

# SESLHD PROCEDURE COVER SHEET



**Health**  
South Eastern Sydney  
Local Health District

<b>NAME OF DOCUMENT</b>	Wound - Clinical Digital Photography
<b>TYPE OF DOCUMENT</b>	Procedure
<b>DOCUMENT NUMBER</b>	SESLHDPR/285
<b>DATE OF PUBLICATION</b>	November 2022
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<b>LEVEL OF EVIDENCE</b>	National Safety and Quality Health Service Standards: National Standard 1 – Clinical Governance National Standard 5 – Comprehensive Care National Standard 6 – Communicating for safety
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<b>EXECUTIVE SPONSOR or EXECUTIVE CLINICAL SPONSOR</b>	Clinical Stream Director, Surgery, Perioperative & Anaesthetics
<b>AUTHOR</b>	SESLHD Wound management committee
<b>POSITION RESPONSIBLE FOR THE DOCUMENT</b>	SESLHD Clinical Stream Nurse Manager Surgery, Perioperative & Anaesthetics <a href="mailto:Andrewina.Piazza-Davies@health.nsw.gov.au">Andrewina.Piazza-Davies@health.nsw.gov.au</a>
<b>FUNCTIONAL GROUP(S)</b>	Surgery, Perioperative and Anaesthetics
<b>KEY TERMS</b>	Clinical photography, Wound, Wound Management, Wound assessment
<b>SUMMARY</b>	To instruct clinical staff on how to take clinical digital photographs of wounds for monitoring and for educational purposes.

## **COMPLIANCE WITH THIS DOCUMENT IS MANDATORY**

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**1. POLICY STATEMENT**

This procedure relates only:

- to the use of facility approved cameras by clinicians within a clinical setting
- to photographing wounds, drain sites, stomas and wounds next to stomas and any other interruption to skin integrity (e.g. bruising and skin conditions such as rashes, burns etc)
- to assist clinicians in the ongoing assessment and management of patients/clients
- to the subsequent use of clinical photographs for the purpose of education of healthcare professionals and/or publication.

**NB: This procedure does not relate to photographs for promotional purposes or personal photographic devices (incl. mobile phones)**

All images should be taken in such a way that it is adequate for its intended purpose and that the confidentiality and dignity of the patient is respected at all times. Image frames that include features that could identify the patient, for example the face, or tattoos, birthmarks etc, should be avoided where possible. Care must also be taken to respect, and be sensitive to, the dignity, ethnicity and religious beliefs of the client/patient<sup>1</sup>.

This procedure should be read in conjunction with [SESLHDPD/327 - Photography and Recording of Patients within the SESLHD](#).

**2. BACKGROUND**

Accurate medical records are essential for the provision of quality care. Digital wound photography allows for accurate documentation of the status of patient wounds by providing an adjunct to narrative description. Digital wound photography is not a standalone wound assessment tool and must be used in conjunction with assessment of the wound area<sup>2</sup>. The use of digital wound photography is not mandatory unless directed by specific areas or units.

Ensure only Local Health District approved cameras with a minimum of 6 Mega-pixels are used to photograph wounds.

When digital wound photography is used as part of the wound assessment, the wounds should preferably be photographed:

- On presentation/admission
- During the patients' admission at each formal assessment (Acute wounds – weekly, Chronic wounds – monthly)
- Peri-operatively
- Prior to and after debridement
- As part of the discharge process
- On the first domiciliary visit and/or
- Whenever there is a significant change in the patient's clinical status (deterioration or improvement)<sup>3</sup>

**Note:** Please view [SESLHDPR/297 - Wound – Assessment and Management Procedure](#) in conjunction with this procedure.

## 2.1. Electronic data

Digital wound photography should be used for treatment purposes only. Digital wound photographs are to remain identifiable using patient's medical record number (MRN) – [see 4.6](#). Identifiable images must be saved electronically on a secure site. These sites include in eMR for Inpatients [Appendix A](#), Community Health [Appendix B](#) or Cancer Services [Appendix C](#). The sharing of patient information via email is to be restricted to health professionals. Sharing is only for the benefit of on-going assessment and management, [refer to 4.19<sup>5</sup>](#).

**Note:** 4.19 does not prevent a patient sending their wound photo which has been taken on their own device to their medical team.

Computer screens which display personal health information such as digital wound photography should be so placed that they cannot be seen by anyone other than the staff member entering the information. Screen savers and passwords must be used to reduce the chance of casual observation. Patient privacy is paramount.

## 3. RESPONSIBILITIES

### 3.1 Employees will:

All Local Health District clinicians involved in wound photography must be familiar with requirements for the use/handling of clinical electronic data.

To ensure a standard quality of photograph staff will:

- Be familiar with the digital wound photography procedure prior to taking wound photographs (competency assessment not required)
- Use the same type of camera and the same printer for the same patient every time to ensure continuity of picture resolution and clarity
- Keep equipment operating instructions/procedures with the digital camera/printer
- Use an electronic flash as the light source to sharpen pictures, provide consistent colour and greater depth of field and eliminate the use of a tripod.

**Note:** Written consent is **not** required when the digital wound photographs are taken for the direct clinical care of a patient/client (including the ongoing assessment, management and consultation). If photos are to be used for educational purposes, verbal consent must be obtained and documented in progress notes e.g. 'Mr Smith agreed to his photograph being used for teaching purposes'

**NB: This procedure does not relate to photographs for promotional purposes or personal photographic devices (incl. mobile phones).**

**3.2 Line Managers will:**

- Adhere to the content of this document
- Facilitate clinical staff awareness of this document and provide support to WCE in mandating this document
- Facilitate the presence of wound champions within their wards/depts./service.

**4. PROCEDURE****4.1 Staff members who photograph wounds will:**

- Inform all patients (in cases where the patient is unconscious, the carers are informed and for Cultural and Linguistically Diverse (CALD) and Deaf patients and carers use Health Care Interpreter Service) about the purpose of taking a photograph of their wound and the associated procedure
- Provide patients with the [NSW Ministry of Health Privacy Leaflet for Patients](#) and explain how their personal health information will be stored and used. Advise patients that photographs are subject to the same privacy and confidentiality requirements as their Healthcare record(s)
- Use the patients consent form when photographs are identifiable and are used for educational purposes see [Appendix D](#)
- Document the conversation and outcome contemporaneously within the patients' health care record or electronic medical record<sup>5</sup>. Example of suggested script: *introduction of self, "I have been asked to review your wounds, as part of this, I may take digital photographs of your wound, etc. Photography assists with the on-going assessment and management of your wound. I will, as best I can, cover sensitive areas or identifying features prior to taking the photographs. All photographs taken are securely stored electronically. Are you agreeable for me to take the wound/s photo?"*
- If the wound photo may also be used in staff education ask the patients permission to do this. Example of suggested script *"In the future, I may want to use these photographs as a means of educating other health professionals. Are you agreeable for me to include the non-identified wound photos in education session/s?"* These photos are to be deleted immediately after use.

**4.2** Place the patient in a comfortable position to expose the wound. Cover sensitive areas (e.g. genitals, breasts/prepubescent chests) or identifying features (e.g. tattoos) prior to taking the photographs to protect the identity of the patient/client<sup>1</sup>.

**4.3** Remove unnecessary equipment from site and place a drape in the background of the wound. Obtain the camera.

**4.4** Perform hand hygiene and follow wound management procedure to remove the dressing

**4.5** Cleanse wound as per wound management plan<sup>6</sup>

**4.6** Check the patients' identification against their notes. Once confirmed, write the

- patient's Medical Record number (MRN)

- patient's initials
  - date
  - body part being photographed (e.g. right arm)  
on a disposable measuring device<sup>4</sup> within the field of exposure.
- 4.7** Place this disposable metric measuring device approximately 1cm from the wound edge to indicate scale. Measuring device must be placed in the same focal plane as the skin as only this section will be in focus – refer to [Appendix E](#).
- 4.8** Perform hand hygiene. Prepare the camera. Avoid using gloves when handling the camera.
- 4.9** Take all required photographs avoiding physical contact with the patient and preventing the camera from coming into contact with the patient or immediate surroundings. Avoid including the hands in the image if possible. If clinician's hands are shown in the photograph gloves should be worn.
- 4.10** Take at least three images each time - refer to [Appendix E](#). These are:
- 4.10.1** Close-up using the zoom to document detail (20cm from wound base)
  - 4.10.2** Midway shot of the wound, positioning the lens to capture at least a 4-6cm border around the peri wound to assess status of skin surrounding wound (30cm from wound base)
  - 4.10.3** Distant shot (e.g. showing entire extremity)
  - 4.10.4** It may also be necessary, in some instances, to take additional shots to include true lateral and anterior views or to minimise reflection from the flash.
- 4.11** For subsequent photographs, try to maintain the position of the wound (e.g. same relative position, distance and angle from the camera).
- 4.12** Clean the camera e.g. wipe with neutral detergent and return camera to a secure area when finished taking photographs.
- 4.13** Perform hand hygiene and follow wound management procedures to complete dressing change <sup>6, 7, 8,9</sup>.
- 4.14** Document wound findings and photographs taken in the eMR.
- 4.15** Storage of photographs. It is the responsibility of the person taking the photographs to appropriately store the images.
- 4.15.1** Upload the digital wound photograph into eMR, [Appendix A](#), [Appendix B](#) or [Appendix C](#).
  - 4.15.2** If printed – print coloured images, attach the patients' identification sticker to the wound photograph and place in patient's healthcare record.
- 4.16** Printing of photographs - ensure only LHD equipment and no external equipment is used to print images.

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- 4.17 Delete all images from the digital camera (once uploaded and/or printed).
- 4.18 Attach a clinical note to any digital wound photographs stored in eMR.
- 4.19 Only send and receive wound photographs to colleagues via email for the purpose of consultation using a NSW Health email address **Note** [refer to section 2.1](#).
- 4.20 **Uploading Clinical photography to the Enterprise Imaging Repository (EIR) via MedSync**
- 4.20.1 MedSync is a new functionality within Teams that enables the upload of clinical photographic images to patient records in the State-wide Enterprise Image Repository (EIR). MedSync is optimised for mobile use which means you can take a picture and, with just a few clicks, associate it with a patient and upload it into the EIR. Since the EIR is a state-wide repository, any photos uploaded here can be viewed by clinicians anywhere in the State.
- 4.20.2 See Appendices [F](#) & [G](#) for guides.

## 5. DOCUMENTATION

Wound photographs are to be uploaded into the patient's health care record. Instructions on how to upload wound care photographs in eMR is dependent on the service providing the care, refer to:

- [Appendix A](#) for Inpatients
- [Appendix B](#) for Community Health
- [Appendix C](#) for Cancer Services
- [Appendix F](#) for all patients (via MS Teams MedSync)

In addition, the Wound Assessment & Management Plan Form (hard copy form number S0056) or the electronic equivalent e.g. community use Wound Assessment Treatment Evaluation Plan (WATEP) should be completed.

## 6. AUDIT

N/A

## 7. REFERENCES

1. [NSW Ministry of Health Policy Directive PD2015\\_036 - Privacy Management Plan 2015](#)
2. [SESLHDPR/297 - Wound – Assessment and Management Policy](#)
3. Calianno, CA 2005, 'Snap judgements: should I photograph my patients wound?' *Nursing*, vol 35, no. 2. p.28-29. American Professional Wound Care Association,
4. [NSW Ministry of Health Policy Directive PD2012\\_069 - Health Care Records Documentation and Management](#)
5. Director of Department of Clinical Informatics POW 2013
6. [NSW Ministry of Health Policy Directive PD2017\\_013 - Infection Prevention and Control Policy](#)



7. IMI National Guidelines. Clinical Photography in Wound Management Journal of Visual Communication in Medicine, March 2007 Vol. 30 N01 pp.31-34
8. Langemo D. Hanson D. Anderson, J. Thompson P., and Hunter S. 2006 Digital Wound Photography: Points to Practice. Advances in Skin and Wound Care.
9. National wound care strategy programme (2021) Recommendations for the use of digital images in wound care, UK
10. [SESLHDPD/327 - Photography and Recording of Patients within the SESLHD](#)

**8. REVISION AND APPROVAL HISTORY**

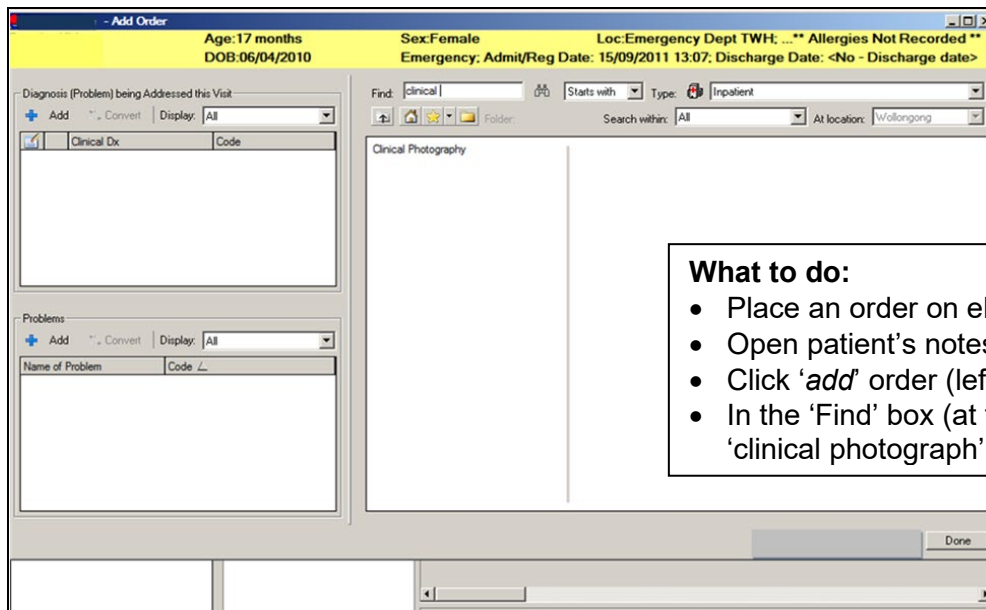
Date	Revision No.	Author and Approval
February 2008	0	Area Wound Committee - Review of former IAHS 'Use of electronic recording devices in wound management' Clinical practice 2006 due to amalgamation of the Area Health Service. Kay Maddison, A/Policy Coordinator, Sydney & Sydney Eye Hospital. Approved by Elizabeth Koff, Director Clinical Operations and Area Executive Team 11 February 2008.
May 2013	1	Reference links updated- Michelle Bonner Acting Policy officer SESLHD & ISLHD Wound management committee
July 2013	2	Old Policy 'Digital Wound Photography' PD 151 was converted to a district procedure. Re-written by Carol Stott, Clinical Nurse Consultant and revised by Scarlette Acevedo, District Policy Officer. Instruction for MOSAIQ added (POW Cancer Services)
November 2013	2	Procedure approved by CQC in November 2013
June 2014	2	District Policy Officer added hyperlink to 'Wound – Assessment and Management' Procedure SESLHDPR/297 as approved by former Clinical Stream Nurse Manager, Sheila McCulloch
November 2022	3	Minor review. Plain Language principles applied. Updated section 4.20. Included Appendices F & G - retaking images via MS Teams MedSync app. Approved by Executive Sponsor.

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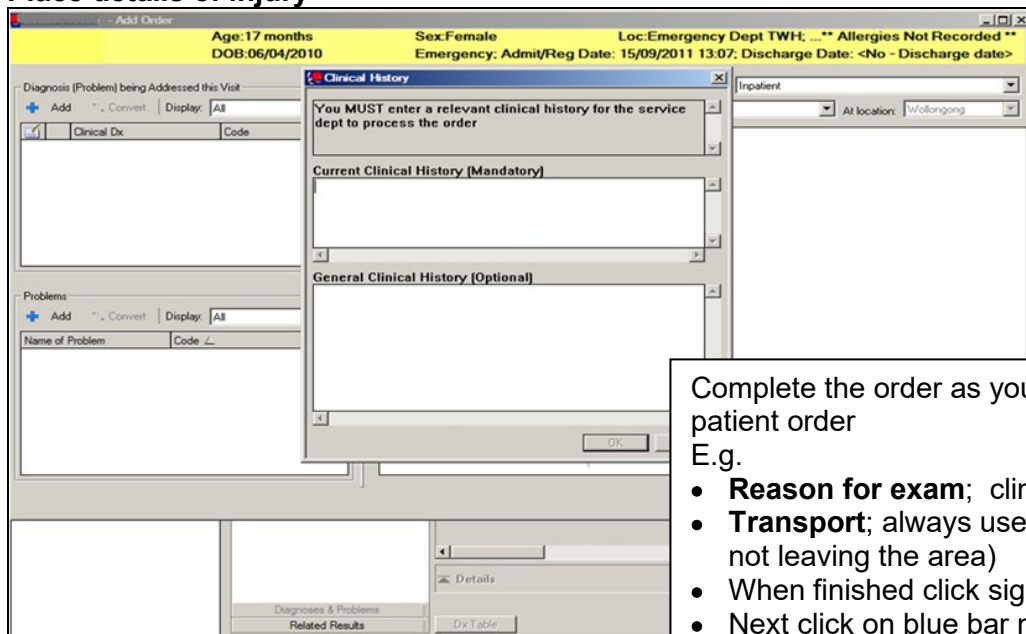
### Appendix A - Medical records storage of clinical photography in eMR – inpatients



**What to do:**

- Place an order on eMR for clinical photography
- Open patient's notes
- Click 'add' order (left side of screen)
- In the 'Find' box (at top left of screen) - type 'clinical photograph'

### Place details of injury



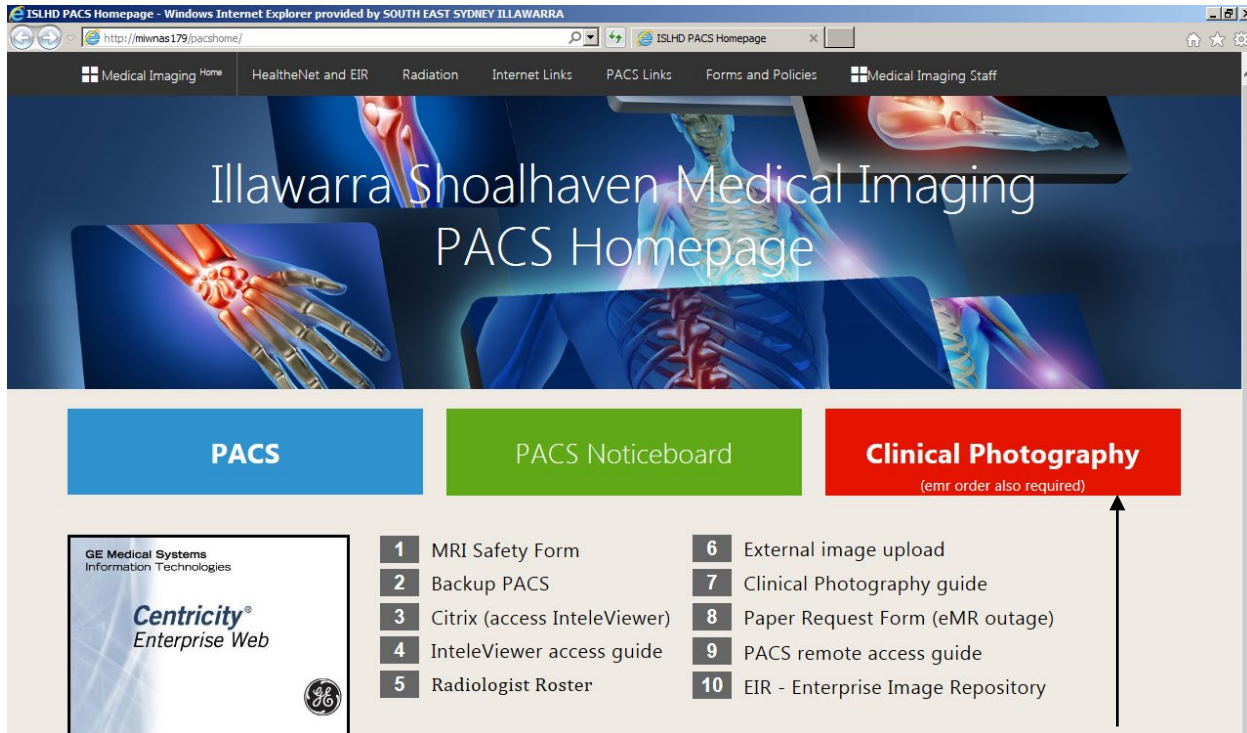
Complete the order as you would for any other patient order  
E.g.

- **Reason for exam;** clinical photo by -----
- **Transport;** always use ambulant (as the patient is not leaving the area)
- When finished click sign bottom right of screen
- Next click on blue bar medical imaging and wait for processing to be ordered

### Then provide the images to radiology staff by one of the following options:

- Fill out the form on the link from the PACS homepage and upload the images to radiology
- Take the camera and USB cable to radiology
- Provide images to radiology on a flash drive, memory card or CD





Fill in form with patients details

**Test South Eastern Sydney and Illawarra Medical Imaging (SESAIMI) - SHN**

**Clinical Photography Upload to Radiology**

This system is provided by SESAIMI and allows clinicians to upload clinical photographic images for storage in PACS. Please allow up to 48 hours for storage.

- Place the "Clinical Photography" order in eMR.
- Complete all text fields.
- Record relevant anatomical side, site, location and any other relevant details. This text will appear in the PACS Report for future reference
- Browse to the file(s) and upload images. Maximum file size: 20Mb

By uploading images to be stored in PACS you agree to the following:

- You have authorisation from the patient to submit these images
- You give permission to Test South Eastern Sydney and Illawarra Medical Imaging (SESAIMI) - SHN to archive these images in PACS
- The uploaded images correspond to the patient details you have supplied

Your IP address is 10.39.71.113 and will be logged.

**Sender's Details**  
Your Name  Email Address

**Patient's Details**

To add photo to PACS  
Click on upload photography images  
**Notes:**  
1) Photos need to be in JPEG format.  
2) Upload image size must be less than 10 megapixel  
3) Only staff member's designated RN / equivalent or above can upload photos into PACS

The images will be placed in the patients' eMR record  
If the photos have been uploaded correctly you will get a message to say the upload successfully  
**Notes:** Document wound photo uploaded into the eMR in progress notes

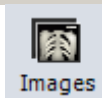
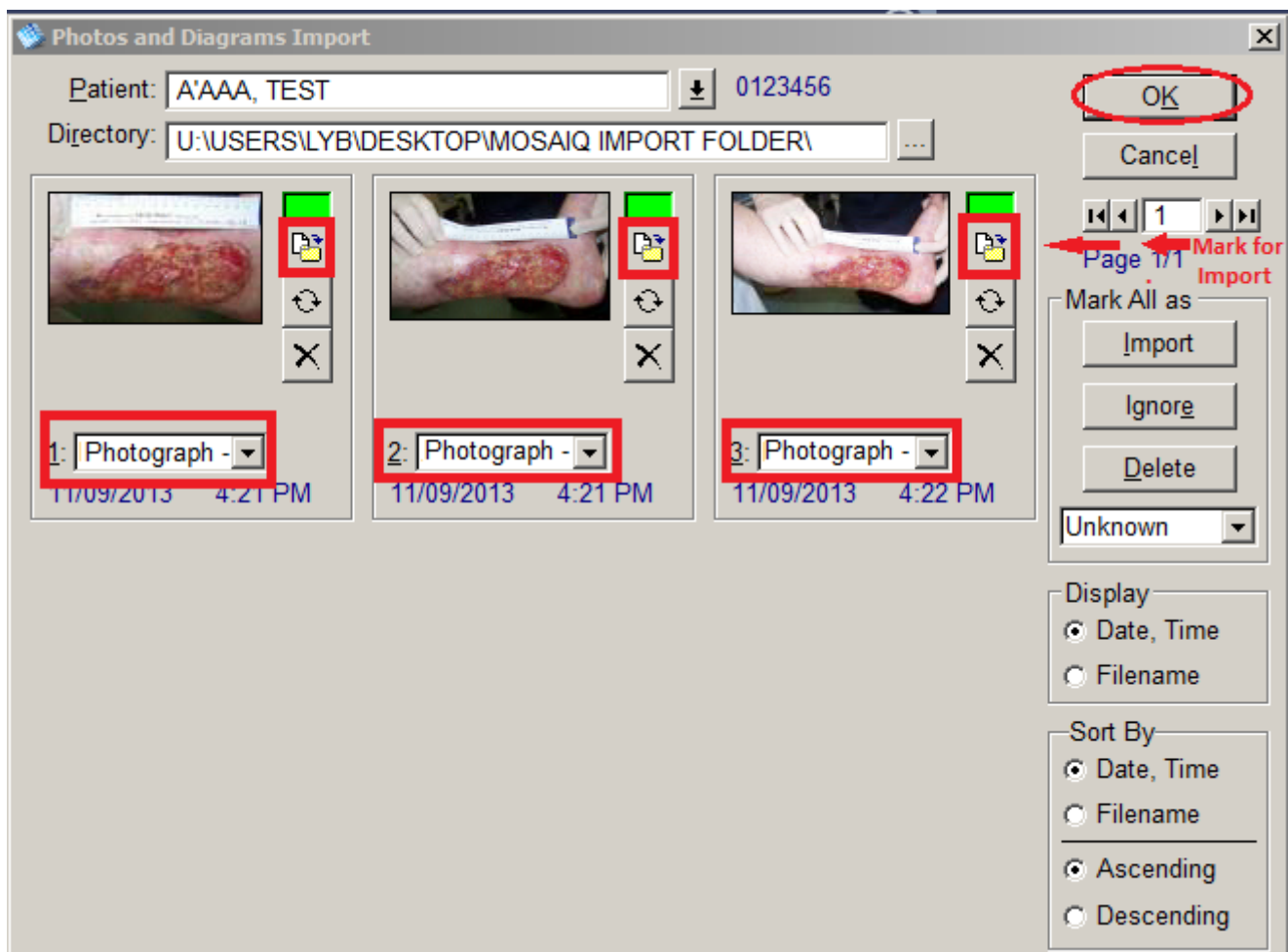
**Appendix B - Medical records storage of clinical photography in Community Health**

Community Health Ambulatory Primary Health Care nursing staff are required to upload wound photos into eMR as follows

- 1) Wound Assessment Treatment Plan (WATEP) How to UPLOAD wound photos  
Multimedia Manager users must refer to local service directions on how to upload wound photos.

**Appendix C – Medical records storage of clinical photography in MOSAIQ**

- Crop photos to the desired size
- Save the photographs into the designated folder
- Open MOSAIQ
- Select patient
- Locate the file by choosing the menu ‘file’, then ‘Import/Export’, then ‘Photos and Diagrams import’
- The **Photo and Diagrams Import** module will now search the designated folder for any photographs. Ensure the module is set to the correct designated directory or change the directory to where the photo file has been stored
- Mark the desired photos for import and change the label type to ‘Photograph – Clinical’ then click ‘OK’



Click on the ‘Images’ Module on the toolbar

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The list of Images will now be displayed



Select the desired photograph by highlighting and clicking on 'open' or double clicking on the file.

Once the photo is opened, write a comment to indicate what type of photo e.g 'leg ulcer', and then click OK



To view the a larger photo, click on the maximise button.

Appendix D – Patient consent for identifiable clinical photography (*do not print, forms must be ordered from Stream as per the form number SMR020.005*)

 SMR020005		FAMILY NAME	MRN
	Facility:	GIVEN NAME	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
	<b>PATIENT CONSENT FOR IDENTIFIABLE CLINICAL IMAGERY</b>	D.O.B. / /	M.O.
		ADDRESS	
		LOCATION / WARD	
COMPLETE ALL DETAILS OR AFFIX PATIENT LABEL HERE			
I, _____ hereby consent to myself / my _____ (Relationship) (Name of Patient) being: <input type="checkbox"/> PHOTOGRAPHED/IMAGED <input type="checkbox"/> VIDEO TAPED <input type="checkbox"/> AUDIO RECORDED During treatment at the following NSW Local Health District Facility / Clinical Service: _____ <b>THE HEALTH CARE WORKER WHO PROVIDES INFORMATION MUST WITNESS THIS CONSENT WITH A SIGNATURE AT THE BOTTOM OF THIS FORM</b> <u>I agree</u> to the photographs/images/recordings being taken and used for clinical audit and education purposes within the local health district. <u>I understand and acknowledge:</u> <ul style="list-style-type: none"> <li>The reasons for these photographs/images/recordings and the purpose for which they will be used as set out above.</li> <li>This has been explained to me by the treating health care worker.</li> <li>That my participation is completely voluntary and I can choose not to participate at all.</li> <li>That these photographs/images/recordings will be treated with the utmost confidentiality and will be retained by the Local Health District in accordance with the State Records Act 1998, the Health Records and Information Privacy Act 2002 and NSW Health record keeping policies.</li> <li>That I may withdraw my consent, in writing, at any time in the future.</li> </ul> <b>HEALTH CARE WORKERS NOTE: THE IMAGE MUST BE STORED SECURELY AND BE RETRIEVABLE FOR STAFF AND PATIENT ACCESS IN THE FUTURE.</b>			
<b>For Patients over 16 Years:</b> _____ Signature of Patient Date PRINT NAME			
<b>For Patients under 16 years, or patients who are unable to give consent</b> _____ Signature of Authorised Representative Date PRINT NAME (Authorised Representative)			
<b>WITNESS:</b> _____ Signature of healthcare worker that provided information Designation Date PRINT NAME			
<b>If an interpreter is present:</b> _____ Signature of Interpreter Date PRINT NAME			
NO WRITING			

Holes punched as per AS2828-1999  
 BINDING MARGIN - NO WRITING

PATIENT CONSENT FOR IDENTIFIABLE CLINICAL IMAGERY SMR020.005

NSW Health Patient Consent for Identifiable Clinical Imagery 130613.indd 1

8/13/2013 10:16:15 AM



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### Appendix E - Taking a Digital Photograph



Place a patient addressograph within the field of exposure or write the patient's Medical Record number (MRN), date body part being photographed (e.g. right arm) on a disposable measuring device. Take at least three images each time. These are:

- Close-up using the zoom to document detail (20cm from wound base).
- Midway shot of the wound, positioning the lens to capture at least a 4-6cm border around the peri wound to assess status of skin surrounding wound (30cm from wound base)
- Distant shot (e.g. showing entire extremity)





Appendix F – Use of Microsoft Teams - MedSync app

Uploading an Image to the EIR from Microsoft Teams from MedSync Home Page

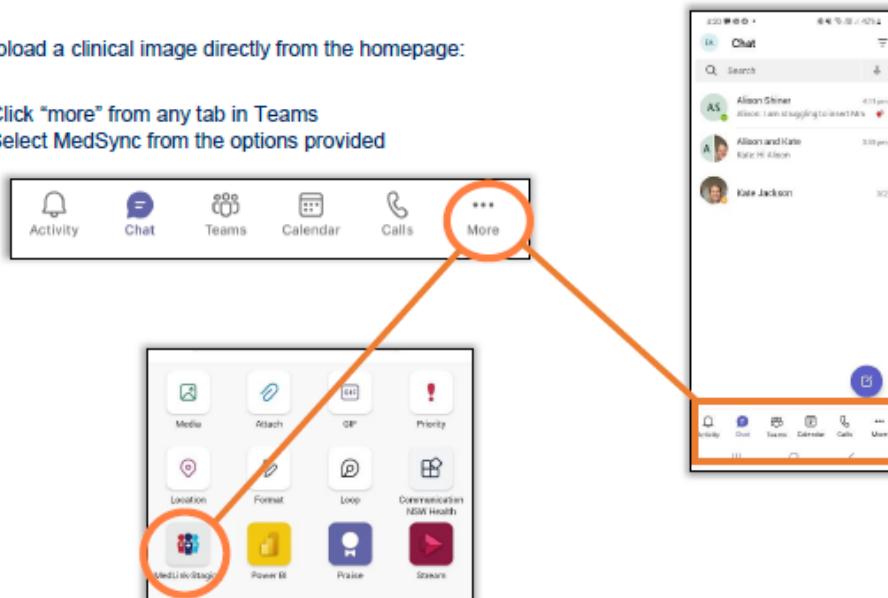


Uploading a Clinical Image to the EIR from the "MedSync" homepage

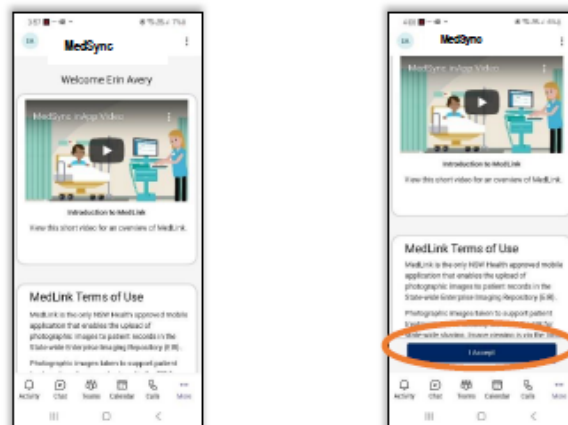
MedSync is a new functionality within Teams that enables the upload of clinical photographic images to patient records in the State-wide Enterprise Image Repository (EIR). MedSync is optimised for mobile use which means you can take a picture and, with just a few clicks, associate it with a patient and upload it into the EIR. Since the EIR is a state-wide repository, any photos uploaded here can be viewed by clinicians anywhere in the State.

To upload a clinical image directly from the homepage:

- 1. Click "more" from any tab in Teams
- 2. Select MedSync from the options provided



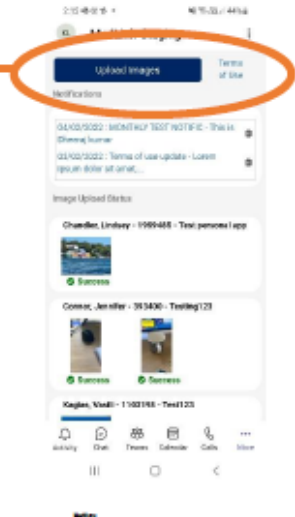
- 3. On first use, you will see the Terms of use and a short Introduction to Sync video. Watch the video, read the terms of service. Once complete, press "I accept".



# Quick Reference Guide

## Mobile Clinical Communications – Teams & MedSync

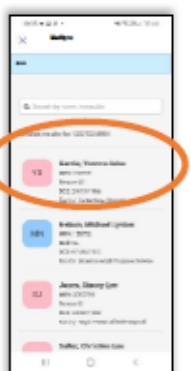
4. On the MedSync homepage, select Upload Images



5. Search for patient using their MRN.



6. MedSync returns all the patients in the Electronic Patient Records (EPR) with the typed MRN. Further search by using the name search box. Check for your patient's details using 3 points of ID and facility. Tap to select the correct patient.



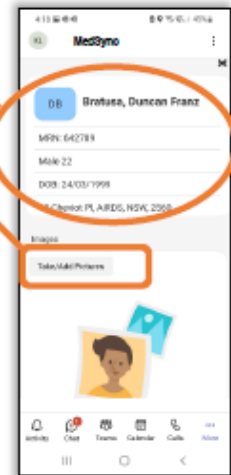
# Quick Reference Guide

## Mobile Clinical Communications – Teams & MedSync

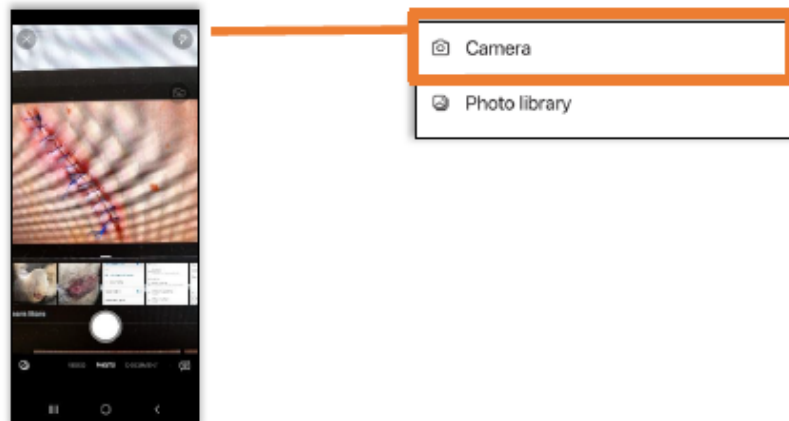
- 7. Recheck that you have the correct patient using 3 forms of identification (Name, DOB and MRN). Address is also available

- 8. Select Take/Add Pictures to take a picture with your camera or add a photo from your photo library

**NOTE:** Note that photos taken through Teams are not retained on your mobile device. Photos NOT taken through Teams (uploaded from your photo library/gallery) do remain on your phone and should be deleted immediately after successful upload to the EIR.



- 9. Press camera to open your phone's camera and take the photo. *Note: you can also select an image from your camera roll, however this is not the preferred method as the photo is then stored on the device.*



- 10. After taking your photo, press the more button to get annotation options. You may like to annotate with clinical information or patient identifiers.

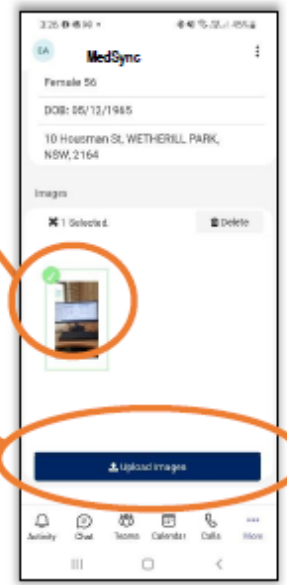


# Quick Reference Guide

## Mobile Clinical Communications – Teams & MedSync

11. Tap to select the photos that you would like to upload to the patient's records

12. Press upload images



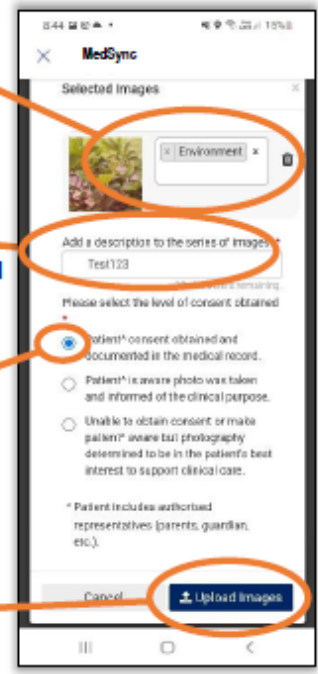
13. Annotate the images with optional tags e.g. body part, equipment, environment. Start typing your description and select an option from the drop-down menu.



14. Add a description of your image/s (free text)

Naming convention:

- Diagnosis or Condition pictured (including undiagnosed or provisional diagnoses)
- Body part and side (Right or Left)
- Date and time photo taken
- Time frame or series number (e.g. post op day, series #)



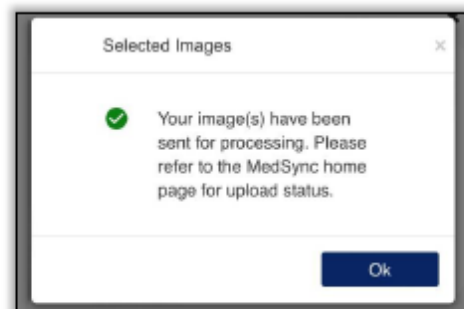
15. Select the level of consent obtained

16. Press Upload Images

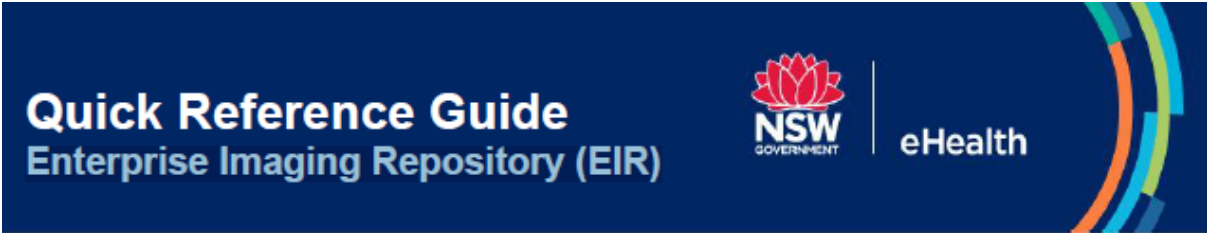
## Quick Reference Guide

### Mobile Clinical Communications – Teams & MedSync

17. MedSync will notify you that your images have been sent for processing. You can check the status of the upload on the MedSync homepage.



Appendix G – Viewing Clinical images in the Enterprise Imaging Repository (EIR)

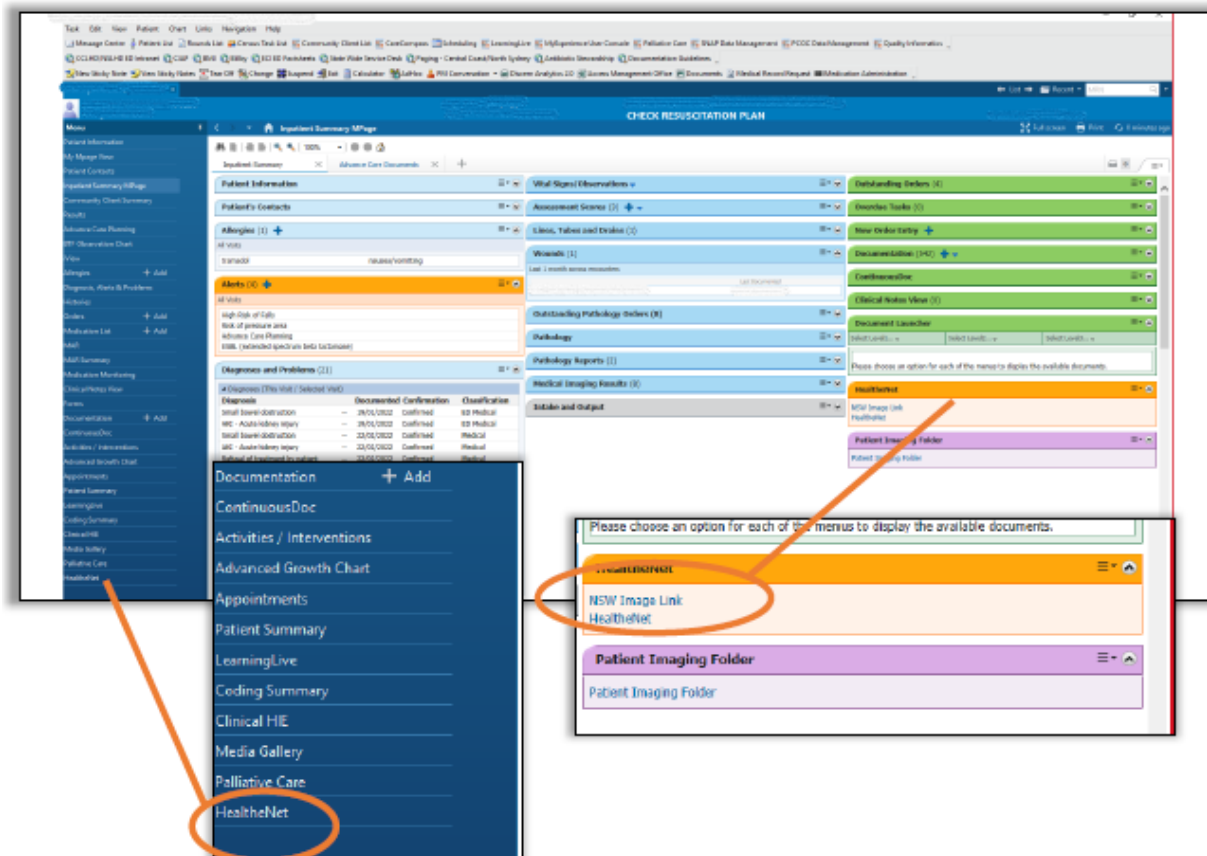


Viewing Clinical Images in the EIR

The Enterprise Imaging Repository (EIR) is the New South Wales archiving system for medical images and reports. Clinicians can view and analyse image/ reports from anywhere using an internet browser or the hospital's network. This quick reference guide addresses how to open images in the from the HealthNet tab in eMR or directly through the mobility viewer <https://viewer.health.nsw.gov.au>. For more information or further training contact [EHNSW-MCC@health.nsw.gov.au](mailto:EHNSW-MCC@health.nsw.gov.au).


Accessing images from the eMR (For patients at your LHD)

1. Open and sign into the eMR
2. Open your patients record
3. Click on the Healthnet link either on the navigation pane or on the Patient Summary page

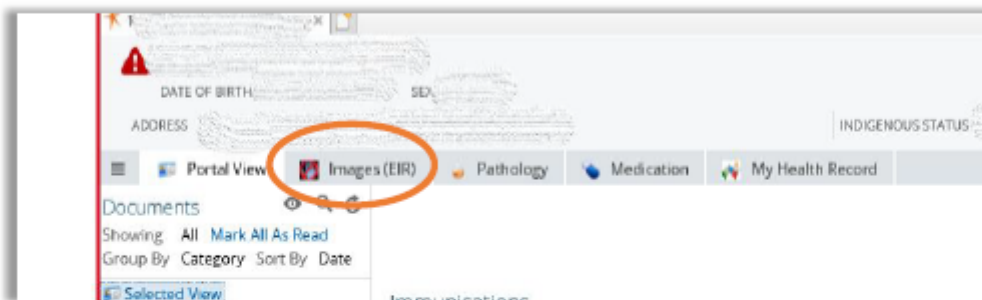




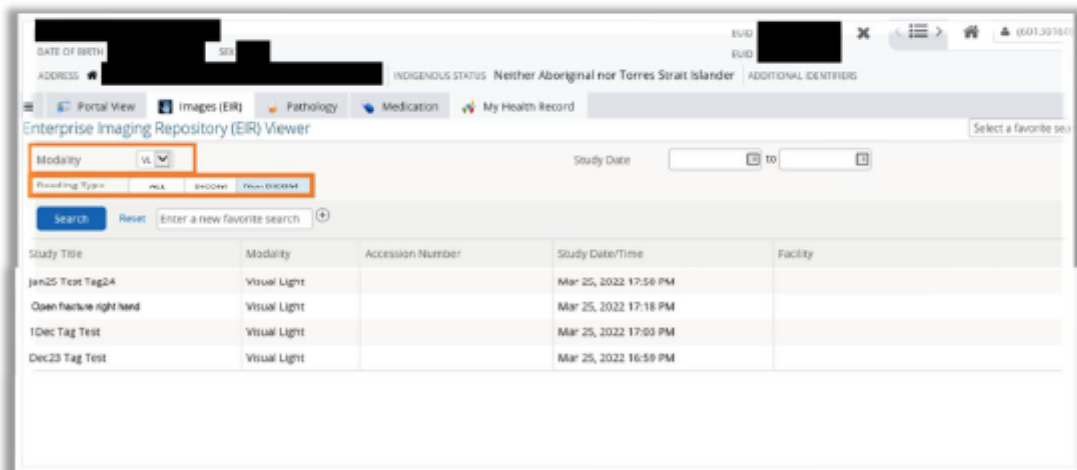
# Quick Reference Guide Enterprise Imaging Repository (EIR)



- On the Healthnet Summary page, click on the Images (EIR) tab to display the list of images/ reports associated with the patient.



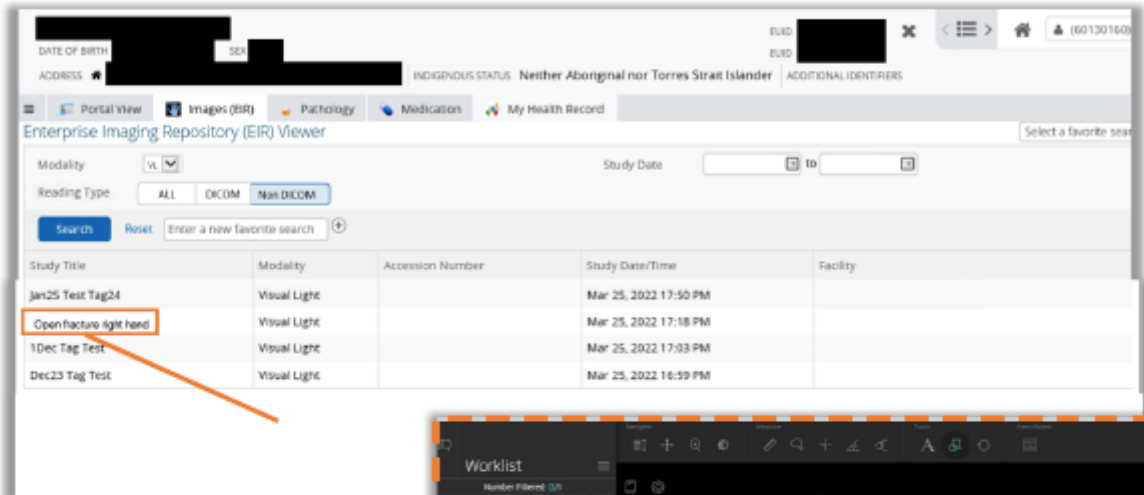
- Select VL (Visual Light) in the Modality dropdown box to filter for Clinical Photography. Alternatively, you can select Non-DICOM in the Reading Type.



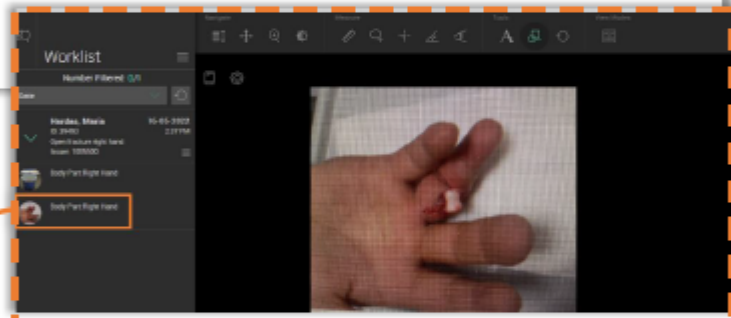
# Quick Reference Guide Enterprise Imaging Repository (EIR)



6. Click a Study Title to open the image in the EIR Mobility Viewer.



7. Related reports will appear in the worklist on the left. Click on the thumbnails to view the images





Accessing Images in Mobility Viewer (for access outside eMR)

If you require access to Mobility Viewer or the EIR directly, send your Stafflink ID to the EIR Support Team:

Email: EIR@health.nsw.gov.au

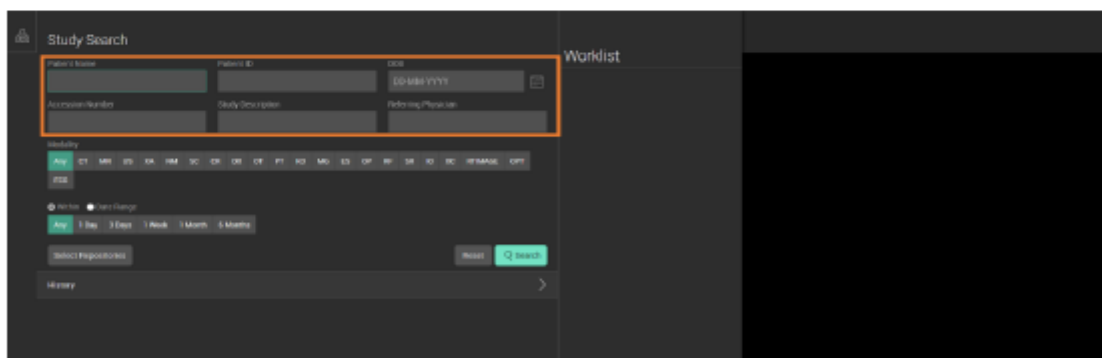
Business hour support: (02)8644 2570

After hours support: 1300 285 533

1. Go to <https://viewer.health.nsw.gov.au>
2. Login using your stafflink credentials

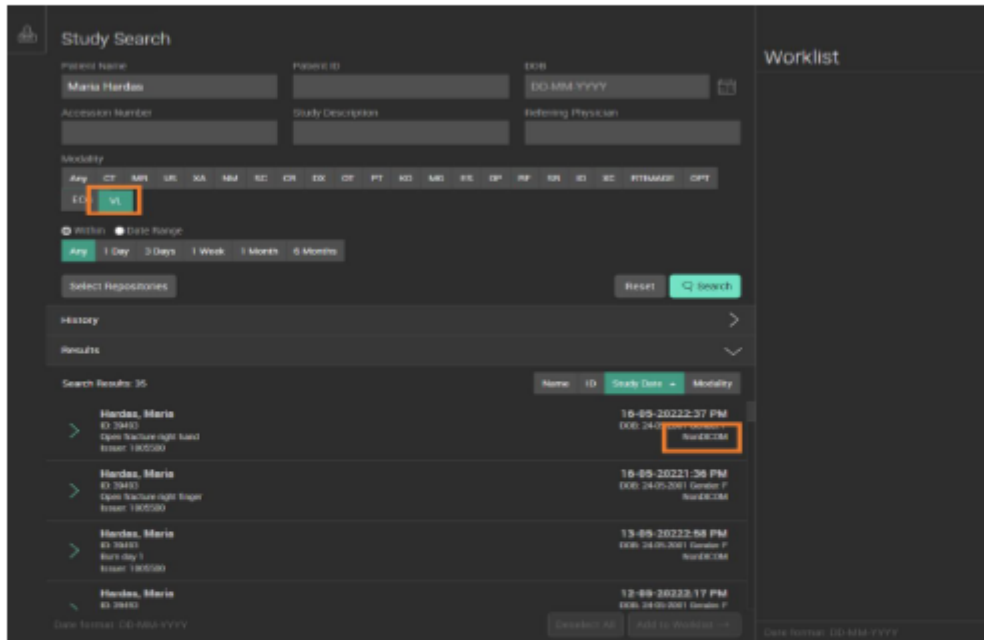


3. Enter patient details to display the list of images/ reports associated with the patient

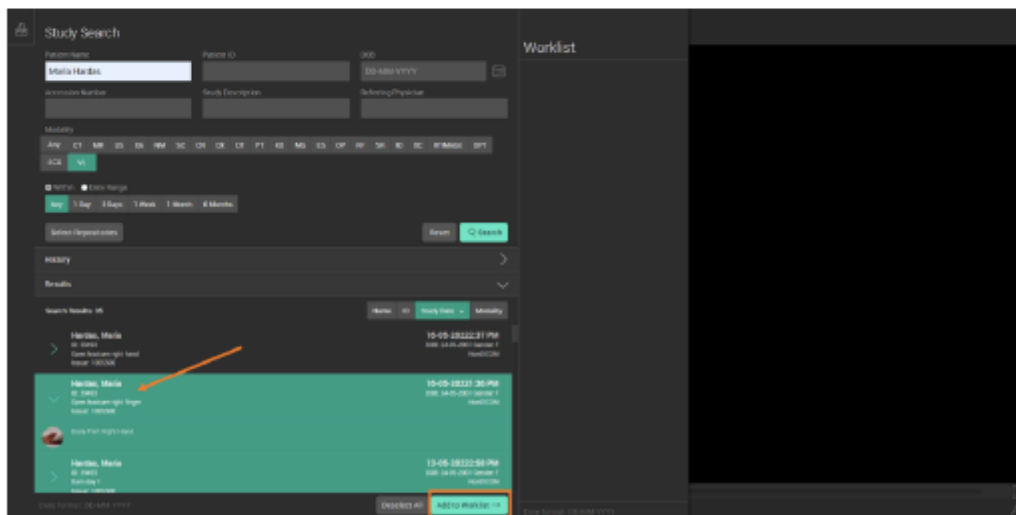


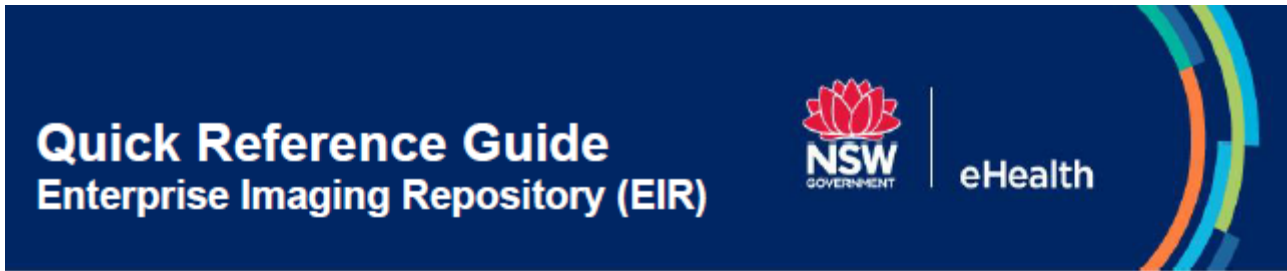
4. Select VL (Visual Light) in the Modality to see all State-wide non-DICOM images.

# Quick Reference Guide Enterprise Imaging Repository (EIR)



5. Highlight the selected images and select "Add to Worklist".





6. Double click on the thumbnail to view the image in the image viewer



Accessing images directly from the EIR (access requires approval)

1. Go to <https://eir-evercore.health.nsw.gov.au>
2. Enter your login information

