

How do I use reference fields in the Form Builder?

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In the Form Builder, reference fields allow you to cross-reference fields across different templates or within the same template. The purpose of reference fields is to easily pull values entered in a different field and have those values show up in a different section of your clinical note.

Possible uses include:

- An OnPatient template is filled out by the patient during the onboarding process. During the appointment, you can have a field that generates their response to your follow-up questions.
- If you have a template that generates text for the purpose of printing a prescription or lab order, you can generate text from your clinical templates and then select print.
- If you would like multiple instances of a value entered in your clinical notes, reference fields allow you to easily generate additional instances out of the section where the value was originally entered.

Note: Reference fields can only pull values from Short Text, Single, and Multiple Select Fields.

Before building your form, we recommend reviewing [Best Practices for Building Custom Forms](#) designed to help you make the most of the clinical notes feature.

Reference Field Setup

1. To begin with reference fields, navigate to your form builder ([Clinical > Form Builder](#)). Before you add reference fields to a template, make sure that you have a field or template set up that you would like to pull values from.

Form Builder

The screenshot shows the Form Builder interface. On the left is the 'Form List' pane with various templates like 'Consent for Injection', 'Work/School Excuse Form', and 'Eye Exam'. The 'Eye Exam' template is selected and shown in the center as a 'Form Editor' window. The editor contains fields for 'Eye Exam Performed Today?' (checkboxes for YES/NO), 'Visual Acuity OD' (single select), 'Pinhole OD' (single select), 'Afferent Pupillary Defect OD' (checkboxes for YES/NO), 'Dilated OD' (checkboxes for YES/NO), 'IOP OD', 'CVF OD', 'Visual Acuity OS' (single select), 'Pinhole OS' (single select), 'Afferent Pupillary Defect OS' (checkboxes for YES/NO), 'Dilated OS' (checkboxes for YES/NO), 'IOP OS', and 'CVF OS'. On the right is the 'Form Tools' pane with sections for 'New Fields' (Short Text Field, Yes / No, Switch, Single Select, Multiple Select, Free Draw, Fraction Field, Header, Subheader, Reference Field), 'Field Clipboard' (New Section, SOAP Section), and buttons for 'Edit', 'Move', 'Copy to clipboard', and 'Archive'.

2. When that field is set up, select a reference field from the right-hand **Form Tools** pane and click the desired location for the reference field on the form.

Form Tools

New Fields **Field Clipboard**

New Section SOAP Section

Short Text Field

Yes / No

Switch

Single Select

Multiple Select

Free Draw

Fraction Field

Header

Subheader

Reference Field



3. Click the field to set up your reference field. Under the reference section, select the template your desired field is located.

Edit Field

Label Name: Visual Acuity OS

Reference: **[Choose Form]**  Use current form

Generated text:

Edit Preview

Value Patient Date Date & Time Field Date Field Date & Time

Header Subheader Bold Italic Underline x_1 x_2

Pt Demogr Service Date & Time System Vitals Custom Vitals Custom Pt Demogr

`{{value}}`

Reference fields require a form to refer to.

Edit Field

Label Name: Visual Acuity OS

Reference: Eye Exam **[Choose Field]**

Generated text:

Edit Preview

Value Patient Date Date & Time Field Date Field Date & Time

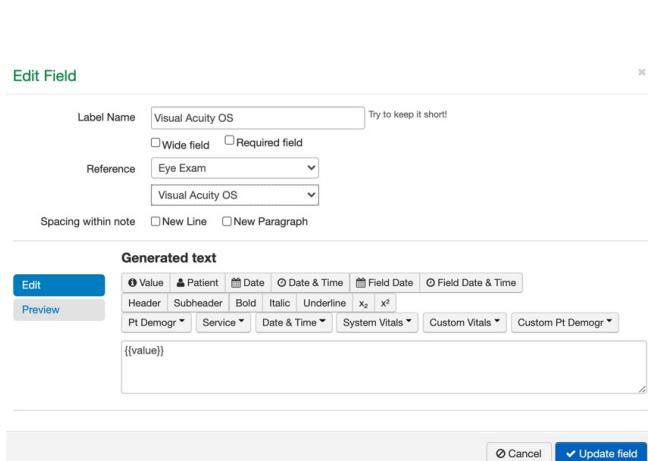
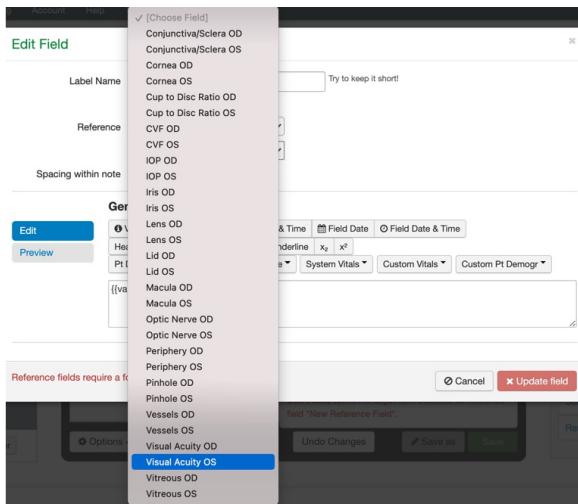
Header Subheader Bold Italic Underline x_1 x_2

Pt Demogr Service Date & Time System Vitals Custom Vitals Custom Pt Demogr

`{{value}}`

Reference fields require a form and field to refer to.

4. Then in the field below, select the field your value is pulled from. Now, when you enter in `{{value}}` , the text generated will be identical to the text generated with the `{{value}}` field from the original field. Click **Update Field**.



5. When the field editor closes, be sure to also select **Save** on your form.

Eye Exam *

<p>Macula OS WNL?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>Macula OS</p> <p>Multiple Select •••</p>
<p>Vessels OD WNL?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>Vessels OD</p> <p>Multiple Select •••</p>
<p>Vessels OS WNL?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>Vessels OS</p> <p>Multiple Select •••</p>
<p>Periphery OD WNL?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>Periphery OD</p> <p>Multiple Select •••</p>
<p>Periphery OS WNL?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>Periphery OS</p> <p>Multiple Select •••</p>
<p>Visual Acuity OS</p> <p><input type="text"/> → <input type="text"/></p>	

Options ▾ Undo Changes Save as Save