

Zedmed v40.0 ePrescribing FAQ

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These FAQs explain the prescribing workflows and configuration changes introduced in Zedmed v40.0.0 to support new electronic prescribing requirements taking effect from 1 March 2027. The changes include stricter Healthcare Identifier checks and more information sent with electronic prescriptions.

When will practices need to upgrade?

Practices will need Zedmed v40.0.0 or later by 1 March 2027 to continue electronic prescribing after that change.

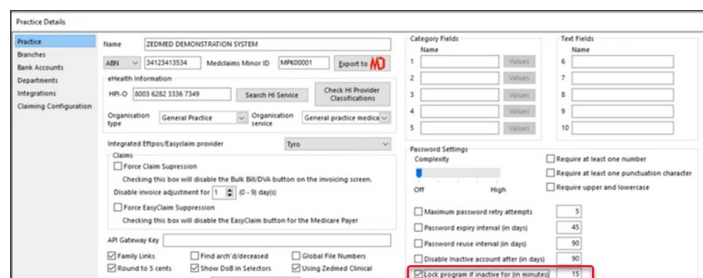
Will paper prescribing change?

No. The changes only affect electronic prescribing.

Zedmed's Inactive timeout lock

One new requirement is a timeout lock in the prescribing system. Zedmed has one, and we recommend enabling it with a 15-minute timeout for practices using ePrescribing. For practices currently using the timeout, it will be set to 15 minutes when upgrading to Zedmed v40. The lockout displays a password dialogue, and re-entering your password will unlock Zedmed.

The Practice Details screen manages the timeout lock.



The screenshot shows the 'Practice Details' screen in Zedmed. The 'Practice' tab is selected. The 'Name' field is 'ZEDMED DEMONSTRATION SYSTEM'. The 'ABN' is '34123413534'. The 'Medicare Minor ID' is 'MPK20001'. The 'eHealth Information' section shows 'HPI-ID' as '0003 6282 3336 7349'. The 'Organisation Type' is 'General Practice'. The 'Integrated EPrescribing provider' is 'Type'. The 'Password Settings' section is expanded, showing 'Complexity' set to 'High'. The 'Lock program if inactive for (in minutes)' field is set to '15' and is highlighted with a red box.

What is the Individual Healthcare Identifier (IHI)?

An IHI identifies a person for healthcare and digital health purposes. The Australian Digital Health Agency (ADHA) manages the information. An IHI is required for Zedmed's ePrescribing and My Health Record integrations.

What are the patient information requirements for ePrescribing?

The patient must have an active and verified Individual Healthcare Identifier (IHI). Patient Details must include a Given and Family name, Date of Birth, Sex at Birth and Medicare or DVA card details. You can still create a new patient using just a name and date of birth.

What are the practitioner requirements for ePrescribing?

The doctor needs a prescriber number, a Healthcare Provider Identifier Individual (HPI-I) and qualifications in the

treating doctor's record.

When and how often is the patient's IHI checked?

Opening a patient record in Zedmed Clinical triggers a background lookup when the previous IHI lookup was more than 24 hours ago. Closing and reopening the same record within that period does not trigger another lookup.

Changes to relevant demographics in Office also trigger a lookup. If you have not performed an IHI lookup within the previous 24 hours, you cannot submit an electronic prescription. The current lookup status can be viewed in the Patient's clinical record (screenshot below).

Prescribing a Schedule 8 drug always triggers a lookup (or reauthentication). This is existing behaviour. The check is performed when you click Prescribe electronically and before the Schedule 8 Approval screen.

You can see when the last lookup took place in the patient's clinical record.

The screenshot shows the 'Patient Details' form for a patient named Sally Biscuit. The form is divided into several sections: Personal, Practice, and eHealthID. The eHealthID section is highlighted with a red box, showing the following information:

eHealthID - Individual Healthcare Identifier (IHI)	
IHI Number	8003 6083 3342 8779
Number Status	Active
Record Status	Verified
Last Updated	28/04/2020 06:12:08 PM
Last Searched	30/09/2026 10:06:25 AM

What happens if the IHI lookup finds conflicting information?

When the practitioner selects **Prescribe electronically**, the system checks the IHI for any missing requirements, including differences between the patient's information in Zedmed and ADHA. If there is a difference, a dialogue will display two options. 1) **Cancel** and continue with the discrepancy, or 2) **Update** the Zedmed Patient Details to match the information held by ADHA. If the IHI information is incorrect, the practice must contact Medicare or DVA to update it.

Can a doctor type or paste an IHI into Clinical?

No. The IHI field in Clinical is read-only, even when it is empty. Typing and pasting are both blocked.

Script Details considerations

Two new selections have been added to the Script Details screen.

- **Route of administration** - set by the drug selected. You can select it if the drug has more than one option.
- **Send prescription direct to pharmacy** - Must be selected to send an electronic token. When enabled, SMS and Email are disabled so the token cannot be sent to the patient.

Key values selected in **Script Details** automatically carry over to the **Electronic Prescription** screen (details below).

Script Details

Methadone hydrochloride 5mg per ml, Oral Liquid (Oral liquid) 5mg/ml, 1 ml, [840]
 You selected: Methadone hydrochloride 5mg per ml, Oral Liquid 5mg/ml, 1 ml, [840]

Dosage
 and a half
 1 2 3
 4 5 6
 7 8 9
 Ctr 0 00
 1
 Calculator

Frequency
 capsule
 puff
 tablet
 2 times a day
 3 times a day
 4 times a day
 every 4 hours
 every 6 hours
 once a day
 weekly

Instructions
 after meals
 as directed
 as needed
 at night
 before meals
 in the morning

MIMS Reference Information
 The MIMS information displayed below is of product "Biodone Forte Oral liquid 5mg/ml, 1 ml, [840]", this information may vary for other products/brands with the same generic name.
MIMS Dosage
 Individualise dosage, treatment duration; see full PI if dilution nec. Adults: initially 10-20 mg; may incr by 5-10 mg/day (max incr 30 mg/wk) to usual maintenance 30-50 mg/day (max 80 mg/day); gradually decr once stabilised until total withdrawal achieved. Mid-mod hepatic impairment: decr dose
Drug Use
 Synthetic opioid analgesic. Detoxification, maintenance treatment of opioid dependence

Dosage Full Text
 Take 1 drop
 Undo Redo Clear
 Regular Use PRN Short Term
 Quantity 1*840*1ml Repeats 5 PBS allows 5 repeats
 Script Date: 30/09/2026
 Minimum Repeat Interval (days) 1
 Hide from display (archive) if not current
 Upload script to Active Script List
 Route of Administration Oral
 Medicine estimated to last until 28/10/2026
 Warn me to renew script after 21/10/2026
 PBS Status: Private PBS / RPBS RPBS PBS Section 100
 Reg24 Include Brand on Script
 Authority Brand Substitution NOT Permitted
 Send prescription direct to Pharmacy Reason Staged Supply
 Add to encounter notes
 MIMS P.L. MIMS C.M.L. Add Favourite Add to History Prescribe Electronically Prescribe Cancel

Electronic prescription screen

The Route of Administration, Minimum Repeat Interval, Send Prescriptions Direct to Pharmacy, and Active Script List settings carry through to the Electronic Prescription screen from the Script Details screen.

Field considerations:

- **Route of administration** - set by the drug selected. You can choose if the drug has more than one option.
- **Specialty treatment** - This only appears when set in the treating doctor's record and is sent with the payload to the dispenser.
- **Clinical indication** - This field will populate if you created a problem record, or you can enter one.
- **Minimum repeat interval** (required if repeats selected) - For S8 drugs, all states except SA will require a value greater than 0. In NSW, it also displays that it is required for Schedule 4B drugs. The number is included in the information sent to the dispenser.
- **Warrant number (name varies by state)** - required in most states, but the field is not mandatory.
- **Pharmacy for dispense** - new optional field. Required for NSW. Its contents are sent to eRx with the prescription.
- **Unusual dose** - not new and not mandatory.
- **Script is for urgent supply** - If ticked, enables the email field to email the token to the pharmacy, or you can print a paper token (can fax).
- **Send prescription direct to pharmacy** - Must be selected to send an electronic token. When enabled, SMS and Email are disabled so the token cannot be sent to the patient

Electronic Prescription

AUTHORITY No. 2000272

Dr Phillip Davis RACGP, MBBS
Branch NSW
1 Branch 2 Street
NORTH DUNEY 2060
Prescriber Number: 9877773 Phone Number: 9999999

Patient's Name: Sally Brown
Address: 5 Cook Street
RED HILL 4059
Date of Birth: 04/04/1984
Date: 30/09/2026

Patient Medicare No: 49504816511 CTG PES Co-Payment ☐
Pharmaceutical benefits entitlement number
PES Satisfy Net ☐ Concessional or dependant ☐
entitlement card holder RPES beneficiary or PES Safety ☐
Net card holder
PES ☐ RPES ☐ Brand substitutions not permitted ☐

Methadone hydrochloride 5mg per mL Oral Liquid (Syrup) 5mg/mL 1 mL [840]
TAKE 1 DROP
Qty: 840 (eight hundred and forty mL) 5 repeats

Approval No: 16083
Previous Authority? (R)
Indication for use of item:
Opioid dependence Clinical criteria: * The treatment must be within a framework of medical, social and psychological treatment.
The prescriber must request a quantity (in millilitres) sufficient for up to 28 days of supply per dispensing according to the patient's daily dose. Up to 5 repeats will be authorised. The maximum listed quantity or number of repeats must not be prescribed if lesser quantity or repeats are sufficient for the patient's needs.

Notes for pharmacist (staged supply, special approval, specific condition, etc).
NOTE: may be visible to patient.

Route of Administration: Oral
Specialty Treatment: for dental treatment only
Clinical Indication:
Minimum Repeat Interval (days):
Required for Scheduled 4B drugs:
Authorisation number:
Pharmacy for Dispense:
☐ Unusual Dose
☐ Script is for urgent supply (script owing)

Electronic Prescribing Token delivery
☐ SMS
☐ Email
☒ No Electronic Token
☐ Print Paper Token
☒ Upload script to Active Script List
☐ Send prescription direct to Pharmacy Reason: Dosing Point

The option above will prevent the patient from receiving the token. It is intended that the paper token is printed and provided directly to the pharmacy.
This is due to a requirement in individual state and territory legislation that prevents prescriptions from being handed over to the patient for specific controlled substances.

What information is sent to the pharmacy?

The information in the Electronic prescription, the pharmacist notes, the route of administration, clinical indications and the unusual dose flag are all sent to the dispenser.

Can a token be emailed directly to a pharmacy?

Yes, but only when **Script for urgent supply** is selected. This section will enable the email field so you can enter the pharmacy email address. SMS delivery to the patient is disabled. Alternatively, you can print a paper token and provide it to the pharmacy. The Script for urgent supply flag is sent with the prescription and is visible to the dispenser.

How do I know the prescription was transmitted?

A brief confirmation appears in the progress dialogue to indicate transmission to eRx. It displays for about one second.

How do I resend a token if the patient did not receive it?

Right-click the prescription and choose Resend electronic token when that option is available. If the original token was printed rather than sent by SMS or email, only the paper reprint option is available. An electronic prescription can have a printed token, so the token icon alone does not identify the delivery method.

Which contact details appear when resending?

The resend screen remembers the previous delivery destination, including a manually entered pharmacy email address. It does not automatically populate every contact method from the patient record. For example, when the original token was emailed, the patient's recorded mobile number will not automatically appear in the SMS field; enter it if changing to SMS.

What is the new Doctor Details field - Test for specialty treatment?

This is a conformance requirement: whatever is selected here will be displayed on the electronic script before the

prescriber submits it and will be included in the payload. If you are not a GP, then you need to select one of these options when you prescribe drugs.

What happens if you cancel a prescription?

You can cancel prescriptions via the right-click option under Summary Views > Current Medications.

- Zedmed displays a warning that the patient will no longer be able to fill the prescription and that its repeats will also be cancelled, then sends the cancellation request to eRx.
- If you attempt a cancellation and the drug has been dispensed, Zedmed will say it cannot be cancelled and send a cease request for any remaining repeats.
- If the prescription cancellation transmission fails, for example because the Prescription Delivery Service (PDS) is unavailable, Zedmed retries the cancellation in the background. Zedmed will show it as cancelled locally while the background transmission retries continue. Retries stop after one week.
- A cease request is not sent when the original cancellation could not be transmitted.

