HealthLink

NZ TRANSPORT AGENCY
WAKA KOTAHI

User Guide

V1 12.06.2026 PW

HealthLink Forms Guide for Profile for Windows

Using HealthLink to submit **NZTA**'s
Medical Certificate for Driver Licence (DL9) form

For more information including FAQs, go to:

www.healthlink.co.nz/nzta

Completing NZTA's **Medical Certificate for Driver Licence (DL9)**

via HealthLink

The DL9 form is moving from a paper-based process to a digital experience available through the HealthLink Forms launch page.

This change will allow health professionals to complete and submit forms directly to NZTA, creating a faster and more efficient workflow as well as improve road safety.

Drivers will also benefit from a simpler process, as there will no longer be a need to take paper forms to an NZTA licensing agent.

Step 1:
Accessing the DL9 via HealthLink Forms

Step 2:
Completing the form

Step 3:
Parking the form

Step 4:
Previewing & Submitting the form

Step 5:
Printing the form

Step 6:
Accessing parked and submitted forms

HealthLink Technical Support

Email: helpdesk@healthlink.net

Phone: 0800 288 887

Step 1 (method 1):

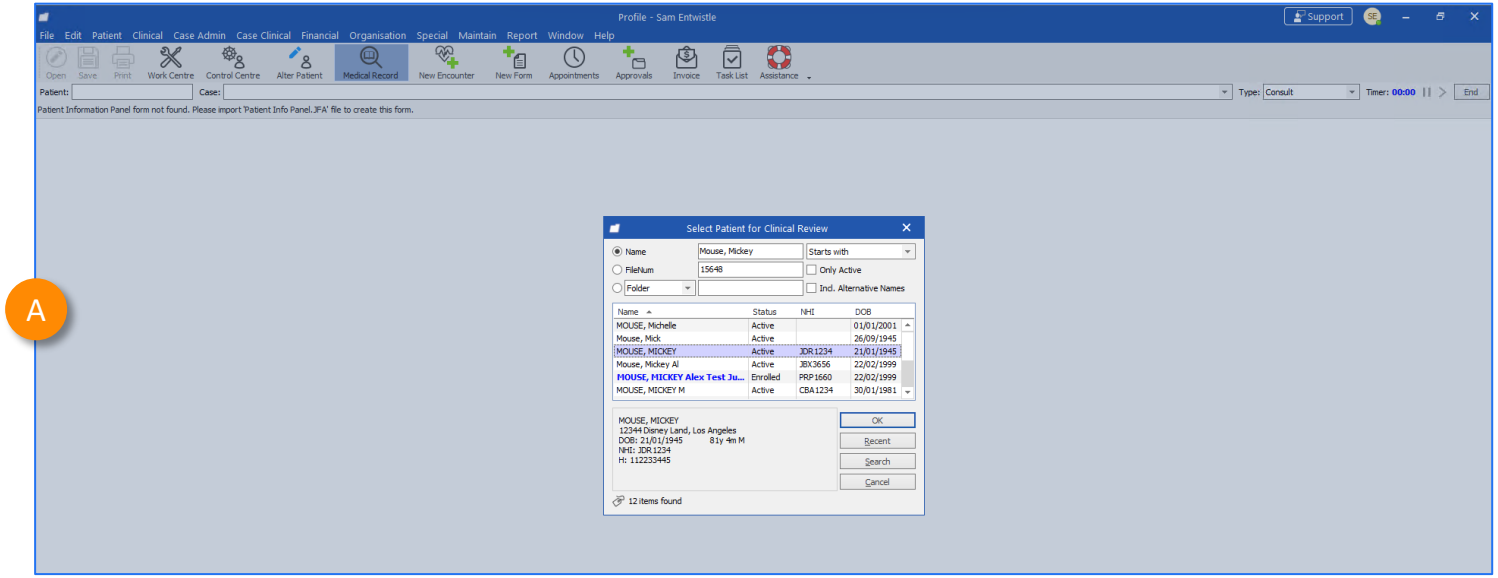
Accessing the DL9 via HealthLink Forms

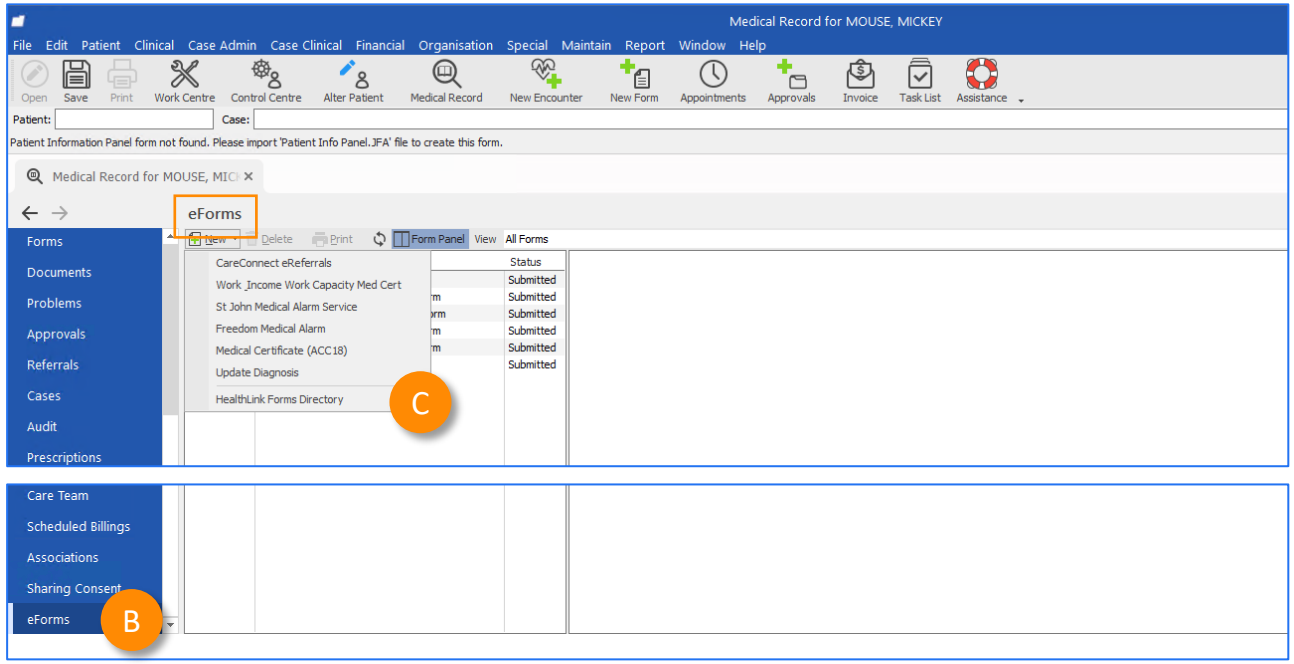
METHOD 1: Through patient medical record

A Search for your patient and open their Patient Record.

B In the **eForms** section…

C **HealthLink Forms Directory** & select **New Form**





Step 1 (method 2):

Accessing the DL9 via HealthLink Forms

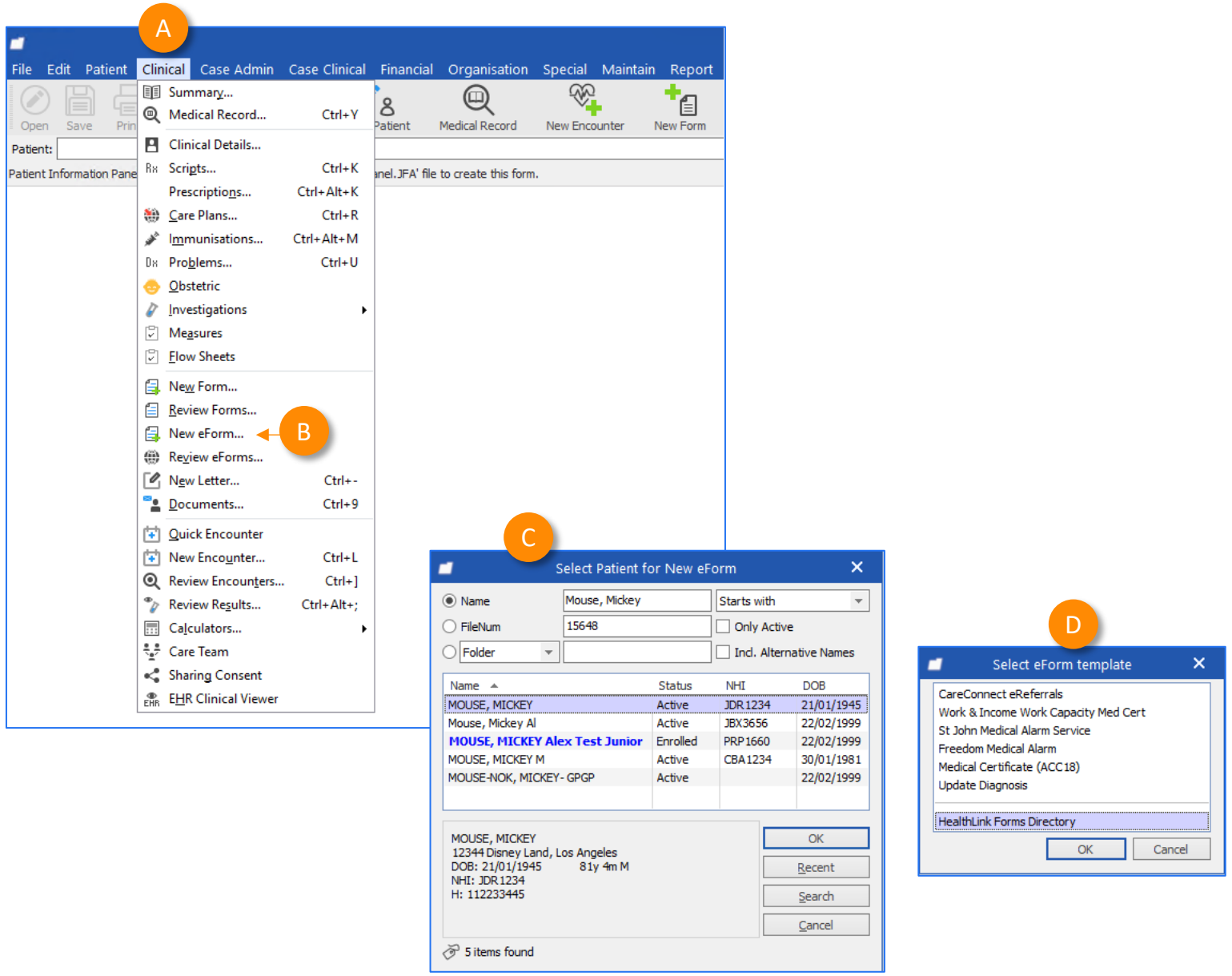
METHOD 2: From Profile homepage

A In the menu, select **Clinical**

B From the drop-down, select **New eForm**

C Search and **Select patient for New eForm**

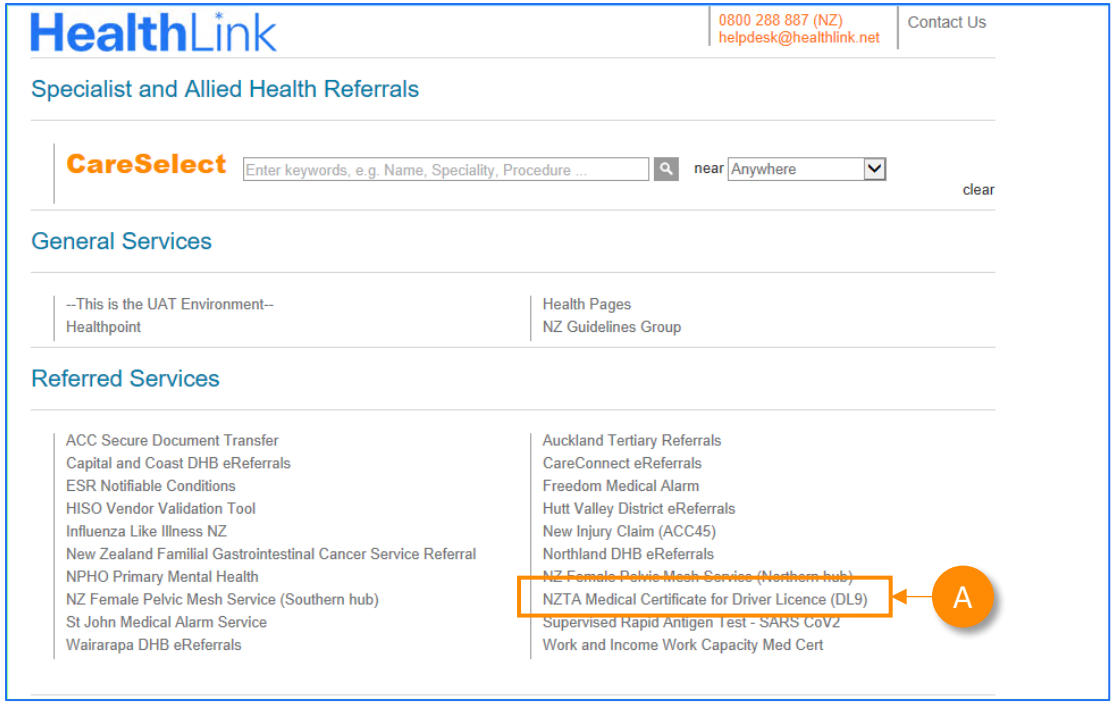
D **Select eForm template**:
HealthLink Forms Directory



Step 1 (continued):

Accessing the DL9 via HealthLink Forms

A Now you're on the HealthLink forms launch page, click '**NZTA Medical Certificate for Driver Licence (DL9)'**



Step 2:

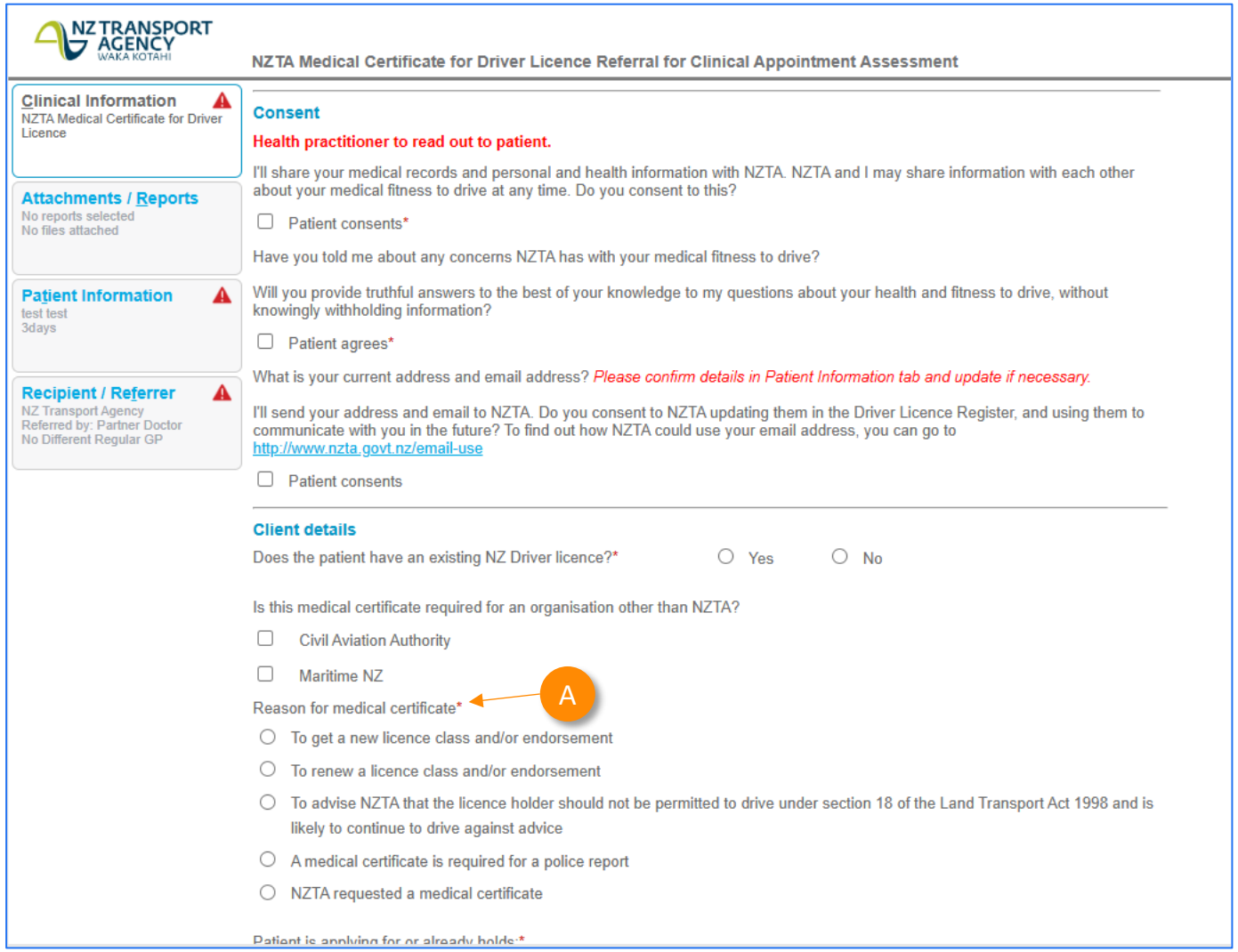
Completing the form

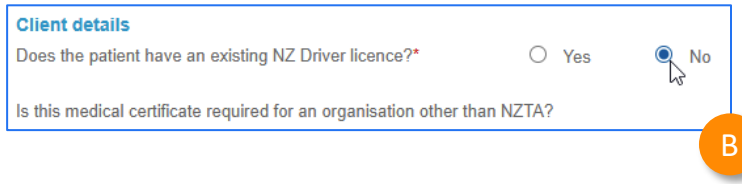
Clinical Information

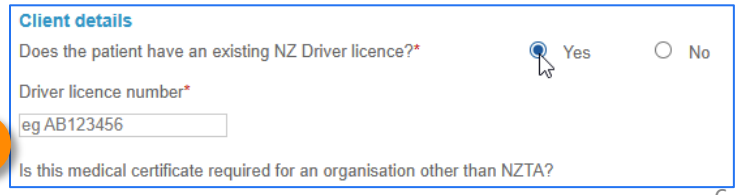
Fill out the form on the right-hand side, navigating through the tabbed sections on the left.

A Mandatory fields are marked with an asterisk

B The reflexive questioning helps you provide only relevant information, and the right information first time.







B

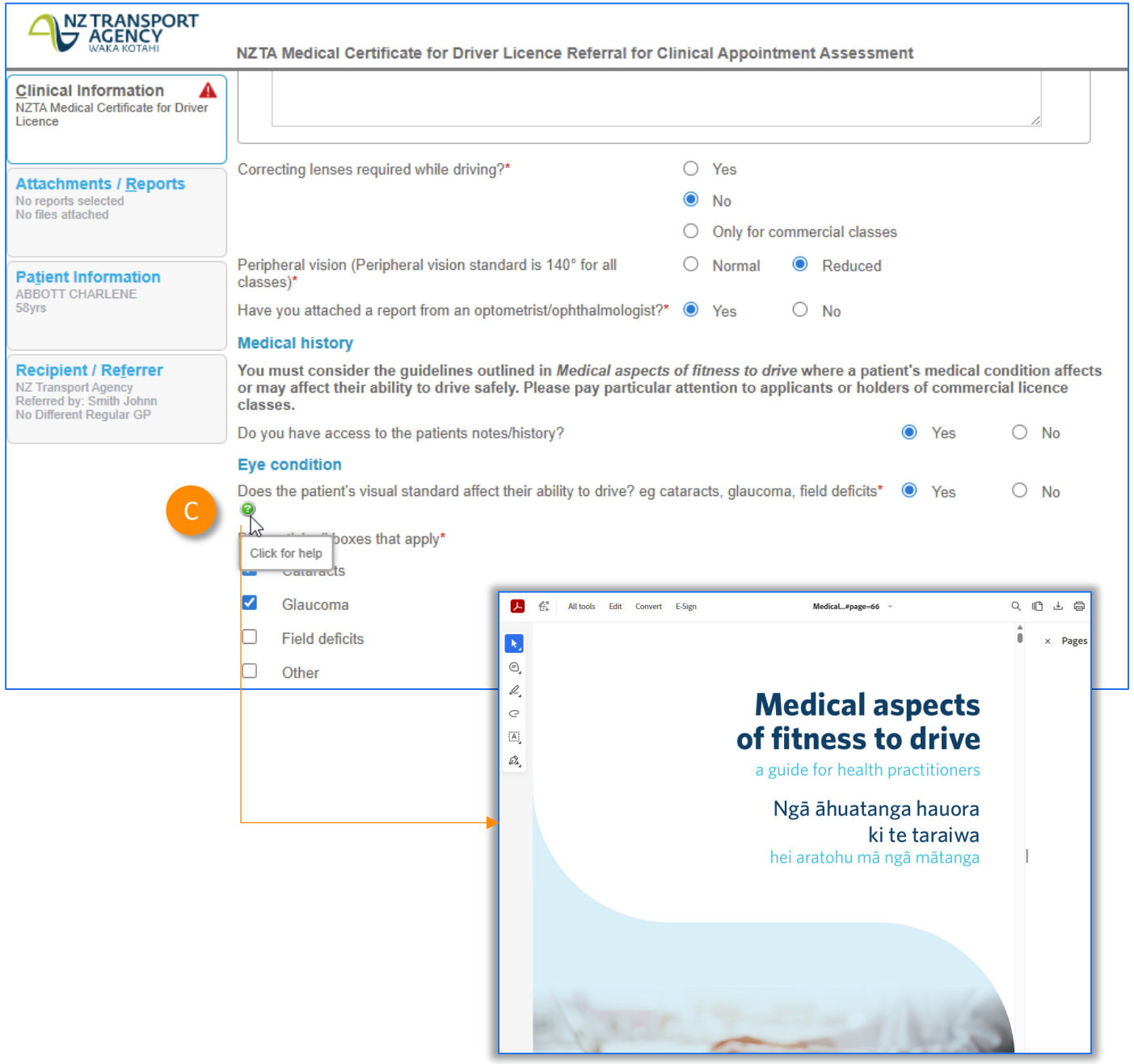
Step 2 (continued):

Completing the form

Clinical Information

The form has built-in guidance and clinical decision-making support

C Click on the Question mark icons to get more information and context.



Step 2 (continued):

Completing the form

Attachments/Reports

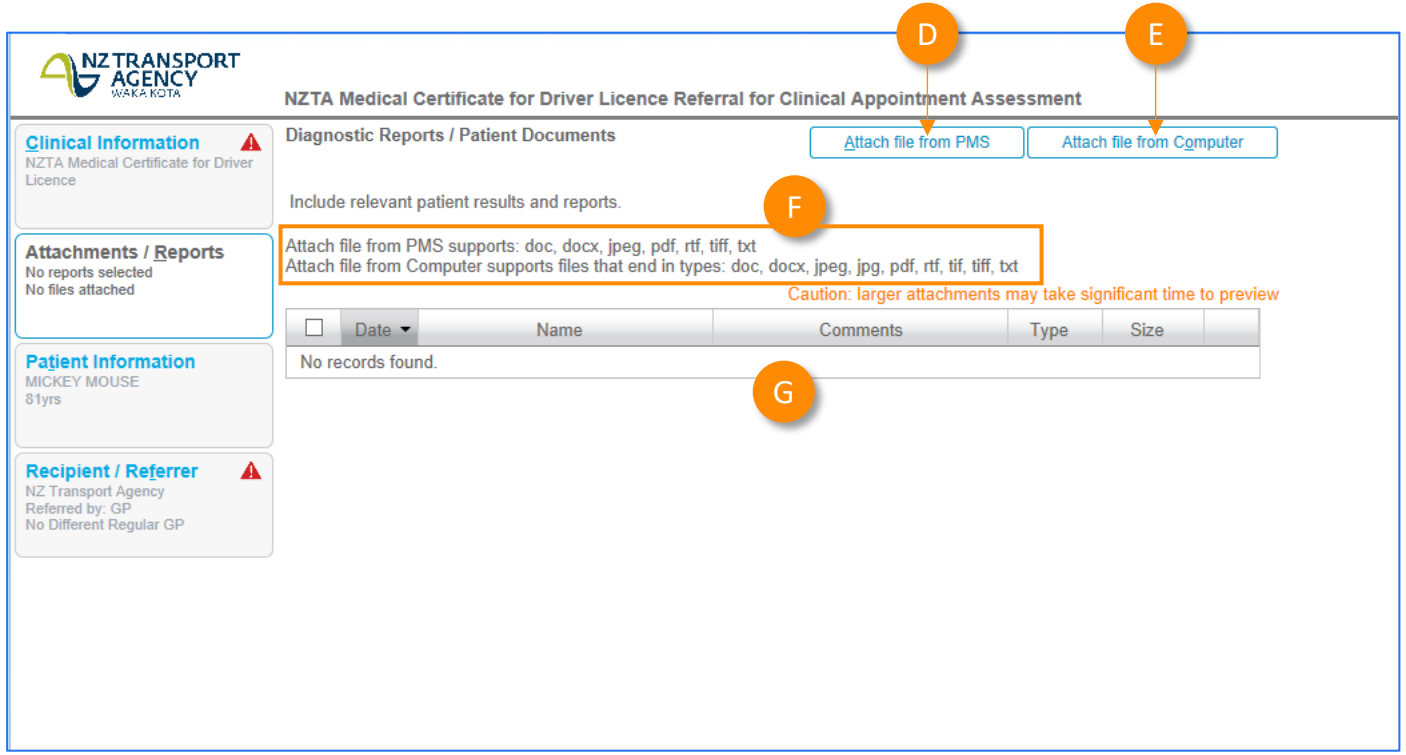
D You can attach files from your PMS

And/or

E You can attach files from your Computer.

F Take note of the supported file types.

G Added attachments will be listed in this table



Step 2 (continued):

Completing the form

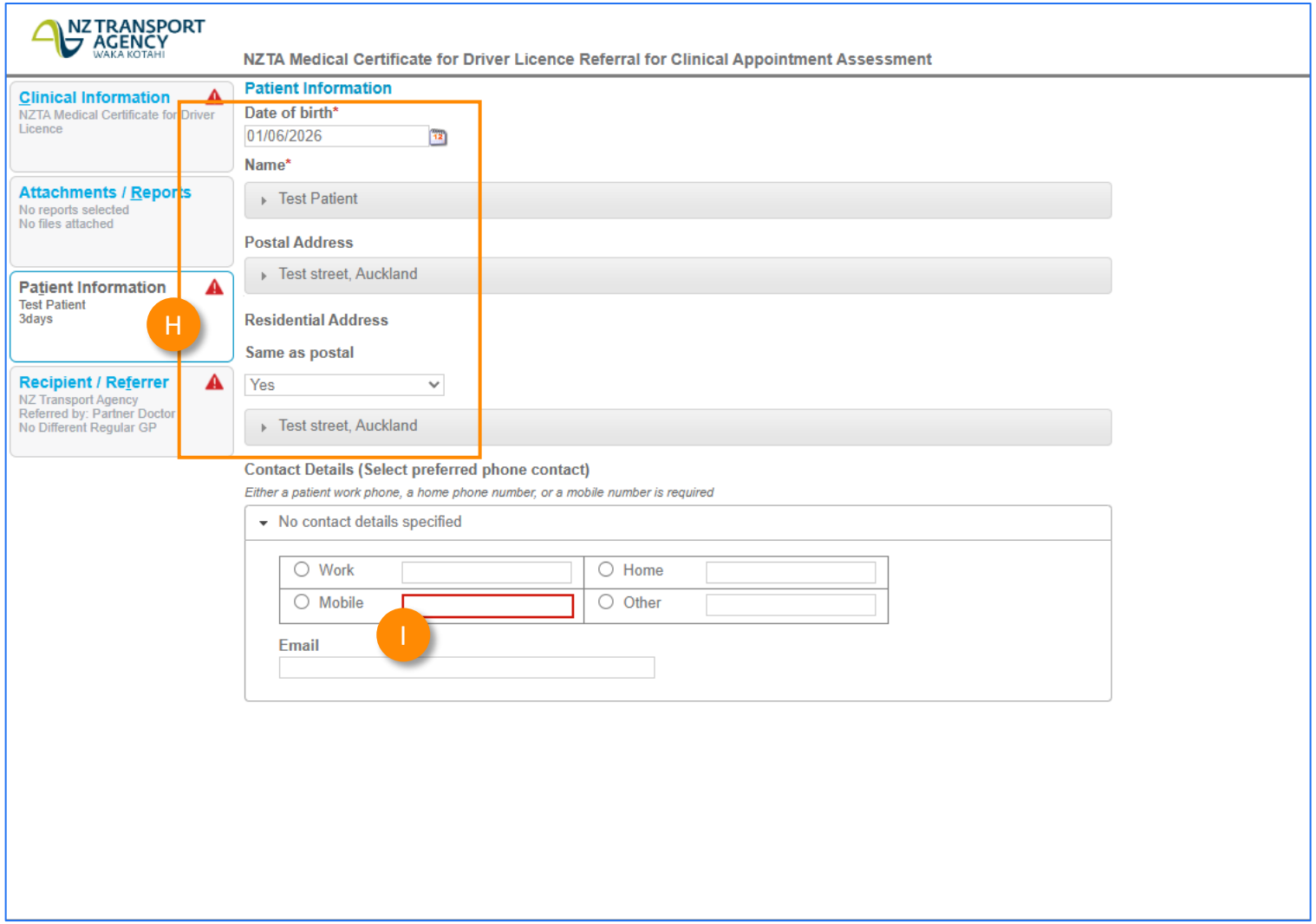
Patient information

H In the **Patient Information** section, the fields are **pre-populated** from your PMS, if the information is recorded in your PMS.*

I You can add or edit this information.

Please ensure the details are accurate.

***Note:** Pre-populated fields are sourced from patient/referrer information in your PMS. Any details not recorded in the PMS (e.g. address) must be entered manually.



Step 2 (continued):

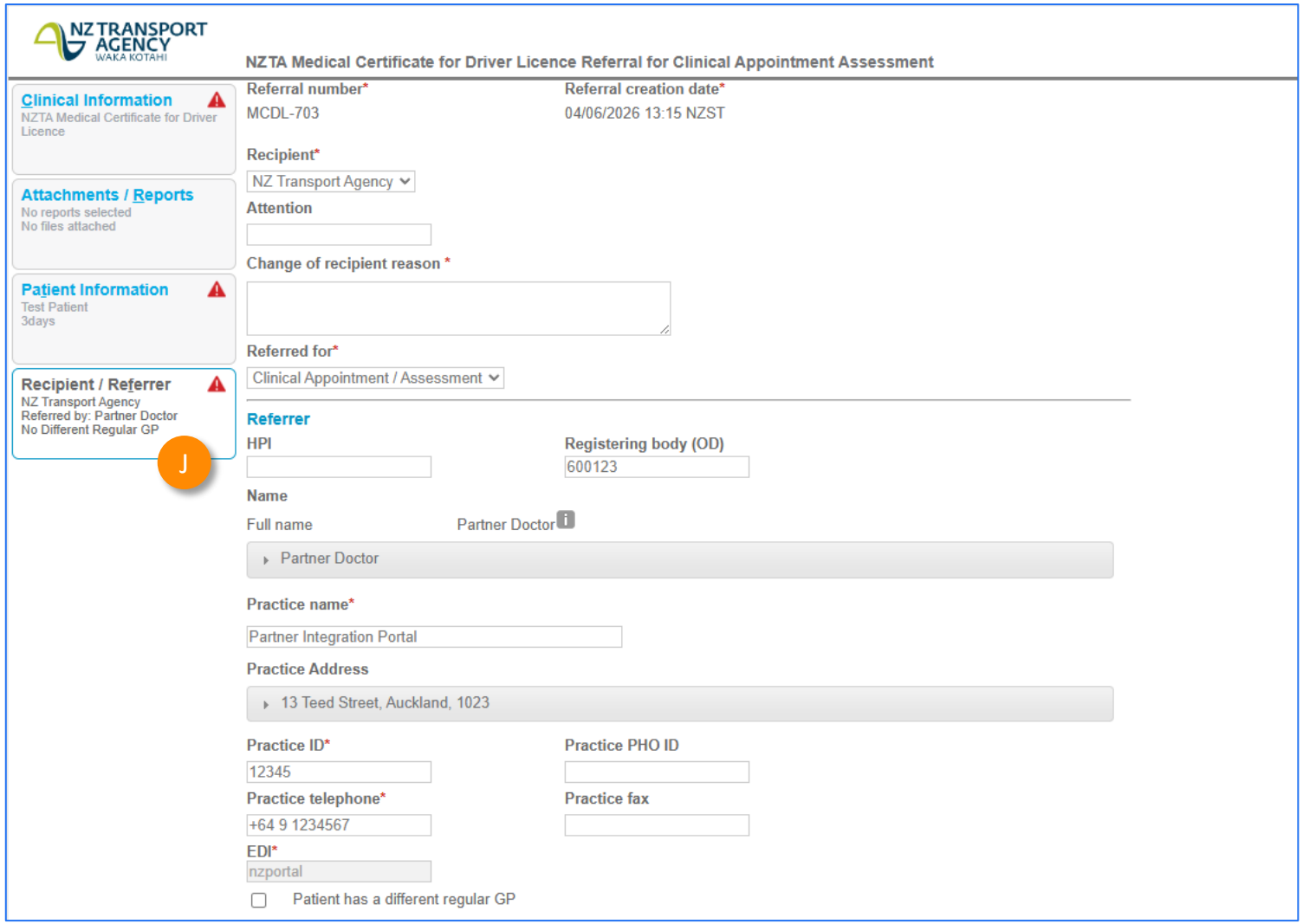
Completing the form

Recipient / Referrer

J In the **Recipient / Referrer** tab, the recipient and referrer information is **pre-populated** from the data in your PMS, if the information is recorded in your PMS.*

Check that the referrer information is accurate.

***Note:** Pre-populated fields are sourced from patient/referrer information in your PMS. Any details not recorded in the PMS (e.g. address) must be entered manually.

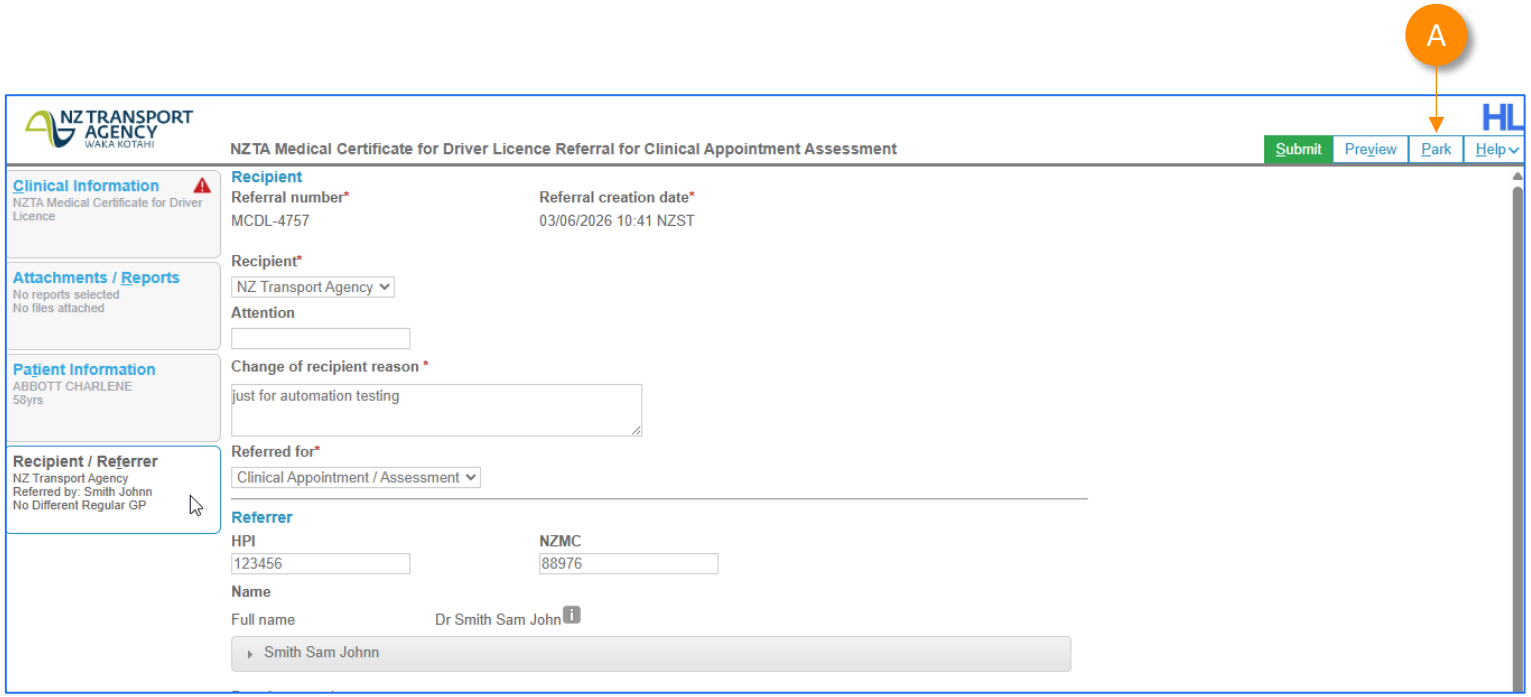


Step 3:

Parking the form

A At the top right, click Park to park the form to resume later.

To open and resume the form, see ***Step 6: Accessing parked and submitted forms***



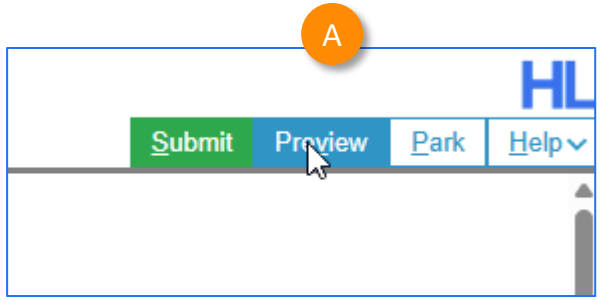
Step 4:

Previewing & Submitting the form

Previewing the form is a good way to check if you've missed any mandatory questions, and to review the details before submitting.

A Simply click the **Preview** button to the top right of the window.

B If you've completed the form correctly, it will give you a preview of the final report.



B

Preview, not submitted copy

Submit

NZTA Medical Certificate for Driver Licence Referral for Clinical Appointment Assessment

NZ TRANSPORT AGENCY

Patient: MICKEY MOUSE (MICKEY), 81yrs, DOB 21/01/1945, PH: Work 0923456789, Home 0912345678, Mob 020000000

Residential address: 100 Dominion Road, Mount Eden, Auckland 1024

Postal address: 100 Dominion Road, Mount Eden, Auckland 1024

Referred by: GP test, Millstone Family Practice, NZMC 12345, PH 09 3580116, FAX 09 4433456

Clinical Referral Information

Consent

I'll share your medical records and personal and health information with NZTA. NZTA and I may share information with each other about your medical fitness to drive at any time. Do you consent to this?

Patient consents

Have you told me about any concerns NZTA has with your medical fitness to drive?

Will you provide truthful answers to the best of your knowledge to my questions about your health and fitness to drive, without knowingly withholding information?

Patient agrees

Client details

Does the patient have an existing NZ Driver licence? No

Is this medical certificate required for an organisation other than NZTA?

- Maritime NZ

Reason for medical certificate:

To get a new licence class and/or endorsement

Patient is applying for or already holds:

- Any of: class 1 or 6, dangerous goods (D), forklift (F), rollers (R), tracks (T), wheels (W) endorsement

Visual Acuity

Visual Acuity: Classes 1 & 6 FRTWD endorsement

Both (At least 6/12): Meets visual acuity standard (At least 6/12)

Peripheral vision (Peripheral vision standard is 140° for all classes): Normal

Medical history

Do you have access to the patients notes/history? Yes

Eye condition

Does the patient's visual standard affect their ability to drive? eg cataracts, glaucoma No

Step 4 (continued):

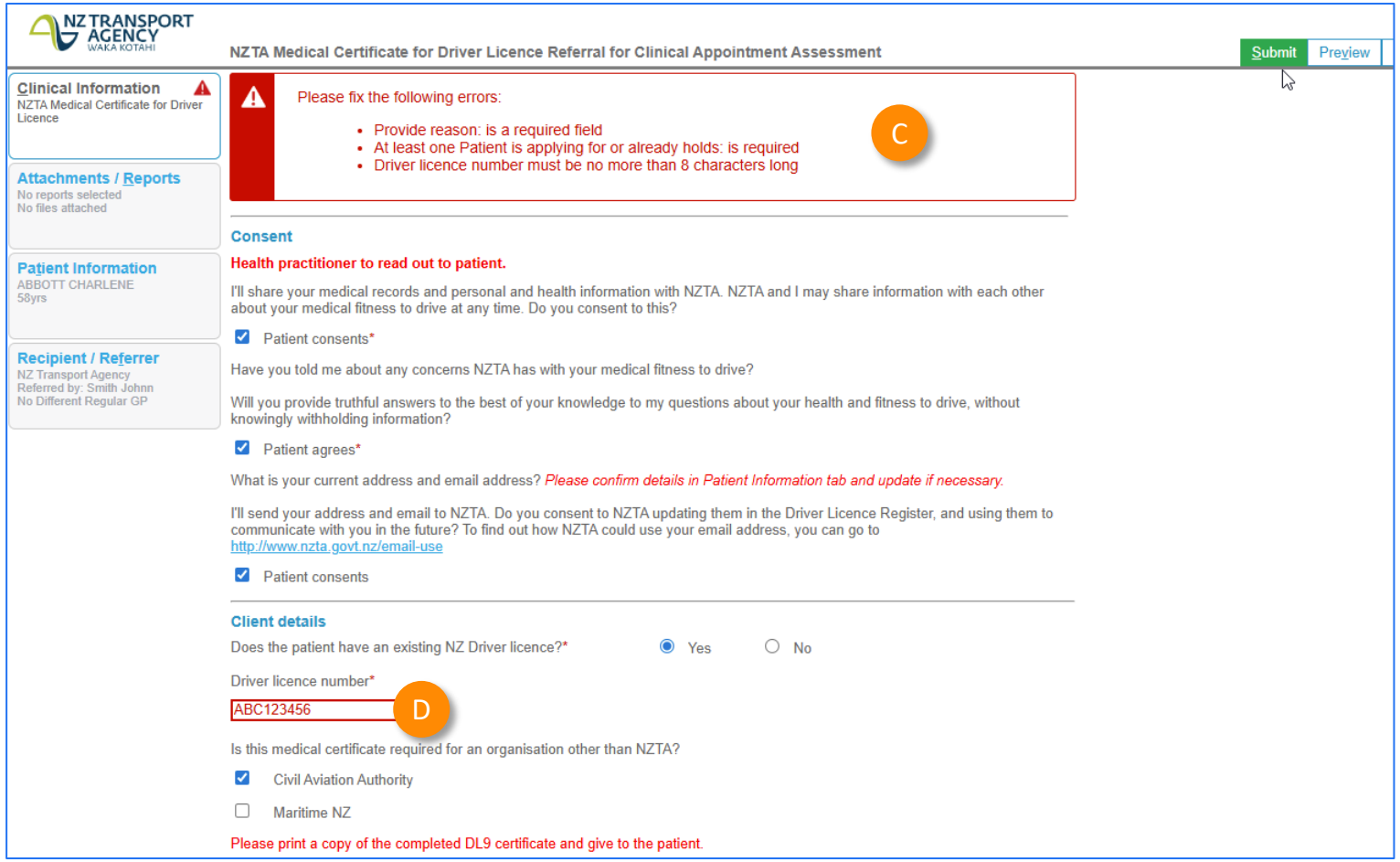
Previewing & Submitting the form

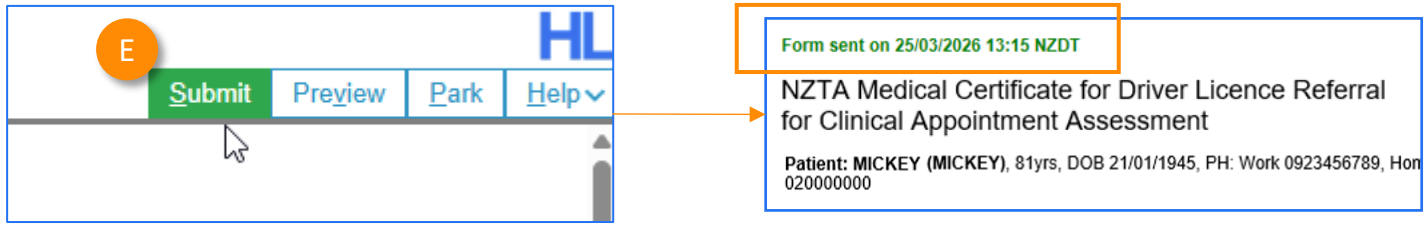
C If any mandatory fields have been missed or are incomplete, when you click **Preview** *or* **Submit** you'll see a red box appear at the top of the form giving you feedback on what needs fixing.

D The fields that need to be fixed will also be in red.

E **Ready to submit?**
Once you've completed all required fields, click **Submit**.

To access your submitted form, see ***Step 6: Accessing parked and submitted forms***





Step 5:

Printing the form

In some scenarios you may need to print a copy of the submitted form for the driver (your patient).

A **To print a copy**, once you've submitted the digital form, click the **Print** button that now appears on the form.

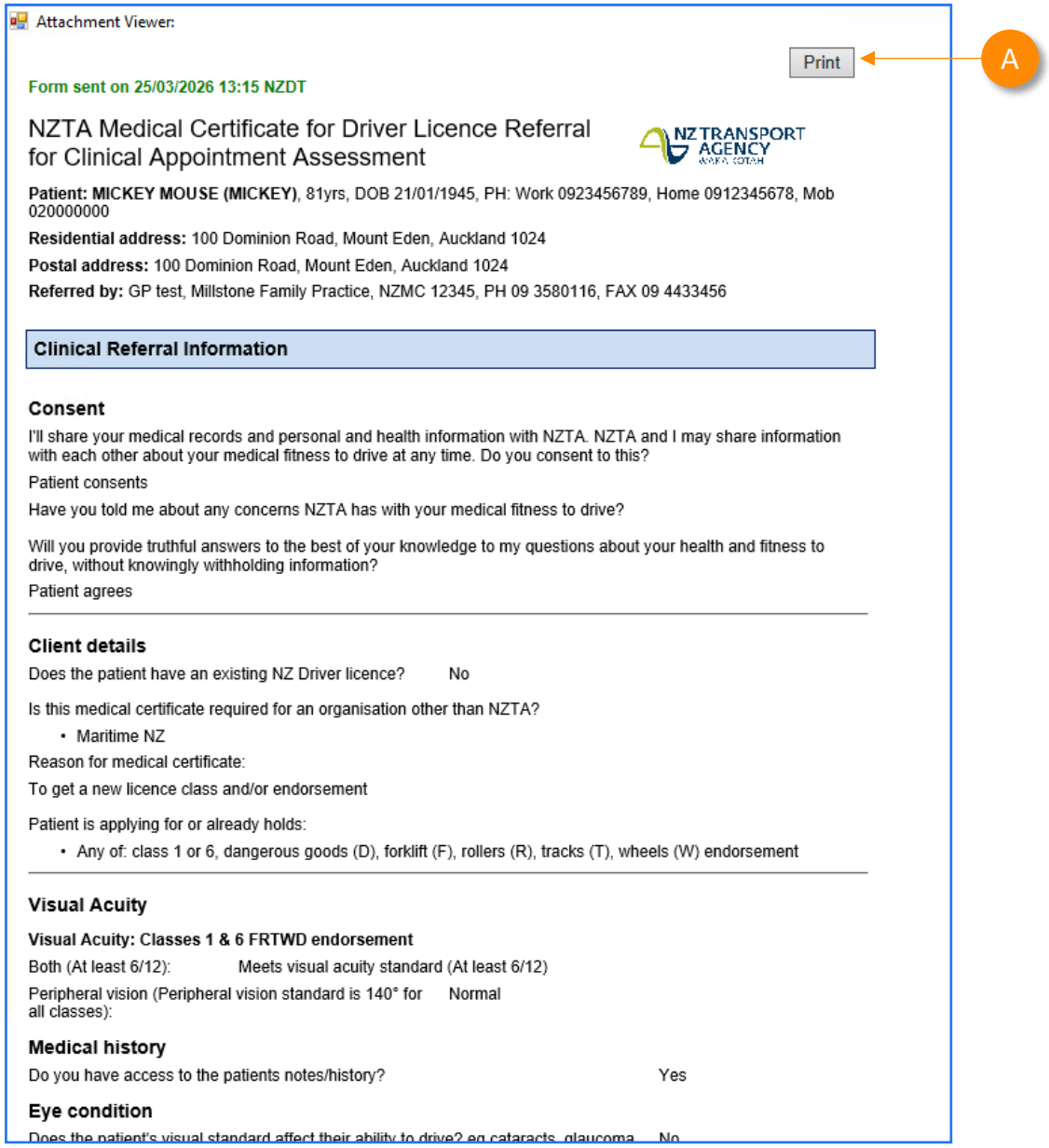
In what scenarios will I still need to print a DL9, and why?

You will need to print a DL9 in the following situations:

- To provide a patient copy if requested
- When the driver does not yet hold a New Zealand driver licence
- When completing a DL9 for Maritime New Zealand or Civil Aviation Authority (CAA) purposes

In these cases, a printed DL9 is required because the certificate must

accompany the relevant licensing or application form.



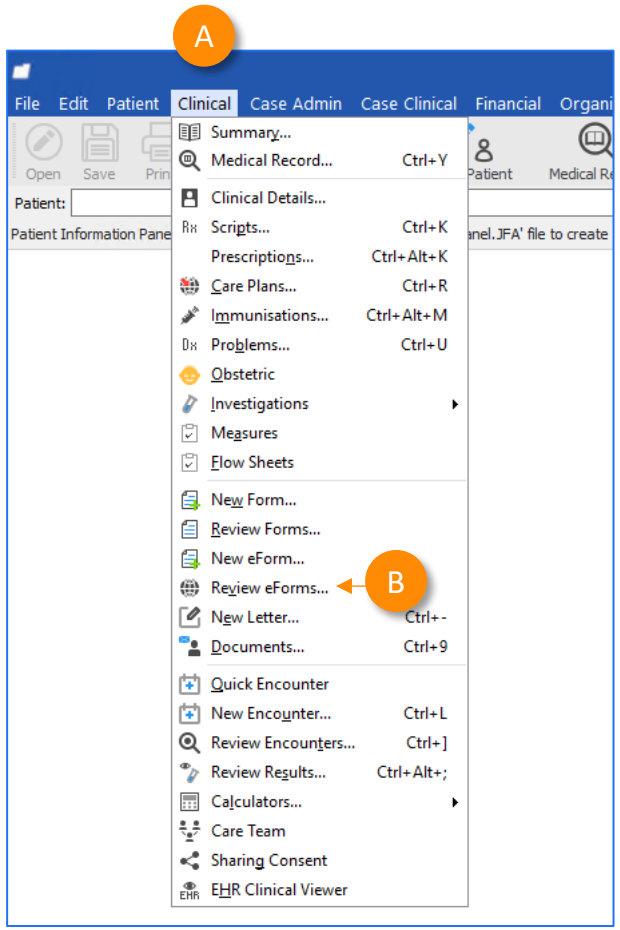
Step 6:

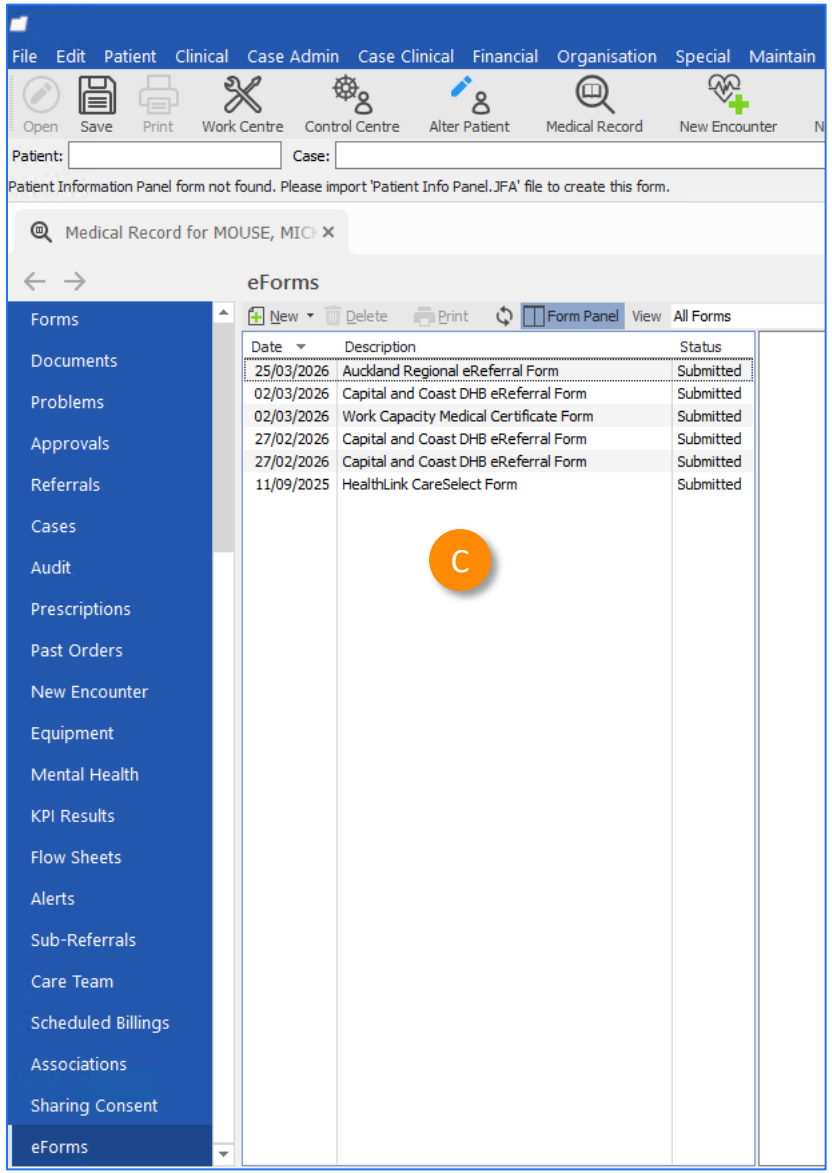
Accessing parked and submitted forms

A In the menu, select **Clinical**

B From the drop-down, select **Review eForms**

C Now you can view a list of **parked** and **submitted** forms





Customer Care
Phone: 0800 288 887
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Monday to Friday (Except Public Holidays)
8:00am – 6:00pm

www.healthlink.co.nz

HealthLink

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