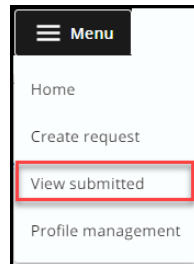# How to Provide Additional Information Online Via SADIE

In response to a Ministry decision of 'Further Information Required' for a submitted request, prescribers, their delegates and designates* can provide additional information in support of a submission, online via SADIE.

*Note: Designates can send additional information to prescribers and delegates to submit, for requests associated with practice locations for which they have been provided access.
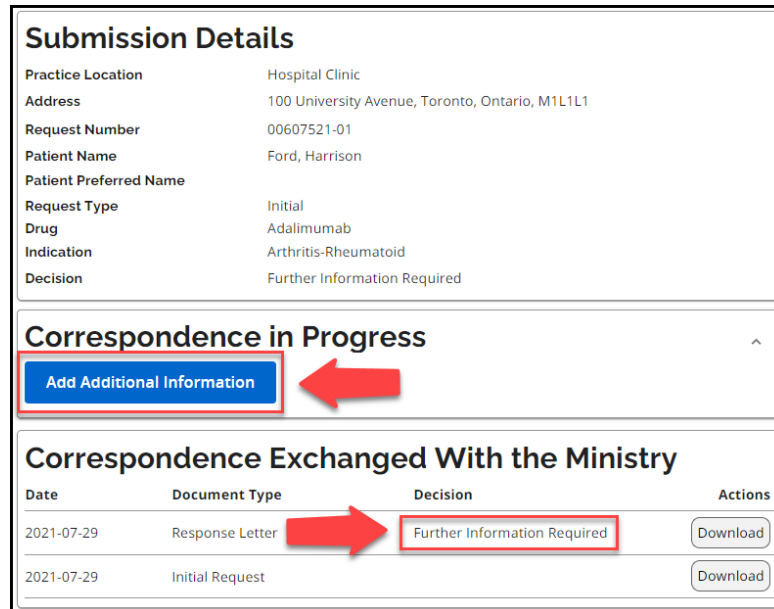
See the User Guide, Chapter 16, for more information about how to provide additional information to the EAP. Additional training materials are found on the Training Aids page: Ontario.ca/SADIE.
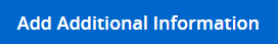
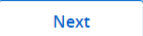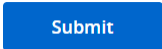| Steps	
Select the **Menu** button, and then click on **View submitted** found in the header at the top of all SADIE pages	
Select the **View** { View } button for the request with a 'Further Information Required' decision, in the **Submitted Requests With Ministry Decision** list. Select the **Add Additional Information** { Add Additional Information } button in the **Correspondence in Progress** section. The **Additional Information Submission Details Summary** tab displays. Confirm practice location details and then click the **Next** { Next } button.	 Select the **Save** { Save } button to save the Additional Information in the **Correspondence in Progress** section on the **Submission Details** screen, as well as the **Requests in Progress** list on the **Home** screen. The saved Additional Details record can be edited, deleted, or submitted to the EAP.
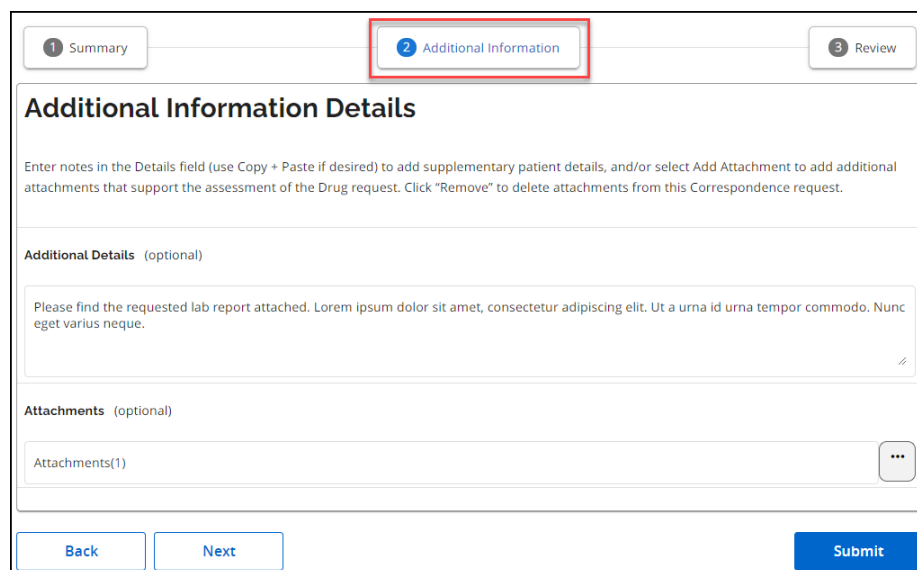
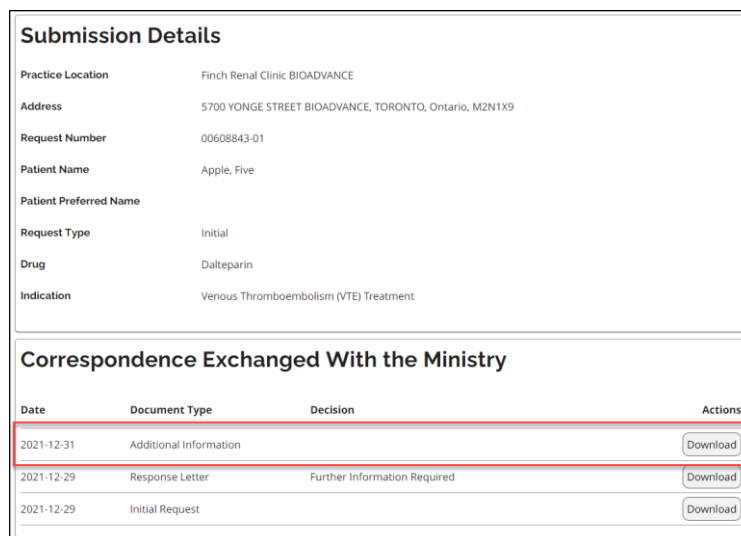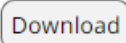|	
The system displays the **Additional Information Details** tab. Type additional details or paste from another document and/or add attachment(s), then click the **Next** { Next } button.	**Additional Information Details** Enter notes in the Details field (use Copy + Paste if desired) to add supplementary patient details, and/or select Add Attachment to add additional attachments that support the assessment of the Drug request. Click "Remove" to delete attachments from this Correspondence request. **Additional Details** (optional) Please find the requested lab report attached. Lorem ipsum dolor sit amet, consectetur adipiscing elit. Ut a urna id urna tempor commodo. Nunc eget varius neque. **Attachments** (optional) Attachments(1)
The system displays the **Request Summary Review** tab. Review the information, and to continue, click the **Submit** { Submit } button. Note that Designates view a **Send to Prescriber** { Send to Prescriber } button. When a designate sends additional information to a prescriber, it displays on the **Home** screen in the **Requests Ready to Submit** list.	The request returns to the **Submitted Requests Awaiting Ministry Decision** list. Note: It can take 1 - 2 minutes for the submitted request to appear in the list. Select the **View** { View } button and the **Submission Details** screen displays. **Submission Details** Practice Location Finch Renal Clinic BIOADVANCE Address 5700 YONGE STREET BIOADVANCE, TORONTO, Ontario, M2N1X9 Request Number 00608843-01 Patient Name Apple, Five Patient Preferred Name Request Type Initial Drug Dalteparin Indication Venous Thromboembolism (VTE) Treatment **Correspondence Exchanged With the Ministry** | Date	Document Type	Decision	Actions
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2021-12-31	Additional Information		Download
2021-12-29	Response Letter	Further Information Required	Download
2021-12-29	Initial Request		Download	 Select the **Download** { Download } button to download a copy of the Additional Information that was submitted to the EAP.
Need Assistance?	**Looking for more Information about SADIE?** www.Ontario.ca/SADIE **Technical Assistance (Mon – Fri, 8 a.m. - 5 p.m.)** **Call: 1-800-262- 6524** (after the language prompts, press 4-4-1) **Email:** SSContactCentre.MOH@ontario.ca