

# TELEHEALTH ONLINE CLINICAL BOOKING FORM COORDINATOR GUIDE

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## A. RECEIVING A CLINICAL BOOKING FORM

1. Clinic Provider offices complete the online Clinical Booking Form and submit.
2. Coordinators will get an email in their Clinical Inbox from [SP2013@ehealthsask.ca](mailto:SP2013@ehealthsask.ca).
3. Once you open the email, click “here” to view the booking form.

From: [SP2013\\_uat@ehealthsask.ca](mailto:SP2013_uat@ehealthsask.ca) [mailto:SP2013\_uat@ehealthsask.ca]  
 Sent: Monday, January 06, 2020 3:11 PM  
 To: Falastein, Jennifer SHA  
 Subject: Please review the TH Clinical Booking form for the Patient Site Arborfield by Provider Test7on06Jan2020 on Appointment date 1/11/2024 at 19:00 Reference:

Workflow Notification

Please review the Telehealth Clinical Booking form. Upon reviewing update the task to either Approve or Reject.  
 Click [here](#) to complete the Clinical booking form.

### CLINICAL BOOKING FORM

<b>SCHEDULING</b>		
Appointment Date (mm/dd/yyyy)*: 0/20/2021	Start Time (3K)*: 14:00	End Time (3K)*: 15:00
Patient Site*: Carrot River	Telehealth Partner*: SHA Central Scheduling	Reference: scheduler 343434TMS 23435
Consultant*: Aneta, Victor	Consultant Specialty*: Anesthesiology	
Consultant Telehealth Site*: PA Hospital Suite 1	Other Site:	
Consultant Phone*: 333-888-6666	Fax:	
<b>PATIENT INFORMATION</b>		
Patient Name*: Test Training	Home Phone*: 333-888-6666	Cell Phone*: 333-888-6666
DOB (mm/dd/yyyy)*: 12/12/1994	HSC#:	
Address*: Upanwa, SK		
Alternate Contact:	Relationship: <input checked="" type="radio"/> Please select a value...	<input type="radio"/> Other
Alternate Contact Phone:		
<b>CLINICAL REQUIREMENTS</b>		
Talk Only*: <input checked="" type="radio"/> Yes <input type="radio"/> No		
Assessments Required:		
<input type="checkbox"/> Assessment form specific to clinic attached	<a href="#">Add Attachment</a>	
<input type="checkbox"/> Vital Signs (BP/Pulse/O2 Temperature)		
<input type="checkbox"/> Medication List		
<input type="checkbox"/> HR		
<input type="checkbox"/> Wt		
<input type="checkbox"/> Others (list below)		
Additional Information relevant to this appointment (e.g. specific infectious concerns with the Patient)		
<b>OTHER</b>		
Sender Name: Hryciuk, Michelle SHA	Date (mm/dd/yyyy): 09/08/2021	
Sender's Phone Number*: 333-888-6666	Email Address*: michelle.hryciuk@saskhealthauthority.ca	
<b>COORDINATOR'S APPROVAL SECTION</b>		
Approval Required: <input type="radio"/> Approved <input type="radio"/> Rejected		
Comments:		
<a href="#">Submit</a>	<a href="#">Cancel</a>	<a href="#">Print to PDF</a>

# TELEHEALTH ONLINE CLINICAL BOOKING FORM

## COORDINATOR GUIDE

#### 4. IMPORTANT NOTES:

##### a. REFERENCE FIELD

- i. This field used for identifiers such as Out of Province (OOP) booking numbers or SCA identifiers; these numbers will appear in the subject line of email notifications.
- ii. For OOP bookings, use this format example: **iScheduler # 00000 / TMS # 00000**. Coordinator must add **TMS #** to the reference field **BEFORE** approving and submitting.

##### b. CLINICAL REQUIREMENTS

- i. Attached "Assessments Required" form:
  1. Providers can attach an APPROVED assessment form that contains all the information needed prior to the clinic.
  2. The form must be APPROVED by the Virtual Care Team prior to utilizing, they are advised to contact Virtual Care if they have questions about the form.
- ii. "Assessment Required" menu:
  1. Providers may select options from the list of assessments and MUST provide instructions on what to do with that information in the "additional information" section.
  2. Providers may also add specific information requests such as chest auscultation, edema assessment, etc and add this information in the "additional information" section of the booking form.

#### 5. Coordinator will review the requested date/time/location:

- i. If request can be accommodated, continue on to STEP 6. If NOT, skip to section B.
- ii. **NOTE:** Providers are to phone for any SAME DAY or URGENT requests (**less than 3 days before clinic date**) to verify availability **PRIOR** to submitting booking request. If they have not done so, please call to remind them.

#### 6. Coordinator will add way-finding instructions in the "comment section" for the provider to contact their patients. Example below:

*Thank you for your email. This is to confirm that we have received your booking request and it is completed. Please contact the patient directly to notify about the appointment and provide the wayfinding instructions, which are found below.*

*If you have any other questions, please email us at < your email address> or phone us at: <your phone number>*

*\*Insert Endpoint Name & Troubleshooting info\**

*\*Insert patient site wayfinding instructions\**

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7. Now click “**Approved**” and Submit.

**COORDINATOR'S APPROVAL SECTION**

Approval Required:  **Approved**  Rejected

Comments: If you have any other questions, please email us at [VirtualCareClinicalBooking@saskhealthauthority.ca](mailto:VirtualCareClinicalBooking@saskhealthauthority.ca) or phone us at: 1-855-557-6602.  
"Endpoint Name: Hudson Bay Health Facility"

8. Provider office will receive an email that booking has been approved.

 SP2013\_uat@ehealthsask.ca  Hrychuk, Michele SHA Mon 11:23 AM

Coordinator has reviewed and Approved the Clinical booking form for the Patient Site Carrot River by Provider Dr Test on 6/6/2020

Workflow Notification

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Coordinator has reviewed and updated the Clinical booking form with following information

Status: Approved  
Appointment Date: 6/6/2020  
Site: Carrot River  
Clinic Type: Neurology  
Coordinator's Comments: Approved it

9. The Booking Form will display on your landing page. If this is your first time logging on to the site, sign in using SHA or myehealth account credentials and bookmark the site:

<https://collaboration.web.ehealthsask.ca/sites/telehealth/booking/SitePages/Home.aspx>

10. The Home page of the online clinical booking form is a portal to access both the online clinical booking form and Provider/Coordinator Landing pages. Click on the URL located on your landing page to see bookings created for scheduled patients in your facilities.

Welcome to the Telehealth Saskatchewan Clinical Booking Form

To submit a booking form, please click [Clinical Booking Form](#)

To view the Clinical Booking Form User Guide, click on [CBF - Coordinator User Guide](#) or [CBF - Provider User Guide](#)

To view a Provider or Group Landing Page, please select from the list below:

URL

...

Click link below to see the bookings you submitted for "Other" Consultants:

[Other Consultant](#)

Below are the Duplicate Bookings you have submitted. To delete a Duplicate entry, please send a request to [VirtualCareClinicalBooking@saskhealthauthority.ca](mailto:VirtualCareClinicalBooking@saskhealthauthority.ca)

Find an Item

Search Filter: Patient Name Patient Site Patient Phone Primary Contact

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11. If your landing page is open when bookings are submitted by the Provider office, you will need to refresh your page for them to appear. Please get into the habit of doing this regularly in the day.
12. Clinical bookings will auto-delete at midnight on the day the clinic is completed.

## B. REJECTING CLINIC REQUESTS

1. If date/time for clinical request is not available, select “Rejected” and add reason for rejecting in the comment section. See below example from SHA Central Scheduling:

*Thank you for your booking. This is to confirm that we have received your booking request. We are unable to accommodate the requested booking. Alternate times available that day are .... Please submit a revised booking*  
*If you have any other questions, please email us at*  
[VirtualCareClinicalBooking@saskhealthauthority.ca](mailto:VirtualCareClinicalBooking@saskhealthauthority.ca).  
*Or phone us at: 1-833-337-6602.*

2. Click Submit.

<b>COORDINATOR'S APPROVAL SECTION</b>	
Approval Required: <input type="radio"/> Approved <input checked="" type="radio"/> Rejected	
Comments:	<div style="border: 1px solid gray; padding: 2px; min-height: 20px;">Thank you for your booking. This is to confirm that we have received your booking request. We are unable to accommodate the requested booking. Alternate times available that day are .... Please submit a revised booking If you have any other questions, please email us at <a href="mailto:VirtualCareClinicalBooking@saskhealthauthority.ca">VirtualCareClinicalBooking@saskhealthauthority.ca</a></div>

Submit   Cancel   Print to PDF

3. The Provider site will receive an email containing a link to **MODIFY** the booking form with an alternate date/time.
4. Once modification is submitted, Coordinator will receive an email and must “approve” or “reject” the new date/time.
5. If Coordinator can approve new date/time, go back up to A- step 6 to complete the full process.

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## C. PRINTING/SAVING CLINICAL BOOKING FORM

1. If you need to print/scan a copy of the booking form.
2. Click “Print to PDF” to print or save.

3. If the booking form contains “clinical assessment forms”, you must also send copy of this attachment when forwarding on to the patient site as it will not print once embedded in the PDF.
4. Following clinic, destroy all copies of the form as per your organization’s policies.

## D. CANCELLING A CLINIC

1. If for any reason the clinical appointment needs to be cancelled, either by the patient or provider, communication must go to all involved (provider office and approving Coordinator).
2. Email is the preferred method of communication up to 3 business days in advance of appointment. If less than 3 days, you **must** phone to communicate the cancellation.
3. The Coordinator will cancel the booking and appointment will disappear from both Coordinator and Provider landing pages.
  - a. Find clinical booking on landing page
  - b. Click on (...) by the booking
  - c. Select “Delete Item”

Kelsey Trail	...	Nipawin C	Tyler Gorse	4/12/2018	1:30 PM	Mental Health Therapist
Kelsey Trail	...	View Item	Anson Scott	4/11/2018	3:00 PM	Psychiatry
Kelsey Trail	...	Edit Item	ROBERT HAY	4/6/2018	3:40 PM	INTERNAL MEDICINE
Kelsey Trail	...	Compliance Details	Eva Lefebvre	4/4/2018	10:20 AM	RRMC
Kelsey Trail	...	Workflows	Cade Munro	4/3/2018	10:30 AM	Psychiatry
Kelsey Trail	...	View Workflow History	Morgan Christianson	3/27/2018	1:30 PM	Mental Health Therapist
Kelsey Trail	...	Schedule Workflows	Donald Nicholson	3/26/2018	1:00 PM	Nephrologist
Kelsey Trail	...	Alert me	Campbell Stuart	3/23/2018	1:30 PM	Psychology
Kelsey Trail	...	Shared With	Tomaso Alfonso Ventura	3/20/2018	10:00 AM	Psychiatry
Kelsey Trail	...	Shared With	Kailyana Alfonso Ventura	3/20/2018	10:30 AM	Psychiatry
Kelsey Trail	...	Delete Item	Patrick Young	3/20/2018	2:15 PM	TB Prevention & Control