



**Central Referral Service**

**GUIDELINES FOR IMPORTING  
REFERRAL TEMPLATES INTO  
BEST PRACTICE**



## BEST PRACTICE

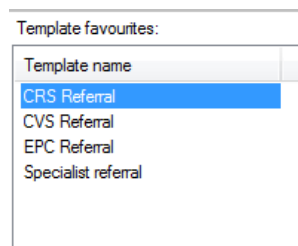
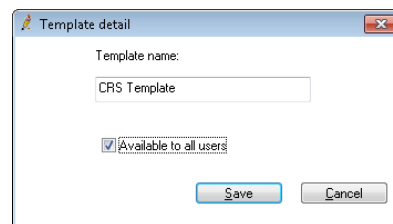
### Installing the templates

1. Go to the **CRS** website  
(<http://www.gp.health.wa.gov.au/CPAC/referral/templates.cfm>)
  - a. Click *CRS Adult Referral v1-1*
  - b. Select *Save As*
    - i. Save to the desktop
  - c. Select *Open folder* from the yellow prompt at the bottom of the screen



**NB: Do not select *OPEN* this will corrupt the merge fields for this template**

2. Open **Best Practice**
3. Open the *Word Processor*
4. Select *Templates*; Select *Import*; Select *CRS\_Adult(BPS)\_v1-1.rtf* from the save location (the desktop)
5. Check Page settings
  - a. *A4 Size*
  - b. All Margins are *10mm*
6. Select *Save Icon*
  - a. Enter the *Template Name*  
**CRS Adult Referral**
  - b. Select the *Available to all users* tickbox
  - c. Click *Save*
7. Repeat steps 1-6 for **CRS Obstetric & Gynaecology Referral** & **CRS Paediatric Referral**
8. Setup *Favourites List* (to be completed for each User)
  - a. Click the *Add Button* below the *favourites* (bottom left-hand of screen)
  - b. Select the **CRS Adult Referral** from the custom list; Select *Add*
  - c. The *CRS template* has been added to this users favourites
9. Repeat step 8 for each user and each template to be added to the favourites list



**(NB: you will need to login as each user to setup the Favourites list ONLY)**



### Creating the Contact for CRS

1. Select *View*; Select *Contacts*
2. Click *Add New*
3. Enter the following details into the **Contacts record**
  - a. Select *Company/Institution*
  - b. Enter *Name*: **Central Referral Service**
  - c. Select *Category*: **Government Department**
  - d. Add *Address*:

Address line 1:   
Address line 2:   
City/Suburb:   
Postcode:   
Phone:  Fax:   
Health Identifier:  ...  
 Accepts CDA eReferrals

- i. *Suburb*: **Perth**
- ii. *Postcode*: **6000**
- iii. Click *accepts CDA e referrals* (circled in red)
- iv. Click *Save* (circled in orange)

Individual  Company/Institution  
Title:  First name:   
Name:    
Greeting:   
Category:   
Addresses:  

Address	Phone	Fax
Perth, 6000.		

  
Mobile phone:  Pager:  A/H phone:   
Provider No.:  Health Identifier:   
PKI key ID:   Skype:   
E-mail:  Web site:   
Messaging provider:  Account ID: (if applicable)   
Comment:   
 Is an operating facility

- e. Select *Messaging Provider*: **Healthlink** (circled in red)
- f. Enter *Account ID*: **crefserv** (circled in orange)
- g. Click *Save* (circled in green)

