



Education

How to Manage Health Conditions, Medications, Health Care Plans & Doctor Details in ERN

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Lead Paragraph


This guide shows how to manage Health Conditions, Medications, Health Care Plans and Doctor Details

Background information

ERN Health Conditions, Medications, Health Care Plans and Doctor Details are available on Student Profile that is accessed by Student Enquiry tab.



 - To view, add new, modify or delete Health Conditions, Medications and attach Health Care Plans

 - To view, add new, modify or delete Doctor Details

Before you start

Users must be provisioned with access for Student Administration via ERN in AMU

Detailed Instructions – Add a new Health condition, Medication and attach a Health Care Plan

1. Select Student Enquiry



2. Search for the Student by entering the search criteria and select Go

Search Criteria

School: ghSchool | Calendar Year: 2021 | Scholastic Year: SI | Enrolment Type: All

Registration Offering: All | Registration Status: All | Student Group: All

Family Name: | Given Name: | SRN:

Screen Options

Name Search Mode: Go simple search | Show students with: Active Registrators

Run in quick mode:

Go

3. Select the student from the list

Note: In the **Matching Students** list Students with the existing health conditions are displayed with an Orange Flag



Students with existing high-risk health conditions are displayed with an Orange Flag with an exclamation mark. High-risk conditions include Diabetes, Epilepsy, severe Asthma, Anaphylaxis etc.



Students with existing high-risk health conditions with missing information are displayed with an Orange Flag with a red exclamation mark inside a red circle



| SRN | Student name | Gender | D.O.B | Roll Class | Status |
|-----|--------------|--------|-------------|------------|--------------------------|
| | | M | 24-Jun-2008 | | Enrolled (In Attendance) |
| | | F | 26-Nov-2007 | | Enrolled (In Attendance) |
| | | F | 10-Jun-2007 | | Enrolled (In Attendance) |
| | | M | 10-Apr-2007 | | Enrolled (In Attendance) |
| | | M | 25-Oct-2007 | | Enrolled (In Attendance) |

4. Select on the top of the student profile





5. Select Create to add a new Health Condition

Health Detail

*Need : *Start Date : 15/09/2021 Review Date : *End Date : 31/12/2999

Diagnosed by doctor? :

Has the student been hospitalised for this condition? :

*Note :

0/2048

*Has an Emergency Response Plan covering this condition been developed/provided? :

*Has an individual Health Care Plan covering this condition been developed? :

Medications

Add Prescribed Medication

Back Cancel Save Save & Exit

6. Select the associated Health Condition from the available options

Health Detail

*Need : *Start Date : 15/09/2021 Review Date : *End Date : 31/12/2999

Allergies
 ALF - Allergy- fish
 ALS - Allergy- shellfish
 ALL - Allergy- soy
 ASE - Allergy- sesame
 ALW - Allergy- wheat
 ALC - Allergy- cow's milk
 ALE - Allergy- egg
 ALO - Allergy- other
 ALI - Allergy- insect sting/bite
 ALM - Allergy- medication
 ALP - Allergy- peanuts
 ALT - Allergy- tree nuts

Others
 AST - Asthma - Severe
 DIA - Diabetes
 ASH - Asthma
 EPI - Epilepsy
 OTH - Other Health Condition
 OHR - Other High Risk Health Condition

*Note :

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Medications

Add Prescribed Medication

Back Cancel Save Save & Exit

*Indicates mandatory field.

7. Populate the other required fields and select Save

- The **Start Date** will auto-populate with today's date and the **End date** with 31/12/2999. You can change these dates as required.
- **Note:** Description added in the “Notes” field will be visible when you click on the orange flag in student enquiry tab.
- **Note:** Review Date is selected to indicate the date that a review of the document is required (this is not a mandatory field)
- **Note:** Description added in the **Notes** field will be visible when you click on the **Orange Flag** in **Student Enquiry** tab
- **Note:** If **Diagnosed by doctor?** answer is Yes, doctor selection field will appear to select doctor details. If doctor detail has not been added to the student, please refer to **Add doctor details** QRG
- **Note:** If **Health Care Plan** answer is Yes, a **Review Date** box will appear. Insert the date that a review of the document is required (this is a mandatory field)
- **Note:** If **Autoinjector** answer is Yes, a message will display to use ebs:central autoinjector module to enter the expiry date and batch number of the autoinjector

Populate the other required fields

Select **Save**

Note: Health Condition details added in ERN will be available to view in ebs:central

8. Select paperclip icon to attach a ASCIA Action Plan for Allergic Reactions and/or a Health Care Plan

Health Detail

*Need : ALS - Allergy- shellfish

*Start Date : 15/09/2021 Review Date : 30/09/2021 *End Date : 31/12/2999

Diagnosed by doctor? : Yes

Doctor? : Dr John Smith Daytime Phone Number: 0400000000

*Is this a Severe Allergy (Anaphylaxis)? : No

Has the student been hospitalised for this condition? :

*Note : This kid has been diagnosed with the Shellfish Allergy.

55/2048

*Has an ASCIA Action Plan for Allergic Reactions been provided? : Yes

*Has an individual Health Care Plan covering this condition been developed? : Yes

*Review Date : 22/09/2022

*Has the student been prescribed an adrenaline autoinjector? : No

Use the obs:central autoinjector module to enter the autoinjector details
You will need Auto Injector Expiry Date and Batch Number

9. Select Add Document

Medical Documents

Existing Documents

No Health Plans uploaded

Cancel Add Document

If Health Plans have previously been uploaded the following screen will appear. In either instance, select the **Add Document** button to add a new Health Plan

Medical Documents

Existing Documents

| File Name | School Owner | Plan Type | Health Condition | Last Update Date | Updated By | Attachment |
|----------------------|--------------|---------------------------------------|------------------|------------------|---------------|------------|
| Health Care Plan.pdf | All Schools | ASCIA Action Plan - Allergic Reaction | All Conditions | 15/09/2021 | ABHI.TALIKOTI | |

Cancel Add Document

10. Select the Documentation Type required and select Browse to attach a document

New Document

School : High School Health Condition : Allergy- shellfish

Documentation Type : ASC2 - ASCIA Action Plan - Allergic Reaction

Upload Document : Browse... Health Care Plan.docx

Cancel Save Save & Exit

11. Select Save



Medical Document has been successfully updated.

Medical Documents

Existing Documents

| File Name | School Owner | Plan Type | Health Condition | Last Update Date | Updated By | Attachment |
|----------------------|--------------|---------------------------------------|------------------|------------------|---------------|------------|
| Health Care Plan.pdf | All Schools | ASCIA Action Plan - Allergic Reaction | All Conditions | 15/09/2021 | ABHI.TALIKOTI | |

Cancel Add Document

12. Select Add Prescribed Medication to add medication details

Health Detail

*Need : ALS - Allergy- shellfish

*Start Date : 15/09/2021

Review Date : 30/09/2021

*End Date : 31/12/2999

Diagnosed by doctor? : Yes

Doctor? : Dr John Smith Daytime Phone Number: 0400000000

*Is this a Severe Allergy (Anaphylaxis)? : No

Has the student been hospitalised for this condition? :

*Note : This kid has been diagnosed with the Shellfish Allergy.

55/2048

*Has an ASCIA Action Plan for Allergic Reactions been provided? : Yes

*Has an individual Health Care Plan covering this condition been developed? : Yes

*Review Date : 22/09/2022

*Has the student been prescribed an adrenaline autoinjector? : No

Use the ebs:central autoinjector module to enter the autoinjector details
You will need Auto Injector Expiry Date and Batch Number

Last Update Date : 15/09/2021 Updated by : ABHI.TALIKOTI

Medications

Add Prescribed Medication

Back Print Cancel Save Save & Exit End Date

13. Populate the required medication details

Last update date : 15/09/2021 updated by : ABHI.TALIKOTI

Medications

| Medication Type | Administered By | Has Been Provided | Start Date | Review Date | Expiry Date | End Date |
|-----------------|------------------------------------|-------------------|--------------|-------------|-------------|--------------|
| * Other | * Administered by Authorised Staff | * Yes | * 15/09/2021 | | Jun 2023 | * 31/12/2023 |

*Name : Claratyne

Dosage : 1

1 tablet everyday after lunch time.

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Moorebank High School
Last updated: 24/09/2021
ABHI.TALIKOTI

Add Prescribed Medication

Back Print Cancel Save Save & Exit End Date

*Indicates mandatory field.

At **Name** insert the name of the medication. Notes can be used to include information about the name/brand of medication, type of medication eg. Nasal spray, tablet and the dosage and time to be given.

14. Select Save or Save & Exit

Last update date : 24/09/2021 updated by : ABHILASHKOTI

| Medication Type | Administered By | Has Been Provided | Start Date | Review Date | Expiry Date | End Date |
|-------------------|------------------------------------|-------------------------------------|--------------|---|-------------|--------------|
| * Other | * Administered by Authorised Staff | * Yes | * 15/09/2021 | | Jun 2023 | * 31/12/2023 |
| *Name : Claratyne | | 1 tablet everyday after lunch time. | | Moorebank High School Last updated: 24/09/2021 ABHILASHKOTI | | |
| Dosage : 1 | | 35/2048 | | | | |

Add Prescribed Medication

Back Print Cancel Save Save & Exit End Date

*Indicates mandatory field.

Adding a Health Condition, Medication and attaching a Health Care Plan Document has now been completed successfully.

Detailed Instructions – Add Doctor Details

1. Select Student Enquiry

- ERN School Enrolment
 - Registration
 - Student Enquiry
 - Data Harvest
 - Place Management
 - Extract Share Student
 - My School
 - Collegiate Transition
 - Court Order Maintenance
 - Suspension Maintenance
 - Reports
 - Data Change Logs
 - Maintain EAL/D
 - Personalised Learning & Support
 - Access Request
 - Disability Adjustments
 - Online Enrolment
 - Curriculum Reference Data
 - General Functions**
 - My Reports
 - My Profile
 - Log off

2. Search for the Student by entering the search criteria and select Go

Search Criteria

School: ghSchool Calendar Year: 2021 Scholastic Year: 15 Enrolment Type: All

Registration Offering: All Registration Status: All Student Group: All

Family Name: Given Name: SRN:

Screen Options

Name Search Mode: Go simple search Show students with: Active Registrations

Run in quick mode:

Go

3. Select the student from the list



Note: Students with the existing medical conditions are displayed with the Orange Flags

| SRN | Student name | Gender | D.O.B | Roll Class | Status |
|-----|--------------|--------|-------------|------------|--------------------------|
| | | M | 24-Jun-2008 | | Enrolled (In Attendance) |
| | | F | 26-Nov-2007 | | Enrolled (In Attendance) |
| | | F | 10-Jun-2007 | | Enrolled (In Attendance) |
| | | M | 10-Apr-2007 | | Enrolled (In Attendance) |
| | | M | 25-Oct-2007 | | Enrolled (In Attendance) |

4. Select on the top of the student profile and select Create

Student: (44) (Year 7 - 7M ENG)

| Family Details | Student Details | Others | Reg. His. | Search Again |
|----------------|-----------------|--------|-----------|--------------|
| | | | | |

Dossier Details: Health Condition

No Health Conditions exist

5. Populate the required details

Save Medical Contact Details

*Contact Name :

Daytime Phone Number :

Mobile Phone Number :

More Contact Details :

Address Details :

Permission to contact doctor :

*Priority :

6. Select to add more contact details and select Create

Contact Details : Dr John Storg

| Contact Type | Contact Details | Priority |
|-------------------------------------|-------------------------------|----------|
| <input checked="" type="checkbox"/> | Daytime Phone Number 12345678 | 1 |

Medical Contact:

Contact Type :

7. Populate required details and Save or Save & Exit

Contact Details : Dr John Storg

| Contact Type | Contact Details | Priority |
|----------------------|-----------------|----------|
| Daytime Phone Number | 12345678 | 1 |

Medical Contact: Dr John Storg

Contact Type : EMAIL - E-Mail

Cancel Create

Save Contact Details : Dr John Storg; E-Mail

*Contact Data : abc.test@gmail.com ✓

Comments : Send an email if can't be reached on phone

*Priority : 2

Back Cancel Save Save & Exit

Contact has been successfully created.

Student (Year 7 - 7M E)

| Family Details | Student Details | Others | Reg. His. | Search Again |
|----------------|-----------------|--------|-----------|--------------|
| | | | | |

Contact Details : Dr John Storg

| Contact Type | Contact Details | Priority |
|----------------------|--|----------|
| Daytime Phone Number | 12345678 | 1 |
| E-Mail | abc.test@gmail.com Send an email if can't be reached on phone | 2 |

Medical Contact: Dr John Storg

Contact Type : EMAIL - E-Mail

Cancel Create

8. Select to add address

| Family Details | Student Details | Others | Reg. His. | Search Again |
|----------------|-----------------|--------|-----------|--------------|
| | | | | |

Medical Contacts

| Name | Contact Details | Address Details | Priority |
|---------------|--|---------------------------------------|----------|
| Dr John Smith | Daytime Phone Number: 0400000000 Please call 9 to 5 | Business: 6-8 Central Avenue EVELEIGH | 1 |
| Dr John Storg | Daytime Phone Number: 12345678 | Not Provided | 2 |

Cancel Create

Save Medical Contact Details

*Contact Name : Dr John Storg

Daytime Phone Number : 12345678

Mobile Phone Number :

More Contact Details :

Address Details :

Permission to contact doctor : Yes

*Priority : 2

Back Cancel Save Save & Exit Delete

9. Select address type and select Create

| Family Details | Student Details | | | | | | | Others | Reg. His. | Search Again | | | | |
|----------------|-----------------|--|--|--|--|--|--|--------|-----------|--------------|--|--|--|--|
| | | | | | | | | | | | | | | |

Address Detail

Address Type :

10. Populate required fields and Save or Save & Exit

Address Detail

Address Type :

Address Details: Dr John Stormg; Business

Address Search : Enter the address, the system will narrow the search as you enter more details
 Enter the address in the following format: 1 Street Name, Suburb Name, Post Code, State ** It is not necessary to separate with a comma. **

***Address :**

***Valid From Date :**

***Valid To Date :**

Suburb :

State :

Post Code :

***Country :**

Validated
 Accepted



Address has been successfully created.

Student: (Year 7 - 7M ENG) v:

| Family Details | Student Details | Others | Reg. His. | Search Again |
|----------------|-----------------|--------|-----------|--------------|
| | | | | |

Medical Contacts

| Name | Contact Details | Address Details | Priority |
|---------------|---|---------------------------------------|----------|
| Dr John Smith | Daytime Phone Number: 0400000000 Please call 9 to 5 | Business: 6-8 Central Avenue EVELEIGH | 1 |
| Dr John Storg | Daytime Phone Number: 12345678 | Business: 6-8 Central Avenue EVELEIGH | 2 |

Cancel Create

Save Medical Contact Details

***Contact Name :**

Daytime Phone Number :

Mobile Phone Number :

More Contact Details :

Address Details :

Permission to contact doctor :

***Priority :**

Back Cancel Save Save & Exit Delete

Adding a Doctor Detail has now been completed successfully.


Detailed Instructions – View or edit Health conditions, Medications and Health Care Plan

1. Select Student Enquiry

- ▶ **ERN School Enrolment**
- ▶ Registration
- ▶ Student Enquiry
- ▶ Data Harvest
- ▶ Place Management
- ▶ Extract Share Student
- ▶ My School
- ▶ Collegiate Transition
- ▶ Court Order Maintenance
- ▶ Suspension Maintenance
- ▶ Reports
- ▶ Data Change Logs
- ▶ Maintain EAL/D
- ▶ Personalised Learning & Support
- ▶ Access Request
- ▶ Disability Adjustments
- ▶ Online Enrolment
- ▶ Curriculum Reference Data
- General Functions**
- ▶ My Reports
- ▶ My Profile
- ▶ Log off

2. Search for the Student by entering the search criteria and select Go

3. Select the student from the list

Note: Students with the existing medical conditions are displayed with the Orange Flags 



| SRN | Student name | Gender | D.O.B | Roll Class | Status |
|-----|--------------|--------|-------------|------------|--------------------------|
| | | M | 24-Jun-2008 | | Enrolled (In Attendance) |
| | | F | 26-Nov-2007 | | Enrolled (In Attendance) |
| | | F | 10-Jun-2007 | | Enrolled (In Attendance) |
| | | M | 10-Apr-2007 | | Enrolled (In Attendance) |
| | | M | 25-Oct-2007 | | Enrolled (In Attendance) |

4. Select on the top of the student profile to view/ edit Medical Conditions



| Family Details | | | | Student Details | | | | Others | | | | Reg. His. | Search Again | |
|----------------|--|--|--|-----------------|--|--|--|--------|--|--|--|-----------|--------------|--|
| | | | | | | | | | | | | | | |

| Need | Start Date | Review Date | End Date | Last Update Date | Anaphylaxis | High Risk | ASCIA or Emergency Plan | Health Care Plan |
|--------------------|------------|-------------|------------|------------------|-------------|-----------|-------------------------|------------------|
| Allergy- shellfish | 15/09/2021 | 30/09/2021 | 31/12/2999 | 15/09/2021 | No | No | Yes | Yes |

Cancel Create

5. Select the Medical Condition to view/edit Medical Conditions, Medications or attach Health Care plan

Family Details Student Details Others Reg. His. Search Again

| Need | Start Date | Review Date | End Date | Last Update Date | Anaphylaxis | High Risk | ASCIA or Emergency Plan | Health Care Plan |
|--------------------|------------|-------------|------------|------------------|-------------|-----------|-------------------------|------------------|
| Allergy- shellfish | 15/09/2021 | 30/09/2021 | 31/12/2999 | 15/09/2021 | No | No | Yes | Yes |

Cancel Create

Health Detail

*Need : ALS - Allergy- shellfish *Start Date : 15/09/2021 Review Date : 30/09/2021 *End Date : 31/12/2999

Diagnosed by doctor? : Yes
 Doctor? : Dr John Smith Daytime Phone Number: 0400000000

*Is this a Severe Allergy (Anaphylaxis)? : No
 Has the student been hospitalised for this condition? :

*Note : This kid has been diagnosed with the Shellfish Allergy.
55/2048

*Has an ASCIA Action Plan for Allergic Reactions been provided? : Yes
 *Has an individual Health Care Plan covering this condition been developed? : Yes *Review Date : 22/09/2022

*Has the student been prescribed an adrenaline autoinjector? : No Use the ebs:central autoinjector module to enter the autoinjector details. You will need Auto Injector Expiry Date and Batch Number.

Last Update Date : 15/09/2021 Updated by : ABHI.TALIKOTI

Medications

6. Select paperclip to view or attach a new document

| Need | Start Date | Review Date | End Date | Last Update Date | Anaphylaxis | High Risk | ASCIA or Emergency Plan | Health Care Plan |
|--------------------|------------|-------------|------------|------------------|-------------|-----------|-------------------------|------------------|
| Allergy- shellfish | 15/09/2021 | 30/09/2021 | 31/12/2999 | 15/09/2021 | No | No | Yes | Yes |

Cancel Create



Health Detail

*Need : ALS - Allergy- shellfish *Start Date : 15/09/2021 Review Date : 30/09/2021 *End Date : 31/12/2999

Diagnosed by doctor? : Yes
 Doctor? : Dr John Smith Daytime Phone Number: 0400000000

*Is this a Severe Allergy (Anaphylaxis)? : No
 Has the student been hospitalised for this condition? :

*Note : This kid has been diagnosed with the Shellfish Allergy.
55/2048

*Has an ASCIA Action Plan for Allergic Reactions been provided? : Yes 
 *Has an individual Health Care Plan covering this condition been developed? : Yes *Review Date : 22/09/2022 

*Has the student been prescribed an adrenaline autoinjector? : No Use the ebs:central autoinjector module to enter the autoinjector details. You will need Auto Injector Expiry Date and Batch Number.

Last Update Date : 15/09/2021 Updated by : ABHI.TALIKOTI

Medications

| Medication Type | Administered By | Has Been Provided | Start Date | Review Date | Expiry Date | End Date |
|-----------------|------------------------------------|-------------------|--------------|-------------|-------------|--------------|
| * Other | * Administered by Authorised Staff | * Yes | * 15/09/2021 | | Jun 2023 | * 30/12/2999 |

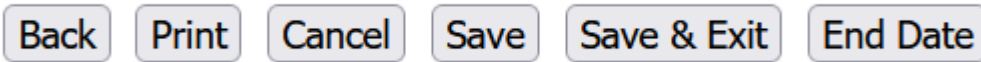
*Name : Claratyne Dosage : 1 1 tablet everyday after lunch time. Moorebank High School Last updated: 24/09/2021 ABHI.TALIKOTI

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Add Prescribed Medication

Back Print Cancel Save Save & Exit End Date

*Indicates mandatory field.



Note: If you have modified any information that you want to save, select save or save & exit.

Note: If you do not wish to save the details you modified, select cancel.

Note: If you are only viewing the information, select Cancel or Back to go the previous menu.

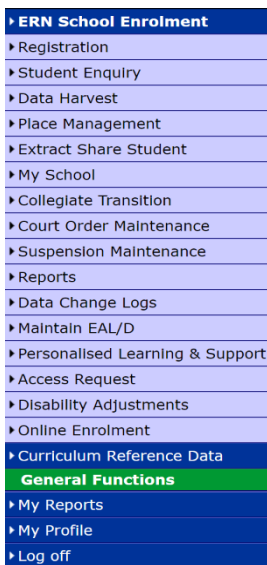
Note: If you want to end date the medical condition, select end date and system will update the health condition with end date.

Select Save or Save & Exit or Cancel

View or edit Health conditions, Medications and Health Care Plan has now been completed successfully.

Detailed Instructions – View or edit Doctor Details

1. Select Student Enquiry



2. Search for the Student by entering the search criteria and select Go

Search Criteria

School: Calendar Year: Scholastic Year: Enrolment Type:

Registration Offering: Registration Status: Student Group:




Family Name: Given Name: SRN:

Screen Options






Name Search Mode: Show students with:

Run in quick mode:

















3. Select the student from the list

Note: Students with the existing medical conditions are displayed with the Orange Flags   

Matching 5 students

| SRN | Student name | Gender | D.O.B | Roll Class | Status |
|---|--------------|--------|-------------|------------|--------------------------|
|  | | M | 24-Jun-2008 | | Enrolled (In Attendance) |
|  | | F | 26-Nov-2007 | | Enrolled (In Attendance) |
|  | | F | 10-Jun-2007 | | Enrolled (In Attendance) |
|  | | M | 10-Apr-2007 | | Enrolled (In Attendance) |
|  | | M | 25-Oct-2007 | | Enrolled (In Attendance) |

4. Select on the top of the student profile to view/ edit Doctor Details

| Family Details | Student Details | Others | Reg. His. | Search Again |
|---|---|--|---|---|
|  |           |      |  |  |

Medical Contacts

| Name | Contact Details | Address Details | Priority |
|---------------|--|---------------------------------------|----------|
| Dr John Smith | Daytime Phone Number: 0400000000 Please call 9 to 5 | Business: 6-8 Central Avenue EVELEIGH | 1 |
| Dr John Storg | Daytime Phone Number: 12345678 | Business: 6-8 Central Avenue EVELEIGH | 2 |

5. Select the Contact from the list to view/ edit information

| | | | | | | | | | | | | | | | | |
|-----------------------|------------------------|--|--|--|--|--|---------------|--|--|--|------------------|---------------------|--|--|--|--|
| Family Details | Student Details | | | | | | Others | | | | Reg. His. | Search Again | | | | |
| | | | | | | | | | | | | | | | | |

| Name | Contact Details | Address Details | Priority |
|---------------|--|---------------------------------------|----------|
| Dr John Smith | Daytime Phone Number: 0400000000 Please call 9 to 5 | Business: 6-8 Central Avenue EVELEIGH | 1 |
| Dr John Storg | Daytime Phone Number: 12345678 | Business: 6-8 Central Avenue EVELEIGH | 2 |

Save Medical Contact Details

*Contact Name :

Daytime Phone Number :

Mobile Phone Number :

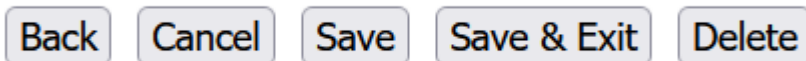
More Contact Details :

Address Details :

Permission to contact doctor :

*Priority :

6. Select Save or Save & Exit or Cancel or Delete or Back



Note: If you have modified any information that you want to save, select save or save & exit.

Note: If you do not wish to save the details you modified, select cancel.

Note: If you are only viewing the information, select Cancel or Back to go the previous menu.

Note: If you want to delete the doctor contact details, select delete.

View or edit Doctor Details has now been completed successfully.

Related resources

<https://my.education.nsw.gov.au/help/platoapps/home/ern/ern-help-index>