

# HealthLink

User Guide

18.05.2026 BP

# HealthLink SmartForms for Best Practice

Welcome to HealthLink SmartForms. The smartest way for health professionals to submit an online form to **Transport for NSW**.

Your practice must be running Best Practice Lava SP3 or above to access the HealthLink SmartForms.

©HealthLink



Best Practice  
An evolution in medical software

# Submitting HealthLink SmartForms from Best Practice

SmartForms enable **Best Practice** 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.

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## HealthLink Technical Support

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

Phone: 1800 125 036

## Step 1: Accessing HealthLink SmartForms

### Part 1: Fitness to Drive Assessments:

Step 2:  
**Launching a new Fitness to Drive form**

Step 3:  
**Completing the form**

Step 4:  
**Previewing, Submitting and Parking**

Step 5:  
**Accessing parked and auto-saved forms**

Step 6:  
**Accessing submitted forms**

### Part 2: Interlock Program Recommendation:

Step 2:  
**Launching a new Interlock Program Recommendation form**

Step 3:  
**Completing the form**


Step 4:  
**Previewing, Submitting and Parking**

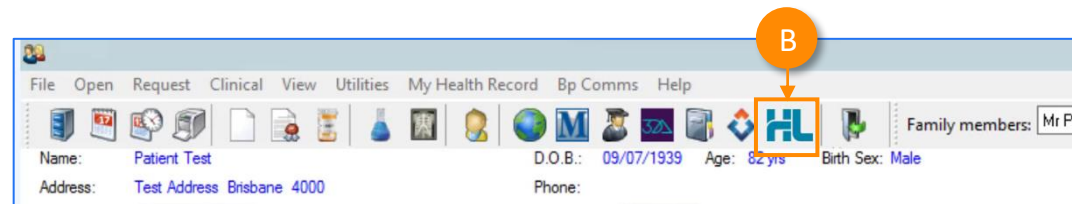
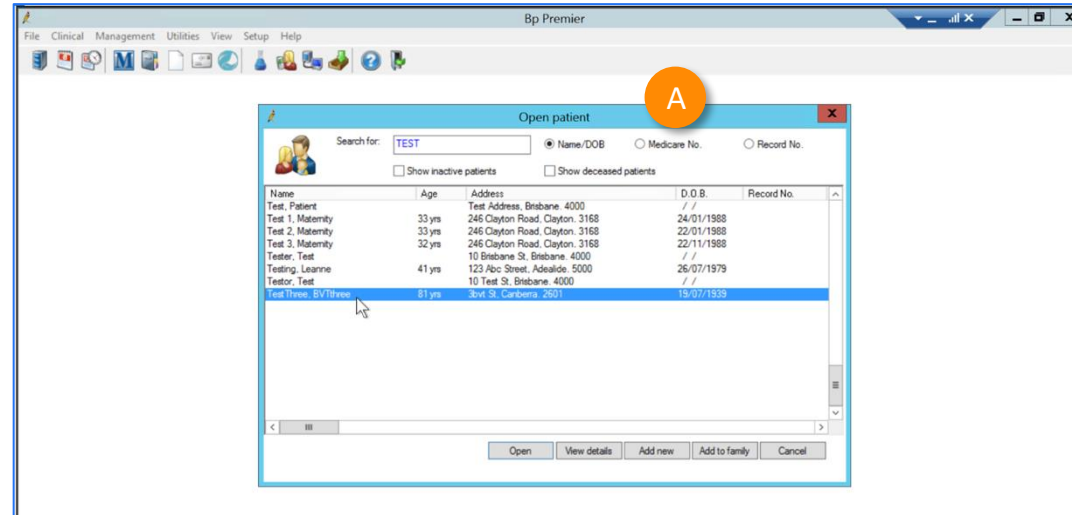
Step 5:  
**Accessing parked and auto-saved forms**

Step 6:  
**Accessing submitted forms**

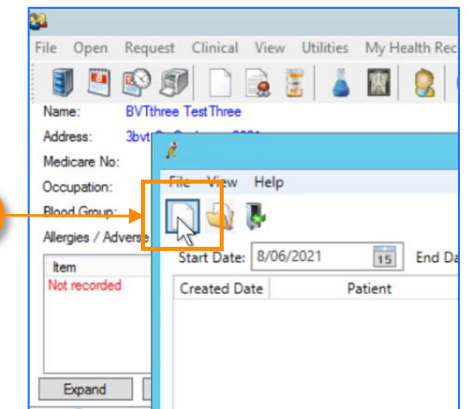
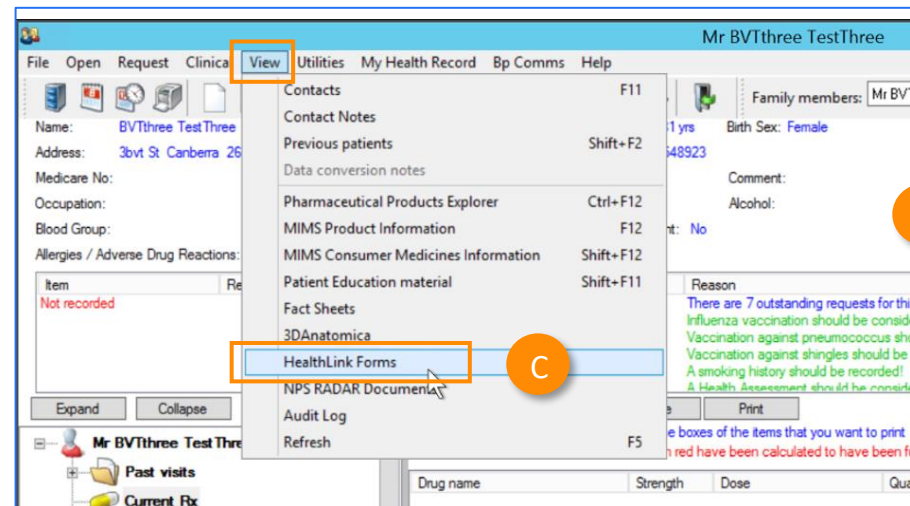
# Step 1: Accessing HealthLink SmartForms

To access the forms within your  
Best Practice software...

- A First, search for the patient and open their electronic medical record.
- B Then click the **HealthLink icon**  from the quick launch bar to launch the **HealthLink home page**.
- or
- C Click **View** from the menu and select **HealthLink Forms**.
- D And then click the **New Form** button to launch the **HealthLink home page**.



or



## 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**

Create Update Support HealthLink | PRO

Search a Directory

SR Specialists+Referrals Refer to Private Specialist HL HealthLink Direct

IAR Decision Support Tool for Mental Health Konnect NET Spotlight Services

Return.ioWorkSA Work Capacity Certificate

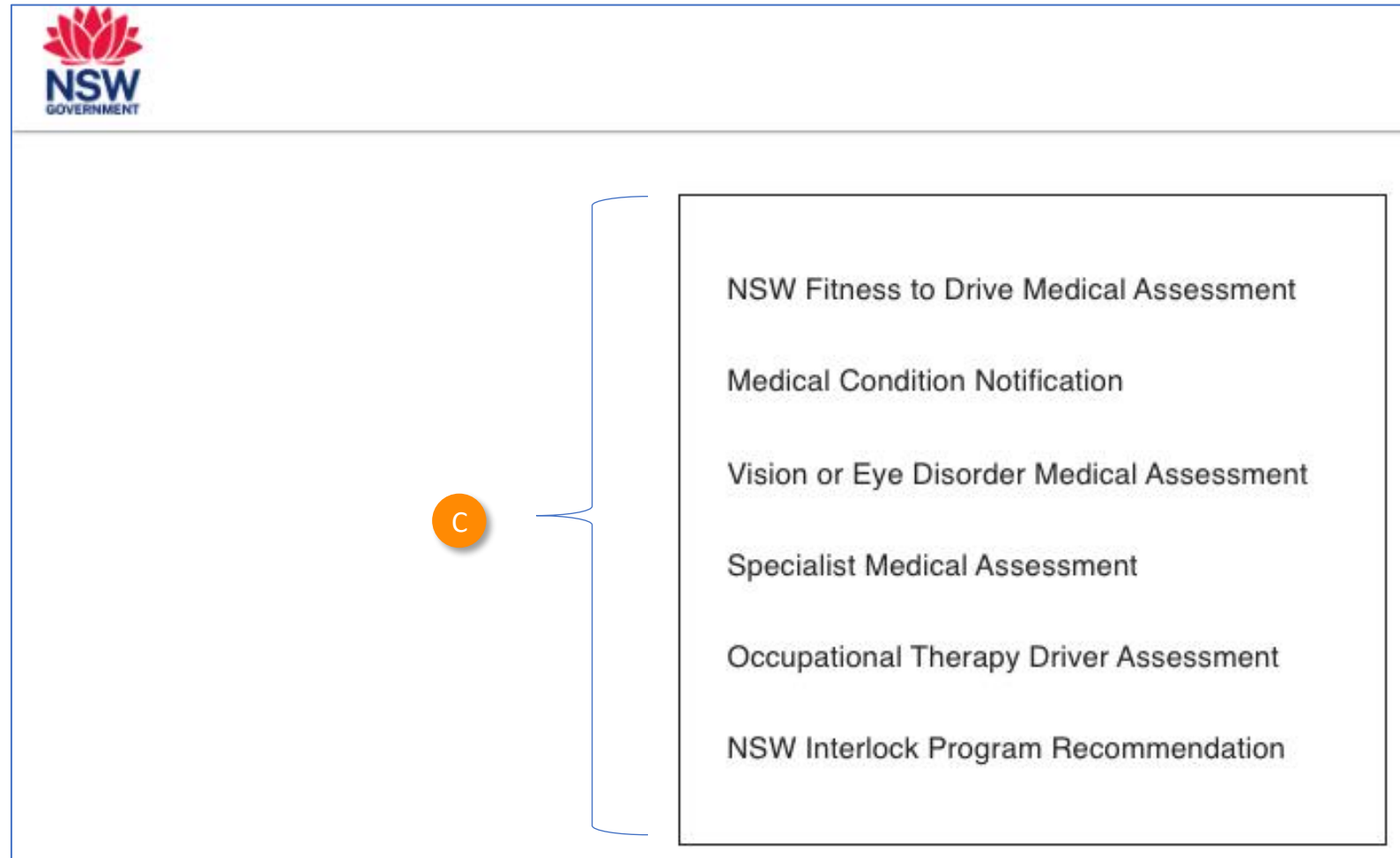
### Referral Services

Search Referral Services Clear

Access Canberra Prototype	led Medicines	ACT Public Outpatient and Community
Application		Austin Health referrals
Banyule Community Health		ccCHIP - Cardiometabolic Health in Psychosis
Chris O'Brien Lifecare Services		DPV Community Health
Eastern Health		Grampians Health
Head to Health		Hearing Australia Medical Certificate
Medicare Mental Health (1800 595 312)		Mercy Hospital for Women
Monash Health		My Aged Care Referral
Northern Health		Northern NSW LHD - referrals
Northern Sydney Local Health District Services		NSW Certificate of Capacity
NSW Health Outpatient Referrals		NSW Health Outpatient referrals - Central Coast LHD
NSW Health Outpatient referrals - Far West LHD		NSW Health Outpatient referrals - Western NSW LHD
NSW Health Outpatient referrals - Western Sydney LHD		NSW Health Outpatient referrals - Illawarra Shoalhaven LHD
NSW Health Outpatient referrals - South Eastern Sydney LHD		Parkville Hospital referrals Demo
PRP Diagnostic Imaging		SA Health
Spectrum Medical Imaging		Sydney LHD Aged Care, Allied Health and Community services
Sydney LHD Hospitals Services		Tasmanian Health Service
Tasmanian Mental Health and Alcohol and Other Drugs		TINSW SPA Homepage Dev ATS
TINSW SPA Homepage Dev Local 2		<b>Transport for NSW</b>
Victoria General Practice Referral		Victorian Standard of Practice
WA Health Referrals		Wentree Mercy Hospital

## Step 2: Launching a new form

**C** To launch the SmartForm, select the online form you require from the list of available forms.



The screenshot shows the NSW Government logo in the top left corner. A large, empty rectangular area represents the SmartForm selection interface. A blue bracket on the right side of this area points to a list of available forms. An orange circle with the letter 'C' is positioned to the left of the list, indicating the selection step.

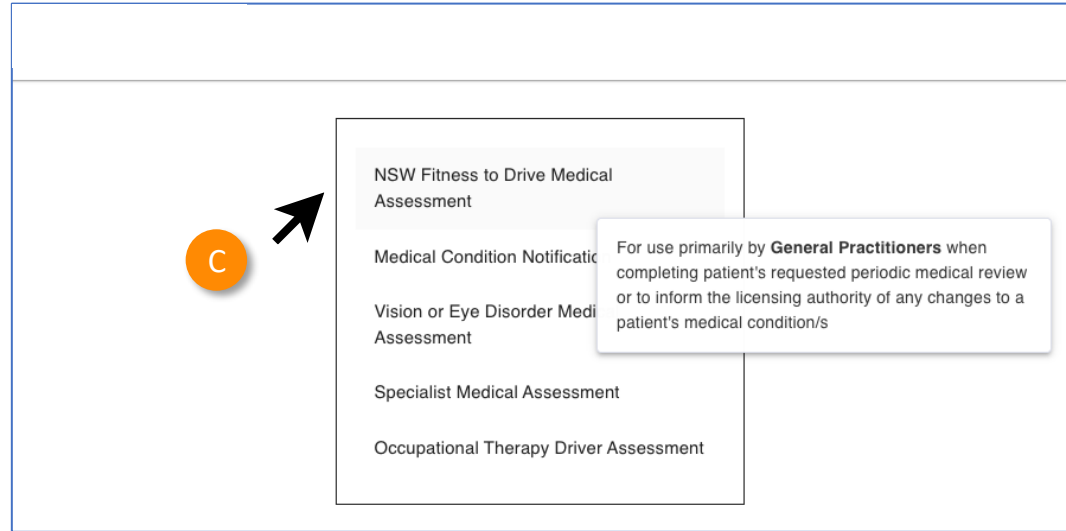
- NSW Fitness to Drive Medical Assessment
- Medical Condition Notification
- Vision or Eye Disorder Medical Assessment
- Specialist Medical Assessment
- Occupational Therapy Driver Assessment
- NSW Interlock Program Recommendation

**Part 1:**

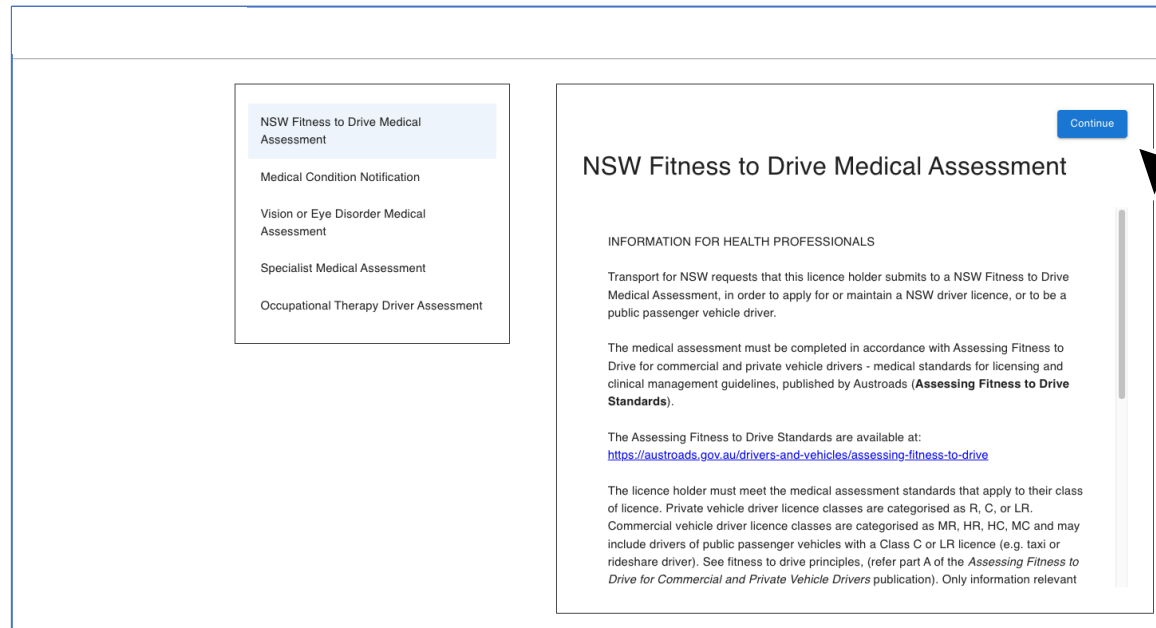
# Fitness to Drive Medical Assessment

## Step 2: Fitness to Drive Launching a new form

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



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



## Step 3: Fitness to Drive Completing the form

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

A

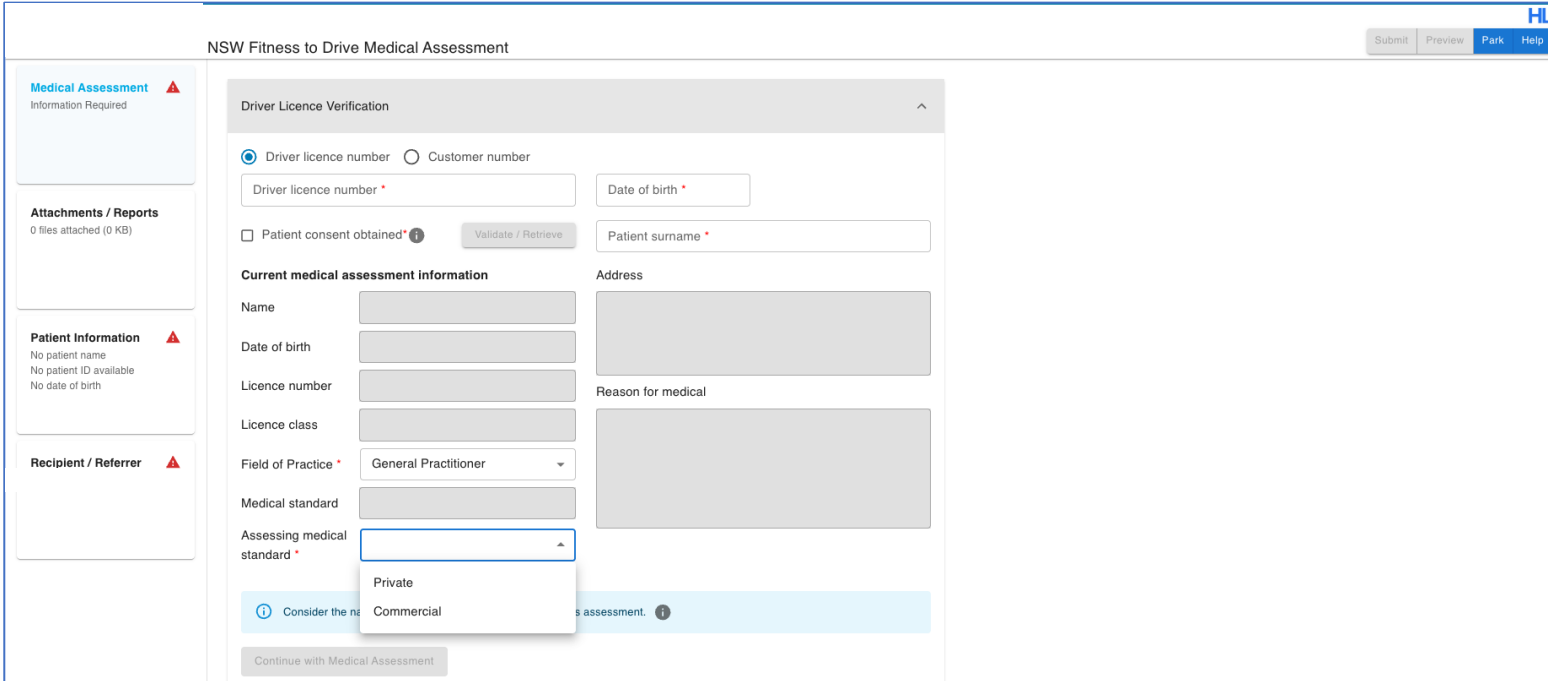
The **SmartForm layout** provides a consistent, easy-to-use tabular structure on the left, with the main action window on the right.

B

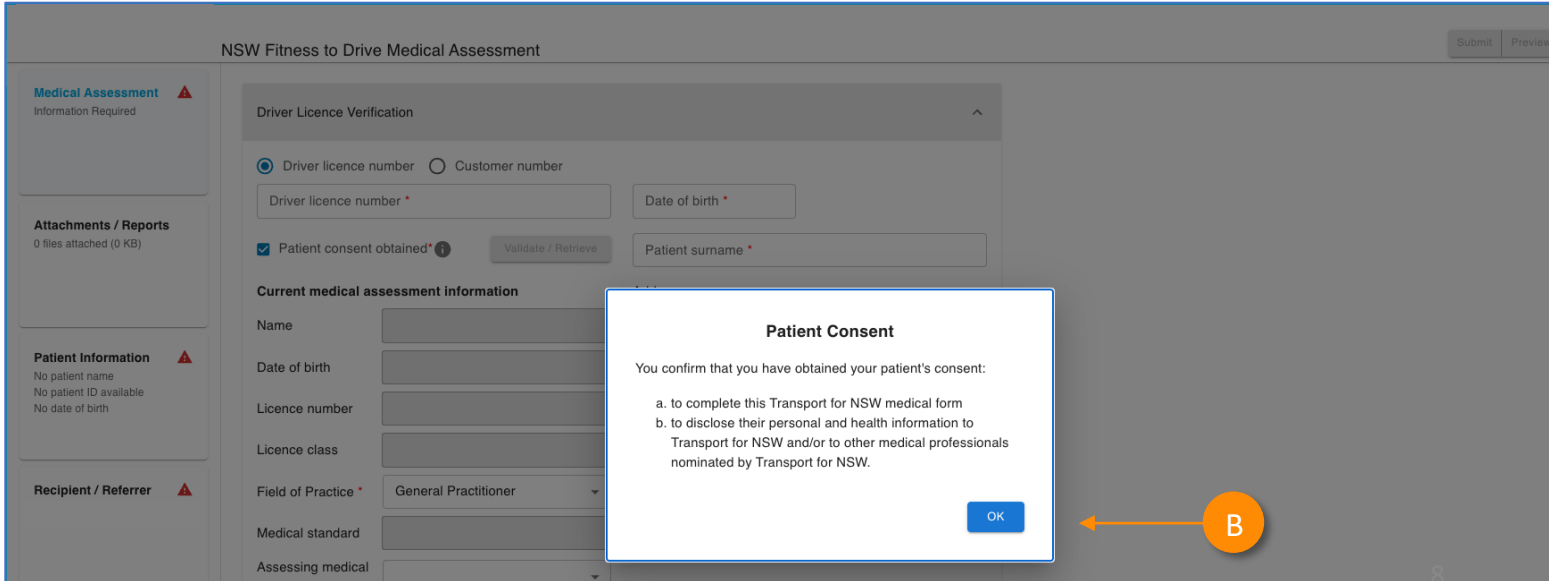
**Mandatory Fields** must be completed prior to submitting the SmartForm and are each highlighted with a red asterisk.

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



The screenshot shows the 'NSW Fitness to Drive Medical Assessment' form. On the left sidebar, the 'Patient Information' section has a red asterisk next to the 'Patient consent obtained' checkbox. The main form area has the 'Patient consent obtained' checkbox checked, and a red asterisk is visible next to the 'Driver licence number' field. A dropdown menu is open for the 'Assessing medical standard' field, showing 'Private' and 'Commercial' options. The form includes sections for 'Driver Licence Verification', 'Current medical assessment information', and 'Address'.




The screenshot shows the same form as above, but with a 'Patient Consent' dialog box overlaid. The dialog box contains the text: '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.' There is an 'OK' button at the bottom right of the dialog box. A red asterisk is visible next to the 'Patient consent obtained' checkbox in the background form.

B

## Step 3: Fitness to Drive Completing the form

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


NSW Fitness to Drive Medical Assessment


**Medical Assessment** 

Licence class: C  
Medical standard: Private

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

**Patient Information**


**Recipient / Referrer** 

**Driver Licence Verification** 

Driver licence number  Customer number

Driver licence number \*

Date of birth \*

Patient consent obtained\* 

Patient surname \*

**Current medical assessment information**

Name

Date of birth

Licence number

Licence class



Field of Practice \*

Medical standard

Assessing medical standard \*

**Address**

**Reason for medical**

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

## Step 3: Fitness to Drive 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.

HL

Submit Preview Park Help

NSW Fitness to Drive Medical Assessment

Driver Licence Verification

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

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

**Patient Information**

**Recipient / Referrer** ▲

**VISION**  
Does the patient have a current vision or eye disorder? \* **D**  Yes  No

**CARDIOVASCULAR DISEASE**  
Does the patient have a cardiovascular condition(s)? \* **D**  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**

**D** ⓘ 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)

## Step 3: Fitness to Drive 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  
2 reports selected (0 KB)  
0 files attached (0 KB)

Patient Information

Recipient / Referrer

**Diagnostic Reports / Patient Documents**  
Supports file types: doc, docx, jpeg, jpg, 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 it 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  
2 reports selected (0 KB)  
0 files attached (0 KB)

Patient Information  
HL License # 9704  
Magdonboudist  
No patient ID available  
01/01/1980

Recipient / Referrer

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

Caution: larger attachments may take significant time to preview

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

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

Search Options

Date From: 15/06/2025  
Date To: 15/07/2025

Search Filename

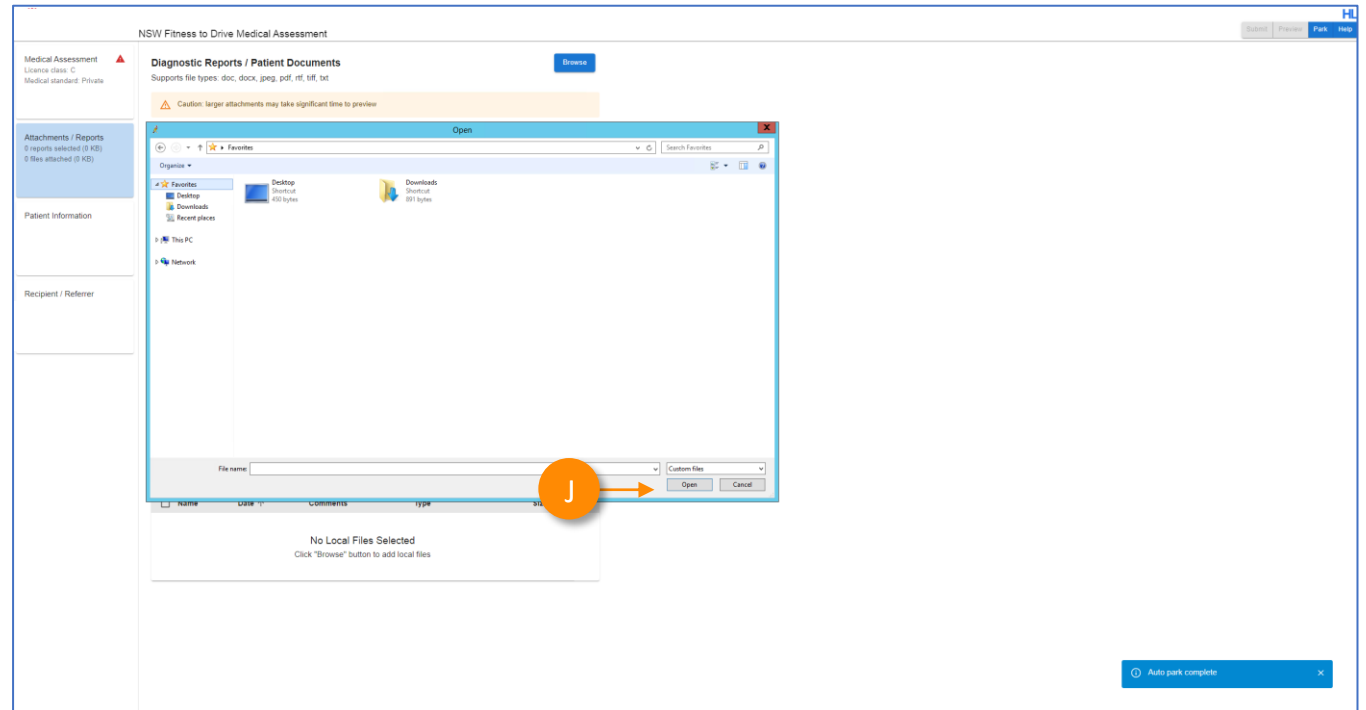
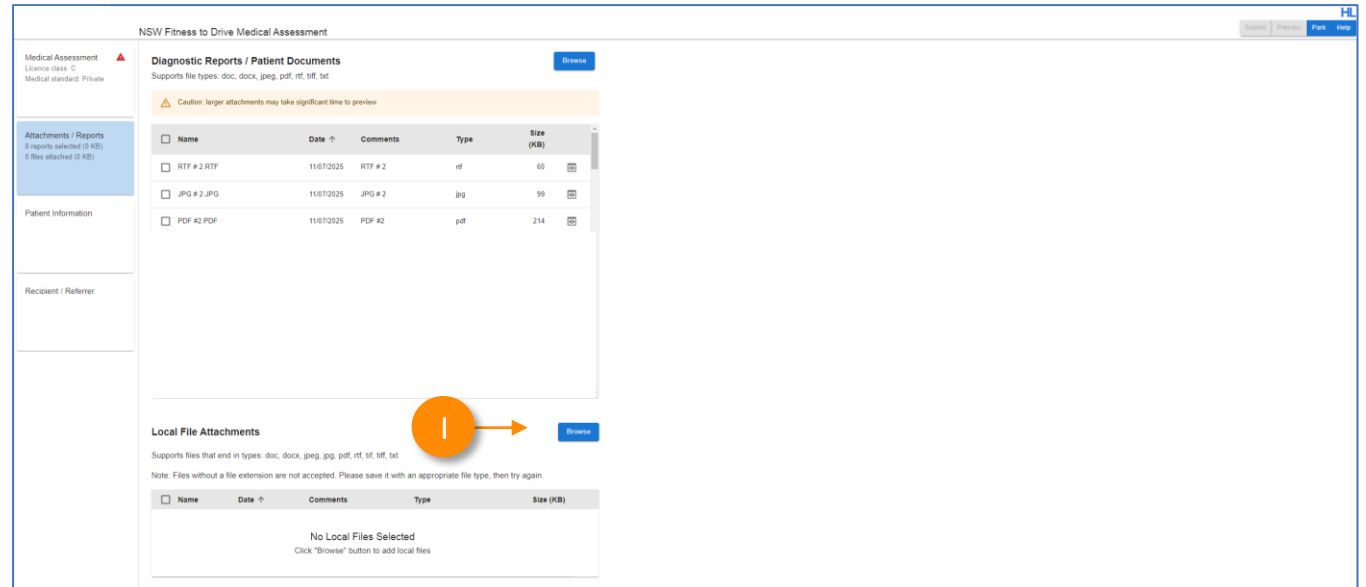
Attach

Cancel

### Step 3: Fitness to Drive 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**.



## Step 3: Fitness to Drive

# 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\*  

Pension number

**Name** Patient Name 

First name\*

Last 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\*


Address line 2

Suburb

State\*

Postcode

**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\*

## Step 3: Fitness to Drive 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.



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  
000000Y

**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

FDI

## Step 4: Fitness to Drive 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

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 **x**

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: Fitness to Drive 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.

## NSW Fitness to Drive Medical Assessment

Submit

Preview

Park

Help

⚠ 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 >

D

# Step 4: Fitness to Drive 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

HL

The screenshot shows the 'NSW Fitness to Drive Medical Assessment' form. The main form is partially visible on the left, showing sections for 'Medical Assessment', 'Attachments / Reports', 'Patient Information', and 'Recipient / Referrer'. The 'Medical Assessment' section indicates 'No Errors Found'. The 'Patient Information' section shows 'Name: Brett Mitchell' and 'Practice name: Furious Five Psych'. The 'Recipient / Referrer' section shows 'Address line 1: 4/69 eyre Street', 'Suburb: NORTH WARD', 'State: Queensland', and 'Postcode: 4810'. The 'Practice telephone' is '+61 04 17728660'. The 'EDI' field is 'auportal'.

A 'Preview' pop-up window is open in the center, displaying the following text:

**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.

**Assessment Statement**  
This assessment has been completed in accordance with 'Assessing Fitness to Drive'. The standards can be viewed at <https://www.austroads.gov.au>

**Privacy Statement**  
Your personal and health information collected in this form will be held by Transport for NSW at 20-44 Ennis Road, Milsens 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.

**NSW Fitness to Drive Medical Assessment - Transport for NSW**

**Patient:** , 45yrs, DOB 01/01/1980.

**Residential address**

**Postal address:** , ,

**Referred by:**

**Medical Assessment Information**

**Driver Licence Verification**

**Driver licence number:** 45232285

## Step 4: Fitness to Drive Submitting

### Submitting

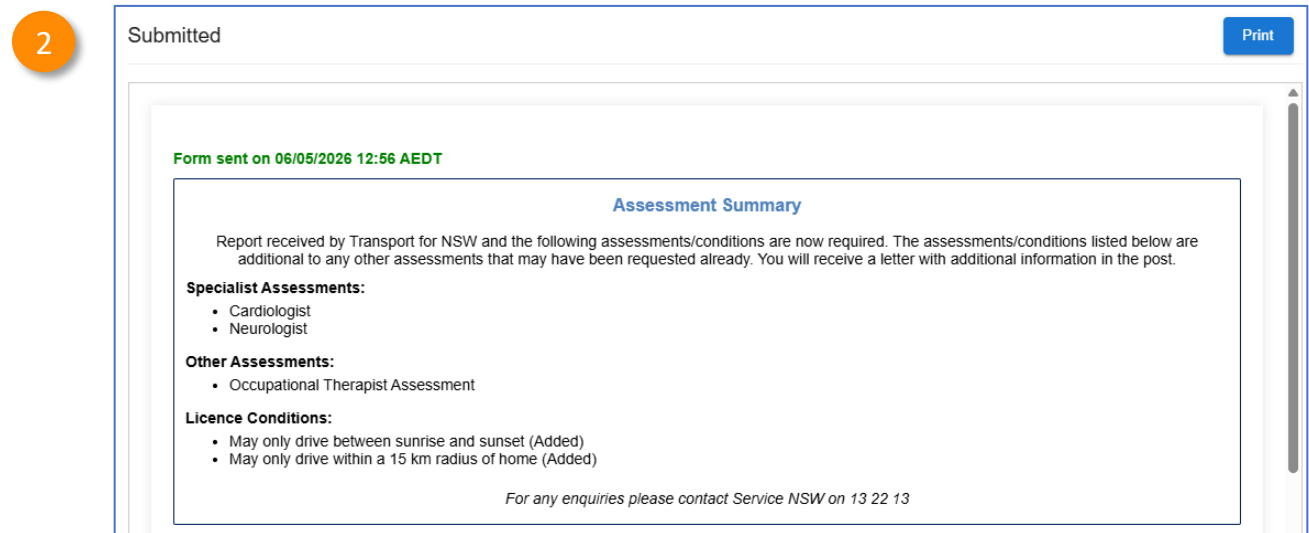
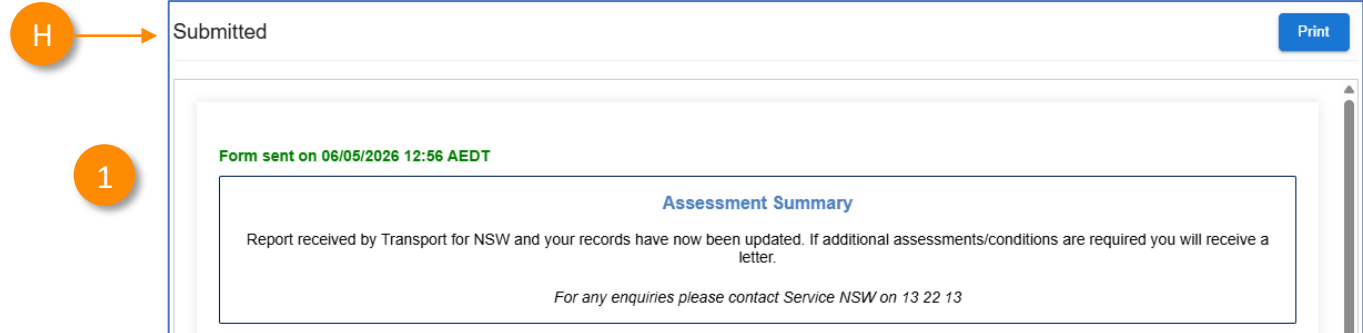
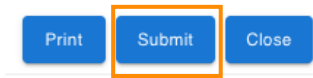
**G** When you are ready to send your form, click **Submit**.

**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**.

#### There are four submission response outcomes:

- 1. Straight through processing:** successfully received by Transport for NSW. The data has been processed automatically and the licence record updated.
- 2. Straight through processing with assessments/conditions:** successfully received by Transport for NSW. Additional Assessments to be requested based on Doctor recommendations/business rules.

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



## Step 4: Fitness to Drive Submitting

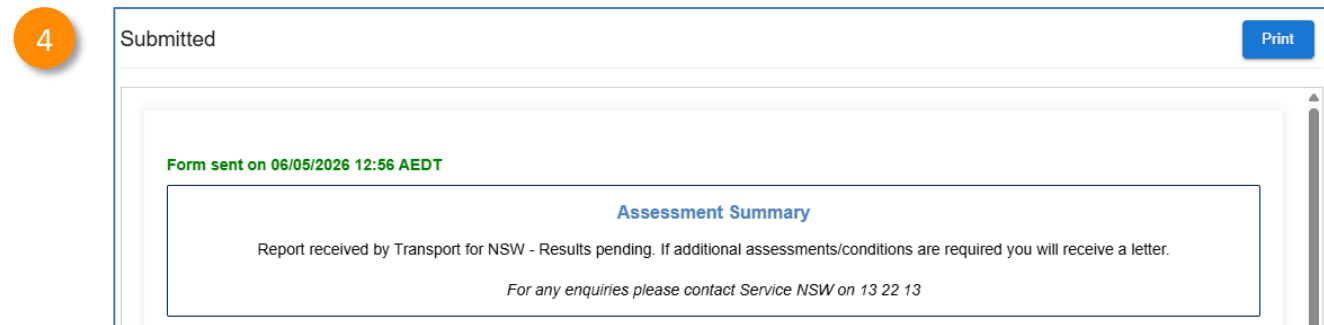
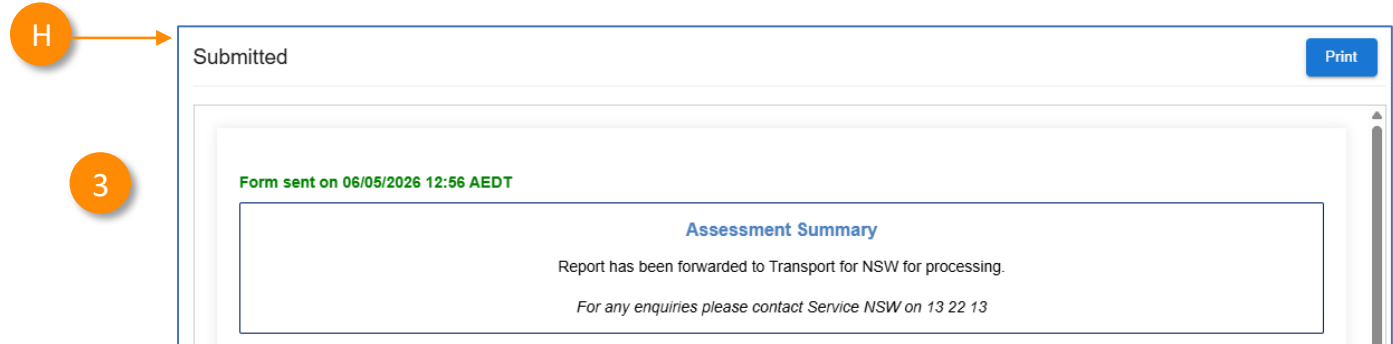
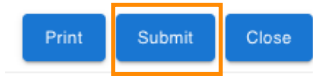
### Submitting continued

- 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**.

#### There are four submission response outcomes:

- 3. Manual processing required by Transport for NSW:** successfully received by Transport for NSW and the data will be processed manually.
- 4. Technical issue:** successfully received by Transport for NSW, but there was an issue with automatic processing at Transport for NSW. Transport for NSW will manually process the data.

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



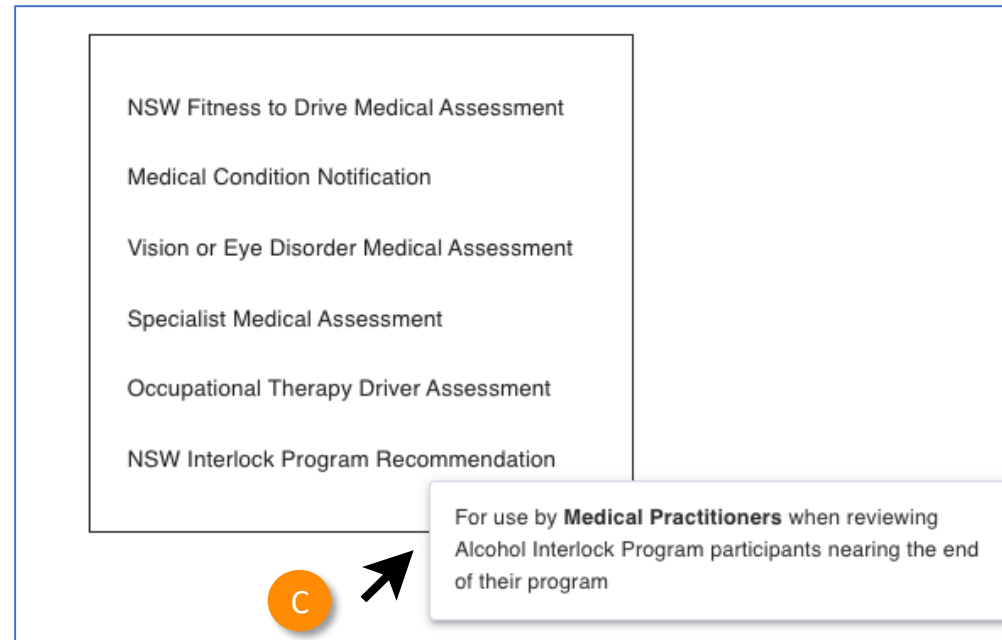
**Part 2:**

# Interlock Program Recommendation

## Step 2: Interlock Program Recommendation Launching a new form

C

To launch the SmartForm, select the **NSW Interlock Program Recommendation** 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

NSW Interlock Program Recommendation

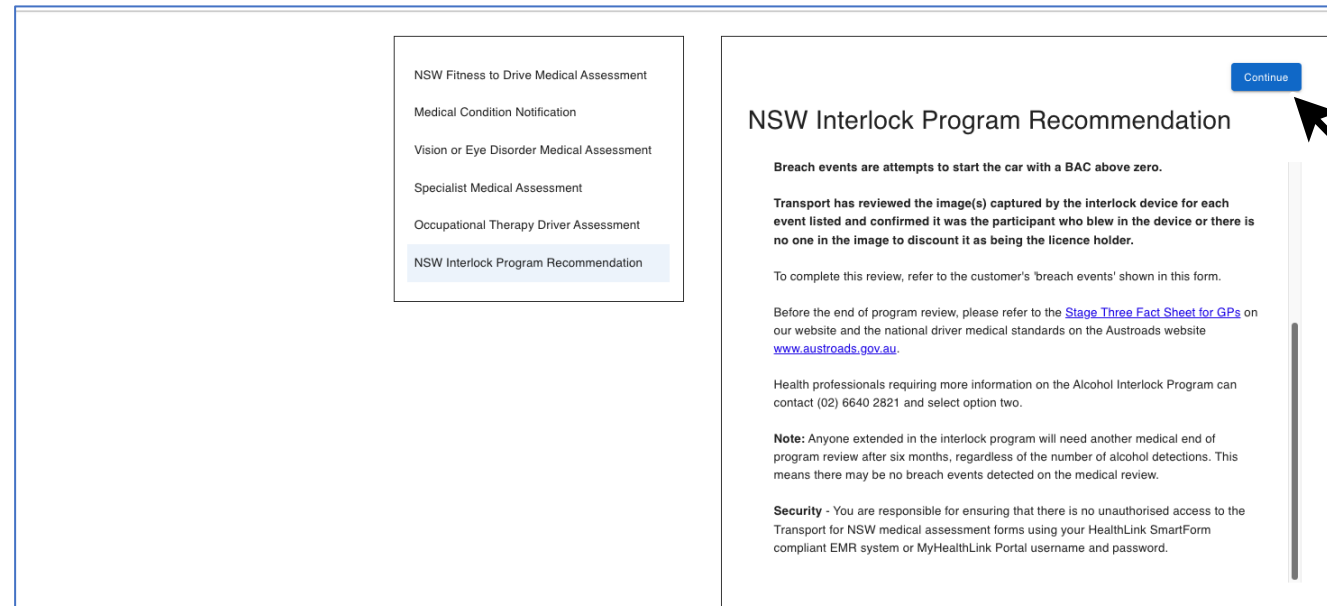
For use by **Medical Practitioners** when reviewing Alcohol Interlock Program participants nearing the end of their program

C

This screenshot shows a list of medical assessment forms. The 'NSW Interlock Program Recommendation' form is highlighted. A callout box with an arrow points to this form, containing text that specifies its use for medical practitioners reviewing participants near the end of their program. A small orange circle with the letter 'C' is positioned below the callout box.

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 Interlock Program Recommendation

### NSW Interlock Program Recommendation

**Breach events are attempts to start the car with a BAC above zero.**

Transport has reviewed the image(s) captured by the interlock device for each event listed and confirmed it was the participant who blew in the device or there is no one in the image to discount it as being the licence holder.

To complete this review, refer to the customer's 'breach events' shown in this form.

Before the end of program review, please refer to the [Stage Three Fact Sheet for GPs](#) on our website and the national driver medical standards on the Austroads website [www.austroads.gov.au](http://www.austroads.gov.au).

Health professionals requiring more information on the Alcohol Interlock Program can contact (02) 6640 2821 and select option two.

**Note:** Anyone extended in the interlock program will need another medical end of program review after six months, regardless of the number of alcohol detections. This means there may be no breach events detected on the medical review.

**Security** - You are responsible for ensuring that there is no unauthorised access to the Transport for NSW medical assessment forms using your HealthLink SmartForm compliant EMR system or MyHealthLink Portal username and password.

Continue

D

This screenshot shows the 'NSW Interlock Program Recommendation' form. On the left is a list of form options, with the current form selected. The main content area contains detailed information about breach events, including a definition, a note about image review, instructions on how to complete the review, contact information for health professionals, and a note about program review timelines. A 'Security' section is also present. A blue 'Continue' button is located in the top right corner of the form content area. A small orange circle with the letter 'D' is positioned to the right of the 'Continue' button.

## Step 3: Interlock Program Recommendation 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 with the recommendation.

NSW GOVERNMENT

### NSW Interlock Program Recommendation - Transport for NSW

**Interlock Program Recommendation Information Required**

**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 surname \*       Patient consent obtained \*      [Validate / Retrieve](#)

**Current medical assessment information**

Name      Address

Date of birth

Licence number

Licence class

Field of Practice \*      General Practitioner

Reason for medical

**Assessing Fitness to Drive**

Please refer to the [Assessing Fitness to Drive](#) document for more information.

[Close](#)

**Recipient / Referrer**  
Brett Mitchell

Name

Date of birth

Licence number

Licence class


Field of Practice \*      General Practitioner

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


[Continue with Recommendation](#)


## Step 3: Interlock Program Recommendation Completing the form


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



### NSW Interlock Program Recommendation - Transport for NSW


Interlock Program Recommendation Information Required 

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


Recipient / Referrer 


**Patient Information**


Medicare number

**Date of birth\***    
Required

Pension number

**Name:** 

**First name\***  **Last name\*** 

**Residential Address:** No address specified  
*Please add only the following State or Territory codes, ACT, NSW, NT, QLD, SA, TAS, VIC, WA in the State field* 

**Address line 1\***

Address line 2

Suburb

**State\***

Postcode

**Postal Address**  
Same as residential  
 Yes  No

©HealthLink

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## Step 3: Interlock Program Recommendation Completing the form

### Recipient / Referrer

**D** 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.

NSW GOVERNMENT

NSW Interlock Program Recommendation - Transport for NSW

Submit Preview Park Help

Interlock Program Recommendation Information Required

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

Recipient / Referrer

Recipient

Referral number  
RMS-5003216

Medical Practitioner Information

Medicare Provider Number \*  
Medical Registration Number

Full Name:

Name

First name \*  
Last name \*

Practice name \*



Practice Address:

Address line 1 \*  
Address line 2

## Step 4: Interlock Program Recommendation Previewing, Submitting and Parking

### Previewing

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




Submit Preview Park Help

### NSW Interlock Program Recommendation - Transport for NSW

06-04-2026 14:39:46	Initial Test Failed High BAC	0.067
03-04-2026 09:19:34	Initial Test Failed	0.045
01-04-2026 07:51:15	Retest Failed	0.034
01-04-2026 04:28:45	Initial Test Failed	0.031


**Interlock Program Recommendation**  
Licence class: C  
Medical standard: Private  
Ready to Submit

Patient Information

Recipient / Referrer 


**TREATMENT HISTORY**  
How long have you treated the patient? \*

First Visit  
 12 months or less  
 1 to 5 years  
 5 years or more


Did you have any knowledge of the patient's medical history before undertaking this assessment? \*   Yes  No

**RECOMMENDATIONS\***


Meets the medical criteria for a conditional licence and should continue to be monitored by an alcohol interlock device - **Extend or Re-enter** the Alcohol Interlock Program  
 Meets the medical criteria for an unconditional licence - **Exit or Not Re-enter** the Alcohol Interlock Program

 NOTE: Alcohol interlock device no longer a requirement to be installed in a vehicle.

**DECLARATION**

I have reviewed all of the verified breach events \*  
 Applicant declaration read and accepted. \* 

Patients should be given a copy of their review, as it includes a privacy statement relevant to them. This can be provided by printing the form, emailing to them or they can obtain a copy on application from a Service NSW Centre.

Goto Error: 

< Previous Current Next >

## Step 4: Interlock Program Recommendation 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.

Submit Preview Park Help

B



**NSW Interlock Program Recommendation - Transport for NSW**

**Interlock Program Recommendation**  
Licence class: C  
Medical standard: Private  
Ready to Submit

---

**Patient Information**

10/10/1980

---

**Recipient / Referrer** ⚠

---

Goto Error:

< Previous
Current
Next >

⚠ Please fix the following errors:

**Recipient / Referrer**

- Medicare Provider Number is a required field

Driver Licence Verification ▼

**VERIFIED BREACH EVENTS**

⚠ The breach events listed below have been verified by Transport for NSW as being attributable to the customer. If any manual adjustments have been made, the patient will provide an amended letter.

As at 8 May 2026

Verified Breach Events		
Date / Time	Recorded Event	Blood Alcohol Concentration (BAC)
01-05-2026 19:36:04	Initial Test Failed High BAC	0.147
25-04-2026 22:47:31	Retest Failed High BAC	0.067
25-04-2026 18:37:29	Initial Test Failed High BAC	0.098

D

## Step 4: Interlock Program Recommendation 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

**NSW GOVERNMENT**

Interlock Program Recommendation  
Licence class: C  
Medical standard: Private  
Ready to Submit

Patient Information

Recipient / Referrer  
362649

Referral number: RMS-500

Medical Practice  
Medicare Provider Number: 362649

Full Name: Name: Brett  
First name: Brett

Practice name: Furious Five

Goto Error: Address: 4/69 e

**Preview** [Print] [Submit] [Close]

**The responsibility for issuing, renewing (or refusing to issue or renew), suspending or cancelling a person's licence lies with Transport for NSW. Licensing decisions are based on a full consideration of relevant factors relating to health and driving performance. The end of program review information captured below will be considered by Transport and you will be sent a letter confirming your exit or continuation in the Alcohol Interlock Program.**

**Assessment Statement**  
This assessment has been completed in accordance with 'Assessing Fitness to Drive'. The standards can be viewed at <https://www.austroads.gov.au>

**Privacy Statement**  
We are collecting your personal information in connection with your Alcohol Interlock Program end of program review. We may retain, use and disclose your personal information in connection with verifying your identity and your end of program review. We will not otherwise disclose your personal information unless authorised by law. Providing this information is voluntary but we will not be able to complete your review unless you provide it. Your personal information will be held and managed by Transport for NSW in accordance with the Privacy and Personal Information Protection Act 1998. To access or amend your personal information please use the access and amendment application forms available at [transport.nsw.gov.au/about-us/transport-privacy](https://transport.nsw.gov.au/about-us/transport-privacy).

**NSW Interlock Program Recommendation - Transport for NSW**

**Patient:** s. DOB 10/10/1980.

**Residential address:** 88 EBLEY STREET, BONDI JUNCTION, NSW 2022

**Referred by:** Brett Mitchell, Furious Five Psych, Prov. No. 362649, PH +61 04 17728660

**Referral date:** 12/05/2026 11:27 Pacific/Auckland

**Medical Assessment Information**

**Driver Licence Verification**

**Driver licence number:** 69178693  
**MAIP participant number:** 362649

## Step 4: Interlock Program Recommendation Submitting

### 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**.

There are three submission response outcomes:

1. **Straight through processing: successfully received by Transport for NSW. The data has been processed automatically and the licence record updated.**
2. **Manual processing required by Transport for NSW: successfully received by Transport for NSW and the data will be processed manually.**
3. **Technical issue: successfully received by Transport for NSW, but there was an issue with automatic processing at Transport for NSW. Transport for NSW will manually process the data.**

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

The image displays three sequential screenshots of a web form titled 'Submitted'. At the top right of the form, there are three buttons: 'Print', 'Submit', and 'Close'. An orange box highlights the 'Submit' button, with an arrow pointing to a circular callout 'G'. Another arrow points from a circular callout 'H' to the top left of the form. The form content is divided into three numbered sections:

- 1:** Shows a 'Form sent on 23/04/2026 11:23 AEDT' timestamp. The main text reads: 'NSW Interlock Program Recommendation Summary. Recommendation received by Transport and your records have been updated. You will receive a letter about your participation in the Alcohol Interlock Program. For any enquiries please contact Service NSW on 13 22 13'. A red warning message at the bottom states: 'The responsibility for issuing, renewing (or refusing to issue or renew), suspending or cancelling a person's licence lies with Transport for NSW. Licensing decisions are based on a full consideration of relevant factors relating to health and driving performance. The end of program review information captured below will be considered by Transport and you will be sent a letter confirming your exit or continuation in the Alcohol Interlock Program.'
- 2:** Shows the same timestamp. The main text reads: 'NSW Interlock Program Recommendation Summary. Recommendation has been forwarded to Transport for processing. You will receive a letter about your participation in the Alcohol Interlock Program. For any enquiries please contact Service NSW on 13 22 13'. The red warning message is identical to the first screenshot.
- 3:** Shows the same timestamp. The main text reads: 'NSW Interlock Program Recommendation Summary. Recommendation received by Transport - Results pending. You will receive a letter about your participation in the Alcohol Interlock Program. For any enquiries please contact Service NSW on 13 22 13'. The red warning message is identical to the first screenshot.

## Step 5:

# Accessing parked and auto-saved forms

**A** To access parked or auto-saved forms, from the patient's record, select **HealthLink Forms** under the **View** menu.

**B** From the available list, **double-click on the Parked or AutoSaved** form you would like to open.

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

**C** You can also use this area to see **completed and deleted** forms.

The screenshot shows the HealthLink software interface for a patient named 'Mr Patient Test'. The 'View' menu is open, and 'HealthLink Forms' is highlighted with a blue bar and a red circle 'A'. The patient's personal information, including name, address, Medicare number, and blood group, is visible on the left. The right side of the screen shows a 'Reason' section with several green alerts: 'There are 2 outstanding requests for this patient!', 'Influenza vaccination should be considered!', 'Vaccination against pneumococcus should be considered!', 'Vaccination against shingles should be considered!', 'A smoking history should be recorded!', and 'A Health Assessment should be considered!'. Below the menu, there is a table of visit records with columns for Date, Doctor, Reason, Visit type, Start, Duration, and Rev.

The screenshot shows a list of forms in the HealthLink software. The list has columns for Created Date, Patient, Subject, Provider, Addressee, Location, Status, and Message ID. A red circle 'B' highlights the 'Parked' status in the 'Status' column for the fourth row. A red circle 'C' highlights the 'Completed' and 'Deleted' statuses in the 'Status' column for the first three rows. The list contains 9 rows of data, each representing a different patient and location.

Created Date	Patient	Subject	Provider	Addressee	Location	Status	Message ID
dd/mm/yyyy	Patient Name 1	Referral 1	Dr Name 1	Addressee 1	Location 1	Completed	MAC-0001
dd/mm/yyyy	Patient Name 2	Referral 2	Dr Name 2	Addressee 2	Location 2	AutoSaved	MAC-0002
dd/mm/yyyy	Patient Name 3	Referral 3	Dr Name 3	Addressee 3	Location 3	Deleted	MAC-0003
dd/mm/yyyy	Patient Name 4	Referral 4	Dr Name 4	Addressee 4	Location 4	Parked	MAC-0004
dd/mm/yyyy	Patient Name 5	Referral 5	Dr Name 5	Addressee 5	Location 5	Completed	MAC-0005
dd/mm/yyyy	Patient Name 6	Referral 6	Dr Name 6	Addressee 6	Location 6	Deleted	MAC-0006
dd/mm/yyyy	Patient Name 7	Referral 7	Dr Name 7	Addressee 7	Location 7	Completed	MAC-0007
dd/mm/yyyy	Patient Name 8	Referral 8	Dr Name 8	Addressee 8	Location 8	Parked	MAC-0008
dd/mm/yyyy	Patient Name 9	Referral 9	Dr Name 9	Addressee 9	Location 9	Deleted	MAC-0009

## Step 6: Accessing submitted forms

- A** A copy of the submitted form can be found in the **Correspondence Out** section of the clinical record for the patient. You can use the **F5** key to refresh this section.
- B** To view a submitted or saved/parked messages in the Correspondence Out section, highlight the message,
- C** Then click **View** and it will display the form.

The screenshot displays a medical software interface for a patient named Patty Smith. The top section shows patient details such as name, address, date of birth, age, sex, and Medicare number. Below this is a table of notifications with columns for Type, Due date, and Reason. A red banner indicates 'There are unchecked reports for this patient!'. The left sidebar contains a navigation tree with categories like 'Today's notes', 'Past visits', 'Current Rx', 'Past history', 'Immunisations', 'Investigation reports', 'Correspondence In', 'Correspondence Out', 'Past prescriptions', 'Observations', 'Family/Social history', 'Clinical images', 'Obstetric history', 'Cervical screening', and 'Enhanced Primary Care'. The 'Correspondence Out' section is expanded, showing a list of messages. One message from 'wemihosp - Wentbee Mercy Hospital' dated 28/10/2022 is highlighted. A 'View' button is visible next to it. The main content area shows the details of the selected message, titled 'Form sent on 16/07/2025 10:37 Australia/Sydney'. It includes an 'Assessment Summary' section with a report forwarded to Transport for NSW, an 'Assessment Statement' section with a link to standards, and a 'Privacy Statement' section. A 'View' button is also present at the top of the message details pane.

## Helpdesk

Phone: 1800 125 036

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

Monday to Friday (Except Public Holidays)

8:00am – 6:00pm

[www.healthlink.com.au](http://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.