



# MEDICAL RECORD REQUESTS, PRINTING/FAXING

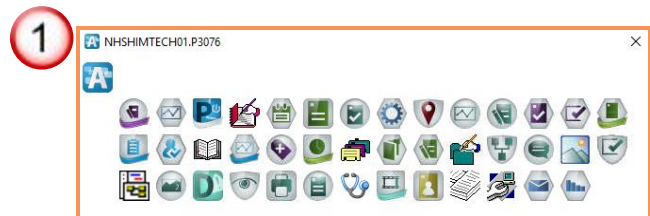
HOSPITAL INFORMATION SYSTEM (HIS)

## HIM ROLES

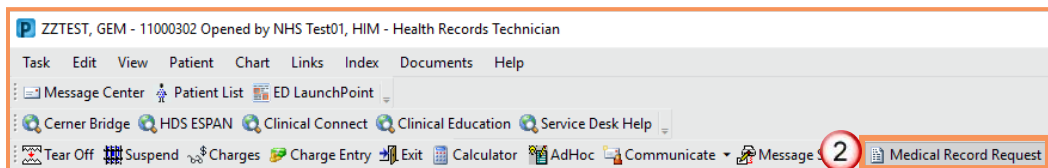
### Printing Medical Record Request:

When a patient is transferred to another facility, their electronic documentation is printed and sent as a paper record to the receiving care providers. Patients should continue to request their medical records through Health Records.

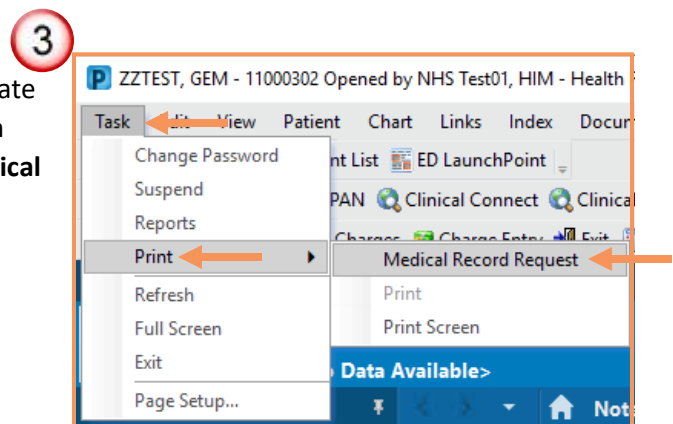
1. Open **Powerchart**  from the AppBar.



2. Open the patient's chart, select the correct encounter and click on "**Medical Record Request**" tab.



3. To access the Medical Record Task an alternate way, go to the **Task** tab, choose "**Print**" from the drop-down menu, and then select "**Medical Record Request**."





# MEDICAL RECORD REQUESTS, PRINTING/FAXING

## HOSPITAL INFORMATION SYSTEM (HIS)

4. Select the "**Template**" and "**Purpose**" for Printing drop-down menu in the Medical Record Request window.
5. Enter "**Date range**", use the arrow next to open calendar.
6. Click on the "**Sections**" tab.
7. Select the box(s) next to the type of document you want to print.
8. Click "**Preview**".

Medical Record Request - ZZTEST, GEM - 11000302

Medical Record Request Submitted Requests (0)

Event Status: All results

4 Template: ED Transfer Template Purpose: Patient Representative

5 Date Range: From: [calendar icon] To: [calendar icon]

Clinical Range  Posting Range

6 Sections

Name	Relationship	Destination
<input type="checkbox"/> NHS Test01, HIM - Health Records Technician	HIM Manager	
<input type="checkbox"/> NHS Test01, HIM - Health Records Technician	HIM Manager	
<input type="checkbox"/> NHS Test01, HIM - Health Records Technician	HIM Manager	

7

Device selected  Associated Destination

8 Preview

Proper authorization received?

Destination: [text box]

Requester: [text box]

Comment: [text area]

Device: [dropdown] Copies: 1

Send

**Note:** The Medical Record Requests PDF Preview and Submitted Requests window appears. This preview will display all MRR requests created for the patient in the past 72 hours.



# MEDICAL RECORD REQUESTS, PRINTING/FAXING

## HOSPITAL INFORMATION SYSTEM (HIS)

9. Click **"Refresh"** to finalize query.
10. Right-Click on the report and select **"Display Report"** from the menu.

Medical Record Request - ZZTEST, GEM - 11000302

Medical Record Request Submitted Requests (2)

Last Refresh: 20/Aug/2024 America/New\_York Display: Last 24 hours

Request Status	Fax Status	Requested Date/Time	Person Name	FIN	Report Request ID	Out
✓ Previewed	N/A	20/Aug/2024	ZZTEST, GEM	22-000493	7146908	N/A
✓ Archived - Preview Not Displayed	N/A	20/Aug/2024	ZZTEST, GEM	22-000493	7146547	N/A

11. Review the report selected. When finished, select the **"X"** to the right to close window.

ZZTEST, GEM - 7146908.pdf

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St. Catharines Site  
1200 Fourth Avenue  
St. Catharines, Ontario L2S 0A9  
(905) 378-4647

Name: ZZTEST, GEM  
MRN: 11000302  
DOB/Sex: 01-Jan-1950 Male  
Province: ON  
Health Card Number: 1010-101-293  
Encounter Number: 22-000493  
Encounter Type: Inpatient

Admit: 24-Oct-2023  
Disch: 30-May-2024  
Patient Location: SC EDHOLD; A3; A  
Attending: Carner Test, Physician - Cardiovascular Corner  
PCP:  
Copies to: n/a

**Allergies**

Substance	Allergy Type	Severity	Reaction Status	Reaction Symptom	Reviewed Date/Time
dust	Allergy	Moderate	Active		23-Nov-2023 13:28:19
Septra	Allergy	Severe	Active		23-Nov-2023 13:30:20

**Emergency Documentation**

Document Type: ED Note Physician  
Service Date/Time: 04-Apr-2024 11:05:00  
Result Status: Auth (Verified)  
Document Subject: ED Consult/Handoff Note  
Sign Information: NHS Test01, Physician - Emergency Medicine (04-Apr-2024 11:08:35)

Click 'x' to close



# MEDICAL RECORD REQUESTS, PRINTING/FAXING

## HOSPITAL INFORMATION SYSTEM (HIS)

**Note:** Avoid using the Print icon from the PDF version, as it won't be trackable. Medical Record Requests must be trackable for future verification.

12. Return to the "Medical Record Request" tab, select the printer device from the drop-down menu.
13. Then click "Send".

Medical Record Request - ZZTEST, GEM - 11000302

Medical Record Request | Submitted Requests (2)

Event Status: All results | Template: ED Transfer Template | Purpose: Patient/Personal

Date Range: From: [ ] To: [ ] |  Clinical Range |  Posting Range

Related Providers | Sections

Name	Relationship	Destination
<input type="checkbox"/> NHS Test01, HIM - Health Records Technician	HIM Manager	zztest02_t4
<input checked="" type="checkbox"/> NHS Test01, HIM - Health Records Technician	HIM Manager	zztest02_t4
<input type="checkbox"/> NHS Test01, HIM - Health Records Technician	HIM Manager	zztest02_t4
<input type="checkbox"/> NHS Test01, HIM - Health Records Technician	HIM Manager	zztest02_t4

Device selected |  Associated Destination

Device: zztest02\_t4 | Copies: 1

Preview | Send

- **Note:** MARs are printed separately whenever documentation is required to be shared outside of the organization - one example being an inpatient transfer
- Otherwise, it will generate every administration of every dose during a patient's encounter, IF you do not print separately and narrow down the time period.
  - **Remember:** Enter the date for the last 24 or 48 hr period in a patient's stay to reduce the number of pages generated prior to printing. In other words, enter 1-2 days in the date range prior to choosing the MAR section for printing.




# MEDICAL RECORD REQUESTS, PRINTING/FAXING

## HOSPITAL INFORMATION SYSTEM (HIS)

### Faxing Medical Record Request:

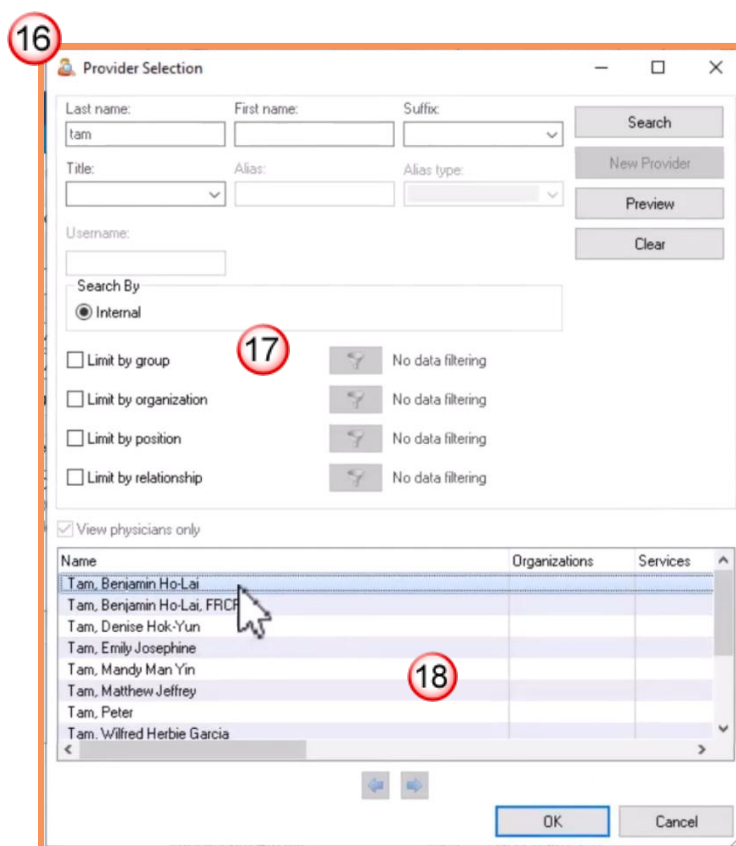
A patient's electronic documentation can also be faxed to the receiving care providers. Steps 1-12 will be identical.

14. Return to the “**Medical Record Request**” tab, select the provider you wish to send the fax too by typing in the “Destination” field.
15. Select a provider from the drop down or click on the  button to the right, which leads you to the Provider Selection window.

# MEDICAL RECORD REQUESTS, PRINTING/FAXING

## HOSPITAL INFORMATION SYSTEM (HIS)

16. In the Provider Selection window, you can enter any further details required to narrow down the selection process (i.e. First and Last Name, Suffix, and Title).
17. Additionally, you may filter your search by group, organization, position or relationship, etc.



**16**

Provider Selection

Last name: tam First name: Suffix: Search

Title: Alias: Alias type: New Provider

Preview

Username: Clear

Search By

Internal

Limit by group **17** No data filtering

Limit by organization No data filtering

Limit by position No data filtering

Limit by relationship No data filtering

View physicians only

Name	Organizations	Services
Tam, Benjamin Ho-Lai		
Tam, Benjamin Ho-Lai, FRCP		
Tam, Denise Hok-Yun		
Tam, Emily Josephine		
Tam, Mandy Man Yin		
Tam, Matthew Jeffrey		
Tam, Peter		
Tam, Wilfred Herbie Garcia		

**18**

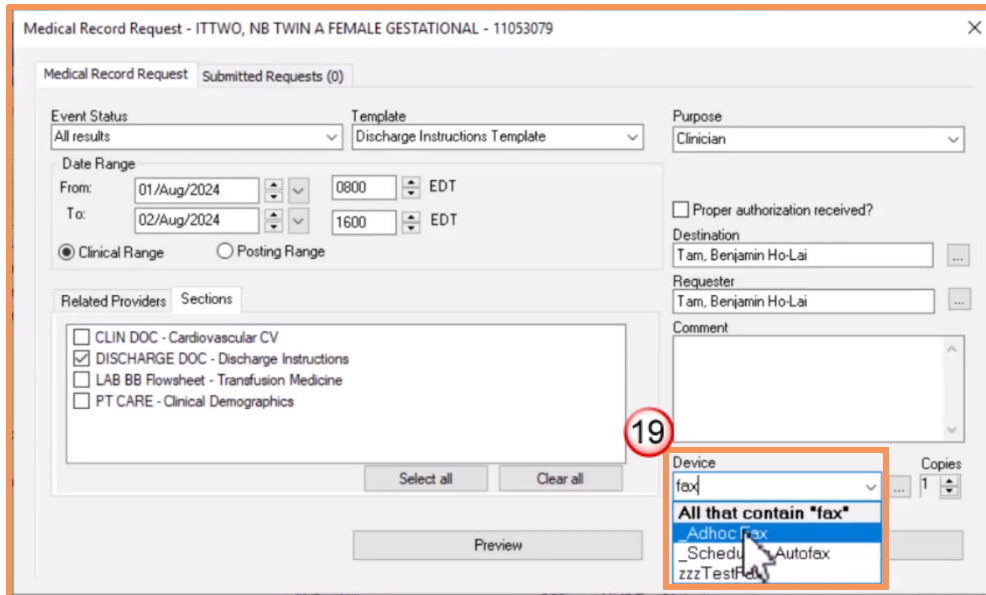
OK Cancel

18. Select the provider of interest from the list and then select "OK".

# MEDICAL RECORD REQUESTS, PRINTING/FAXING

## HOSPITAL INFORMATION SYSTEM (HIS)

19. Under the **“Device”** dropdown, search the receiving providers name as their fax numbers will be attached to their name in the system.
  - a. If a provider’s fax number is not within the system directory yet, search for and select **“\_AdHocFax”** in the **“Device”** dropdown.



Medical Record Request - ITTWO, NB TWIN A FEMALE GESTATIONAL - 11053079

Medical Record Request Submitted Requests (0)

Event Status: All results | Template: Discharge Instructions Template | Purpose: Clinician

Date Range: From: 01/Aug/2024 0800 EDT | To: 02/Aug/2024 1600 EDT

Clinical Range  Posting Range

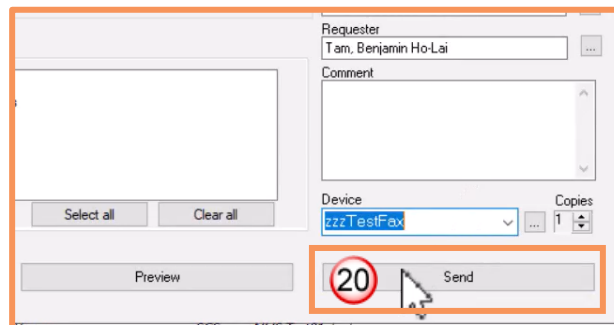
Related Providers Sections

- CLIN DOC - Cardiovascular CV
- DISCHARGE DOC - Discharge Instructions
- LAB BB Flowsheet - Transfusion Medicine
- PT CARE - Clinical Demographics

Buttons: Select all, Clear all, Preview

Device dropdown menu (circled 19):

- fax
- All that contain "fax"
- \_AdHocFax**
- \_Schedule
- Autofax
- zzzTestFax



Requester: Tam, Benjamin Ho-Lai

Comment:

Device: zzzTestFax

Copies: 1

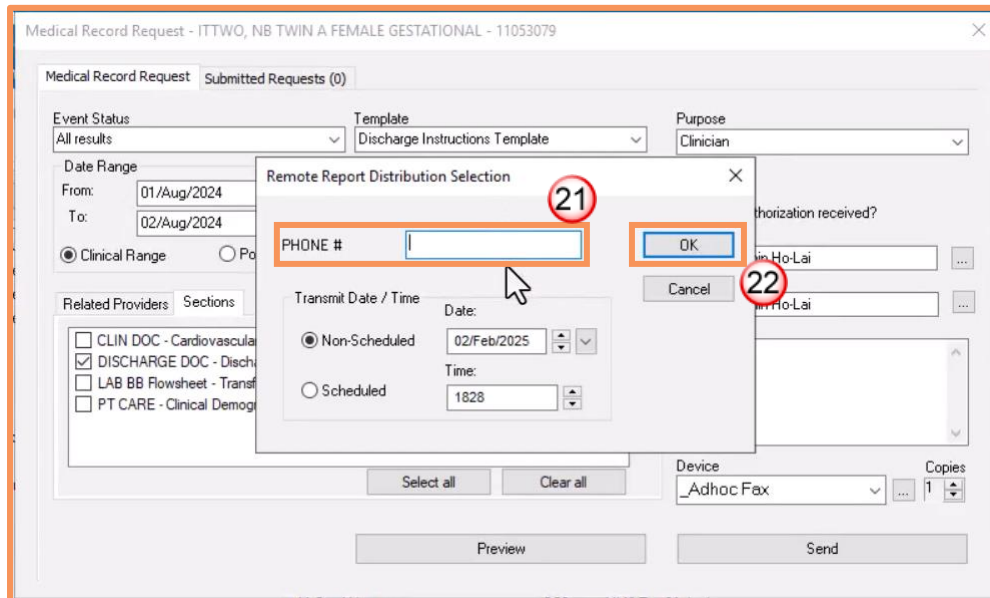
Buttons: Select all, Clear all, Preview, **Send** (circled 20)

20. Then click **“Send”**.

# MEDICAL RECORD REQUESTS, PRINTING/FAXING

## HOSPITAL INFORMATION SYSTEM (HIS)

- In the Remote Report Distribution Selection, enter the fax number (with area code included) of the receiving provider, given you have access to this information.



Medical Record Request - ITTWO, NB TWIN A FEMALE GESTATIONAL - 11053079

Medical Record Request Submitted Requests (0)

Event Status: All results | Template: Discharge Instructions Template | Purpose: Clinician

Date Range: From: 01/Aug/2024 | To: 02/Aug/2024

Remote Report Distribution Selection

PHONE # [ ]

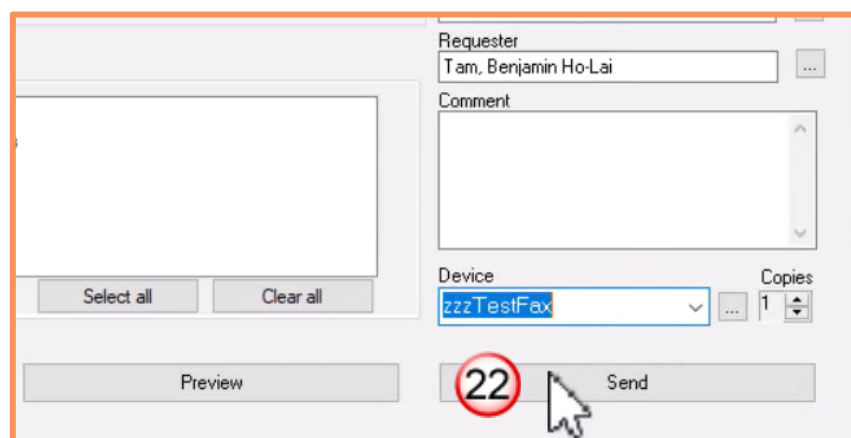
Transmit Date / Time: Date: 02/Feb/2025 | Time: 1828

OK [ ] | Cancel [ ]

Device: \_Adhoc Fax | Copies: 1

Preview [ ] | Send [ ]

- Click **“OK”** and then **“Send”** in the Medical Record Request window.



Requester: Tam, Benjamin Ho-Lai

Comment: [ ]

Device: zzzTestFax | Copies: 1

Preview [ ] | Send [ ]