

# **Transfer of Care in BloodSTAR**

BloodSTAR allows both Medical Officers and Nurses to transfer a patient's care from one Treating Medical Specialist to another or to transfer the patient's care to another facility. This can be due to a number of reasons including a patient relocating to another area or transferring to another Medical Officer with a different specialty.

#### How do I transfer the care of my patient to another Medical Officer?

1. Select the patient you wish to transfer from your patient list on the home page by clicking on either their name or authorisation number.

| Medical C   | all (NBA) - Medical  | Officer @ The 1  | Townsville Hospital  | [Change Role] N    | ly Account 👻   |                                |                  | BloodPortal   L                            |
|---|--|--|--|--------------------|--|--------------------------------|------------------|--|
| <b>LOO</b>  | DSTAF  | Home   | e Patients <del>-</del>  | Authorisation Requ | uests 👻 Treatment 👻                                    | BloodSTAF                      | R Messages       |  |
| ly Authorised Pati  |  |  | Requests   |                    |  |                                |                  |  |
| _   |  |  |  |                    |  |                                |                  |  |
| Show patients<br>Treating Medic   |  |  |  |                    |  | +1                             | New Initial Auti | horisation Request                         |
| Requesting Me   |  |  | Click on the   | nationt's nam      | o or Authorizatio                                      |                                | ~~               |  |
| Diagnosing Me Verified Diagno   | osis Medical Office  |  | Click on the   | patient's nan      | ne or Authorisatio                                     | n numb                         | er               |  |
|   |  |  |  |                    |  |                                |                  |  |
| Patient   | Date   | of Birth In  | reating Facility   | Patient ID         | Medical Condition                                      |                                | End Date         | Authorisation                              |
| VHITESOCKS, Mr  | Eddy 26-M  | ay-1973 Th   | he Townsville Hospit   | tal                | Guillain-Barré syndrome                                | (GBS)                          | 05-Aug-2016      | Q PT633555                                 |
| ia a 1 i  | н 10   | • items per  | page   |                    |  |                                |                  | 1 - 1 of 1 items                           |
| me Lyndsay Wal  | STAR   | Home   | s Base Hospital [Cha<br>Patlents -<br>ase Hospital   | Treatment 🗸        | ccount +   |                                |                  | BloodPortal   L                            |
| horised P   | STAR   | Home<br>Cairns Ba  | Patients -   | Treatment -        |  | ation Number                   |                  |  |
| me Lyndsay Wal<br>LOOI<br>horised P<br>arch   | <b>DSTAR</b><br>atients at 0   | Home<br>Cairns Ba  | Patients •   | Treatment 👻        |  | ation Number                   | Pending F        |  |
| me Lyndsay Wal<br>LOOI<br>horised P<br>arch<br>en Name  | <b>DSTAR</b><br>atients at 0   | Home<br>Cairns Ba<br>ame   | Patients +<br>ase Hospital<br>Date of Birth  | URN                |  |                                |                  |  |
| me Lyndsay Wal<br>LOOOI<br>horised P<br>arch<br>en Name                                       | T(NBA) - Nurse/M   | Home<br>Cairns Ba<br>ame   | Patients +<br>ase Hospital<br>Date of Birth  | URN                | Authorisa  | nt's name                      | e .              |  |
| me Lyndsay Wal<br>LOOI<br>horised P<br>arch<br>en Name<br>w patients wher<br>Administering fa | Family Na<br>e Cairns Base Hors<br>cality (where pro   | Home<br>Cairns Ba<br>ame<br>spital is nomina<br>duct will be giv   | Patients +<br>ase Hospital<br>Date of Birth  | URN                | Authorisa  | nt's name                      | e .              | Review                                     |
| thorised P<br>arch<br>en Name   | Family Na<br>e Cairns Base Hors<br>cality (where pro   | Home<br>Cairns Ba<br>ame<br>spital is nomina<br>duct will be giv   | Patients -<br>ase Hospital<br>Date of Birth  | URN                | Authorisa  | nt's name                      | e .              | Review                                     |
| Treating facility   | Family Narse/M   | Home<br>Cairns Ba<br>ame<br>spital is nomina<br>duct will be giv   | Patients -<br>ase Hospital<br>Date of Birth<br>ated as the:<br>ren or infused)<br>I and clinically revie   | URN                | Authorisa<br>Click on the patier<br>or Authorisation n | nt's name                      | e s              | Review<br>Search Clear                     |
| Treating facility   | Family Na<br>e Cairns Base Hors<br>cality (where pro   | Home<br>Cairns Ba<br>ame<br>spital is nomina<br>duct will be giv<br>nt is diagnosed<br>Dose<br>Maintenance | Patients -<br>ase Hospital<br>Date of Birth<br>Date d Birth<br>ated as the:<br>ren or infused)<br>and clinically review<br>and clinically review<br>to bose - Ca             | URN                | Authorisa  | nt's name<br>number            | e s              | Review<br>search Clear<br>ding Request Dos |
| thorised P<br>arch<br>waren Name  | Family Na<br>Constants at Constant<br>Family Na<br>Constants at Constant<br>Family Na<br>Constants at Constant<br>Constants at Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Constant<br>Cons | Home<br>Cairns Ba<br>ame<br>spital is nomina<br>duct will be giv<br>nt is diagnosed                        | Patients -<br>ase Hospital<br>Date of Birth<br>Date of Birth<br>ated as the:<br>ren or infused)<br>I and clinically review<br>and clinically review<br>Dose -<br>33.00 grams | URN                | Authorisa<br>Click on the patier<br>or Authorisation m | t's name<br>number<br>End Date | e s              | Search Clear                               |

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### If you click on the patient's name:

2. This will open up the details of their current authorisation. Click on "Edit" in the "Current Authorisation" box

| Current Authorisatio   | n                                  |  |                 |                  |
|------------------------|------------------------------------|--|-----------------|------------------|
| Authorisation PT633555 |                                    |  |                 | ⊻                |
| Authorisation Number   | PT633555                           |  |                 |                  |
| Authorisation Date     | 04-Jul-2016                        |  |                 |                  |
| Condition              | Guillain–Barré sy                  | ndrome (GBS)                                     |                 |                  |
| Indication             | GBS and its varia                  | nts with significant disability and progression. |                 |                  |
| Treating Specialist    | Mrs Lyndsay WAI<br>Immunologist NE | .L (NBA)<br>A - The Townsville Hospital          |                 |                  |
| Regimen                | Dose Type                          | Dose   | Infusion Method | Action           |
|                        | Dose                               | INTRAGAM P - 111.00 grams once only.             | Intravenous     | + Request Change |
|                        | + Request Additi                   | onal Dose  |                 |                  |
| Authorisation End Date | 05-Aug-2016                        |  |                 |                  |
| Treating Facility      | The Townsville H                   | ospital  | Click on "Edit" | to transfer care |
| Administering Facility | The Townsville H                   |  |                 |                  |
| Dispensing Facility    | Pathology Queer                    | sland - Townsville Laboratory                    |                 |                  |
|                        | Q View Treatmer                    | <u>it Plan</u>                                   |                 | Edit             |

# If you click on the Authorisation number:

3. This will open up the screen below with the patient's and authorisation details. Click on "Edit" in the "Authorisation details" tab

| Patient Details       |                        |   |  |                 |                    |
|-----------------------|------------------------|---|--|-----------------|--------------------|
|                       | 43 y<br>Date           | Eddy Cat WHITES<br>rear old, Male<br>e of Birth: 26-May<br>Townsville Hospi | -1973  |                 |                    |
| Authorisation Details | Review Outcomes        |   |  |                 |                    |
| A                     | uthorisation Number    | PT63355S  |  |                 |                    |
|                       | Approval Date          | 04-Jul-2016   |  |                 |                    |
|                       | Condition              | Guillain-Barré  | syndrome (GBS)                                   |                 |                    |
|                       | Indication             | GBS and its var   | ants with significant disability and progression |                 |                    |
|                       | Treating Specialist    | Mrs Lyndsay W.<br>Immunologist N  | ALL (NBA)<br>IBA - The Townsville Hospital       |                 |                    |
|                       | Regimen                | Dose Type   | Dose   | Infusion Method | Action             |
|                       |                        | Dose  | INTRAGAM P - 111.00 grams once only.             | Intravenous     | + Request Change   |
|                       |                        | + Request Addi  | tional Dose                                      |                 |                    |
| Au                    | thorisation End Date   | 05-Aug-2016   |  |                 |                    |
|                       | Treating Facility      | The Townsville  | Hospital   | Click on "Edit" | ' to transfer care |
| ,                     | Administering Facility | The Townsville  |  | click off Edit  | to transfer care   |
|                       | Dispensing Facility    | Pathology Quee  | ensland - Townsville Laboratory                  |                 | Edit               |

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## 4. In the new screen select "Change Treating Medical Specialist"

| Patient and Authorisation  |   |  |
|--|---|--|
| Patient  | Mr Eddy Cat WHITESOCKS  |  |
|  | 43 year old, Male   |  |
| Date of Birth  | 26-May-1973   |  |
| Authorisation Number   | PT633555  |  |
| Medical Condition  | Guillain-Barré syndrome (GBS)   |  |
| Specific Condition   | Guillain-Barré syndrome 4   | Click on "Change Treating Medical                      |
| Indication   | GBS and its variants with significant disability and progression.   | Specialist" to transfer care                           |
|  | Z <u>View Criteria</u>  |  |
|  |   |  |
| Treating Medical Specialist  |   | Q Change Treating Medical Specialist                   |
| Name   | Mrs Lyndsay WALL (NBA)  |  |
| Position   | Immunologist NBA - The Townsville Hospital  |  |
| Specialties  | Immunologist  |  |
| If you are not the current Treating Medic<br>notes, as shown below, to inform them o | al Specialist, a message will be sent advising them of the change in Ti<br>If the reason for this change. | reatment Arrangements for this patient. Please include |
| Notes to Treating Medical Specialist   |   |  |
|  | ·   |  |

- 5. Start typing the name of the Medical Officer to whom you are transferring care.
- 6. Select from the drop down list.

| Select Treating Me | dical S | pecialist  | 6 | Start typin  | g the name of the medical<br>whom you are transferring care | ×      |
|--------------------|---------|--|---|--------------|---|--------|
| Search             |         | -  |   | officer to v | whom you are transferring care                              |        |
|                    | Name    | Bens <mark>ON, Dr Jeannie</mark><br>BENSON, Dr Jeannie |   |              | Select from the drop down list                              | ×<br>6 |
|                    |         |  |   |              |   |        |

Cancel



7. Click select against the Medical Officer's name.

Please note they may have a number of roles if working at different treating facilities.

| arch                       |                           |     |                           |   |
|----------------------------|---------------------------|-----|---------------------------|---|
| Name                       | BENSON                    |     |                           |   |
|                            | BENSON, Dr Jeannie        |     |                           |   |
|                            |                           |     |                           |   |
|                            |                           |     |                           |   |
| irch results for Name: BEN | ISON, Dr Jeannie          |     | 7 Click "Select"          |   |
| irch results for Name: BEN | ISON, Dr Jeannie<br>Facil | ity | 7 Click "Select" Position |   |
|                            | Facil                     | ity |                           | ¥ |

8. Write relevant treatment of communication notes to the Medical Specialist about the patient you are transferring, as appropriate.

| Treating Medical Specialist   |   | Q Change Treating Medical Specialist  |  |
|---|---|---|--|
| Name<br>Position<br>Specialties<br>If you are not the current Treating Medic<br>notes, as shown below, to inform them o |   | Write notes to the accepting Medical<br>Officer as appropriate  |  |
| Notes to Treating Medical Specialist  | As discussed on the phone I am transferring the care of<br>Base Hospital. Thank you for accepting this patient. | Mr Eddy Whitesocks, DOB 26 May 1973, to your care at Cairns   |  |
| Treatment Arrangements  |   |   |  |
| Treating Facility *   | QLD - The Townsville Hospital   | •   |  |
| Administering Facility *  | QLD - The Townsville Hospital   | •   |  |
| Dispensing Facility *   | QLD - Pathology Queensland - Townsville Laboratory  | •   |  |
|   |   | ould be deleted before proceeding to ensure the infusion can be<br>benser will need to be notified for the request to be cancelled. |  |
|   |   |   |  |
|   |   | Save  |  |

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9. Change the treating, administering and dispensing facilities from a drop down list or start typing, as appropriate.

**Please note:** It may be that you need to change the facilities the patient has a relationship with in BloodSTAR but not the Treating Medical Specialist so change the fields required on this page before you click Save.

10. Click Save to save your changes.

| Treating Medical Specialist  | Q Change Treating Medic  | cal Speci | <u>alist</u> |
|--|--|-----------|--------------|
| Name   | Dr Jeannie BENSON  |           |              |
| Position   | Haematologist NBA - Cairns Base Hospital   |           |              |
| Specialties  | Haematologist  |           |              |
| If you are not the current Treating Medica<br>notes, as shown below, to inform them of | al Specialist, a message will be sent advising them of the change in Treatment Arrangements for this patient. Plea<br>of the reason for this change.             | ase inclu | je           |
| Notes to Treating Medical Specialist   | As discussed on the phone I am transferring the care of Mr Eddy Whitesocks, DOB 26 May 1973, to your care a Base Hospital. Thank you for accepting this patient. | at Cairns |              |
| Treatment Arrangements   | Change the Treating, administering<br>dispensing facilities as appropriate   |           |              |
| Treating Facility *  | QLD - Cairns Base Hospital   |           | •            |
| Administering Facility *   |  |           |              |
| Hammistering Focinty   | QLD - Cairns Base Hospital   |           | •            |
| Dispensing Facility *  | QLD - Cairns Base Hospital       QLD - Pathology Queensland - Cai  | ×         | •            |
| Dispensing Facility *  | QLD - Pathology Queensland - Cai   | ×         | •            |
| Dispensing Facility * [!] Check that the patient is not included o                     | QLD - Pathology Queensland - Cai   | ×         | •            |