

5. Select **DMMR Referral (Home Medicines Review)** (3).
6. Add an addressee – a **Credentialed Pharmacist** or a **Community Pharmacy**.
Search local Credentialed Pharmacists using [HealthPathways Medication Management Review](#)
7. Insert relevant medications, investigation results, progress notes etc.
8. Complete the **User Defined Fields**. Include **reasons for referral** and select OK.

User Defined Fields ✕

Enter the values for these fields:

Fields

Timing for the Pharmacist to action this Referral:	A.S.A.P. ▼
Reason for referral 1:	▼
Reason for referral 2:	▼
Reason for referral 3:	▼
Medication usually administered by:	him/her self. ▼
Dosing aid, if used, filled by:	▼
Speaks enough English to do the interview:	speaks enough ▼
An interpreter (is/is not) required:	is not ▼
The patients preferred language is:	
Consent to release Medicare/ DVA Number details:	HAS CONSENTED ▼

9. Read through the generated referral and **manually check** any boxes to provide further information, such as issues that may influence medication use, dosing aids and medication administration devices.

Please note: To manually check a box, **backspace the box and press 'X' on the keyboard**. This will add a check box symbol.

10. Free text additional relevant information e.g. details of recent hospital admission, changes in medication regimen, reason for referral not included in pre-selected section.
11. Sign and send the referral to the **Credentialed Pharmacist** or **Community Pharmacy** by chosen secure messaging method.

Creating a HMR / HMR Referral

Medical Director – using a supplied template

GO TO:

PATIENT FILE



NEW LETTER



NEW TEMPLATE



SUPPLIED TEMPLATE



DMMR - Referral (Home Medicines Review)



CREDENTIALLED PHARMACIST or COMMUNITY PHARMACY



Search local Credentialed Pharmacists using [HealthPathways Medication Management Review](#)

DOCTOR (AUTO)



INSERT INVESTIGATION and OBSERVATION RESULTS



ADDITIONAL RELEVANT INFORMATION



SPECIFY REASONS FOR REFERRAL



CHECK, CONSENT and SIGN

