

User Guide

25.02.2026 CC

HealthLink SmartForms for Communicare

Enables any healthcare provider to electronically refer a patient to any other healthcare provider or related service.

All sites must be running Communicare 22.4 or greater to access the HealthLink SmartForms.



Submitting eReferrals from Communicare

Using HealthLink SmartForms

Practice management solution Communicare Clinical now has HealthLink SmartForms as part of the system. This enables Communicare users to easily refer and engage with all HealthLink SmartForms including Grampians Health, NSW LHDs, Transport for NSW and My Aged Care.

SmartForms are designed to speed up the service you can provide for your patients. They give you confidence that your form has been securely delivered to the service provider, and a copy has been saved to your Practice Software.

HealthLink Technical Support

helpdesk@healthlink.net

1800 125 036

Step 1:

Setting up HealthLink SmartForms

Step 2:

Launch HealthLink SmartForms (eReferrals)

Step 3:

Completing the form

Step 4:

Previewing, Submitting and Parking

Step 5:

Locating Parked and Submitted SmartForms

Step 1:

Setting up HealthLink SmartForms

Configuration of Healthlink Smart Forms within Communicare is to be completed by Communicare technical support. This section is included for reference and support purposes only.

Open File > “System Parameters” > “Secure Messaging” and make sure all fields in the “HealthLink” section contain the correct values.

- A. EDI/Mailbox: HealthLink EDI to use
- B. Password: respective ‘connection password’ for EDI, if not known contact Healthlink Helpdesk.
- C. Forms Engine URL: URL of the Forms Engine, should be http://, then the IP of machine where HMS Client is running
- D. Forms Engine Port: 5088, unless a different port is configured for HMS Client
- E. Session Expiry: minutes after which a Smart Forms user session expires in case it was not terminated automatically when closing the Aduro Forms window.

Click “Save”, enter Access code (obtained from Communicare Support) when prompted and restart Communicare.

The screenshot shows the 'Communicare System Parameters' dialog box with the 'Secure Messaging' tab selected. The 'Argus Configuration' section contains fields for 'Server Address' (argusv6-sv) and 'Server Port' (60000). The 'HealthLink' section contains fields for 'EDI/Mailbox' (pmsccare), 'Password' (masked with asterisks), 'Forms Engine URL' (http://localhost), 'Forms Engine Port' (5088), and 'Session Expiry' (720 minutes). At the bottom right are 'Save', 'Cancel', and 'Help' buttons.

Web Services	HealthTracker	Appearance	Integration	Prescription Forms		
System	Clinical	Patient	Appointments	Devices	Electronic Claims	Secure Messaging

Secure Messaging is a means for sending and receiving electronic documents to/from other providers and organisations.

Argus Configuration

Communicare uses Argus to send electronic documents securely. The Argus server configuration below is shared by all organisations which are a part of this Communicare site.

Server Address: Hostname or IP address of the Argus server.

Server Port: Port number of the Argus service. Default is 60000.

HealthLink

A EDI/Mailbox:

B Password:

C Forms Engine URL:

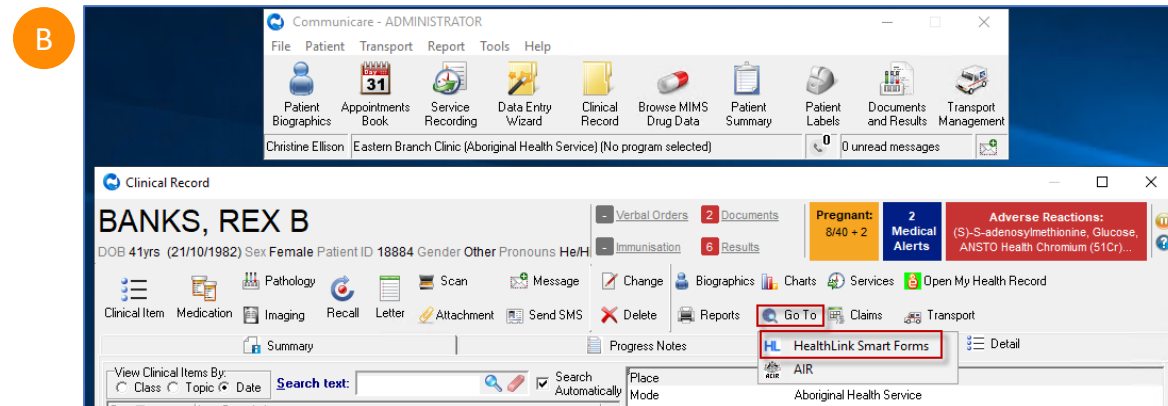
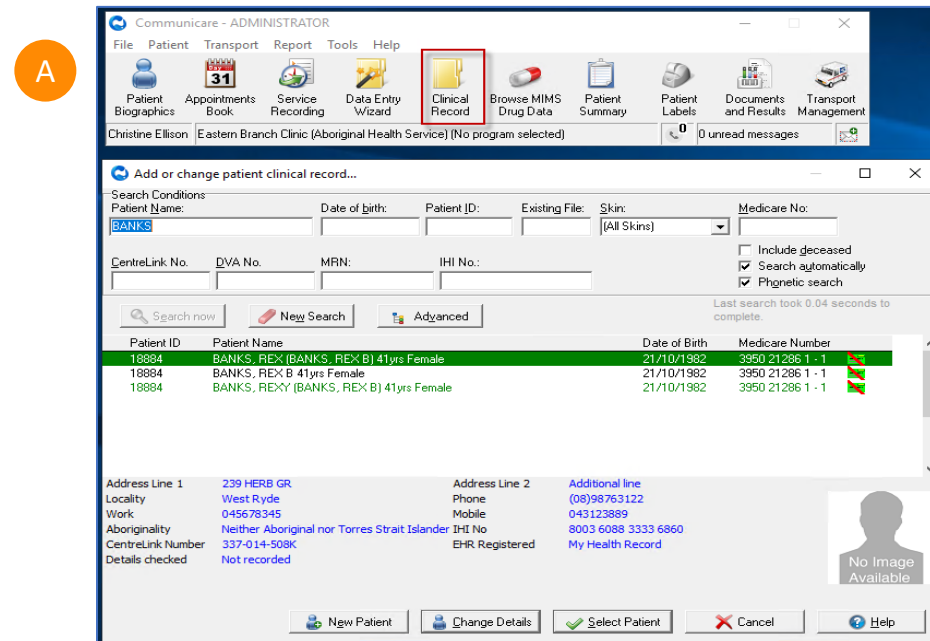
D Forms Engine Port:

E Session Expiry: Minutes

Step 2: Launch HealthLink SmartForms (eReferrals)

A Open the Clinical record tab and search for the required patient.

B Select “Go To” and click “Healthlink Smart Forms



Step 2: Launching a new form

Now you're on the HealthLink home page...

- A** Here you'll find a list of available services to refer patients.
- B** Within the **Referred Services** section, Click on the link named **Grampians Health**.

To launch the SmartForm, **Grampians Health** require you to then:

- C** • **select a specific service** and
- D** • **facility** (only if there's multiple facilities for that service)
- E** Then click **Continue** to launch the form.

For more information on Grampians Health referred services, go to: www.gh.org.au/services

The screenshot displays the HealthLink PRO interface. At the top, there's a navigation bar with 'Create', 'Update', and 'Support' links, and the 'HealthLink | PRO' logo. Below this is a 'Search a Directory' section with a search bar containing 'Specialists+Referrals Refer to Private Specialist' and a 'HL HealthLink Direct' button. The main content area is divided into sections: 'K Konnect NET', 'ReturnToWorkSA Work Capacity Certificate', and 'Spotlight Services'. The 'Referral Services' section is active, showing a list of services. A callout box highlights the 'Grampians Health' link, stating: 'The Grampians Health form can be used to send referrals to Grampians Health - Ballarat, enabling faster streamlined management of referrals. Using this form you will receive immediate confirmation of receipt by Grampians Health. Before referring to our services please visit Western Victoria Health Pathways <https://westvic.communityhealthpathways.org/> or <https://www.gh.org.au/services/specialist-outpatients-ballarat/> for conditions we treat.' Below the list, the 'Grampians Health' form is shown. It has a search bar with 'Type here to search for a service' and a 'Facility*' dropdown. The 'Gastroenterology' service is selected in the search results. A 'Continue' button is visible in the top right corner of the form.

Step 3:

Completing the form

Now you've loaded the form to complete and submit.

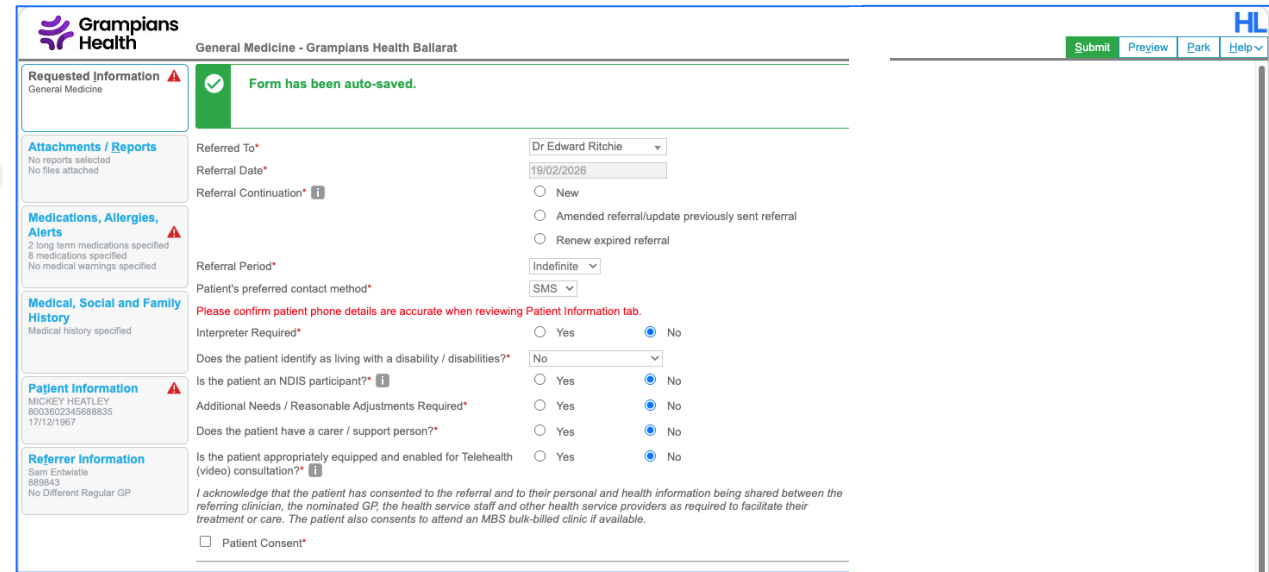
A

The SmartForm layout provides a consistent, easy-to-use tabular structure on the left, with the main action window on the right.

You'll notice SmartForms are **responsive**: They will pre-populate all available patient and referrer data and contain logic to request more specific patient information based on your selections.

B

Mandatory Fields must be completed prior to submitting the SmartForm and are each highlighted with a red asterisk.



Grampians Health General Medicine - Grampians Health Ballarat

Submit Preview Park Help

Requested Information General Medicine

Attachments / Reports No reports selected No files attached

Medications, Allergies, Alerts 2 long term medications specified 8 medications specified No medical warnings specified

Medical, Social and Family History Medical history specified

Patient Information MICKEY HEATLEY 800360234568835 17/12/1967

Referrer Information Sam Entwistle 889843 No Different Regular GP

Form has been auto-saved.

Referred To* Dr Edward Ritchie

Referral Date* 19/02/2026

Referral Continuation* ☐ New ☐ Amended referral/update previously sent referral ☐ Renew expired referral

Referral Period* Indefinite

Patient's preferred contact method* SMS

Please confirm patient phone details are accurate when reviewing Patient Information tab.

Interpreter Required* ☐ Yes ☒ No

Does the patient identify as living with a disability / disabilities? No

Is the patient an NDIS participant? ☐ Yes ☒ No

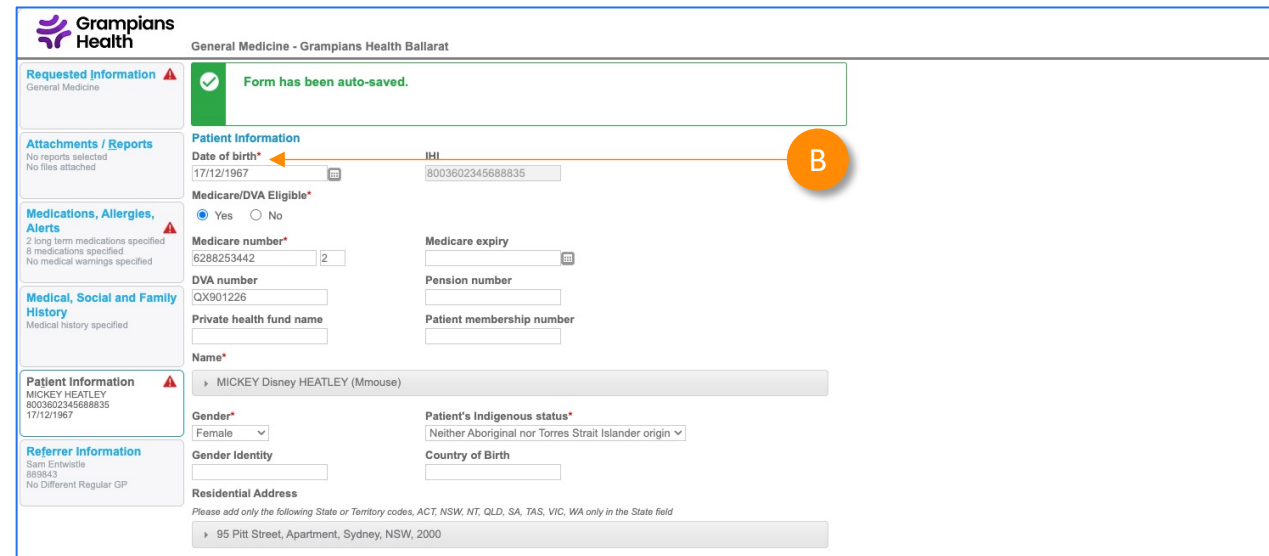
Additional Needs / Reasonable Adjustments Required* ☐ Yes ☒ No

Does the patient have a carer / support person? ☐ Yes ☒ No

Is the patient appropriately equipped and enabled for Telehealth (video) consultation? ☐ Yes ☒ No

I acknowledge that the patient has consented to the referral and to their personal and health information being shared between the referring clinician, the nominated GP, the health service staff and other health service providers as required to facilitate their treatment or care. The patient also consents to attend an MBS bulk-billed clinic if available.

☐ Patient Consent*



Grampians Health General Medicine - Grampians Health Ballarat

Submit Preview Park Help

Requested Information General Medicine

Attachments / Reports No reports selected No files attached

Medications, Allergies, Alerts 2 long term medications specified 8 medications specified No medical warnings specified

Medical, Social and Family History Medical history specified

Patient Information MICKEY HEATLEY 800360234568835 17/12/1967

Referrer Information Sam Entwistle 889843 No Different Regular GP

Form has been auto-saved.

Patient Information

Date of birth* 17/12/1967

Medicare/DVA Eligible* ☒ Yes ☐ No

Medicare number* 6288253442

DVA number QX901226

Private health fund name

Name* MICKEY Disney HEATLEY (Mmouse)

Gender* Female

Patient's Indigenous status* Neither Aboriginal nor Torres Strait Islander origin

Country of Birth

Residential Address 95 Pitt Street, Apartment, Sydney, NSW, 2000

Step 3:

Completing the form

C It will also display a **warning** for some information taken from your Practice Management Software that needs reviewing.

For example, if a contact phone number does not include an area code.

D If you need more context on the questions, you can click on the **information icons**.



C

Name*

▶ MICKEY

Patient Information

MICKEY HEATLEY
8003602345688835
17/12/1967

Gender*

Female ▼

Gender Identity

Residential Address

Please add only the following State or Territory codes, ACT, NSW, NT, QLD, SA, TAS, VIC, WA only in the State field

General Medicine

Patient's Indigenous status*

Neither Aboriginal nor Torres Strait Islander origin ▼

Country of Birth

Referrer Information

889843
No Different Regular GP

Patient's preferred contact method*

SMS ▼

Attachments / Reports

Interpreter Required*

☐ Yes ☒ No

Please confirm patient phone details are accurate when reviewing Patient Information tab.

Medical, Social and Family History

Medical history specified

Patient Information

8003602345688835
17/12/1967

Referrer Information

889843
No Different Regular GP

Referral Guidelines

Please supply all relevant information with the referral as per the guidelines in the relevant [HealthPathways](#) and [pathways \(cancer pathways\)](#)

Urgency* **D**

Routine: Greater than 30 days ▼

Referral purpose*

Please select

Referral Details*

[Browse for Consultation Notes](#)

Please indicate the presenting problem or working diagnosis

Urgency Information

High Priority

Referrals should be categorised as 'High Priority' if the patient has a condition that has the potential to deteriorate quickly with significant consequences for health and quality of life, if not managed promptly. An appointment should be scheduled within 30 calendar days of the referral being received and accepted for these patients.

Routine

Referrals should be categorised as 'Routine' if the patient's condition is unlikely to deteriorate quickly or have significant consequences for the person's health and quality of life, if specialist assessment is delayed beyond one month.

Ok

Step 3: Completing the form

Reason for referral

E In some forms there may be a drop down to select the referral purpose.

**Grampians Health**

General Medicine - Grampians Health Ballarat

Requested Information 

General Medicine

Attachments / Reports

No reports selected
No files attached

Medications, Allergies, Alerts

2 long term medications specified
8 medications specified
No medical warnings specified

Medical, Social and Family History

Medical history specified

Patient Information

8003602345688835
17/12/1967

Referrer Information

889843
No Different Regular GP

Referral Period*
Indefinite

Patient's preferred contact method*
SMS

Please confirm patient phone details are accurate when reviewing Patient Information tab.

Interpreter Required*
☐ Yes ☒ No

Does the patient identify as living with a disability / disabilities?*
No

Is the patient an NDIS participant?* 

☐ Yes ☒ No

Additional Needs / Reasonable Adjustments Required*
☐ Yes ☒ No

Does the patient have a carer / support person?*
☐ Yes ☒ No

Is the patient appropriately equipped and enabled for Telehealth (video) consultation?* 

☐ Yes ☒ No

I acknowledge that the patient has consented to the referral and to their personal and health information being shared between the referring clinician, the nominated GP, the health service staff and other health service providers as required to facilitate their treatment or care. The patient also consents to attend an MBS bulk-billed clinic if available.

☐ Patient Consent*

Referral Guidelines

Please supply all relevant information with the referral as per the guidelines in the relevant [HealthPathways](#) and [Optimal Care pathways \(cancer pathways\)](#)

Urgency* 

Routine: Greater than 30 days

Referral purpose* 

Referral Details* [Browse for Consultation Notes](#)

Please indicate the presenting problem or working diagnosis

Additional information
Please include social history, patient services and any other relevant information.



Please select

Establish a diagnosis

Provide clinical assessment

Inform a treatment plan

Partnership care

Requesting specific tests or investigations

Requesting treatments or an intervention

©HealthLink

8

Step 3:

Completing the form

Attachments

- F** The **Attachments / Reports** tab will give you access to all the supporting documents that you may wish to attach to the form.
- G** You can select any item from the **table** – showing you patient medical records captured from the **last six months**.

Or you can **browse for files...**

- H** • stored in your Practice Management Software by clicking the **Browse for Patient Document** button .
- I** **Note:** Make sure to update the date parameters if you want to see files that are older than 6 months.
- J** • **Or** in your local computer's file system by clicking the **Browse for Local File** button.

Diagnostic Reports / Patient Documents

Attach file from EMR supports: gif, html, jpeg, doc, docx, pdf, txt, rtf, tiff
Attach file from Computer supports files that end in types: doc, docx, gif, htm, html, jpeg, jpg, pdf, rtf, tif, tiff, txt
Caution: larger attachments may take significant time to preview

☐	Date	Name	Comments	Type	Size	
☐	01/09/2021	File_123		rtf	80 KB	
☒	01/10/2021	File_456		rtf	8 KB	
☒	01/11/2021	File_789		rtf	90 KB	

Attach File

Name:

Date from: 08/01/2019 Date to: 08/07/2021 Search

☐	Date	Name	Comments	Type	Size
	08/07/2021	File_One	Aged Care Referral		43 KB
	09/10/2019	File_Two	Aged Care Referral		52 KB
	01/10/2019	File_Three	Aged Care Referral		48 KB
	24/09/2019	File_Four	Aged Care Referral		44 KB

Step 3:

All these features ensure you're providing a quality, and compliant submission every time, on behalf of your patients.

[Attachments / Reports](#)

Step 4: Previewing, Submitting and Parking

Previewing

A

You can verify that the form has been completed correctly by clicking **Preview** allowing you to review the details before submitting.

B

Whether you click **Preview** or **Submit**, if a piece of required information is incomplete or incorrect, the form will notify you to complete or correct it.

Gastroenterology - Grampians Health Ballarat

Submit Preview Park Help

Requested Information

Attachments / Reports

Medical Practitioner Information

Medicare Provider Number*

HPI-I

Name

Full name

Medical Registration Number

123456

Preview, not submitted copy

Submit

Gastroenterology - Grampians Health Ballarat

Patient: MICKEY HEATLEY (Mmouse), 58yrs, F, DOB 17/12/1967, PH: 0401 201 2011, Work 03 9 23423221, Home 03 9 53532221

Residential address: 95 Pitt Street, Apartment, Sydney, NSW 2000

Postal address: 9600 Pitt Street, Apartment, Sydney, NSW 2000

Referred by: Sam Entwistle, Millstone Family Practice, Prov. No. 889843, HPI-I 123456, HPI-I 8003611566681627, PH 03 9 358 0116, FAX 03 9 4433456

Clinical Referral Information

Referred To:

Dr Timothy Elliot

Referral Date:

20/02/2026

Referral Continuation:

New

Gastroenterology - Grampians Health Ballarat

Submit Preview

Requested Information

Gastroenterology

Attachments / Reports

No reports selected

1 file attached

Medications, Allergies, Alerts

2 long term medications specified

8 medications specified

No medical warnings specified

Medical, Social and Family History

Medical history specified

Patient Information

Patient's name

8003602345688835

17/12/1967

Referrer Information

Referrer's name

889843

No Different Regular GP

Form has been auto-saved.

Please fix the following errors:

- Patient Consent is a required field

Referred To*

Dr Timothy Elliot

Referral Date*

20/02/2026

Referral Continuation*

New

Amended referral/update previously sent referral

Renew expired referral

Referral Period*

Indefinite

Patient's preferred contact method*

SMS

Please confirm patient phone details are accurate when reviewing Patient Information tab.

Interpreter Required*

Yes

No

Does the patient identify as living with a disability / disabilities?*

No

Is the patient an NDIS participant?*

Yes

No

Additional Needs / Reasonable Adjustments Required*

Yes

No

Does the patient have a carer / support person?*

Yes

No

Is the patient appropriately equipped and enabled for Telehealth (video) consultation?*

Yes

No

I acknowledge that the patient has consented to the referral and to their personal and health information being shared between the referring clinician, the nominated GP, the health service staff and other health service providers as required to facilitate their treatment or care. The patient also consents to attend an MBS bulk-billed clinic if available.

☐ Patient Consent*

Step 4: Previewing, Submitting and Parking

Submitting

- C** When you are ready to send your form, click **Submit**.
- D** This will safely and securely send the form electronically via HealthLink, and you will see a copy of the completed form with a **date stamp**.

A copy of the submitted form is saved directly to the patient file.

- E** If you'd like to provide the patient with a copy, you can left-click the **Print** button or right-click anywhere on the submitted form and choose Print.

Grampians Health Gastroenterology - Grampians Health Ballarat

Submit **Preview** **Park** **Help** ✓

Requested Information **Medical Practitioner Information**

General Surgery

Medicare Provider Number* 889843 Medical Registration Number

HPI-I 8003611566681627 HPI-O 123456

Name Full name Sam Entwistle ⓘ

Practice name Millstone Family Practice

Practice Address

Form sent on 20/02/2026 09:34 AEST

Print

Gastroenterology - Grampians Health Ballarat

Grampians Health

Patient: Patient's name, 58yrs, F, DOB 17/12/1967, PH: 0401 201 2011, Work 03 9 23423221, Home 03 9 53532221

Residential address: 95 Pitt Street, Apartment, Sydney, NSW 2000

Postal address: same as residential address

Referred by: Referrer, Millstone Family Practice, Prov. No. 889843, HPI-O 123456, HPI-I 8003611566681627, PH 03 9 358 0116, FAX 03 9 4433456

Referral date: 20/02/2026 12:19 NZDT

Clinical Referral Information

Referred To:	Dr Timothy Elliot
Referral Date:	20/02/2026
Referral Continuation:	New
Referral Period:	Indefinite
Patient's preferred contact method:	SMS

Step 4: Previewing, Submitting and Parking

Parking

F And if you need more information to complete the form, you can **Park** the form to save what you've done so far and come back to it later.


Grampians Health

Gastroenterology - Grampians Health Ballarat

Submit

Preview

Park

Help

Requested Information

Gastroenterology

Attachments / Reports

No reports selected
No files attached

Medications, Allergies, Alerts

2 long term medications specified
8 medications specified
No medical warnings specified

Medical, Social and Family History

Medical history specified

Patient Information

Patient's name
8003602345688835
17/12/1967

Referrer Information

Referrer's name
889843
No Different Regular GP

Form parked successfully. Please note that attachments selected from your PC need to be re-attached when resuming the parked form.

F

Referred To*

Dr Timothy Elliot

Referral Date*

20/02/2026

Referral Continuation*

☐ New
☐ Amended referral/update previously sent referral
☐ Renew expired referral

Referral Period*

Indefinite

Patient's preferred contact method*

SMS

Please confirm patient phone details are accurate when reviewing Patient Information tab.

Interpreter Required*

☐ Yes
☒ No

Does the patient identify as living with a disability / disabilities?*

No

Is the patient an NDIS participant?*

☐ Yes
☒ No

Additional Needs / Reasonable Adjustments Required*

☐ Yes
☒ No

Does the patient have a carer / support person?*

☐ Yes
☒ No

Is the patient appropriately equipped and enabled for Telehealth (video) consultation?*

☐ Yes
☒ No

I acknowledge that the patient has consented to the referral and to their personal and health information being shared between the referring clinician, the nominated GP, the health service staff and other health service providers as required to facilitate their treatment or care. The patient also consents to attend an MBS bulk-billed clinic if available.

☐ Patient Consent*

Step 5:

Locating Parked and Submitted SmartForms

Submitted and parked Smart Forms can be found in two locations within Communicare:

- A Within the Details tab of a patient's Clinical Record.
- B Due to Communicare's naming convention SmartForms will all display with Item Description "Smart Form"...
- C ...followed by what had been entered within the "Comments" field at the bottom of the Form screen (Shown in the screenshot above).

The screenshot displays the Communicare Clinical Record interface for patient REX B. The interface is divided into several sections:

- Header:** Patient name REX B, DOB 41yrs (21/10/1982), Sex Female, Patient ID 18884, Gender Other, Pronouns He/H.
- Navigation Bar:** Includes tabs for Verbal Orders, Documents, Pregnant (8/40 + 2), Medical Alerts (2), Adverse Reactions, Immunisation, and Results.
- Summary Tab:** The 'Details' tab is selected, showing a list of clinical items. The list includes several 'Smart Form' entries with descriptions like 'testform', 'parked form', 'Tasman Health Service form', 'Eastern Health', 'Eastern Health Form', and 'Monash health Form - patient is sick'. A red box highlights the 'Smart Form' entries, and a red box highlights the 'Comments' field at the bottom.
- Referral Information:** Includes fields for Referral Date (04/07/2024), Urgent status, Referral Type (New, Continuation, Amendment/Update), Expectation of referral (Advice), Referral period (12 Months), and questions about the patient's usual GP and other relevant specialists.
- Patient Information:** Includes fields for Patient Name (MICKEY BLOOMFIELD), Patient ID (QX901226), and Date of Birth (20/09/1954).
- Referrer Information:** Includes fields for Referrer Name (Christine Ellison) and Referrer ID (2121732K).
- Additional Patient Details:** A section for additional patient details, noting that the majority of patient demographic information is contained within the 'Patient Information' tab.
- Encounter Information:** Includes fields for Encounter Place (Eastern Branch Clinic), Encounter Mode (Aboriginal Health Service), Viewing Rights (Common), and Topic (General & Unspecified).

Step 5: Locating Parked and Submitted SmartForms *Continued...*

D Smart Forms for all patients can be located within the “Documents and Results” tab under the “Outgoing Documents heading. To better view the Message ID right click the “HL7 ID” tab and select “Best Fit”. (this may be changed in the future)

Sent Date	Document Date	Patient	Date Of Birth	Document	Provider	Status	Error	My Health...	Topic	HL7 ID
19/02/2024 11:00	19/02/2024 11:00	BANKS, REX B	21/10/1982	Smart Form "testform"	CHRISTINE ELLISON	Sent	N/A	General & Unspecified	VVT-2	HL7-2
16/02/2024 15:24	16/02/2024 15:24	BANKS, REX B	21/10/1982	Smart Form "parked form"	CHRISTINE ELLISON	Saved	N/A	General & Unspecified	EH-12	EH-12
16/02/2024 15:21	16/02/2024 15:21	BANKS, REX B	21/10/1982	Smart Form	CHRISTINE ELLISON	Saved	N/A	General & Unspecified	EH-12	EH-12
15/02/2024 11:23	15/02/2024 11:33	BANKS, REX B	21/10/1982	Smart Form "Tasman Health Service form"	CHRISTINE ELLISON	Sent	N/A	General & Unspecified	TAS-1	TAS-1
15/02/2024 10:51	15/02/2024 10:51	BANKS, REX B	21/10/1982	Smart Form "Eastern Health"	CHRISTINE ELLISON	Error	N/A	General & Unspecified	EH-12	EH-12
14/02/2024 09:44	14/02/2024 09:44	BANKS, REX B	21/10/1982	Smart Form "Eastern Health Form"	CHRISTINE ELLISON	Saved	N/A	General & Unspecified	VVT-2	VVT-2
13/02/2024 15:44	13/02/2024 15:44	BANKS, REX B	21/10/1982	Smart Form "Monash health Form - patient is sick"	CHRISTINE ELLISON	Saved	N/A	General & Unspecified	NH-1	NH-1
08/02/2024 16:08	08/02/2024 16:08	BANKS, REX B	21/10/1982	Smart Form	CHRISTINE ELLISON	Sent	N/A	General & Unspecified	TAS-1	TAS-1
08/02/2024 16:02	08/02/2024 16:03	BANKS, REX B	21/10/1982	Smart Form	CHRISTINE ELLISON	Sent	N/A	General & Unspecified	TAS-1	TAS-1
08/02/2024 15:53	08/02/2024 15:53	BANKS, REX B	21/10/1982	Smart Form	CHRISTINE ELLISON	Sent	N/A	General & Unspecified	TAS-7	TAS-7
07/02/2024 13:17	07/02/2024 13:17	BANKS, REX B	21/10/1982	Smart Form "Austin HHealth Form"	CHRISTINE ELLISON	Sent	N/A	General & Unspecified	EH-12	EH-12
02/02/2024 17:36	02/02/2024 17:36	BANKS, REX B	21/10/1982	Smart Form	CHRISTINE ELLISON	Saved	N/A	General & Unspecified	NH-1	NH-1
02/02/2024 12:31	02/02/2024 12:31	BANKS, REX B	21/10/1982	Smart Form	CHRISTINE ELLISON	Saved	N/A	General & Unspecified	NH-6	NH-6
02/02/2024 12:01	02/02/2024 12:01	BANKS, REX B	21/10/1982	Smart Form	CHRISTINE ELLISON	Sent	N/A	General & Unspecified	MAC-1	MAC-1

Outgoing Document Status	Meaning
Saved	Form has been parked or auto-saved
Sent	Synchronous forms: Successfully submitted via the Message Gateway Asynchronous forms: Submitted and acknowledged through Message Exchange
Pending	Asynchronous forms only : Submitted through Message Exchange but not yet acknowledged
Error	Submitted through Message Exchanged and rejected or error response was received
Error- Dealt-with	User has marked and form with “Error” status as “Dealt with” – Usually after form has been resubmitted

Helpdesk

1800 125 036

helpdesk@healthlink.net

Monday to Friday (Except Public Holidays)

8:00am – 6:00pm

www.healthlink.com.au

HealthLink^{*}

HealthLink is part of Lanas, a global network of healthcare technology organisations operating across the United Kingdom, Ireland, New Zealand, Australia and India. Together, we work to deliver safer, more efficient and better-connected healthcare for everyone.