

# DHC IT System

Date: 7 September 2019

Time: 4:30-5:15pm

Venue: Kwai Tsing DHC Core Centre

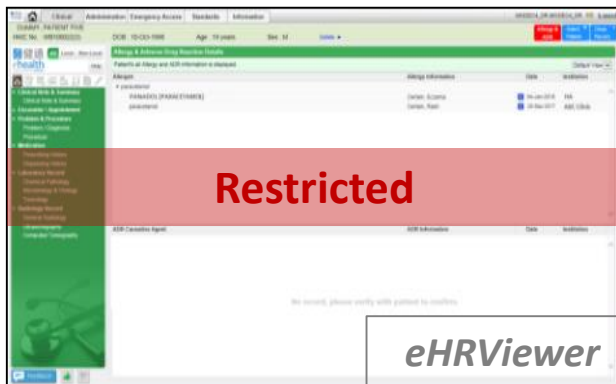
(Level 30, Tower B, Kowloon Commerce Centre, No. 51 Kwai Cheong Road, Kwai Chung, New Territories)





# DHC Induction Course (Session 2)

Time	Topics	Speakers
14:00 – 14:30	Introduction of DHC Scheme	Mr Jimmy WU
14:30 – 16:15	Service guideline and client journey	Dr Wanmie LEUNG DHC Operator
16:15 – 16:30	Break	
16:30 – 17:15	DHC IT system	Ms Connie LAU
17:15– 18:00	Updates on eHRSS	Mr Paul LAM



大腸癌篩查計劃  
Colorectal Cancer Screening Programme

醫療券  
Health Care Voucher



醫健通  
ehealth

NEW

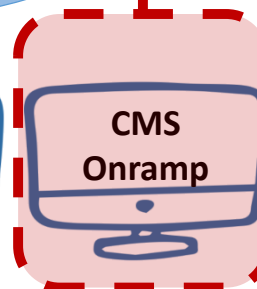
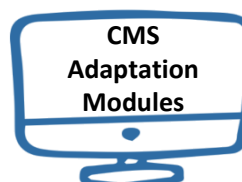
香港特別行政區政府 HKSAR GOVT



葵青地區康健中心  
Kwai Tsing District Health Centre

### DHC IT System

Support DHC core centre and Network HCPs  
to capture program related data & operation



# DHC Operation



Participants

Kwai Tsing  
District Health Centre

DHC Scheme

- 1 Diabetes Mellitus Screening/Management Programme
- 2 Hypertension Screening/Management Programme
- 3 Low Back Pain Programme
- 4 Osteoarthritic Knee Pain Programme
- 5 Fracture Hip Rehabilitation Programme
- 6 Stroke Rehabilitation Programme
- 7 Cardiac Rehabilitation Programme

Programmes



Healthcare  
professional services



Clinical Notes

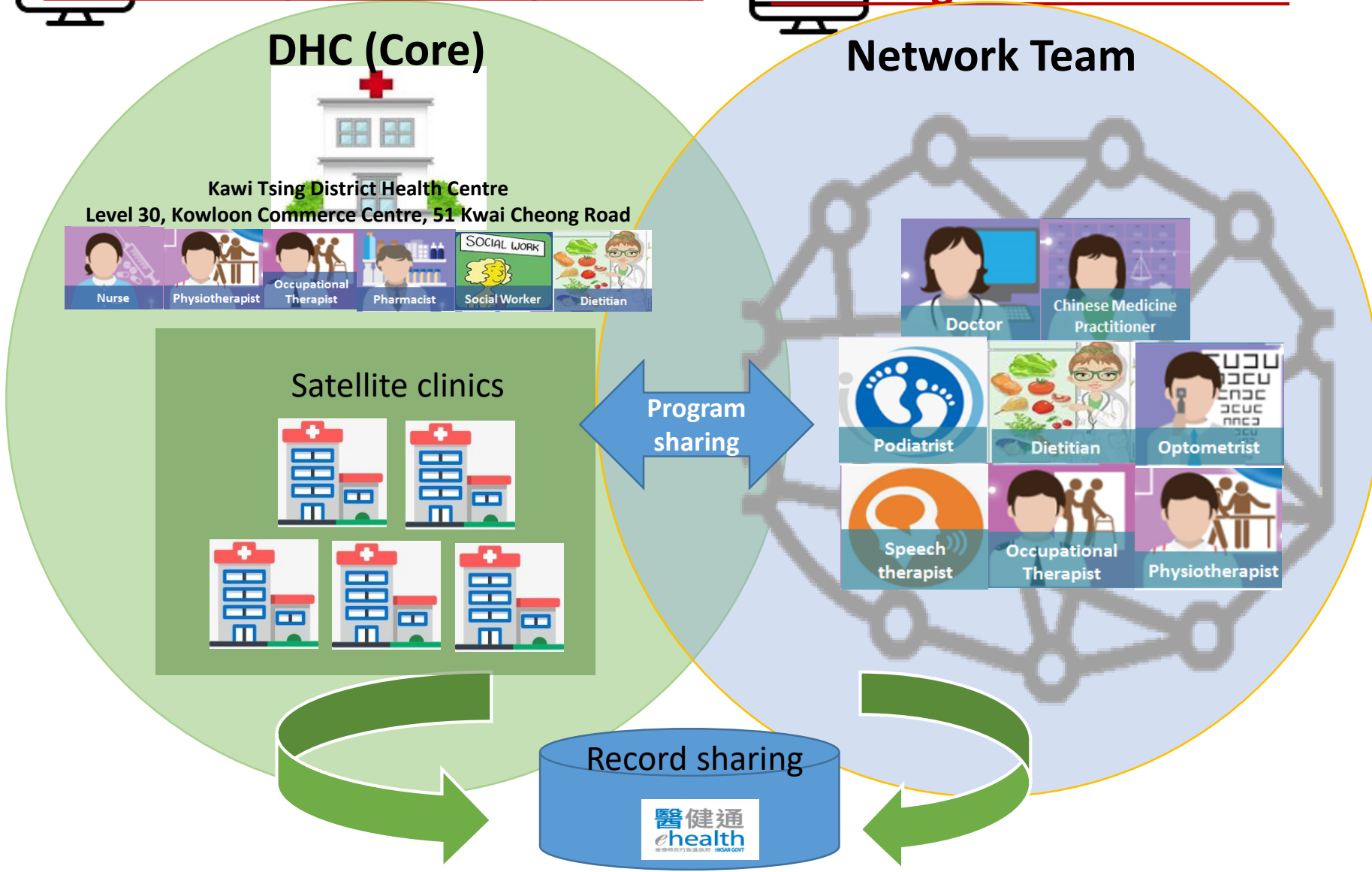
# IT support to DHC Operation



CMS Onramp (extension for DHC)



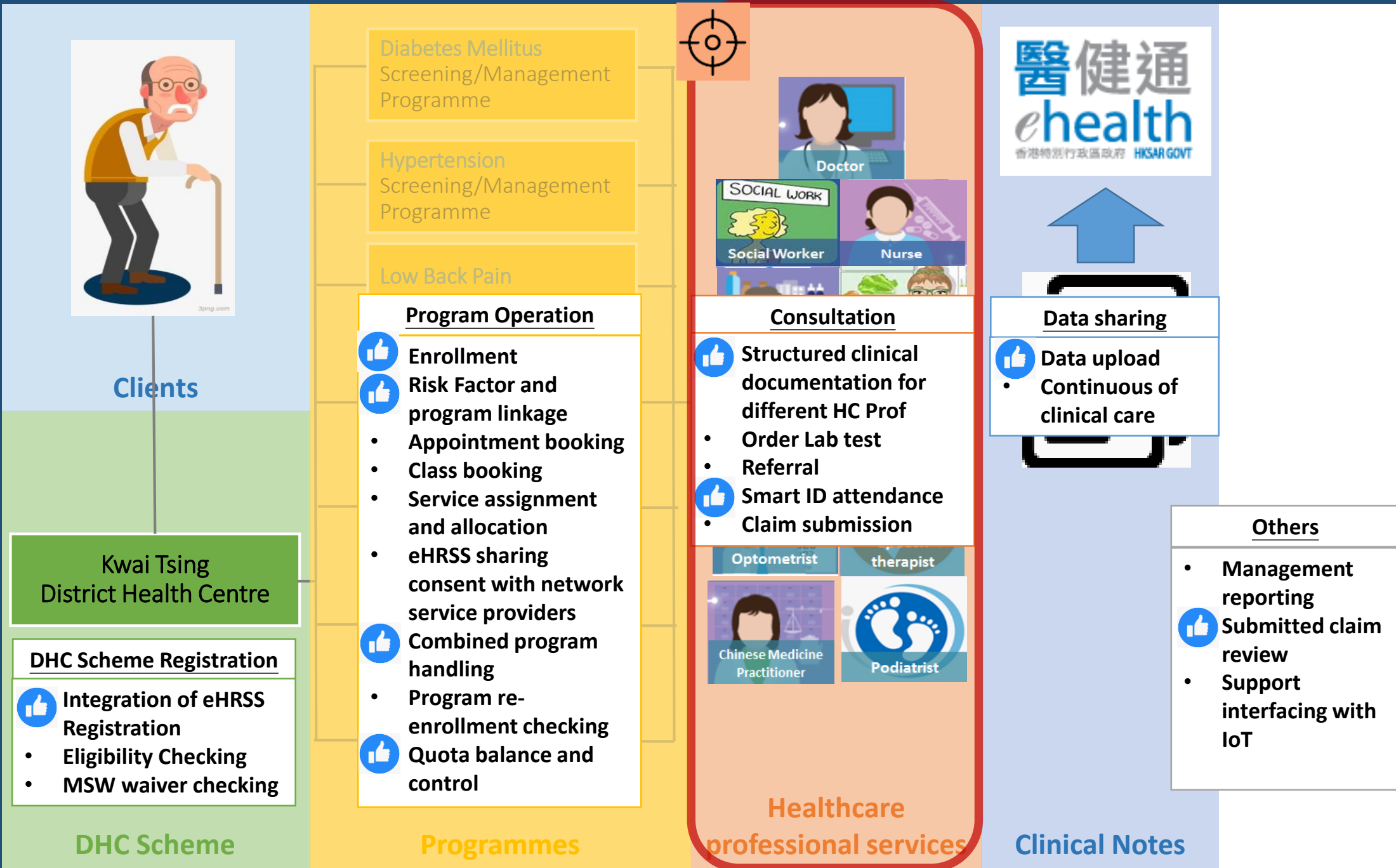
DHC Plug-in in eHRSS core



# Overview on IT support to DHC Operation

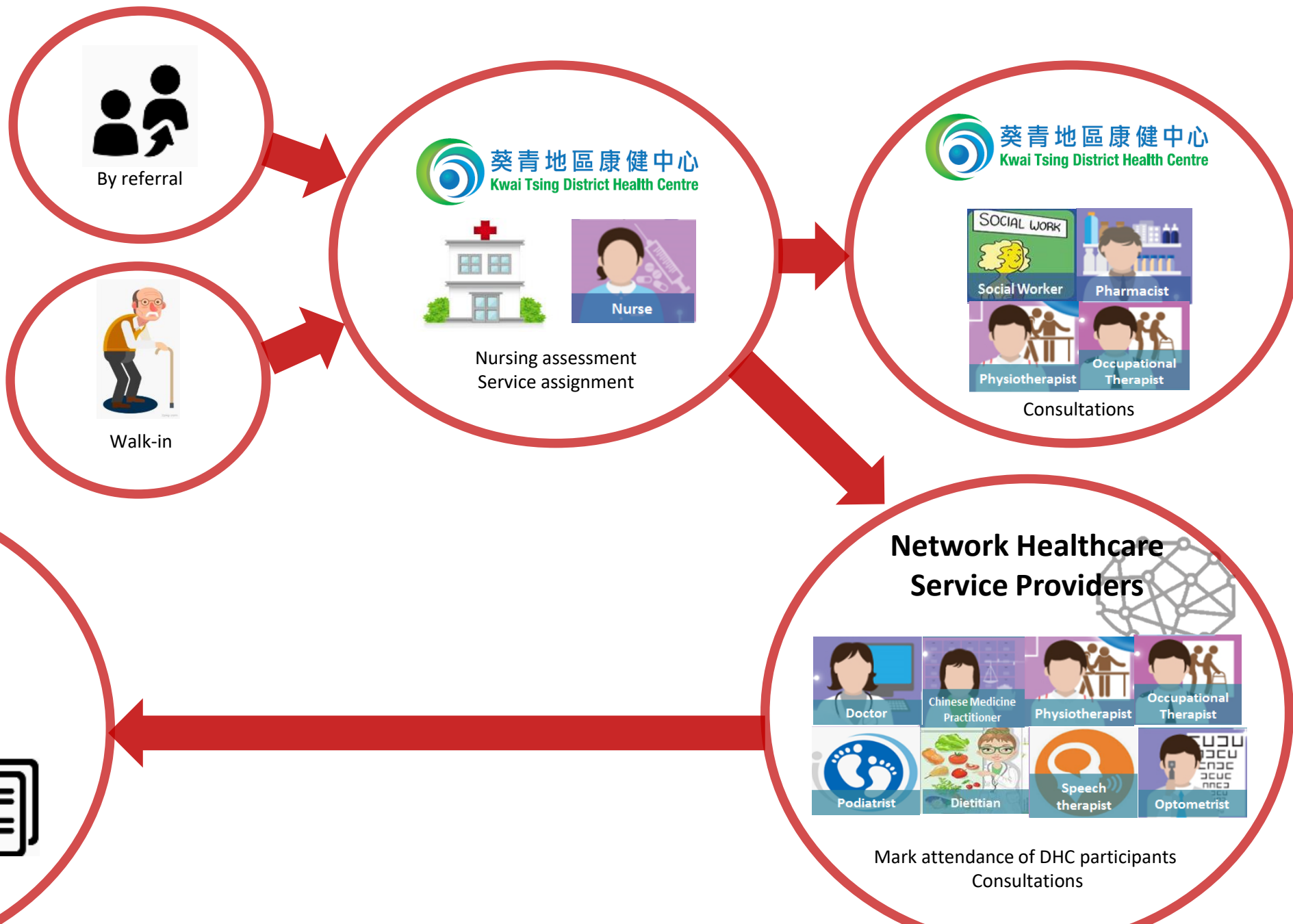


## DHC IT System features highlights



# Illustration on IT system features for Network Team

- Smart ID attendance
- Structured clinical documentation for different healthcare professionals
- Claim submission



General programme workflow



Nursing assessment  
Service assignment

**Restricted**

Search: eHR No. 191000000001, HKIC No. A123456, Document Type HKID Card, Surname CHAN, Given Name CHI WAI, Payment Type General Public, Sex Male, Date of Birth 01-01-1982, Date of Death DD-MM-YYYY.

Contact Info: Contact Person, Referral, Phone (Home), Phone (Mobile), Phone (Office), Phone (Other), Email Address.

Residential Address: Room/Flat, Floor, Block, Building/Street, Sub-district, District, Area.

Correspondence Address: Room/Flat, Floor, Block, Building/Street, Sub-district, District, Area.

Remarks

Buttons: Print Label, Appointment, Connect to other system(s), New Patient, Edit, Save, Cancel.

DHC Member Registration +  
eHRSS Registration integration

**Restricted**

Today: 18-Dec-2018 (Tue). Patient Search: Eric Lo, Peter Chan, Sally Tam.

Appointment History: 10:00, 10:20, 10:40, 11:00.

Status: Booked, Attended, Consultation, Completed, Blocked.

Buttons: Refresh, Select All.

Appointment of Nursing  
Assessment

**Restricted**

Update Allergy / Alert profile

Medical Summary: Background, Past Medical History, Mobility Status, Lifestyle Behaviour.

Past Medical History: Cardiovascular (Hypertension, Stroke), Endocrine / Metabolic (Diabetes Mellitus, Gestational diabetes mellitus, Impaired glucose tolerance, Hyperlipidaemia), Neurological (Parkinson's, History of falls), Musculoskeletal (Osteoarthritis of knee, Osteoarthritis of hip, Lower limb weakness).

Buttons: Confirm, Cancel.

Health Risk Factors Assessment/ clinical documentation

**Intervention List**

**Referral**

- ☐ Refer to Diabetes Mellitus Screening/Management Programme
- ☐ Refer to Hypertension Screening/Management Programme
- ☐ Refer to Low Back Pain Programme
- ☐ Refer to Osteoarthritic Knee Programme
- ☐ Refer to Cardiac Rehabilitation Programme
- ☐ Refer to Fracture Hip Rehabilitation Programme
- ☐ Refer to Stroke Rehabilitation Programme
- ☐ Refer to Fall Prevention Programme
- ☐ Refer to Weight Reduction Programme
- ☐ Refer to Diabetes Prevention Programme
- ☐ Refer to Hypertension Prevention Programme
- ☐ Refer to PEP
- ☐ Refer to pharmacy service
- ☐ Refer to social service/counselling
- ☐ Refer to other activities

**Lifestyle modification**

- ☐ Alcohol abstinence
- ☐ Diet advice
- ☐ Exercise promotion
- ☐ Smoking cessation

**Assessment**

- ☐ DM foot assessment
- ☐ HT foot assessment
- ☐ Health risk factors assessment

**Education / Review / Others**

- ☐ Education on self-monitoring of blood glucose (SMBG)
- ☐ Education on self-measured BP (SMBP)
- ☐ Insulin injection technique
- ☐ Medication compliance review and advice

**Restricted**

DHC programmes and their service quotas per year	Diabetes Mellitus		Hypertension		Low Back Pain Programme	Osteoarthritic Knee Pain Programme	Fracture Hip Rehabilitation Programme	Stroke Rehabilitation Programme	Cardiac Rehabilitation Programme
	Screening/M anagement Programme	Management for known case	Screening/M anagement Programme	Management for known case					
Medical consultation	2	1	2	1					
Laboratory test	1	1	1	1					
Individualized healthcare professional service quota	6	4	4	4	8	12	8	11	8
Physiotherapy Service	✓		✓		✓	✓	✓	✓	✓
Occupational Therapy Service	✓		✓		✓	✓	✓	✓	✓
Dietetic Service	✓		✓		✓	✓	✓	✓	✓
Speech Therapy Service								✓	
Chinese Medicine Service					✓	✓		✓	
Optometry Service	✓		✓						
Podiatry Service	✓		✓						
Nurse Counselling/ Coordination	✓		✓		✓	✓	✓	✓	✓
Drug Review and Counselling by Pharmacist	✓		✓		✓	✓	✓	✓	✓
Community Resource Support/Counselling by Social Worker	✓		✓		✓	✓	✓	✓	✓





Nursing assessment  
Service assignment



## Network Healthcare Service Providers



  Clinical Administration Emergency Access Standards Information

### District Health Centre (DHC) Service

**DHC Participant Management** Utilities Reporting



DHC Participant Management > Programme Enrollment

#### DHC Participant Information

HKIC	E559990(7)
Name	WONG, PO YAN
Date of Birth	09-Sep-1959 (59 years old)
Sex	F

#### DHC Programme Information

Programme *	Stroke Rehabilitation Programme
Referral Source *	Hospital Authority
Referral by *	Princess Margaret Hospital
Referred by Specialty *	Internal Medicine

  Clinical Administration Emergency Access Standards Information

### District Health Centre (DHC) Service

**DHC Participant Management** Utilities Reporting

DHC Participant Management > Service Assignment

#### DHC Participant Information



HKIC	E559990(7)
Name	WONG, PO YAN
Date of Birth	09-Sep-1959 (59 years old)
Sex	F

#### DHC Programme Information

Programme	Stroke Rehabilitation Programme
Assignment Type	Individual Service
Total Programme Quota	11

Service	Healthcare Professional	First Appt. Date	Time	Atn Quota/Resv Quota
<input type="checkbox"/> Nursing Service	Please select	dd-MMM-yyyy	HH:mm	- / -
<input type="checkbox"/> Community Resource Support/Counselling	Please select	dd-MMM-yyyy	HH:mm	- / -
<input type="checkbox"/> Pharmacy Service	Please select	dd-MMM-yyyy	HH:mm	- / -
<input checked="" type="checkbox"/> Physiotherapy (\$)	Please select	dd-MMM-yyyy	HH:mm	0 / 1
<input checked="" type="checkbox"/> Dietetic Service (\$)	Please select	dd-MMM-yyyy	HH:mm	0 / 1
<input checked="" type="checkbox"/> Occupational Therapy (\$)	Please select	dd-MMM-yyyy	HH:mm	0 / 1
<input checked="" type="checkbox"/> Speech Therapy (\$)	Please select	dd-MMM-yyyy	HH:mm	0 / 1
<input type="checkbox"/> CM (Acu-puncture/pressure) (\$)	Please select	dd-MMM-yyyy	HH:mm	0 / 1

[Save](#) [Back](#)

### 物理治療服務預約便條

#### Appointment Slip for Physiotherapy

服務使用者資料	Participant Particulars
姓名: 黃寶欣	Name: WONG, PO YAN
性別: 女	Gender: F
身份證號碼: E55XXX0(7)	HKIC No: E55XXX0(7)

請攜同香港身份證及此預約便條到以下地點接受服務。  
Please bring along HKID card and this appointment slip to the following location for healthcare service.

服務地點: 營養企業中心  
Address: Kwai Tsing Road 123A  
電話: 23001234  
開放時間: 星期一至星期五 14:44至03:33

預約日期: 2019 年 8 月 31 日 上午 11 時 00 分  
Appointment Date: Year Month Day AM Hour Minute

Remarks:

如對服務有任何疑問，請致電 25572557 向地區康健中心職員查詢。  
Please contact DHC staff at 25572557 for any enquiries on service.



## Network Healthcare Service Providers



**葵青地區康健中心**  
Kwai Tsing District Health Centre

**職業治療服務預約便條**  
Appointment Slip for Occupational Therapy

服務使用者資料  
姓名: 黃耀欣  
性別: 女  
身份證號碼: E55XXXX(7)

Participant Particulars  
Name: WONG, PO YAN  
Gender: F  
HKIC No: E55XXXX(7)

請攜同香港身份證及此預約便條到以下地點接受服務。  
Please bring along HKID card and this appointment slip to the following location for healthcare service.

**服務地點**  
物理治療中心  
地址: 葵青區議會大樓  
電話: 23001234

**Service Location**  
Physiotherapy Clinic  
Address: Kwai Tsing Road 123A  
Tel No.: 23001234

**開放時間**  
星期一至星期五: 10:00-15:00

**Opening Hours**  
Monday-Friday 10:00-15:00

**預約日期**  
2019 年 8 月 30 日 下午 2 時 00 分

**Appointment Date**  
2019 Year Month Day PM Hour Minute

**備註:**

**Remarks:**

如遇到任何困難, 請致電 28672857 向葵青區康健中心職員查詢。  
Please contact DHC staff at 28672857 for any enquiries on service.

**葵青地區康健中心**  
Kwai Tsing District Health Centre

**物理治療服務預約便條**  
Appointment Slip for Physiotherapy

服務使用者資料  
姓名: 黃耀欣  
性別: 女  
身份證號碼: E55XXXX(7)

Participant Particulars  
Name: WONG, PO YAN  
Gender: F  
HKIC No: E55XXXX(7)

請攜同香港身份證及此預約便條到以下地點接受服務。  
Please bring along HKID card and this appointment slip to the following location for healthcare service.

**服務地點**  
物理治療中心  
地址: 葵青區議會大樓  
電話: 23001234

**Service Location**  
Physiotherapy Clinic  
Address: Kwai Tsing Road 123A  
Tel No.: 23001234

**開放時間**  
星期一至星期五: 13:45-02:12

**Opening Hours**  
Monday-Friday 13:45-02:12

**預約日期**  
2019 年 8 月 30 日 下午 2 時 00 分

**Appointment Date**  
2019 Year Month Day PM Hour Minute

**備註:**

**Remarks:**

如遇到任何困難, 請致電 28672857 向葵青區康健中心職員查詢。  
Please contact DHC staff at 28672857 for any enquiries on service.

**葵青地區康健中心**  
Kwai Tsing District Health Centre

**中醫藥服務預約便條**  
Appointment Slip for Chinese Medicine - Acupuncture/Acupressure

服務使用者資料  
姓名: 黃耀欣  
性別: 女  
身份證號碼: E55XXXX(7)

Participant Particulars  
Name: WONG, PO YAN  
Gender: F  
HKIC No: E55XXXX(7)

請攜同香港身份證及此預約便條到以下地點接受服務。  
Please bring along HKID card and this appointment slip to the following location for healthcare service.

**服務地點**  
中醫藥中心  
地址: 葵青區議會大樓  
電話: 23001234

**Service Location**  
Chinese Medicine Centre  
Address: Kwai Tsing Road 123A  
Tel No.: 23001234

**開放時間**  
星期一至星期五: 10:00-15:00

**Opening Hours**  
Monday-Friday 10:00-15:00

**預約日期**  
2019 年 8 月 30 日 下午 2 時 00 分

**Appointment Date**  
2019 Year Month Day PM Hour Minute

**備註:**

**Remarks:**

如遇到任何困難, 請致電 28672857 向葵青區康健中心職員查詢。  
Please contact DHC staff at 28672857 for any enquiries on service.

**葵青地區康健中心**  
Kwai Tsing District Health Centre

**營養學服務預約便條**  
Appointment Slip for Dietitian

服務使用者資料  
姓名: 黃耀欣  
性別: 女  
身份證號碼: E55XXXX(7)

Participant Particulars  
Name: WONG, PO YAN  
Gender: F  
HKIC No: E55XXXX(7)

請攜同香港身份證及此預約便條到以下地點接受服務。  
Please bring along HKID card and this appointment slip to the following location for healthcare service.

**服務地點**  
營養學中心  
地址: 葵青區議會大樓  
電話: 23001234

**Service Location**  
Dietitian Centre  
Address: Kwai Tsing Road 123A  
Tel No.: 23001234

**開放時間**  
星期一至星期五: 12:42-01:31

**Opening Hours**  
Monday-Friday 12:42-01:31

**預約日期**  
2019 年 8 月 30 日 上午 10 時 00 分

**Appointment Date**  
2019 Year Month Day AM Hour Minute

**備註:**

**Remarks:**

如遇到任何困難, 請致電 28672857 向葵青區康健中心職員查詢。  
Please contact DHC staff at 28672857 for any enquiries on service.

**葵青地區康健中心**  
Kwai Tsing District Health Centre

**言語治療服務預約便條**  
Appointment Slip for Speech Therapy

服務使用者資料  
姓名: 黃耀欣  
性別: 女  
身份證號碼: E55XXXX(7)

Participant Particulars  
Name: WONG, PO YAN  
Gender: F  
HKIC No: E55XXXX(7)

請攜同香港身份證及此預約便條到以下地點接受服務。  
Please bring along HKID card and this appointment slip to the following location for healthcare service.

**服務地點**  
言語治療中心  
地址: 葵青區議會大樓  
電話: 23001234

**Service Location**  
Lok Lok Speech Therapy Centre  
Address: Kwai Tsing Road 123A  
Tel No.: 23001234

**開放時間**  
星期一至星期五: 12:42-01:31

**Opening Hours**  
Monday-Friday 12:42-01:31

**預約日期**  
2019 年 8 月 30 日 上午 11 時 00 分

**Appointment Date**  
2019 Year Month Day AM Hour Minute

**備註:**

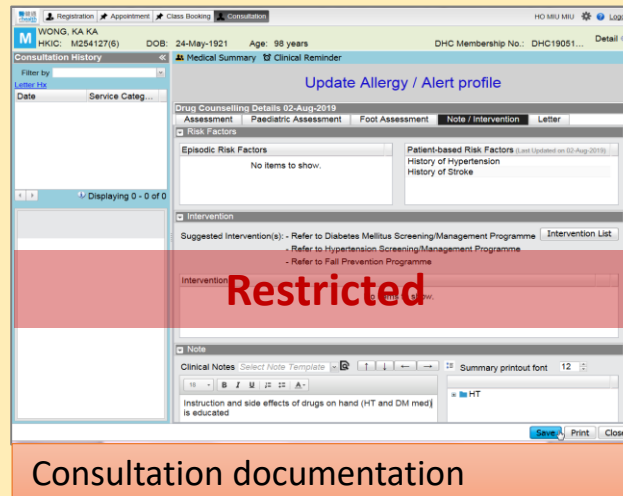
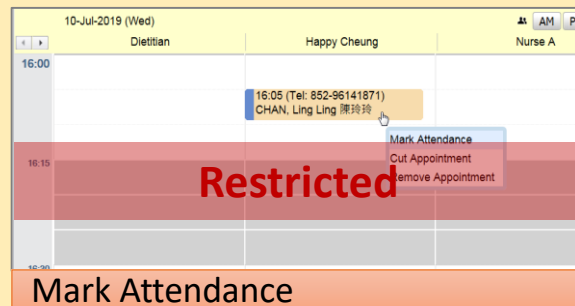
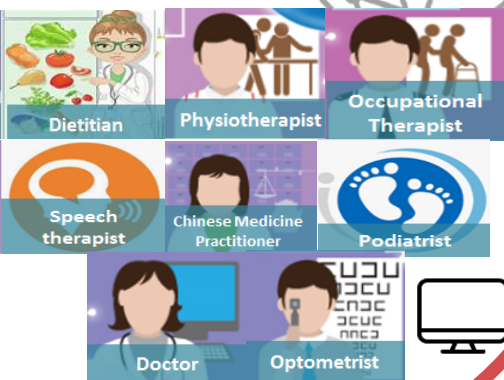
**Remarks:**

如遇到任何困難, 請致電 28672857 向葵青區康健中心職員查詢。  
Please contact DHC staff at 28672857 for any enquiries on service.

**葵青地區康健中心**  
Kwai Tsing District Health Centre



## Network Healthcare Service Providers



- 1 Mark Attendance
- 2 Clinical documentation
- 3 Submit claim

Consultation documentation





**葵青地區康健中心**  
Kwai Tsing District Health Centre

**物理治療服務預約便條**  
Appointment Slip for Physiotherapy

**服務使用者資料**

姓名: 梁麗欣

性別: 女

身份證號碼: E55XXXX(7)

**Participant Particulars**

Name: WONG, PO YAN

Gender: F

HKIC No: E55XXXX(7)

請攜同香港身份證及此預約便條到以下地點接受服務。  
Please bring along HKID card and this appointment slip to the following location for healthcare service.

服務地點	Service Location
匯豐物理治療中心	PP Physical Therapy Centre
地址: 美蘭道27號葵翠大廈地下S10舖	Address: Kwai Tsing Road 123A
電話: 23001234	Tel No.: 23001234
開放時間	Opening Hours
星期一至星期五 13:43至02:32	Monday-Friday 13:43-02:32

**預約日期**

Appointment Date

2019 年 8 月 30 日 下午 12 時 00 分

Year Month Day PM Hour Minute

**Remarks:**

如對服務有任何疑問，請致電 25672567 向地區康健中心職員查詢。  
Please contact DHC staff at 25672567 for any enquiries on service.

# 醫健通

## ehealth

香港特別行政區政府 HKSAR GOVT

**Electronic Health Record Sharing System**  
電子健康紀錄互通系統

User Name  
用戶名稱

Healthcare professionals who are using Internet Explorer 10 or below browser version may experience difficulties accessing Laboratory or Radiology PDF reports on eHR. Please update your Internet Explorer browser to version 11 for normal eHRSS operation if required, for system requirement details, refer to <http://www.ehealth.gov.hk> or contact our hotline at 3467 6230.

**Restricted**

**Important Reminder**

- All patient information is strictly confidential
- Only access patient data for providing healthcare purpose
- All access is logged
- Do not share your account / token
- Please change your password regularly

eHR SHARING

[Personal Information Collection Statement](#)

[Privacy Policy Statement](#)

[Regular System Maintenance Schedule](#)

**重要提示**

- 所有病人的資料都必須嚴格保密
- 只可在提供醫護服務及有需要時取覽病人的資料
- 每次的取覽均會被記錄

# 醫健通

## ehealth

香港特別行政區政府 HKSAR GOVT

Password

Token Passcode

**Restricted**

eHEALTH RECORD

eHR SHARING

HEALTHCARE PROVIDER

HEALTHCARE RECIPIENT

HEALTHCARE PROFESSIONAL

**Healthcare  
Provider  
(HCP)**

YYY醫院綜合醫療中心  
MMM醫務中心  
BBB醫院  
英英英醫生醫所

AAA 專業護眼中心

CCC 專業物理治療中心

DDD專業治療中心



**Health Service  
Locations (HSL)**

DDD專業物理治療中心  
(荃灣)

DDD中醫診所  
(青衣)

TTT中醫醫務所

LLL中醫骨傷針灸診所

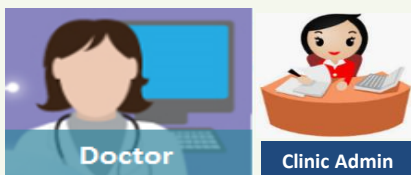
PPP中醫診所

EEE營養中心

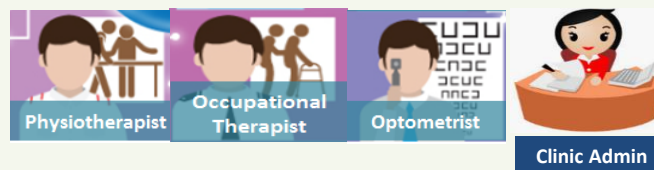
UUU言語治療中心

RRR足病診療專科中心

**Healthcare  
Professional  
(HCProf)**



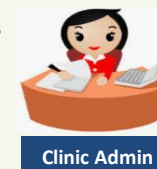
Service Agreement



eHRSS registration  
Service Agreement



HSL of DHC Operator  
eHRSS registration  
Service Agreement



Healthcare Recipient

Home Clinical Administration Emergency Access Standards Information DONALD CHUI (Logout)

Quick Links - Clinical

**Clinical**

- [eHR Viewer](#)
- [District Health Centre Service](#)

Quick Links - Administration

**Administration**

- [Healthcare Recipient](#)
- User Account
  - [Update Own Account](#)
- Public-Private Partnership Programme
  - [GOPC PPP-Participating Service Provider Enrolment](#)
- [CRC Programme - Primary Care Doctor Enrolment](#)
- [SCPPP Programme - Doctor Enrolment](#)
- [District Health Centre Service](#)

**Logon History**

Last logon was **successful** on 23-Jul-2019 18:22:01

**System News**

**Regular System Maintenance**

Regular system maintenance is scheduled on every 3rd and 4th Saturday/Sunday of each month. You may experience intermittent service interruption in accessing all system functions and patients' clinical records may not include the latest updates.

**Non-regular System Maintenance**

- 23-Jul-2019 : The eHRSS system is scheduled for maintenance from 10 Aug 2019 19:00 to 20:00. During this period, you may experience intermittent service interruption in accessing all system functions and from 11 Aug 2019 03:00 to 04:00

**User Documents**

- ▶ Notice to Users
- ▶ Release Note

Restricted

Healthcare Recipient

Home Clinical Administration Emergency Access Standards Information AURORA LAI (Logout)

Quick Links - Clinical

**Clinical**

- [eHR Viewer](#)
- [District Health Centre Service](#)

Quick Links - Administration

**Administration**

- [Healthcare Recipient](#)
- [eHR Administration](#)
- [User Account](#)
- [Public-Private Partnership Programme](#)
- [CRC Programme - Primary Care Doctor Enrolment](#)
- [SCPPP Programme - Doctor Enrolment](#)
- [District Health Centre Service](#)

**Logon History**

Last logon was **successful** on 08-Jul-2019 09:52:58

**System News**

**Regular System Maintenance**

Regular system maintenance is scheduled on every 3rd and 4th Saturday/Sunday of each month. You may experience intermittent service interruption in accessing all system functions and patients' clinical records may not include the latest updates.

**Non-regular System Maintenance**

- 03-Nov-2014 : Welcome to PPI-ePR

**User Documents**

Restricted

健康 ehealth Clinical Administration Emergency Access Standards Information AURORA KU (Logout)

**District Health Centre (DHC) Service**

DHC Participant Management Utilities Reporting

DHC Participant Management > Par Attendance Review

Attendance Register

Restricted

To view the participant profile, please enter participant's HKIC No or Membership No

Membership No

HKIC No  (  )

Next



健康 ehealth Clinical Administration Emergency Access Standards Information AURORA KU (Logout)

**District Health Centre (DHC) Service**

DHC Participant Management Utilities Reporting

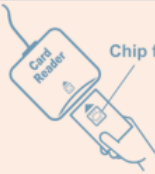
Utilities > Attendance Register

**Register Attendance**

Programme: District Health Centre Service

Date of Attendance: 26-Jul-2019

**Method 1: SMART ID**

 Chip facing up

Next

**Method 2: One-Time Password**

HKIC No.:  (  )

Please enter the One-Time Password:

If patient does not have One-Time Password, please click <Send> to generate a new one.

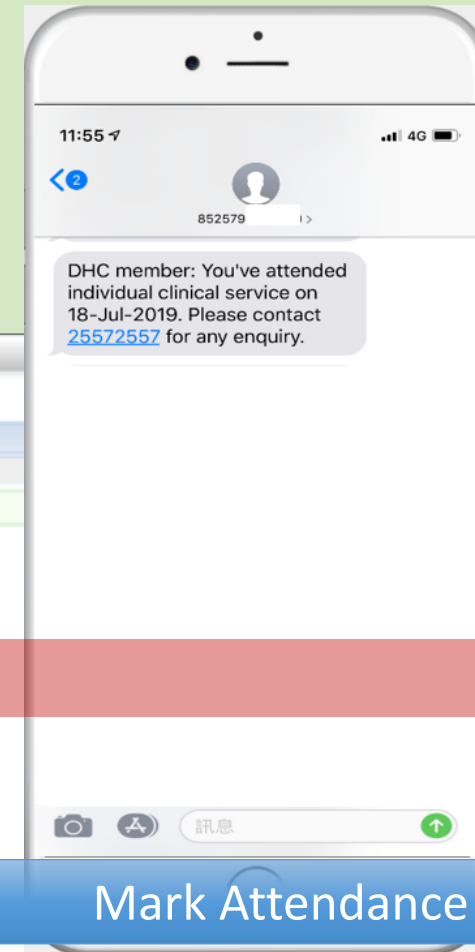
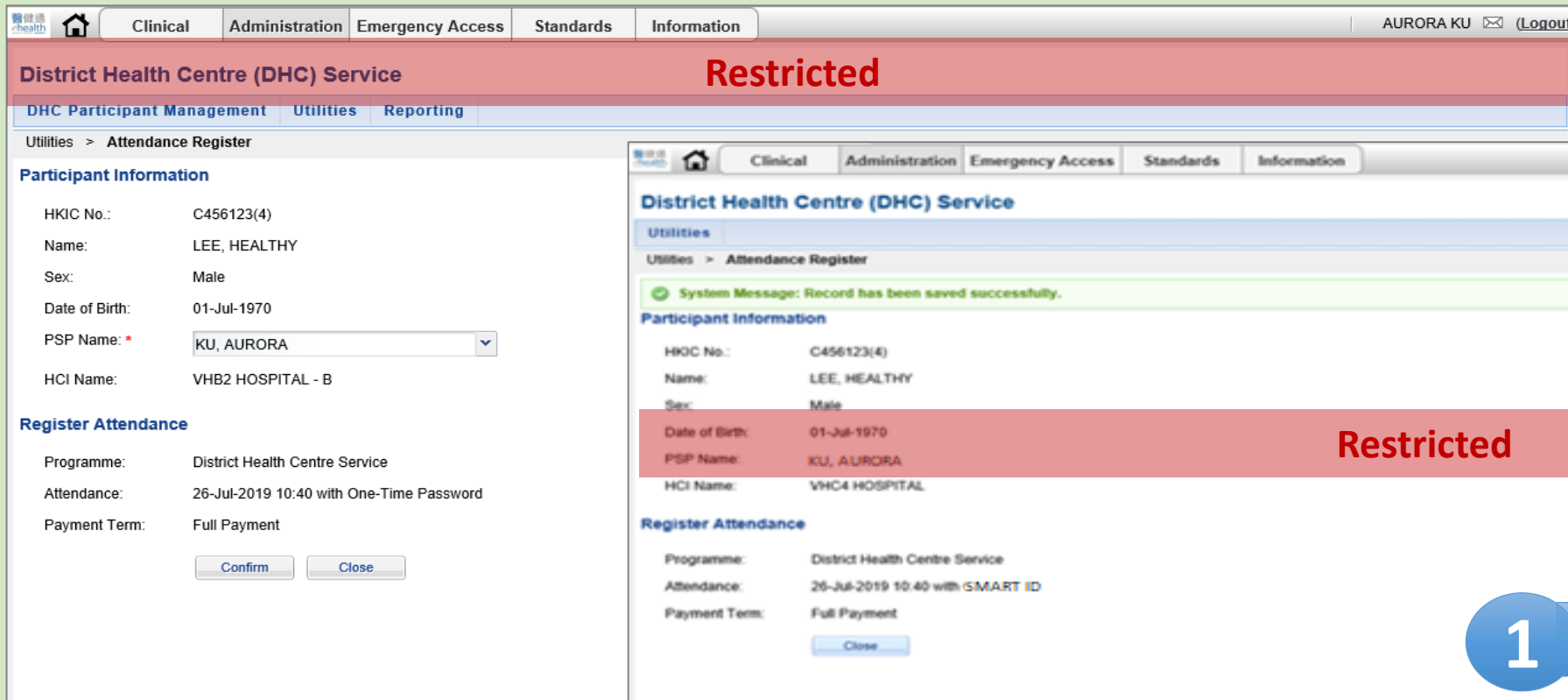
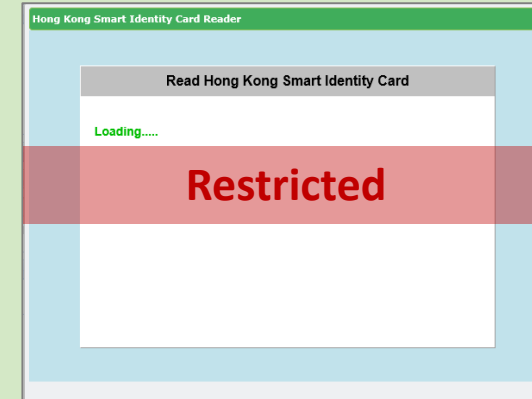
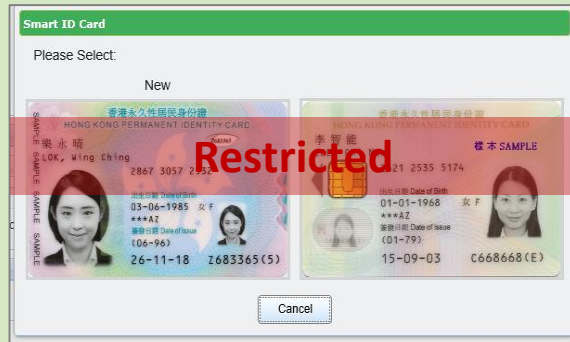
**Method 3: Prefilled Attendance Sheet**

HKIC No.:  (  )

Restricted

1

Mark Attendance



# Points to notes



- **eHR sharing consent** with the healthcare providers has been built already by DHC Operator.
- **Instance eligibility checking** is available at attendance registry.
- Display of **payment term** which is carried forwards from DHC registration.



Mark attendance  
(by smart ID)

1

Mark Attendance



ClinicalAdministrationEmergency AccessStandardsInformation

Quick Link

eHR Viewer

District Health Centre Service

**Clinical**



- [eHR Viewer](#)
- [District Health Centre Service](#)

**Quick Links - Administration**

**Administration**

- [Healthcare Recipient](#)
- User Account
  - [Update Own Account](#)
- Public-Private Partnership Programme
  - [GOPC PPP-Participating Service Provider Enrolment](#)
- [CRC Programme - Primary Care Doctor Enrolment](#)
- [SCPPP Programme - Doctor Enrolment](#)
- [District Health Centre Service](#)

Restricted



ClinicalAdministrationEmergency AccessStandardsInformation

Please select patient

[Select Patient](#) [Close](#) [Record](#)

District Health Centre (DHC) Service

Restricted

**Patient Selection Panel**

Fill in ONE of the following items

☒ ID Doc Type

HKID Card

ID Doc No.  (  )

☐ eHR No.

☐ Smart ID

[Submit](#) [Cancel](#)

health

Home

Clinical

Administration

Information

李健康LEE, HEALTHY

HKIC No. : C456123(4)

DOB : 01-Jul-1970

Age : 49 years

Sex : M

Details

DONALD LUK

Logout

View / AddAllergy & ADR

Select Patient

Close Record

Participant's particulars

District Health Centre (DHC) Service

DHC Consultation History

Date	Consultation Type
09-Jul-2019	DHC Nursing Service Notes

Consultation Summary

Consultation Summary

Please click [Open Summary] to view summary

New

Edit

Open Summary

Open Referral

DHC Consultation Details

Attendance Details

Payment Details

Fee

Paid By Patient

Quota: 0/2

Consultation Date

23-Jul-2019

Consultation

500.00

150.00

Programme

Stroke rehab

Additional Item

0.00

0.00

Additional Charging

Consultation Type

Dietetic Service

Total

150.00

Health Care Voucher used

Dietitian

Note and Plan

\* BW

kg

\* BH

m

\* BMI

kg/m<sup>2</sup>

Hong Kong Chinese- Malnutrition Universal Screening Tool (HKC-MUST)

\* BMI Score

\* Weight Loss Score

\* Acute Disease Effect Score

\* Total Score

\* Overall Risk of Malnutrition

Low Risk

Medium Risk

High Risk

\* Assessment

Restricted

Date & Time of Next Appointment

(HH:mm 24Hr)

Save

Cancel

Consultation details



物理治療服務預約便條  
Appointment Slip for Physiotherapy

服務使用者資料

姓名: 黃寶欣  
性別: 女  
身份證號碼: E55XXX0(7)

Participant Particulars

Name: WONG, PO YAN  
Gender: F  
HKIC No: E55XXX0(7)

請攜同香港身份證及此預約便條到以下地點接受服務。

Please bring along HKID card and this appointment slip to the following location for healthcare service.

<b>服務地點</b> 匯匯物理治療中心 地址: 光輝園27號葵景大廈地下SB舖 電話: 23001234	<b>Service Location</b> PP Physical Therapy Centre Address: Kwai Tsing Road 123A Tel No.: 23001234
<b>開放時間</b> 星期一至星期五 13:43至02:32	<b>Opening Hours</b> Monday-Friday 13:43-02:32

預約日期	2019	年	8	月	30	日	下午	12	時	00	分
Appointment Date	Year		Month		Day		PM	Hour		Minute	

Remarks:  
*Low Back Pain Programme*

如對服務有任何疑問, 請致電 25572557 向地區康健中心職員查詢。  
Please contact DHC staff at 25572557 for any enquiries on service.

standards

Information

DONALD TAM (Logout)

79 years Sex : M Details ▶

Allergy & ADR Select Patient Close Record

DHC Consultation Details

Attendance Details	Payment Details	Fee	Paid By Patient	Quota:
Consultation Date	Consultation		\$--	
Programme	Additional Item		\$--	Additional Charging
Consultation Type	Total		\$--	<input type="checkbox"/> Health Care Voucher used

Programme Selection

The patient have joined multiple programmes.

Please select one for this consultation

☐ Stroke Rehabilitation Programme

☒ Low Back Pain Programme

Next

Restricted

New

Edit

Open Summary

Open Referral

District Health Centre (DHC) Service

DHC Consultation History

Date	Consultation Type
09-Jul-2019	DHC Nursing Service Notes

Consultation Summary

[Consultation Summary](#)

Please click [Open Summary] to view summary

New

Edit

Open Summary

Open Referral

DHC Consultation Details

Attendance Details

Consultation Date23-Jul-2019

ProgrammeStroke rehab

Consultation TypeDietetic Service

Payment Details

Fee	Paid By Patient
Consultation500.00	150.00
Additional Item0.00	0.00
Total	150.00

Additional Charging

☐ Health Care Voucher used

Quota: 0/2

Dietitian

Note and Plan

\* BW    kg      \* BH    m      \* BMI    kg/m<sup>2</sup>

Hong Kong Chinese- Malnutrition Universal Screening Tool (HKC-MUST)

\* BMI Score

\* Weight Loss Score

\* Acute Disease Effect Score

\* Total Score

\* Overall Risk of Malnutrition ☐ Low Risk ☐ Medium Risk ☐ High Risk

\* Assessment

Date & Time of Next Appointment    (HH:mm 24Hr)

Save

Cancel

Restricted

DHC Consultation History

Date	Consultation Type
09-Jul-2019	DHC Nursing Service Notes

DHC Consultation Details

Attendance Details

Consultation Date	23-Jul-2019
Programme	Stroke rehab
Consultation Type	Dietetic Service

Payment Details	Fee	Paid By Patient
Consultation	500.00	150.00
Additional Item	0.00	0.00
Total		150.00

Additional Charging
Health Care Voucher used

Quota: 0/2

Consultation Summary
Consultation Summary
Please click [Open Summary] to view summary

Consultation Fee
=
Government
+

Co-payment by patient\*

\*General Public or Wavier:

- Comprehensive Social Security Assistance (CSSA) 綜合社會保障援助（「綜援」）
- Higher Old Age Living Allowance (aged 75 or above) (Higher OALA (aged ≥ 75)) 長者生活津貼受惠人醫療費用豁免證明書
- Level 0 Voucher Holder of the Pilot Scheme on Residential Care Service Voucher (RCSV Level 0) 「長者院舍住宿照顧服務券試驗計劃」級別0院舍券
- Medical Social Waiver 香港政府或醫院管理局認可社工所發減免全部或部分醫療費用的有效證明書

Network Healthcare  
Service Providers

Dietitian

Physiotherapist

Occupational Therapist

Speech therapist

Podiatrist

Optometrist

09-Sep-1959

Age : 59 years

Sex : F

Details ▶

Allergy & ADR

Select Patient

Close Record

DHC Consultation Details

Attendance Details

Consultation Date03-Sep-2019

ProgrammeStroke rehab

Consultation TypePhysiotherapy

Payment Details

Fee

Consultation800.00

Additional Item100.00

Total200.00

Paid By Patient

100.00

100.00

200.00

Quota: 0/6

Additional Charging

☐ Health Care Voucher used

PT Assessment

Note and Plan

Additional Charge Information

Additional Charge (1) \$

-- Please Select --

Remark

Additional Charge (2) \$

-- Please Select --

Remark

Additional Charge (3) \$

Drugs

Remark

Additional Charge (4) \$

Additional Visit

Remark

Investigations

Vaccination

Others

Confirm

Cancel

General

Consultation Date03-Sep-2019

ProgrammeDM screening

Consultation TypeDM Diagnosis

Assessment

BP135/65 mmHg

Pulse70 /min

BW65.00 kg

BH1.55 m

BMI27.06 kg/m²

H'stix8.00 mmol/L

Clinical NoteReferral for DM screening

H'stix 8

Fam Hx of DM

New

Edit

Open Summary

Open Referral

Save

Cancel

Donald Tam

Logout

Restricted

Date & Time of Next Appointment

(HH:mm 24Hr)

Payment by participant is reflected here

Restricted

09-Sep-1959 Age : 59 years Sex : F Details ▶

Dietitian Physiotherapist Occupational Therapist

Speech therapist Podiatrist Optometrist

Date	Type
03-Sep-2019	DM Diagnosis
02-Sep-2019	DM Screening
29-Aug-2019	Dietetic Service
29-Aug-2019	Physiotherapy

Assessment Dx & Plan Meds

Ref No.: 883

General	
Consultation Date	03-Sep-2019
Programme	DM screen/manage
Consultation Type	DM Diagnosis

Assessment	
BP	135/65 mmHg
Pulse	70 /min
BW	65.00 kg
BH	1.55 m
BMI	27.06 kg/m <sup>2</sup>
H'stix	8.00 mmol/L
Clinical Note	Referral for DM screening H'stix 8 Fam Hx of DM

## DHC Consultation Details

## Attendance Details

Consultation Date 03-Sep-2019

Programme Stroke rehab

Consultation Type Physiotherapy

## PT Assessment

## Note and Plan

\* Modified Functional Ambulatory Classification (MFAC) 4

Elderly Mobility Scale (EMS)

New York Heart Association Functional Classification

## The Keele STarT Back Screening Tool

Total Score

Sub Score

Risk Group

☐ Low Risk☐ Medium Risk☐ High Risk

\*Assessment

W

Date &amp; Time of Next Appointment

(HH:mm 24Hr)

Restricted

Save

Cancel

Dietetic Service  
Occupational Therapy  
Optometry Service  
Physiotherapy  
Podiatry Service  
Speech Therapy  
CM (Acu-puncture/pressure)



Sex : F  
Consultation date defaulted 'Today'

**Attendance Details**

Consultation Date	03-Sep-2019
Programme	DM screen/manage
Consultation Type	DM Diagnosis

**Payment Details**

Fee	Paid By Patient	Quota: 1/2
Consultation 350.00	100.00	
Additional Item 0.00	0.00	<input type="button" value="Additional Charging"/>
<b>Total</b>	<b>100.00</b>	<input type="checkbox"/> Health Care Voucher used

Restricted

	1 <sup>st</sup> consultation	2 <sup>nd</sup> consultation
Diabetes Mellitus Screening/Management Programme	DM Screening	DM Diagnosis
	DM Assessment	
	DM Annual	
Hypertension Screening/Management Programme	HT Screening	HT Diagnosis
	HT Assessment	
	HT Annual	
Diabetes Mellitus and Hypertension Screening/Management Programme	DM+HT Screening	DM+HT Diagnosis
	DM+HT Assessment	
	DM+HT Annual	
	DM Annual + HT Screening	DM Annual + HT Diagnosis
	DM Screening + HT Annual	DM Diagnosis + HT Annual
	DM Screening + HT Assessment	DM Diagnosis + HT Assessment
	DM Annual + HT Assessment	
	DM Assessment + HT Screening	DM Assessment + HT Diagnosis
	DM Assessment + HT Annual	
	DM Assessment + HT Assessment	





黃寶欣 WONG, PO YAN

HKIC No.: E559990(7)

DOB: 09-Sep-1959

Age: 59 years

Sex: F

Details ▶

View / Add

Allergy &amp; ADR

Select ▶

Patient

Close ×

Record

Restricted

## District Health Centre (DHC) Service

## DHC Consultation History

Date	Consultation Type
03-Sep-2019	DM Diagnosis
03-Sep-2019	Physiotherapy
02-Sep-2019	DM Screening
29-Aug-2019	Dietetic Service

## Assessment

## Dx &amp; Plan

## Meds

## \$

Ref No.: 883

## General

Consultation Date 03-Sep-2019

Programme DM screen/manage  
Consultation Type DM Diagnosis

## Assessment

BP 135/65 mmHg

Pulse 70 /min

BW 65.00 kg

BH 1.55 m

BM 27.06 kg/m<sup>2</sup>

H'st Referral for DM screening

Clinical Notes Fam Hx of DM

Lipid Profile (TC, TG, HDL-C, LDL-C)

Renal Function Test

Urine analysis

Urine albumin to creatinine ratio

## DHC Consultation Details

Attendance Details	Payment Details	Fee	Paid By Patient	Quota: 0/1
Consultation Date 03-Sep-2019	Consultation	350.00	100.00	
Programme HT screen/manage	Additional Item	0.00	0.00	Additional Charging
Consultation Type HT Screening	Total		100.00	<input type="checkbox"/> Health Care Voucher used

## Assessment

## Investigation

## Diagnosis and Plan of Management

## Medication

## Referral for Laboratory Tests

☐ Select all

Programme Consultation Type  Assessment BP Pulse BW BH BM H's Clinical Note  New Edit  Open Summary Open Referral	DM screen/manage	DM		HT		DM and HT	
	DM Diagnosis	Screening	Management of known case/ annual assessment	Screening	Management of known case/ annual assessment	Screening	Management of known case/ annual assessment
	HbA1c	✓	✓			✓	✓
	Fasting Blood Glucose	✓	✓	✓	✓	✓	✓
	2-hour Blood Glucose (Post-75g glucose load)	✓				✓	
	Lipid Profile (TC, TG, HDL-C, LDL-C)	✓	✓	✓	✓	✓	✓
	Renal Function Test	✓	✓	✓	✓	✓	✓
	Urine analysis			✓		✓	
	Urine albumin to creatinine ratio		✓		✓		✓

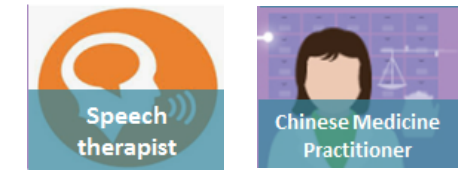


## Data fields in clinical notes

Data fields in clinical notes				
details AH data fields in DHC		Fracture Hip Rehabilitation Programme	Stroke Rehabilitation Programme	Cardiac Rehabilitation Programme
Assessment and Intervention (for all healthcare providers)		Mandatory	Mandatory	Mandatory
Physiotherapy Service				
	Modified Functional Ambulatory Classification (MFAC)	Mandatory	Mandatory	Optional
	Ambulatory Status (Walking Aids)	Mandatory	Optional	Optional
	Elderly Mobility Scale (EMS)	Mandatory	Dimmed field	Dimmed field
	Six Minutes Walk Test	Dimmed field	Dimmed field	Mandatory
	New York Heart Association Functional Classification	Dimmed field	Dimmed field	Optional
	The Keele STarT Back Screening Tool – Total/Sub Score, Risk Group	Dimmed field	Dimmed field	Dimmed field
Occupational Therapy Service				
	Modified Barthel Index Score (MBI)	Mandatory	Mandatory	Optional
	Pre-morbid Living Setting	Mandatory	Mandatory	Dimmed field
	Abbreviated Mental Test (AMT)	Optional	Optional	Dimmed field
	Montreal Cognitive Assessment Hong Kong Version (HK-MoCA)	Optional	Optional	Dimmed field
	Geriatric Depression Scale (GDS)	Dimmed field	Optional	Dimmed field
Dietetic Service				
	Body Weight/ Body Height/ Body Mass Index (BMI)	Mandatory	Mandatory	Mandatory
	Hong Kong Chinese- Malnutrition Universal Screening Tool (HKC-MUST) - (BMI Sr/ Wt loss Sr/ Acute Disease Effect Sr/ Total Sr/ Overall Risk of Malnutrition) <i>* MUST for non-HK Chinese will be inputted by Dietitian manually</i>	Mandatory	Mandatory	Optional
Speech Therapy Service				
	Mode of Nutrition: Oral / Tube	Service not available	Mandatory	Service not available

Data fields in clinical notes				
		Low Back Pain Proramme	Osteoarthritic Knee Pain Programme	DM/ HT Screening/ Management Programme
Assessment and Intervention (for all healthcare providers)		Mandatory	Mandatory	Mandatory
Physiotherapy Service				
	Modified Functional Ambulatory Classification (MFAC)	Dimmed field	Dimmed field	Dimmed field
	Ambulatory Status (Walking Aids)	Dimmed field	Dimmed field	Dimmed field
	Elderly Mobility Scale (EMS)	Dimmed field	Dimmed field	Dimmed field
	Six Minutes Walk Test	Dimmed field	Dimmed field	Dimmed field
	New York Heart Association Functional Classification	Dimmed field	Dimmed field	Dimmed field
	The Keele STarT Back Screening Tool – Total/Sub Score, Risk Group	Mandatory	Dimmed field	Dimmed field
Occupational Therapy Service				
	Modified Barthel Index Score (MBI)	Dimmed field	Dimmed field	Dimmed field
	Pre-morbid Living Setting	Dimmed field	Dimmed field	Dimmed field
	Abbreviated Mental Test (AMT)	Dimmed field	Dimmed field	Dimmed field
	Montreal Cognitive Assessment Hong Kong Version (HK-MoCA)	Dimmed field	Dimmed field	Dimmed field
	Geriatric Depression Scale (GDS)	Dimmed field	Dimmed field	Dimmed field
Dietetic Service				
	Body Weight/ Body Height/ Body Mass Index (BMI)	Mandatory	Mandatory	Mandatory
	Hong Kong Chinese- Malnutrition Universal Screening Tool (HKC-MUST) - (BMI Sr/ Wt loss Sr/ Acute Disease Effect Sr/ Total Sr/ Overall Risk of Malnutrition) <i>* MUST for non-HK Chinese will be inputted by Dietitian manually</i>	Optional	Optional	Optional
Speech Therapy Service				
	Mode of Nutrition: Oral / Tube	Service not available	Service not available	Service not available

# Network Healthcare Service Providers



Consultations

### Dietitian

#### DHC Consultation Details

Attendance Details		Payment Details		Fee	Paid By Patient	Quota: 0/1
Consultation Date	29-Aug-2019	Consultation	500.00	100.00		
Programme	Stroke rehab	Additional Item	0.00	0.00	Additional Charging	
Consultation Type	Dietetic Service	Total		100.00	Health Care Voucher used	

**Dietitian**

Note and Plan

\* BW  kg

\* BH  m

\* BMI  kg/m<sup>2</sup>

Hong Kong Chinese- Malnutrition Universal Screening Tool (HKC-MUST)

\* BMI Score

\* Weight Loss Score

\* Acute Disease Effect Score

\* Total Score

\* Overall Risk of Malnutrition ☐ Low Risk ☐ Medium Risk ☐ High Risk

\* Assessment

Date & Time of Next Appointment  (HH:mm 24Hr)

Save Cancel

### Speech therapist

#### DHC Consultation Details

Attendance Details		Payment Details		Fee	Paid By Patient	Quota: 0/1
Consultation Date	29-Aug-2019	Consultation	1000.00	100.00		
Programme	Stroke rehab	Additional Item	0.00	0.00	Additional Charging	
Consultation Type	Speech Therapy	Total		100.00	Health Care Voucher used	

**ST Assessment**

Note and Plan

\* Mode of Nutrition ☒ Oral Feeding ☐ Tube Feeding

Self-help

\* Assessment Swallowing assessed  
Recommended normal diet  
Thickener for water or fluid intake

\* Intervention Patient education

Date & Time of Next Appointment  (HH:mm 24Hr)

Save Cancel

### Occupational Therapist

#### DHC Consultation Details

Attendance Details		Payment Details		Fee	Paid By Patient	Quota: 0/1
Consultation Date	29-Aug-2019	Consultation	900.00	100.00		
Programme	Stroke rehab	Additional Item	0.00	0.00	Additional Charging	
Consultation Type	Occupational Therapy	Total		100.00	Health Care Voucher used	

**OT Assessment**

Note and Plan

\* Modified Barthel Index Score (MBI) 90

Abbreviated Mental Test (AMT) 9

Montreal Cognitive Assessment Hong Kong Version (HK-MoCA)  Pre-morbid Living Setting Home with family / care

Geriatric Depression Scale (GDS)

\* Assessment MBI and AMT performed

\* Intervention ADL/ Self care assessment and training

Date & Time of Next Appointment  (HH:mm 24Hr)

Save Cancel

### Physiotherapist

#### PT Assessment

Note and Plan

\* Modified Functional Ambulatory Classification (MFAC)

Elderly Mobility Scale (EMS)

New York Heart Association Functional Classification

The Keele STaRT Back Screening Tool

Total Score

Risk Group ☐ Low Risk ☐ Medium Risk ☐ High Risk

\* Assessment

Date & Time of Next Appointment  (HH:mm 24Hr)

Save Cancel

Other examples

32

Network Healthcare  
Service Providers



Consultations

**DRG Consultation Details**

Attendance Details	Payment Details	Fee	Paid By Patient	Quota: 0/1
Consultation Date: 29-Aug-2019	Consultation	350.00	150.00	
Programme: Stroke rehab	Additional Item	0.00	0.00	<input type="button" value="Additional Charging"/>
Consultation Type: CM (Acu-puncture/pressure)	Total		150.00	<input type="checkbox"/> Health Care Voucher used

**Note and Plan**

**\* Clinical Note**

陰虛火旺、氣短、疲倦、頭暈失眠、健忘

**Plan of Management**

百合1兩、生地5錢，加水煎煮約40分鐘後飲用。

Date & Time of Next Appointment:  (Hk:mm:24Hr)

**Visual Acuity**

Right	Left
6 / <input type="text"/> (without pinhole)	6 / <input type="text"/> (without pinhole)
6 / <input type="text"/> (with pinhole)	6 / <input type="text"/> (with pinhole)

**Diabetic Retinopathy (DR)**

Right	Left
<input type="radio"/> No retinopathy	<input type="radio"/> No retinopathy
<input type="radio"/> Mild non-proliferative DR	<input type="radio"/> Mild non-proliferative DR
<input type="radio"/> Moderate non-proliferative DR	<input type="radio"/> Moderate non-proliferative DR
<input type="radio"/> Severe non-proliferative DR	<input type="radio"/> Severe non-proliferative DR
<input type="radio"/> Proliferative DR	<input type="radio"/> Proliferative DR
<input type="radio"/> Ungradable	<input type="radio"/> Ungradable
<input type="radio"/> N/A	<input type="radio"/> N/A

**\* Hypertensive Retinopathy (HR)**

Right	Left
<input type="radio"/> No retinopathy	<input type="radio"/> No retinopathy
<input type="radio"/> Mild HR	<input type="radio"/> Mild HR
<input type="radio"/> Moderate HR	<input type="radio"/> Moderate HR
<input type="radio"/> Severe HR	<input type="radio"/> Severe HR
<input type="radio"/> Ungradable	<input type="radio"/> Ungradable
<input type="radio"/> N/A	<input type="radio"/> N/A

**Foot Assessment** **Note and Plan**

**\* Vascular Assessment**

	Right Foot	Left Foot
Foot pulses (Posterior tibialis or dorsalis pedis)	<input type="radio"/> Present <input type="radio"/> Absent <input type="radio"/> N/A	<input type="radio"/> Present <input type="radio"/> Absent <input type="radio"/> N/A
Ischemic Change	<input type="radio"/> No <input type="radio"/> Yes <input type="radio"/> N/A	<input type="radio"/> No <input type="radio"/> Yes <input type="radio"/> N/A
History of Ulcer / Non-traumatic Lower Extremity Amputation	<input type="radio"/> No <input type="radio"/> Yes <input type="radio"/> N/A	<input type="radio"/> No <input type="radio"/> Yes <input type="radio"/> N/A
Active Ulcer	<input type="radio"/> No <input type="radio"/> Yes <input type="radio"/> N/A	<input type="radio"/> No <input type="radio"/> Yes <input type="radio"/> N/A
Claudication	<input type="radio"/> No <input type="radio"/> Yes <input type="radio"/> N/A	<input type="radio"/> No <input type="radio"/> Yes <input type="radio"/> N/A
Rest Pain	<input type="radio"/> No <input type="radio"/> Yes <input type="radio"/> N/A	<input type="radio"/> No <input type="radio"/> Yes <input type="radio"/> N/A

**Foot abnormality**

Right Foot	Left Foot
<input type="radio"/> Normal <input type="radio"/> Diminished <input type="radio"/> Absent <input type="radio"/> N/A	<input type="radio"/> Normal <input type="radio"/> Diminished <input type="radio"/> Absent <input type="radio"/> N/A

**Assessment**

**\* Intervention**

Application of adhesive padding

Biomechanical assessment, involve visual gait analysis, posture asses...

Biomechanical assessment, computerized

General assessment, pulse, monofilament, systems evaluation

Neurological assessment, involve biothesiometer

Pre-operative assessment, include general, vascular, neurological ass...

Vascular assessment, doppler, ankle brachial index

Provision of customised chairside appliance

Casting for orthotic device using foam

Casting for orthotic device using POP

Destruction of skin lesion using cryotherapy

Destruction of skin lesion using chemical

Destruction of skin lesion using electrocautery

Education to individual patient

Date & Time of Next Appointment:  (Hk:mm:24Hr)

**Save** **Cancel**

Other examples



黃寶欣 WONG, PO YAN  
 HKIC No.: E559990(7)    DOB: 09-Sep-1959    Age: 59 years    Sex: F    Details ▶

District Health Centre (DHC) Service

**DHC Consultation History**

Date	Consultation Type
02-Sep-2019	DM Screening
29-Aug-2019	Dietetic Service
29-Aug-2019	Physiotherapy
29-Aug-2019	Speech Therapy

Assessment    Ix    Meds    \$

Ref No.: 863

General

Consultation Date	02-Sep-2019
Programme	DM screen/manage
Consultation Type	DM Screening

Assessment

BP	125/61 mmHg
Pulse	70 /min
BW	50.00 kg
BH	1.55 m
BMI	20.81 kg/m <sup>2</sup>
H'stix	8.00 mmol/L
Clinical Note	H'stix is borderline. For Lab investigation first.  FU after Blood result is ready.

New    Edit    Open Summary    Open Referral

**DHC Consultation Details**

Attendance Details    Symptom Details    Fee    Paid By Patient    Quota: 1/2

Programme	Additional Item	Fee	Paid By Patient
DM screen/manage		100.00	100.00

Consultation Type: DM Diagnosis    Total: 200.00    ☐ Health Care Voucher used

Assessment    Diagnosis and Plan of Management    Medication

BP: 135 /    mmHg    Pulse:    /min  
 \* BW:    kg    \* BH: 1.55 m    BMI:    kg/m<sup>2</sup>  
 H'stix:    mmol/L

\* Clinical Note

Date & Time of Next Appointment:    (HH:MM 24hr)

Save    Cancel

Restricted

Patient-based, which includes:  
 Clinical notes of client's all joined DHC programmes

Consultation history

醫健通 ehealth  
Legend

▼ Clinical Note & Summary  
Clinical Note & Summary  
Referral  
Birth Record  
Encounter

▼ Problem & Procedure  
Problem / Diagnosis  
Procedure  
Investigation Report

▼ Medication  
Prescribing History  
Dispensing History

▼ Laboratory Record  
Chemical Pathology  
Haematology  
Immunology  
Microbiology & Virology  
Anatomical Pathology  
Toxicology  
Transplantation & Immunogenetics  
Molecular Pathology  
General & Other

▼ Radiology Record  
General Radiology  
Computed Tomography

Problem / Diagnosis Summary		Details ▶
Date	Description	
24-Feb-2013	? Diabetes Mellitus	
24-Feb-2013	Type II diabetes mellitus with complication	
24-Feb-2013	? Type II diabetes mellitus with complication B	
24-Feb-2013	Type II diabetes mellitus with ischaemic hea...	
23-Feb-2013	Vesical pain	
28-Feb-2011	Delirium	>>More

Laboratory Summary			Details ▶
Date	Description	Institution	
24-Dec-2012	AD, RFT	VUC4_A	
15-Dec-2012	APTT,PT	VHC4	
21-Aug-2012	AD	VHC4	
20-Aug-2012	Haematology Result	VHC4	
09-Aug-2012	Haematology Laboratory Report...	QEH	
09-Aug-2012	Molecular Pathology Report (PDI)	QEH	>>More

Encounter Summary			Details ▶
Start Date	Specialty	Institution	
04-Jul-2013	Internal Medicine	VHA	
15-May-2013	General Surgery	VHA	
15-Apr-2013	Ophthalmology	VHA	
16-Jan-2012	General Surgery	VHA	
03-Jan-2012	Internal Medicine	VHA	
22-Dec-2011	Radiology	VUC4_A	>>More

Allergy & Adverse Drug Reaction		Details ▶
Allergen	Allergy Information	
DOXYCYCLINE	Certain,Esophagitis	
AUGMENTIN	Certain,Rash	
PENICILLIN	Suspected,Manifestation uncert...	
ADR Causative Agent	ADR Information	
DICLOFENAC	Severe,Urticaria	
METHYLDOPA	Mild,Drowsiness	
INDAPAMIDE	Mild,Hyponatremia,Hypokalemia	
RAMIPRIL	Mild,Acute Renal Disease, facia...	

Prescribing History Summary		Details ▶
Date	Medication	
04-Jan-2013	Aminoleban (arginine (as hydrochloride) 302 mg / 1 pa...	
	LORAZEPAM	
	PREDNISOLONE	
	ADRENALINE	
	RIFINAH 300	
	CITALOPRAM	
03-Jan-2013	ISONIAZID	
	CETRIMIDE	
	RIFAMPICIN	
	ALCLOMETASONE	
	AQUEOUS	>>More

ClinicalAdministrationEmergency AccessStandardsInformation

黃寶欣 WONG, PO YAN

HKIC No.: E559990(7)DOB: 09-Sep-1959Age: 59 yearsSex: FDetails

Clinical Note & Summary

Type: AllPeriod: AllDefault View

DHC Pharmacy Service Notes  
Outpatient record  
29-Aug-2019  
VHB2\_B

DHC Social Service Notes  
Outpatient record  
29-Aug-2019  
VHB2\_B

DHC Nursing Service Notes  
Outpatient record  
29-Aug-2019  
VHB2\_B

DHC Stroke Rehab Programme  
Chinese Medicine Notes  
Outpatient record  
29-Aug-2019  
VHC4

DHC Stroke Rehab Programme  
Dietetic Service Notes  
Outpatient record  
29-Aug-2019  
VUC4\_A

DHC Stroke Rehab Programme  
Occupational Therapy Notes  
Outpatient record  
29-Aug-2019  
VUC4\_B

DHC Stroke Rehab Programme  
Physiotherapy Notes

eHR Document Viewer

Page 1 of 2100%

Some font styles are not supported and may not be displayed properly. To report an issue, please leave us a feedback or contact the Registration Office Hotline 34676230.

DHC  
Pharmacy Service  
Notes

HKIC No: E5599907

Name: WONG, PO YAN

黃寶欣

DOB: 09-Sep-1959

Age: 59 years

Sex: Female

Consultation Summary

Consultation Date: 29-Aug-2019

Prof. Service: Pharmacy Service

Service Category: Medication Compliance Review

Created Centre: Kwai Tsing District Health Centre Core Centre

Created By: Ho Mary

Alert Allergy Information: (as of 29-Aug-2019 16:11)

Allergy/ADR/Alert: Nil

Patient-based Risk Factors:

Ex- or Current smoker

History of Stroke

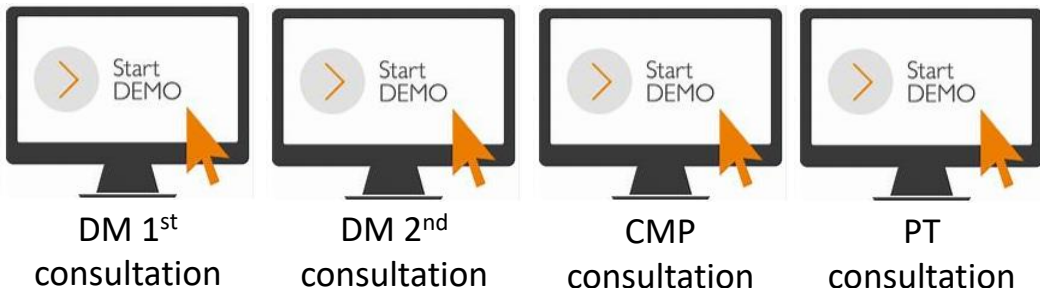
Inadequate physical activity

醫健通  
ehealth  
香港特別行政區政府  
HKSAR GOVT

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# Points to notes

- **Electronic clinical documentation** is one of the key element for effective communication between DHC care co-ordinator and network healthcare service providers.
- **DHC IT system** facilitates programme operation and workflow.
- Clinical notes will be shared to **eHRSS** for continuity of patient care.



## District Health Centre (DHC) Service

### Utilities

#### Utilities > Submit Reimbursement

Programme: District Health Centre Service

Search Claims by Payment Service Period:

 - 


Payment Service Period	Date of Submission	Total Reimbursement Amt.	Reimbursement Status	Ref. No.
Jun-2019	--	--	Pending for Submission	--
May-2019	--	--	Pending for Submission	--

Co-payment by patient to  
Healthcare professional

Amount to be claimed by  
healthcare professional

### Ready for Submission

### Under Review

#### Consultation Subsidy

Date of Transaction	Participant Name	Service ID	Item Description	Patient Paid Amt.	Paid Amt.	<input checked="" type="checkbox"/>
15-May-2019	CHAN, TAI MAN	912312312312	Consultation (HT Screening)	\$250.00	\$350.00	<input checked="" type="checkbox"/>
23-Apr-2019	ER, SAN SI	B300E11232	Consultation (DM Diagnosis)	\$350.00	\$250.00	<input checked="" type="checkbox"/>
17-Apr-2019	CHAN, TAI MAN	912312312312	Consultation (DM Diagnosis)	\$250.00	\$350.00	<input checked="" type="checkbox"/>

**Restricted**

Total reimbursement amount for consultation(s):

\$950.00

I, CHEUNG, MARY, certified that I have provided the service to the participating service recipient (PSR) and confirmed the attendance of the concerned PSR.

1. The above reimbursement claim submitted by the undersigned is in line with the Terms and Conditions of the District Health Centre Service.
2. The information provided by the undersigned in this reimbursement claim form is true and correct.
3. The undersigned understand that submission of false information to support the above payment claim may result in criminal prosecution.
4. The undersigned understand that the reimbursement claim will be verified and confirmed by DHC Centre before payment.

# Points to notes



- Payment claim submission is on **monthly** based and to be submitted by the **healthcare service providers**.
- Guidelines on **submission date** will be advised by PHO/ DHC Operator.
- Other scenarios could be found in IT module user manual, e.g. consultation record not found



Submit claim

# Summary



General programme workflow

User Manual for  
DHC IT Module

- Volume 1: DHC Operator
  - Volume 2: Healthcare providers
- (to be read with  
DHC Service Manual and  
Guidelines)

User Manual for DHC IT Module Vol. 2 – Healthcare Service Providers of DHC Scheme [G106]

Assessment Investigation Diagnosis and Plan of Management Medication

Drug Name Dosage and Frequency PRN Duration

Document medication prescribed if necessary.

Click [Save] to save the consultation record.

Date & Time of Next Appointment (HH:MM 24hr)

Save Cancel

9.2Chinese Medicine Practitioner

Chinese Medicine Practitioner can document “Clinical Note” and “Plan of Management” in this “Note and Plan” tab page.

Note and Plan

\* Clinical Note Mandatory field.

Plan of Management

Click [Save] to save the consultation record.

Date & Time of Next Appointment (HH:mm 24Hr)

Save Cancel

中醫師可以在“紀錄及計劃”的版面內記錄參加者的臨床紀錄及治療計劃。

Note and Plan 紀錄及計劃

\* Clinical Note 臨床紀錄 此項必須填寫

Plan of Management 治療計劃

完成記錄後按 [儲存]

Date & Time of Next Appointment 下次預約日期及時間 如有，可輸入以作記錄

儲存 取消

## Quick Links - Clinical

## Clinical

- [eHR Viewer](#)
- [Primary Care Programme](#)
- [GOPC PPP Programme](#)
- [District Health Centre Service](#)

## Quick Links - Administration

## Administration

- [Healthcare Recipient](#)
- [eHR Administration](#)
- User Account
  - [Reports and Enquiry](#)
  - [Update Own Account](#)
- Public-Private Partnership Programme
  - [Primary Care Programme](#)
  - [GOPC PPP Programme](#)

## Logon History

Last logon was **successful** on 05-Sep-2019 17:55:04

## System News

## Special Notice

- 30-Aug-2019 : Starting from 1st September 2019, PPI-ePR will only provide online services from 08:00-21:00. You are welcome to join eHRSS which offers 24 hours online services. For enquiries, please contact Registration Office at 3467 6300.

## Non-regular System Maintenance

- 29-Aug-2019 : The eHRSS system is scheduled for maintenance from 06 Sep 2019 20:00 to 07 Sep 2019 05:00. During this period, you may experience intermittent service interruption in accessing all system functions and patients' record may not

## User Documents

- [Primary Care Profile User Manual for Private Practitioner](#)
- [Sharing Consent Management](#)
- [Tips on using HKCTT](#)
- [User Guide for Allergy and ADR Input Module](#)
- [User Guide for DHC IT Module - Healthcare Service Providers](#) **NEW**
- [User Guide for Emergency Access](#)

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Q&A

THANK YOU.