate', and 'Spotlight Services'. The 'Referral Services' section features a search bar and a list of services. 'Grampians Health' is highlighted with a callout box that reads: 'The Grampians Health form can be used to send referrals to Grampians Health - Ballarat, enabling faster streamlined management of referrals. Using this form you will receive immediate confirmation of receipt by Grampians Health. Before referring to our services please visit Western Victoria Health Pathways <https://westvic.communityhealthpathways.org/> or <https://www.gh.org.au/services/specialist-outpatients-ballarat/> for conditions we treat.' Below the referral services list, the 'Grampians Health' form is shown, with a search bar for services and a 'Continue' button. Callouts A, B, C, D, and E are placed throughout the interface to indicate the steps described in the text.

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.

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.

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

Grampians Health General Medicine - Grampians Health Ballarat

Requested Information General Medicine **Form has been auto-saved.**

Attachments / Reports: No reports selected, No files attached

Medications, Allergies, Alerts: 2 long term medications specified, 8 medications specified, No medical warnings specified

Medical, Social and Family History: Medical history specified

Patient Information: MICKEY HEATLEY, 800360234568835, 17/12/1967

Referrer Information: Sam Entwistle, 88943, No Different Regular GP

Referred To*: Dr Edward Ritchie

Referral Date*: 19/02/2026

Referral Continuation*: New, Amended referral/update previously sent referral, Renew expired referral

Referral Period*: Indefinite

Patient's preferred contact method*: SMS

Interpreter Required*: Yes, No

Does the patient identify as living with a disability / disabilities?: Yes, No

Is the patient an NDIS participant?: Yes, No

Additional Needs / Reasonable Adjustments Required*: Yes, No

Does the patient have a carer / support person?: Yes, No

Is the patient appropriately equipped and enabled for Telehealth (video) consultation?: Yes, No

I acknowledge that the patient has consented to the referral and to their personal and health information being shared between the referring clinician, the nominated GP, the health service staff and other health service providers as required to facilitate their treatment or care. The patient also consents to attend an MBS bulk-billed clinic if available.

Patient Consent*

Grampians Health General Medicine - Grampians Health Ballarat

Requested Information General Medicine **Form has been auto-saved.**

Attachments / Reports: No reports selected, No files attached

Medications, Allergies, Alerts: 2 long term medications specified, 8 medications specified, No medical warnings specified

Medical, Social and Family History: Medical history specified

Patient Information: MICKEY HEATLEY, 800360234568835, 17/12/1967

Referrer Information: Sam Entwistle, 88943, No Different Regular GP

Date of birth*: 17/12/1967

Medicare/DVA Eligible*: Yes, No

Medicare number*: 6288253442

DVA number: QX901226

Private health fund name:

Name*: MICKEY Disney HEATLEY (Mmouse)

Gender*: Female

Patient's Indigenous status*: Neither Aboriginal nor Torres Strait Islander origin

Country of Birth:

Residential Address: 95 Pitt Street, Apartment, Sydney, NSW, 2000

Step 3: Completing the form

C It will also display a **warning** for some information taken from your Practice Management Software that needs reviewing.

For example, if a contact phone number does not include an area code.

D If you need more context on the questions, you can click on the **information icons**.

C (Warning icon)

Name*
MICKEY

Patient Information
MICKEY HEATLEY
8003602345688835
17/12/1967

Gender*
Female

Gender Identity

Residential Address
Please add only the following State or Territory codes, ACT, NSW, NT, QLD, SA, TAS, VIC, WA only in the State field

Patient's Indigenous status*
Neither Aboriginal nor Torres Strait Islander origin

Country of Birth

Referrer Information
889843
No Different Regular GP

General Medicine

Patient's preferred contact method*
SMS

Attachments / Reports

Interpreter Required*
Yes No

Please confirm patient phone details are accurate when reviewing Patient Information tab.

D (Information icon)

Medical, Social and Family History
Medical history specified

Patient Information
8003602345688835
17/12/1967

Referrer Information
889843
No Different Regular GP

Referral Guidelines
Please supply all relevant information with the referral as per the guidelines in the relevant [HealthPathways](#) and [pathways \(cancer pathways\)](#)

Urgency*
Routine: Greater than 30 days

Referral purpose*
Please select

Referral Details*
Browse for Consultation Notes

Please indicate the presenting problem or working diagnosis

Urgency Information

High Priority
Referrals should be categorised as 'High Priority' if the patient has a condition that has the potential to deteriorate quickly with significant consequences for health and quality of life, if not managed promptly. An appointment should be scheduled within 30 calendar days of the referral being received and accepted for these patients.

Routine
Referrals should be categorised as 'Routine' if the patient's condition is unlikely to deteriorate quickly or have significant consequences for the person's health and quality of life, if specialist assessment is delayed beyond one month.

Ok

Step 3: Completing the form

Reason for referral

E In some forms there may be a drop down to select the referral purpose.

Grampians Health General Medicine - Grampians Health Ballarat

Requested Information ▲
General Medicine

Referral Period* Indefinite

Patient's preferred contact method* SMS

Please confirm patient phone details are accurate when reviewing Patient Information tab.

Attachments / Reports
No reports selected
No files attached

Interpreter Required* Yes No

Does the patient identify as living with a disability / disabilities?* No

Is the patient an NDIS participant?* Yes No

Medications, Allergies, Alerts
2 long term medications specified
8 medications specified
No medical warnings specified

Additional Needs / Reasonable Adjustments Required* Yes No

Does the patient have a carer / support person?* Yes No

Is the patient appropriately equipped and enabled for Telehealth (video) consultation?* Yes No

I acknowledge that the patient has consented to the referral and to their personal and health information being shared between the referring clinician, the nominated GP, the health service staff and other health service providers as required to facilitate their treatment or care. The patient also consents to attend an MBS bulk-billed clinic if available.

Patient Consent*

Medical, Social and Family History
Medical history specified

Patient Information
8003602345688835
17/12/1967

Referral Guidelines
Please supply all relevant information with the referral as per the guidelines in the relevant [HealthPathways](#) and [Optimal Care pathways \(cancer pathways\)](#)

Urgency* Routine: Greater than 30 days

Referral purpose* **E**

Referral Details*

Please indicate the presenting problem or working diagnosis

Additional information
Please include social history, patient services and any other relevant information.

Referrer Information
889843
No Different Regular GP

Referral Purpose Dropdown:

- ✓ Please select
- Establish a diagnosis
- Provide clinical assessment
- Inform a treatment plan
- Partnership care
- Requesting specific tests or investigations
- Requesting treatments or an intervention

Step 3: Completing the form

Attachments

F The **Attachments / Reports** tab will give you access to all the supporting documents that you may wish to attach to the form.

G 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...**

H • stored in your Practice Management Software by clicking the **Browse for Patient Document** button .

I **Note:** Make sure to update the date parameters if you want to see files that are older than 6 months.

J • **Or** in your local computer's file system by clicking the **Browse for Local File** button.

The screenshot shows the 'Diagnostic Reports / Patient Documents' section of a form. On the left, there are tabs for 'Requested Information' (General Surgery), 'Attachments / Reports' (highlighted with callout F), 'Medications, Allergies, Alerts', and 'Medical, Social and Family History'. The main area contains instructions for attaching files from EMR or a computer, a table of existing attachments, and two buttons: 'Browse for Patient Document' (callout H) and 'Browse for Local File' (callout J). A 'Submit' and 'Preview' button are at the top right. A callout G points to a checked checkbox in the table.

<input type="checkbox"/>	Date	Name	Comments	Type	Size	
<input type="checkbox"/>	01/09/2021	File_123		rtf	80 KB	
<input checked="" type="checkbox"/>	01/10/2021	File_456		rtf	8 KB	
<input checked="" type="checkbox"/>	01/11/2021	File_789		rtf	90 KB	


The screenshot shows the 'Attach File' dialog box. It has a 'Name' field, 'Date from' (08/01/2019) and 'Date to' (08/07/2021) fields, a 'Search' button, and 'Attach' and 'Cancel' buttons. Below is a table of files to be attached. Callout I points to the 'Date' column header.

<input type="checkbox"/>	Date	Name	Comments	Type	Size
<input type="checkbox"/>	08/07/2021	File_One	Aged Care Referral	43 KB
<input type="checkbox"/>	09/10/2019	File_Two	Aged Care Referral	52 KB
<input type="checkbox"/>	01/10/2019	File_Three	Aged Care Referral	48 KB
<input type="checkbox"/>	24/09/2019	File_Four	Aged Care Referral	44 KB

Step 3: Completing the form

Then click through the remaining Tabs on the left to ensure all the pre-populated patient information has been either selected, or de-selected, as appropriate to submit to the service provider.

All these features ensure you're providing a quality, and compliant submission every time, on behalf of your patients.


Gastroenterology - Grampians Health Ballarat

Requested Information ▲

Gastroenterology

✔ **Form has been auto-saved.**

Attachments / Reports

No reports selected
No files attached

Medications, Allergies, Alerts ▲

2 long term medications specified
8 medications specified
No medical warnings specified

Medical, Social and Family History

Medical history specified

Patient Information ▲

Patient's name
8003602345688835
17/12/1967

Referrer Information

Referrer's name
889843
No Different Regular GP

Long Term Medications ⓘ

Date	Details	Instructions	
09/05/2014	hkl-aspirin 130 tab	1-2 once daily orally	✕
16/09/2013	Travatan Eye Drops 40mcg/mL Eye drops	1 nocte Instil 1 drop in each eye before retiring. Remove soft contact lenses before app	✕

Other Medications ⓘ [Browse for More Medications](#)

Date	Details	Instructions	
09/05/2014	eye drop 2500 drops	daily	✕
09/05/2014	eye drop 2500 drops	prn with food	✕
09/05/2014	hkl-aspirin 130 tab	orally	✕
14/01/2013	Ceclor CD 375mg Sustained release tablets	1 mane	✕
09/01/2013	Ventolin CFC-free Inhaler 100mcg/dose Inhaler	As required	✕
17/08/2012	Accupril 5mg Tablets	1 bd	✕
04/05/2012	Panadeine Forte Tablets	2 every 4 hours	✕
14/02/2012	Roaccutane 10mg Capsules	1 with food	✕

Medical Warnings

<input type="checkbox"/>	Date	Description	Comments
No records found.			

Clinical Medication Comments

Attachments / Reports

No reports selected
No files attached

Medical Practitioner Information

Medicare Provider Number*
889843

HPI-I
8003611566681627

Name
Full name Sam Entwistle ⓘ

Referrer's name

Practice name
Millstone Family Practice

Practice Address
156 George Street, Galleria, Sydney, NSW, 2000

Practice telephone*
03 9 358 0116

Email
zongjun@gmail.com

EDI*
ma65test

Patient has a different regular GP

Medications, Allergies, Alerts ▲

2 long term medications specified
8 medications specified
No medical warnings specified

Medical Registration Number

HPI-O
123456

Medical, Social and Family History

Medical history specified

Patient Information ▲

Patient's name
8003602345688835
17/12/1967

Referrer Information

Referrer's name
889843
No Different Regular GP

Practice fax
03 9 4433456

Step 4: Previewing, Submitting and Parking

Previewing

A You can verify that the form has been completed correctly by clicking **Preview** allowing you to review the details before submitting.

B Whether you click **Preview** or **Submit**, if a piece of required information is incomplete or incorrect, the form will notify you to complete or correct it.

Grampians Health Gastroenterology - Grampians Health Ballarat

Submit Preview Park Help

Requested Information: General Surgery

Medical Practitioner Information: Medicare Provider Number* 0000000A, Medical Registration Number 123456, HPI-I, Name, Full name

Attachments / Reports

Preview, not submitted copy

Submit

Gastroenterology - Grampians Health Ballarat

Grampians Health

Patient: MICKEY HEATLEY (Mmouse), 58yrs, F, DOB 17/12/1967, PH: 0401 201 2011, Work 03 9 23423221, Home 03 9 53532221

Residential address: 95 Pitt Street, Apartment, Sydney, NSW 2000

Postal address: 9600 Pitt Street, Apartment, Sydney, NSW 2000

Referred by: Sam Entwistle, Millstone Family Practice, Prov. No. 889843, HPI-O 123456, HPI-I 8003611566661627, PH 03 9 358 0116, FAX 03 9 4433456

Clinical Referral Information

Referred To: Dr Timothy Elliot

Referral Date: 20/02/2026

Referral Continuation: New

Grampians Health Gastroenterology - Grampians Health Ballarat

Submit Preview

Requested Information **▲** Gastroenterology **✓** Form has been auto-saved.

Attachments / Reports No reports selected 1 file attached **▲** Please fix the following errors:

- Patient Consent is a required field

Medications, Allergies, Alerts 2 long term medications specified 8 medications specified No medical warnings specified

Medical, Social and Family History Medical history specified

Patient Information Patient's name 800360234568835 17/12/1967

Referrer Information Referrer's name 889843 No Different Regular GP

Referred To* Dr Timothy Elliot

Referral Date* 20/02/2026

Referral Continuation* **i** New Amended referral/update previously sent referral Renew expired referral

Referral Period* Indefinite

Patient's preferred contact method* SMS

Please confirm patient phone details are accurate when reviewing Patient Information tab.

Interpreter Required* Yes No

Does the patient identify as living with a disability / disabilities?* Yes No

Is the patient an NDIS participant?* **i** Yes No

Additional Needs / Reasonable Adjustments Required* Yes No

Does the patient have a carer / support person?* Yes No

Is the patient appropriately equipped and enabled for Telehealth (video) consultation?* **i** Yes No

I acknowledge that the patient has consented to the referral and to their personal and health information being shared between the referring clinician, the nominated GP, the health service staff and other health service providers as required to facilitate their treatment or care. The patient also consents to attend an MBS bulk-billed clinic if available.

Patient Consent*

Step 4: Previewing, Submitting and Parking

Submitting

- C** When you are ready to send your form, click **Submit**.
- D** 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.

- E** If you'd like to provide the patient with a copy, you can left-click the **Print** button or right-click anywhere on the submitted form and choose Print.

Grampians Health
Gastroenterology - Grampians Health Ballarat

Submit Preview Park Help

Requested Information
General Surgery

Attachments / Reports

Medications, Allergies, Alerts

Medical, Social and Family History

Patient Information

Medical Practitioner Information

Medicare Provider Number*
889843

Medical Registration Number

HPI-I
8003611566681627

HPI-O
123456

Name
Full name Sam Entwistle

Practice name
Millstone Family Practice

Practice Address

Print

Form sent on 20/02/2026 09:34 AEST

Gastroenterology - Grampians Health Ballarat

Grampians Health

Patient: Patient's name, 58yrs, F, DOB 17/12/1967, PH: 0401 201 2011, Work 03 9 23423221, Home 03 9 53532221

Residential address: 95 Pitt Street, Apartment, Sydney, NSW 2000

Postal address: same as residential address

Referred by: Referrer, Millstone Family Practice, Prov. No. 889843, HPI-O 123456, HPI-I 8003611566681627, PH 03 9 358 0116, FAX 03 9 4433456

Referral date: 20/02/2026 12:19 NZDT

Clinical Referral Information

Referred To: Dr Timothy Elliot

Referral Date: 20/02/2026

Referral Continuation: New


Referral Period: Indefinite

Patient's preferred contact method: SMS

Step 4: Previewing, Submitting and Parking

Parking

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.


Gastroenterology - Grampians Health Ballarat

HL

Submit
Preview
Park
Help

Requested Information ▲

Gastroenterology

✓

Form parked successfully. Please note that attachments selected from your PC need to be re-attached when resuming the parked form.

Attachments / Reports

No reports selected
No files attached

Referred To* Dr Timothy Elliot ▾

Referral Date* 20/02/2026

Referral Continuation*
 New
 Amended referral/update previously sent referral
 Renew expired referral

Referral Period* Indefinite ▾

Patient's preferred contact method* SMS ▾

Please confirm patient phone details are accurate when reviewing Patient Information tab.

Interpreter Required*
 Yes No

Does the patient identify as living with a disability / disabilities?* No ▾

Is the patient an NDIS participant?*
 Yes No

Additional Needs / Reasonable Adjustments Required*
 Yes No

Does the patient have a carer / support person?*
 Yes No

Is the patient appropriately equipped and enabled for Telehealth (video) consultation?*
 Yes No

I acknowledge that the patient has consented to the referral and to their personal and health information being shared between the referring clinician, the nominated GP, the health service staff and other health service providers as required to facilitate their treatment or care. The patient also consents to attend an MBS bulk-billed clinic if available.

Patient Consent*

Medications, Allergies, Alerts ▲

2 long term medications specified
8 medications specified
No medical warnings specified

Medical, Social and Family History

Medical history specified

Patient Information ▲

Patient's name
8003602345688835
17/12/1967

Referrer Information

Referrer's name
889843
No Different Regular GP

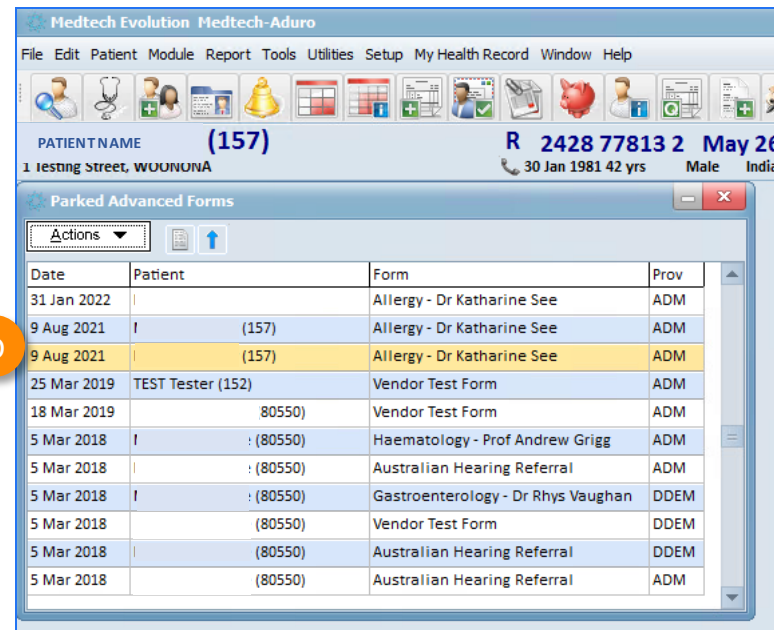
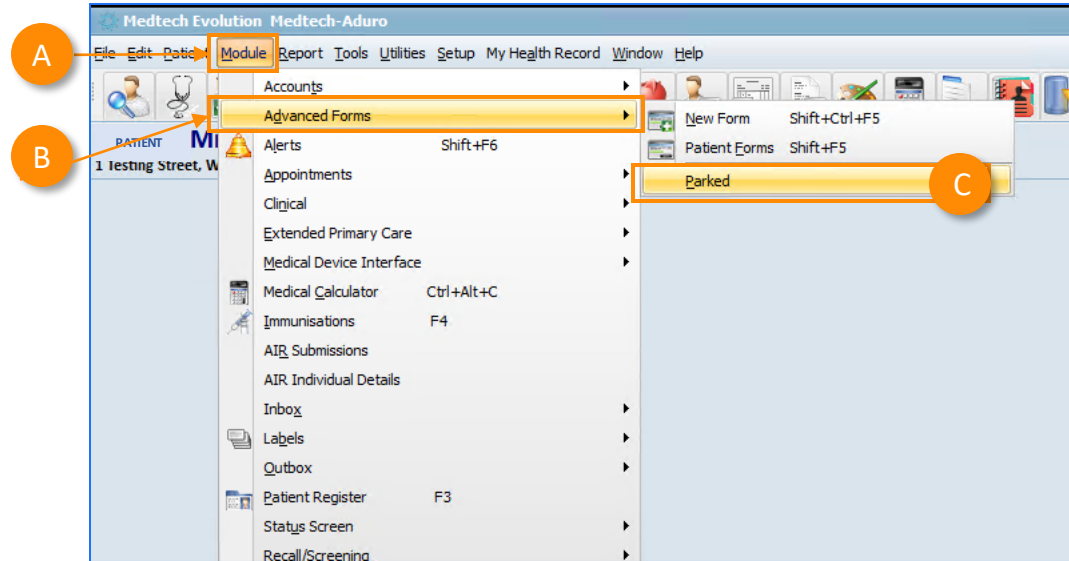
Step 5: Accessing parked and patient forms

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.



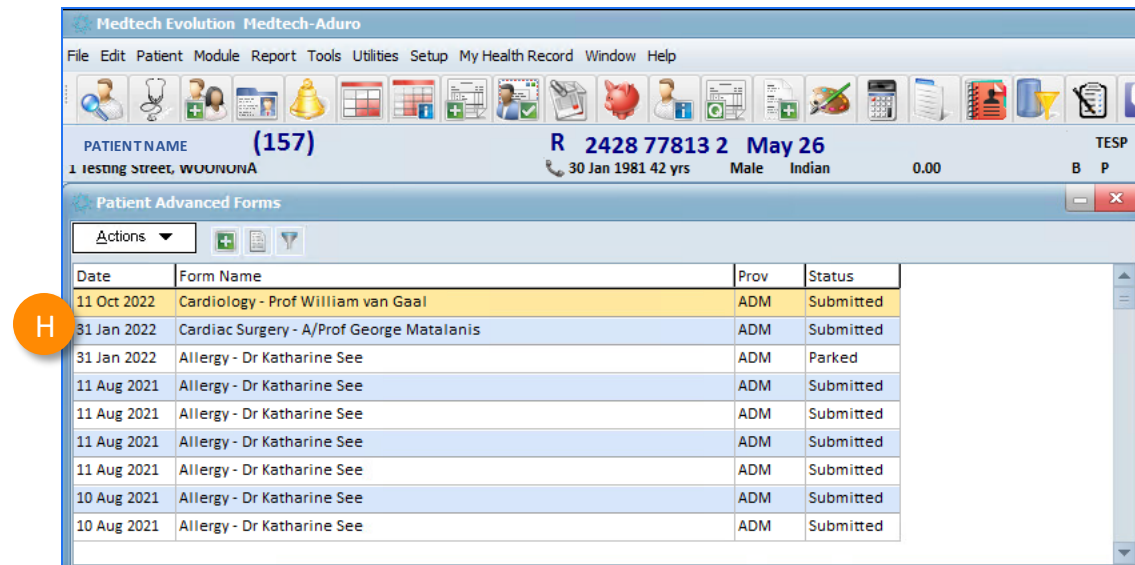
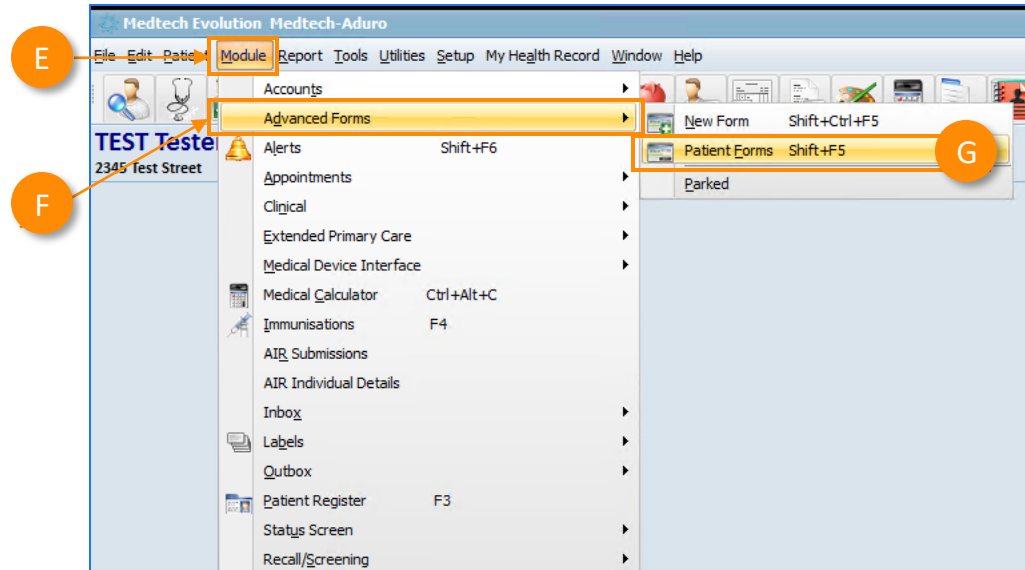
Step 5: Accessing parked and patient forms

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.

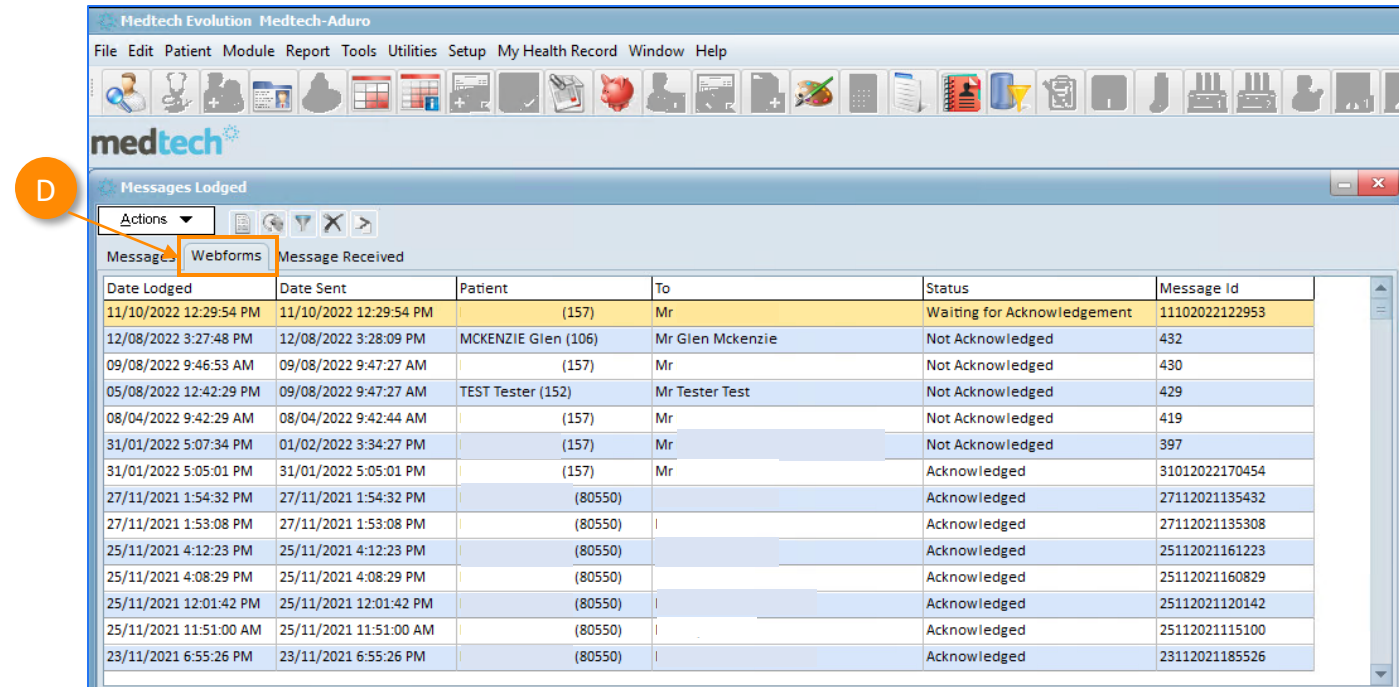
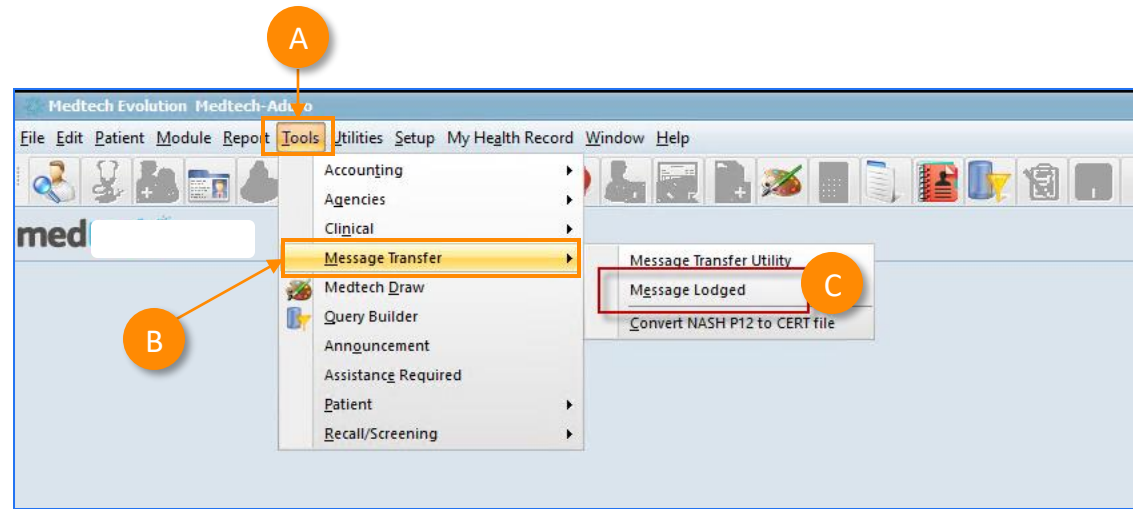
Note: when returning to a parked or auto-saved form, due to security policy, any previously added attachments will need to be re-added.



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.

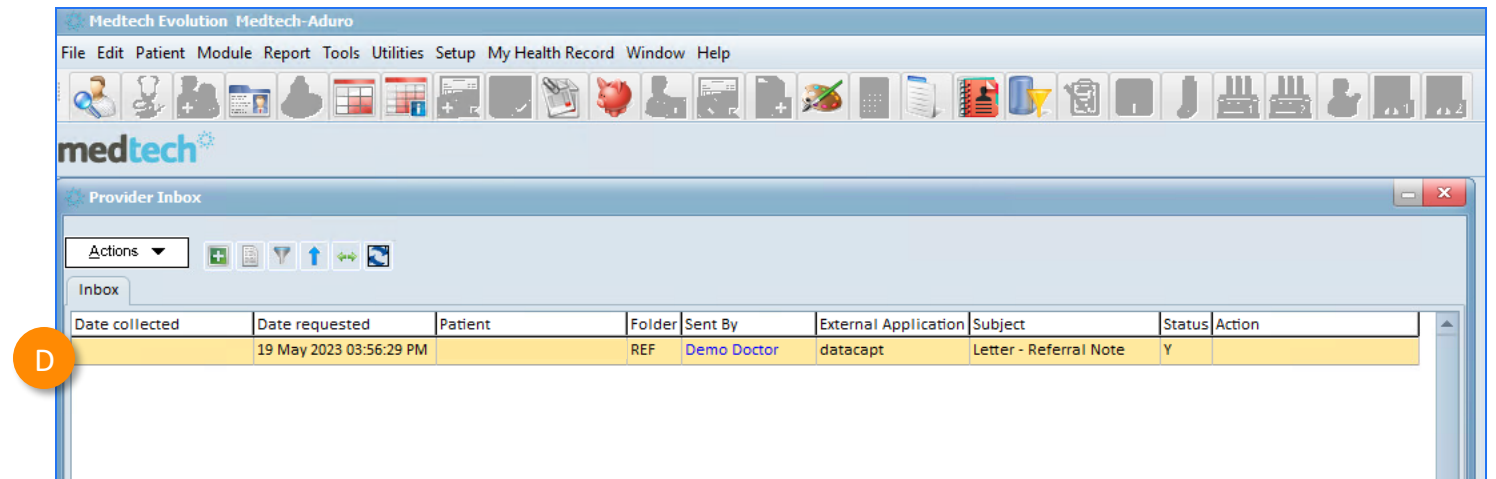
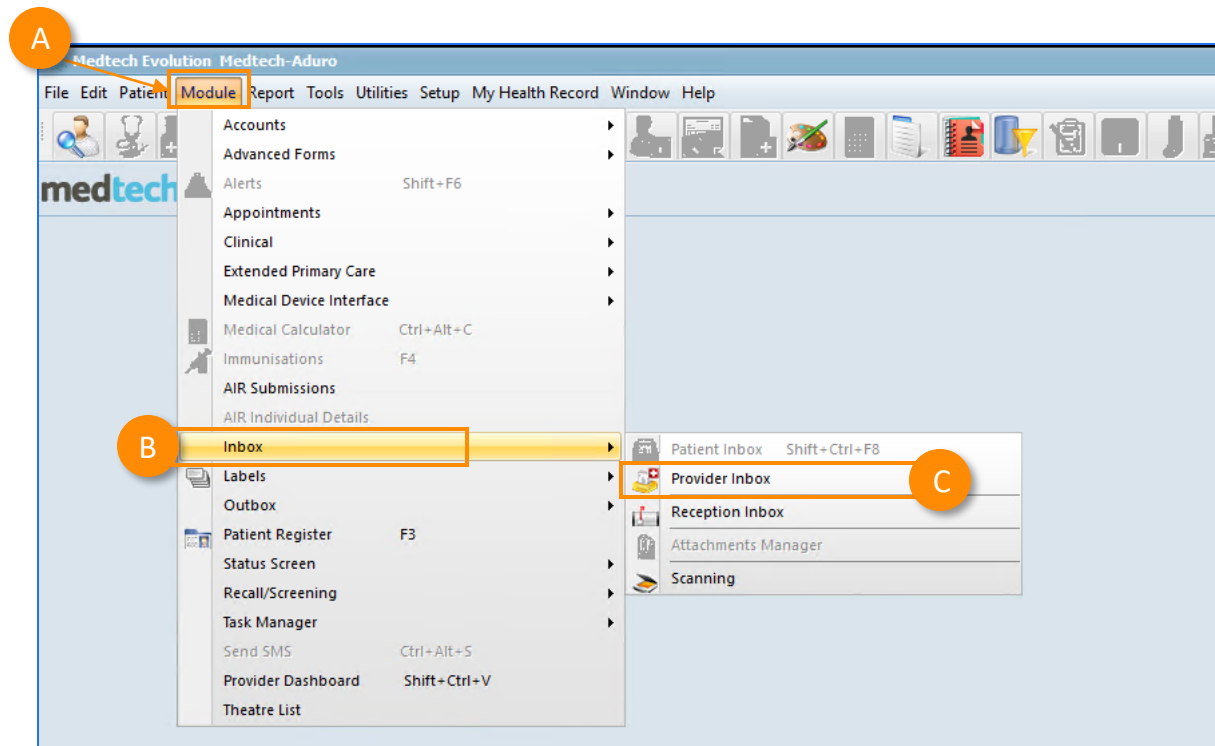


Step 7:

What happens after a referral has been made?

Viewing incoming reports

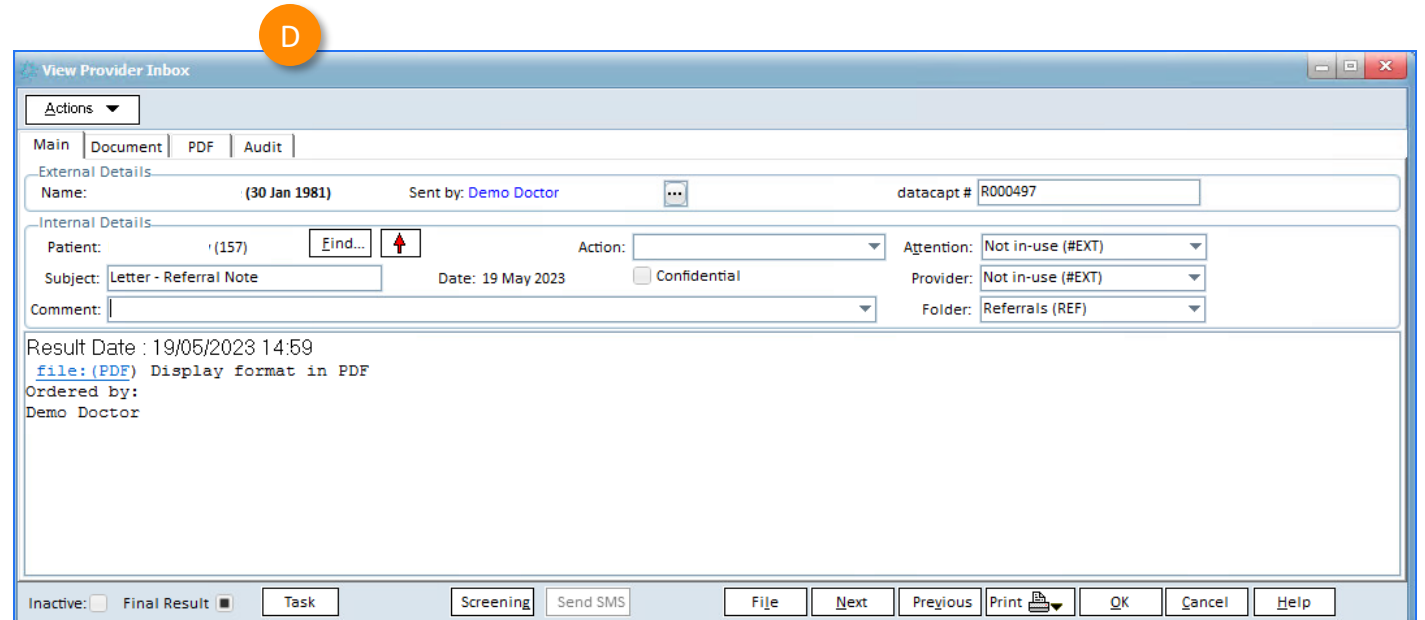
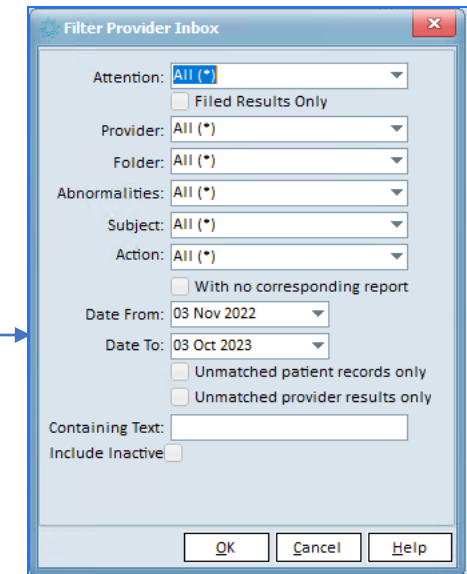
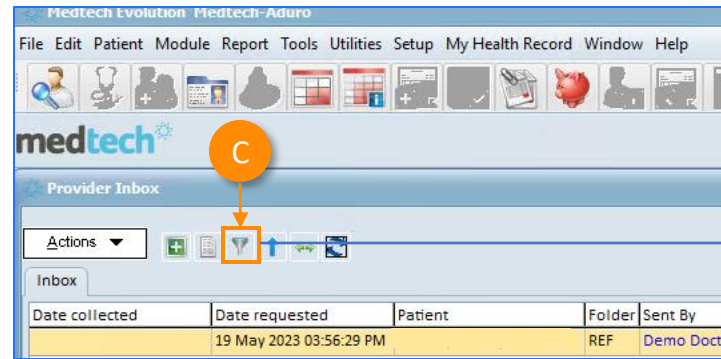
- A In the menu, click **Module**
- B Select **Inbox**
- C And choose **Provider Inbox**
- D Any messages waiting to be reviewed will be shown – click on the message to view it.



Step 7: What happens after a referral has been made?

Viewing incoming reports (continued)

- C** You can use the filters to sort incoming correspondence.
- D** This is how a message is viewed

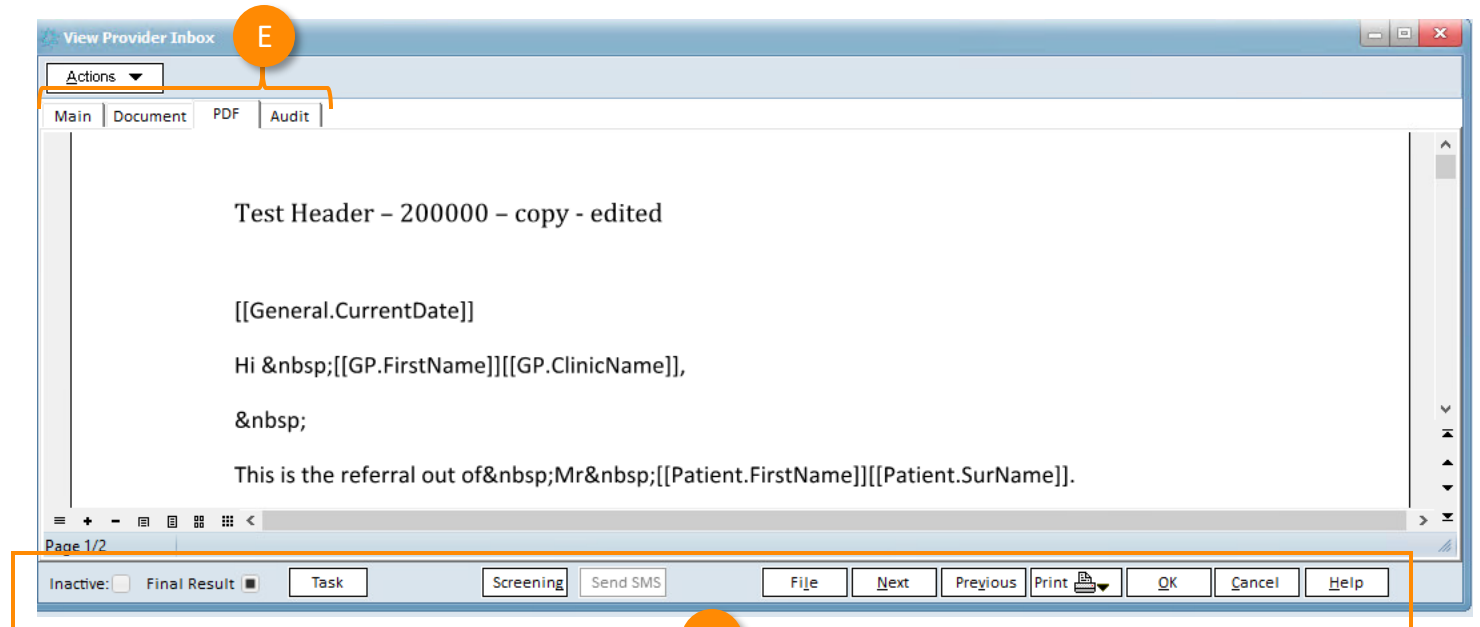


Step 7:

What happens after a referral has been made?

Viewing incoming reports (continued)

- E** Depending on the message type that is sent through, you can use the tabs at the top to change the message view e.g. PDF, Plain Text, etc.
- F** From this screen you can process the message as required e.g. File, Print etc.



Helpdesk

Phone: 1800 125 036

Email: helpdesk@healthlink.net

Monday to Friday (Except Public Holidays)

8:00am – 6:00pm

www.healthlink.com.au

HealthLink^{*}

HealthLink is part of Lanas, a global network of healthcare technology organisations operating across the United Kingdom, Ireland, New Zealand, Australia and India. Together, we work to deliver safer, more efficient and better-connected healthcare for everyone.