

# Updating Shexie Address Book

## Overview

This guide provides an overview on setting up a doctor within Shexie to have sending capabilities through Medical-Objects.

If you require any assistance or have any questions about the procedure, please contact the Medical-Objects Helpdesk on (07) 5456 6000.

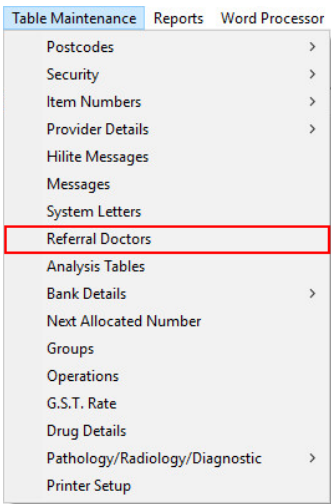
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## Adding and Updating Doctors for Sending within Shexie

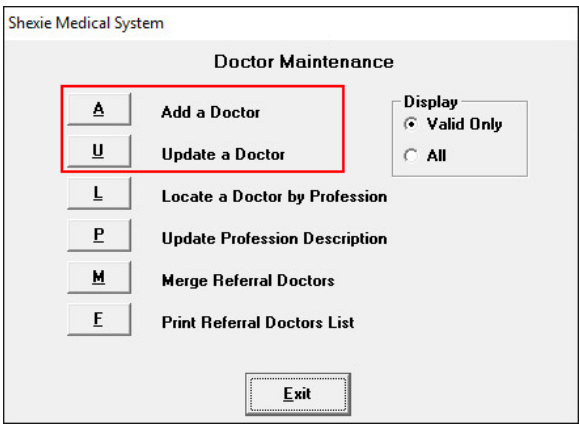
You will need to change some details from within Shexie's Address book to prepare for sending to providers. If this step is not completed, it may cause issues when sending your documents.

To look up providers to update your address book, You can use the Medical-Objects Referral client application. The guide for installing the Referral Client Application can be found [here](#), While the instructions for using the Referral Client to look up providers can be found [here](#).

1. Once you are logged into Shexie, Select **Table Maintenance** from the top Menu, and select **Referral Doctors** as shown below.



2. Select **Add a Doctor** to add a new doctor, or **Update Doctor** to update an existing doctors details.



Note:

If you select **Update Doctor**, You will need to search for the doctor within Shexies system. If the doctor does not exist, you can click **Add Doctor** again from here.

Shexie Medical System

Doctor Maintenance

Last Name First Name Suburb

Johnson Bob

Johnson, Bob (Maroochydore)

Add Doctor Exit

3. If you have chosen to Add a Doctor, You will need to enter their details on this screen. Existing Doctors will still have the information filled out, However there are several changes that will still need to be made before sending through Medical-Objects is possible.

Shexie Medical System

Copy Name/Address to Clipboard Send SMS

Update Referring Doctor Details

Title First Name Last Name Valid

Dr Bob Johnson

Postal Address Alternate Address Provider No. Ref Period

102 Wises Road

Maroochydore 4558

12

Phone

54566000

Fax

Pager

Mobile

Professional Field

General Practice

E-Mail Address

Salutation

Comments

EDI

e-Mail

Letters Send Method

Medical Objects

Electronic Send Format

HL7 RTF PDF

Print

Envelope Address Label Patient List

OK Cancel

4. You will need to find the doctors provider number (if you dont have one already listed by updating the contact) through the Medical-Objects referral client. The guide for installing the Referral Client Application can be found [here](#), While the instructions for using the Referral Client to look up providers can be found [here](#).
5. You will then need to change the **Letters Send Method**. Select the drop down box, and choose the Medical Objects option.

Letters Send Method

Medical Objects

Argus

Central Reporting

Do not Dispatch

E-Mail

Healthlink

Mail

Medical Objects

Promedius

Note:



- Please note that there is a bug within Shexie software, where the name Medical Objects is spelled incorrectly. It may appear as **Medial Objects**. The process will still work, regardless of how the name is spelled.
- Also note in one case we have been informed the Medical Objects entry was missing. If this is the case you will need to contact Shexie support to have it added.

6. Change the **Electronic Send Format** to **HL7**.

The dialog box titled "Electronic Send Format" contains two radio buttons. The "HL7" radio button is selected, and the "PIT" radio button is unselected.

7. Change the **HL7 Format** to **PDF**. RTF format will work as well, However Medical-Objects recommends PDF to ensure compatibility with the receiving sites Practice software.

The dialog box titled "HL7 Format" contains two radio buttons. The "PDF" radio button is selected, and the "RTF" radio button is unselected.

8. The final section that is required to be filled out is the **EDI** section. Copy the provider number from the **Provider No** section and paste it into the **EDI** Field. If this field is left blank, the documents may not send.

The form is titled "Shexie Medical System" and "Update Referring Doctor Details". It contains the following fields and sections:

- Title:** Dr
- First Name:** Bob
- Last Name:** Johnson
- Valid:** ☒
- Postal Address:** 102 Wises Road
- Alternate Address:** Maroochydore 4558
- Provider No.:** 000000AW
- Ref Period:** 12
- Phone:** 54566000
- Fax:**
- Pager:**
- Mobile:**
- Professional Field:** General Practice
- E-Mail Address:**
- Salutation:**
- Comments:**
- EDI:** 000000AW
- Letters Send Method:** Medial Objects
- Electronic Send Format:** HL7 (selected), PIT
- HL7 Format:** RTF, PDF (selected)
- Print:** Envelope, Address Label, Patient List
- Buttons:** OK, Cancel, e-Mail

9. Click **OK** to save your changes.