

# WIREFRAME: REQUEST PAGE

LOGO

Search eConsult

Search

Request

Referral

Admin

Preferences

Welcome User Name ▾

FACILITY

Select

SPECIALTY

Select

PROBLEM REASON

Select

Patient & Physician Detail Card

## Referral Guidelines



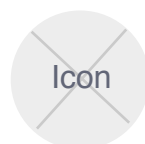
Icon

Title



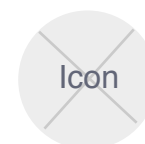
Icon

Title



Icon

Title



Icon

Title

Area reserved for problem reason condition content

## Referral Questions

Area reserved for problem reason condition questions.  
Physician has to answer all before referral can be submitted

## Appointment Preferences

Start Date

MM/DD/YYYY



Day

S

M

T

W

T

F

S

Time

AM

PM

All

Cancel

Save

# WIREFRAME: REQUEST PAGE, REFERRAL GUIDELINES & REFERRAL QUESTIONS SECTIONS

## Referral Guidelines



Icon

Title



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Title



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Title

### Title

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cididunt ut labore et dolore magna

- Laboris nisi ut aliquip ex ea commodo consequat
- Caecat cupidatat non proident ([view image](#))
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- Reiciendis voluptatibus 20ml

### Subhead

Harum quidem rerum facilis est et expedita distinctio. Ut enim ad minima veniam, quis nostrum exercitationem ullam corporis suscipit laboriosam, nisi ut aliquid ex ea commodi consequatur? Quis autem vel eum iure reprehenderit qui de ea molestiae



## Referral Questions

### 1 Lorem ipsum dolor sit amet, consectetur adipiscing elit.

[View Lab Reports](#)

Select Answer One  
– (0-5 days per pt perference)

Select Answer Two  
– (0-5 days)

Select Answer Three  
– (<48 hrs)  
– (Regulatory Criteria = imminen)

Select Answer Four  
– (<10 days)

### 2 Reason for Referral

Type Answer

### 3 Ordering Guide (Optional, use if you need it)

Select ▼

### 4 Question: Exam to be Performed -- Direct bookable exams NOT protocolled by Radiologist. Ut sodales gravida nisl, sed elementum

Select Answer One

Select Answer Two

Select Answer Three

Select Answer Four

Select Answer Five

Select Answer Six

### 5 Safety Check List: CHECK ALL APPLICABLE

Checkbox One  
– Pre-medication Instructions

Checkbox Two

Checkbox Three

Checkbox Four

Checkbox Five

Checkbox Six  
– Pre-medication Instructions

Check All

# WIREFRAME: ADMIN LEVEL REGIONAL SPECIALTY LIST PAGE

LOGO

Search eConsult

Search

Request Referral **Admin** Preferences

Welcome User Name ▾

< USERS GLOBAL FACILITY **REGIONAL SPECIALTY** REGIONAL PRC LOCAL SPECIALTY LOCAL PRC >



Page Title



Add Specialty

Showing 1 to 19 of 43 entries

View All < 1 2 3 >

Problem Reason ▾	Facility	Status	Type	Code	Security	Redirect
<a href="#">Paboris nisaliquip</a>	SCH	Active	A	237	None	Yes
<a href="#">Piriatur excepteur sint</a>	SCH	Active	A	91	None	Yes
<a href="#">Qexercitation</a>	SCH	Active	A	49	None	Yes
<a href="#">Qincidunt labore</a>	SCH	Active	A	54	None	Yes
<a href="#">Ralit esse</a>	SCH	Active	A	11	None	Yes
<a href="#">Reserunt mollit anima</a>	SCH	Active	A	298	None	Yes
<a href="#">Rifficia</a>	SCH	Active	B	84	None	Yes
<a href="#">Ruis nostrud exercitation</a>	SCH	Active	A	36	None	Yes
<a href="#">Sanimipsam voluptatem quia</a>	SCH	Active	A	126	None	Yes
<a href="#">Sapsa inventore veritatis</a>	FRE	Active	A	22	None	Yes
<a href="#">Sellam corporis suscipit</a> 	SAC	Active	C	03	None	No 
<a href="#">Sesse molestiae consequatur</a>	GIL	Active	A	272	High	Yes
<a href="#">Sillum dolorem quo voluptas</a>	RDC	Active	A	28	None	Yes
<a href="#">Snostrum exercitationem ullam</a>	NPA	Active	A	94	None	No
<a href="#">Suaerat voluptatem</a>	MAN	Active	A	16	High	No
<a href="#">Tagni dolores</a>	STK	Active	A	32	None	Yes
<a href="#">Telectus</a>	CVX	Active	F	04	None	Yes
<a href="#">Tienteuis</a>	ROS	Active	A	45	None	Yes
<a href="#">Tempor incididunt labor</a>	MOD	Active	A	19	High	No

Showing 1 to 19 of 43 entries

View All < 1 2 3 >

Cancel

Save

# WIREFRAME ADD CONTENT MODAL

LOGO

Search eConsult

Search

Request Referral Admin Preferences

Welcome User Name

FACILITY Select SPECIALTY PROBLEM REASON

## Add Facility

Select	Selected
<input type="checkbox"/> Facility One	Facility Two
<input checked="" type="checkbox"/> Facility Two	Facility Three
<input checked="" type="checkbox"/> Facility Three	Facility Nine
<input type="checkbox"/> Facility Four	
<input type="checkbox"/> Facility Five	
<input type="checkbox"/> Facility Six	
<input type="checkbox"/> Facility Seven	
<input type="checkbox"/> Facility Eight	
<input checked="" type="checkbox"/> Facility Nine	
<input type="checkbox"/> Facility Ten	

Cancel

Save

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