

SCIMP

Recording non-practice medications in Vision & EMIS PCS

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Recording non-practice medications in Vision & EMIS PCS

About

This document has been prepared by SCIMP to give guidance to GP practices in Scotland using INPS Vision 3 or EMIS PCS.

The guidance describes current best practice for recording in the GP record medications that have been provided or obtained by a patient from a source outside of the GP practice. Typically this would mean medications provided by hospitals and unscheduled care, over the counter items or the patient's own medication. Such medicines are often referred to as 'non practice'.

This has several benefits:

- Prescription record is complete
- The Emergency Care Summary prescribing is complete
- Medication decision support can alert to interactions and other risks

Emergency Care Summary Update

The prescribing data uploaded by GP systems for use by the Emergency Care Summary (ECS) is being changed to better reflect the patient's current medication, and this will include non-practice medications provided the practice has added them correctly to the GP record. Non-practice medicines will be able to be shown as such when viewed in ECS.

For Vision practices the new 'schema' that supports this will be enabled in a future DLM, yet to be confirmed but possibly DLM 440. For the transmission to function correctly practices must have the new DLM installed and have enabled the Key Information Summary (KIS) on their systems.

At this stage it is good practice to start recording non practice medication using the current functionality in Vision as this will allow accurate transmission of data in the future.

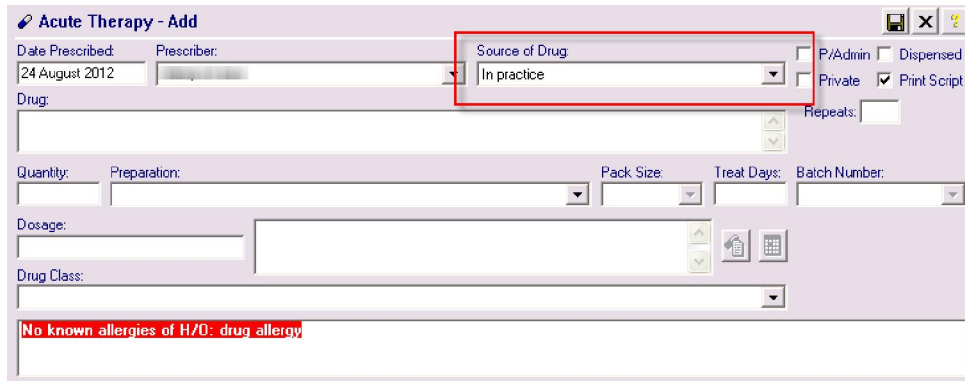
Which non-practice medicines should be added?

At present this is up to individual practices to decide. There is no contractual requirement for GPs to maintain a universal medication record for their patients, but there are local benefits to recording non-practice medicines as well as benefits for data sharing in ECS and associated summaries.

Adding non-practice medicines to the Vision or EMIS record will result in such medicines being checked for drug decision support warnings. It will also allow prescribers to form a more complete assessment of the patient's current and past medications when making future prescribing decisions.

How to record non-practice medications in Vision

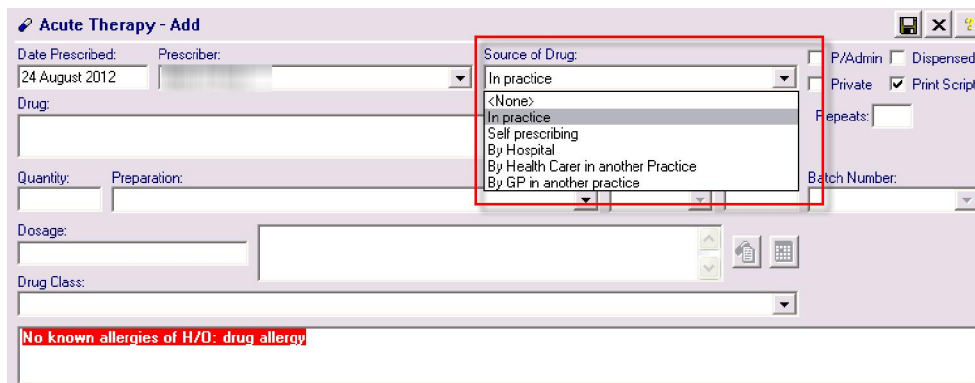
In INPS Vision, therapy records include a field for 'Source of Drug' represented as a drop down box on medication add forms as shown below:



The screenshot shows the 'Acute Therapy - Add' form. The 'Source of Drug' dropdown menu is highlighted with a red box and is currently set to 'In practice'. Other fields include 'Date Prescribed' (24 August 2012), 'Prescriber', 'Drug', 'Quantity', 'Preparation', 'Pack Size', 'Treat Days', 'Batch Number', 'Dosage', and 'Drug Class'. There are also checkboxes for 'P/Admin', 'Dispensed', 'Private', and 'Print Script', and a 'Repeats' field. A red text box at the bottom indicates 'No known allergies of H/O: drug allergy'.

Possible values for this field are:

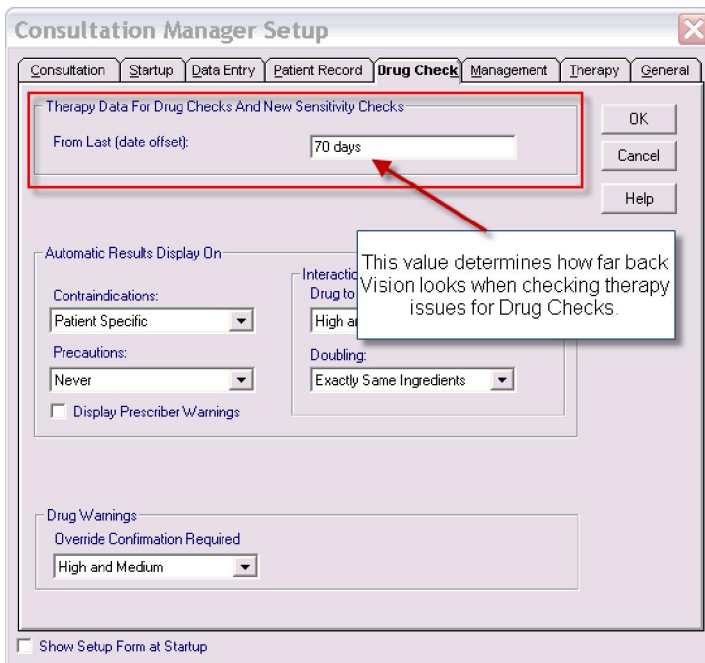
- In practice (the default)
- Self prescribing
- By Hospital
- By Health Carer in another Practice
- By GP in another practice
- <None>



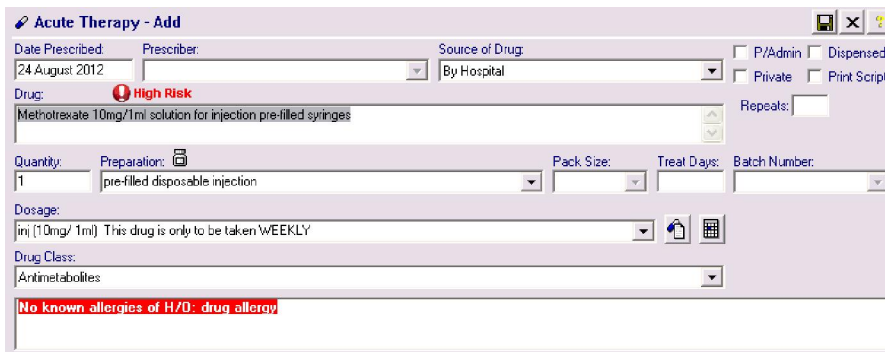
The screenshot shows the 'Acute Therapy - Add' form with the 'Source of Drug' dropdown menu open. The menu options are: 'In practice', '<None>', 'In practice', 'Self prescribing', 'By Hospital', 'By Health Carer in another Practice', and 'By GP in another practice'. The first 'In practice' option is highlighted. Other fields and the red text box at the bottom are the same as in the previous screenshot.

Adding an Acute Therapy Item

You should use the 'Acute' therapy item when the item has been provided as a one off. Items added as 'Acutes' will only continue to inform decision support for the period selected in the date offset in Consultation Manager, Options, Drug Check as shown below.



When you add an acute item change the drop down list for 'Source of Drug' to a value that best represents the source of this medication. For example:

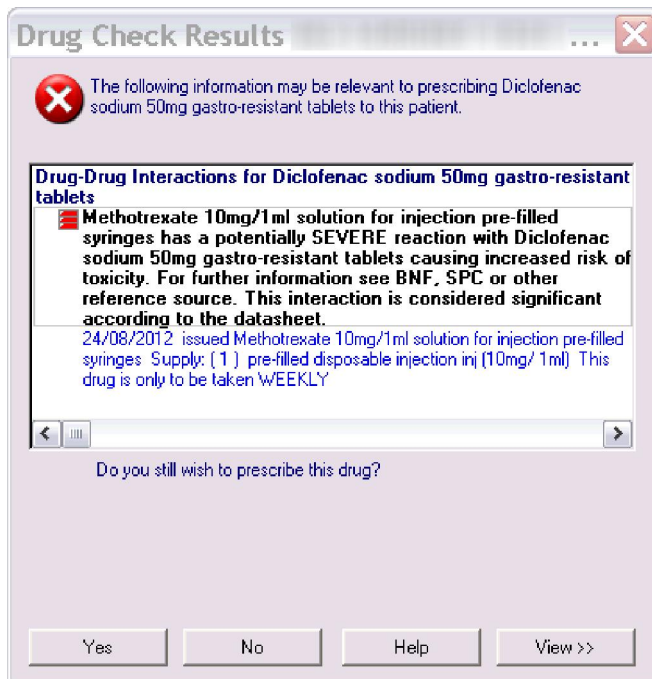


Items with a source value that is non-practice cannot be used to generate prescriptions – either paper or electronic.

Such items appear like this in the 'scripts' listing in therapy (no 'Prescriber' value is shown):

Date	Drug	Iss	Dosage	Q...	Preparation	Prescriber
24/08/12	Methotrexate 10mg/1ml solution for injection pre-filled syringes		inj (10mg/ 1ml) This drug is only to be taken WEEKLY	1	pre-filled disposabl...	----
31/07/12	Diazepam 2mg tablets		3 DAILY	84	tablet	
15/07/12	Amoxicillin 250mg capsules		ONE THREE TIMES A DAY	15	capsule	
27/06/12	RIGEVIDON tabs		TAKE ONE AS DIRECTED	63	tablet	
14/06/12	OMEPRAZOLE gastro-res cap 10mg		1 OR 2 IF NEEDED AT NIGHT [FOR HEARTBURN OR DYSPEPSIA]	56	capsule	
08/05/12	PROPRANOLOL tabs 10mg		TAKE ONE THREE TIMES DAILY	28	tablet	

And will generate decision support warnings, for example when a user prescribes Diclofenac:



Add Descriptive Text to the 'Dosage' Field

It can be helpful to add a description to the dosage field to indicate further the source of the drug, or other information regarding it.

For example entering the text 'HOSPITAL SUPPLIED – NOT TO BE PRESCRIBED BY THE PRACTICE' would add some additional clarity and safety to out of practice items.

More detail such as 'PROVIDED BY RHEUMATOLOGY – ANYWHERE GENERAL HOSP – Tel: 0141-123-4567' could also be supplied.

Adding a Repeat Therapy Item

You should add a Repeat Master item for non-practice medications that the patient will continue to receive on a regular basis. Once Vision is updated for KIS, then as long as the Repeat Master remains 'Active' it will continue to inform decision support and populate the ECS upload appropriately.

Once the patient is no longer taking this medication the repeat master should be 'Inactivated' in Vision. Practices should run housekeeping searches on non practice repeat masters to review and inactivate those that no longer apply.

Note that Repeat Masters that have a non-practice source cannot be used to generate prescriptions, thus no 'issues' can ever be generated from these items.

For on-screen display purposes, current Vision functionality is to treat Repeat Masters with a source of non-practice as if they are 'inactive' so they will not be visible in the patient's Repeat Master listing unless the user selects to show the 'inactive' items. This functionality was originally to enable users to rapidly select and create issues from Active repeat masters – non-practice items present in this list would prevent that. Nevertheless it is now considered misleading and discussions with INPS on changing the views where non-practice repeat masters are shown is ongoing.

For example, adding a Repeat Master with Source of Drug as 'By Hospital':

Repeat Master - Add

Date Prescribed: 24 August 2012 Prescriber: Source of Drug: By Hospital

Drug: **High Risk** Methotrexate 10mg/1ml solution for injection pre-filled syringes

Quantity: 1 Preparation: pre-filled disposable injection Pack Size: Treat Days:

Dosage: inj (10mg/ 1ml) This drug is only to be taken WEEKLY

Drug Class: Antimetabolites

No known allergies of H/O: drug allergy

Repeats: 1 Repeat Until Date: Days Between Issues: Min: Max: Force Re-authorise

Vision will require the user to enter a value for 'Repeats' in order to save the record. As no issues can be created from a non-practice prescription we would recommend simply giving this a value of '1' although there is no significant impact on using higher numbers here. There is no need to enter a 'Repeat Until Date', although practices can do so if desired. The 'Repeat Until Date' will appear on Repeat Master reports and this may have some benefit in reviewing non practice items for housekeeping.

When viewed in the Therapy Tab and the 'Repeats Filter' most users will not see the non-practice items as the default setting is to filter 'Inactive' items not to show.

Current Scripts Repeats CMS

Repeat prescription monitoring Due 20 August 2013

Inactive filter is 'on'

	Last Issued	Drug	Iss	Max	Dosage
<input type="checkbox"/>	24/08/2012	Atenolol 50mg tablets	1	7	1 IN THE MORNING [FOR BP]

To see the non-practice items a user will need to switch this filter off:

Current Scripts Repeats CMS

Repeat prescription monitoring Due 20 August 2013

Inactive filter is Off

	Last Issued	Drug	Iss	Max	Dosage
<input type="checkbox"/>	Not Issued	Methotrexate 10mg/1ml solution for injection pre-filled syringes	1		inj (10mg/ 1ml) This drug is only to be taken WEEKLY
<input type="checkbox"/>	07/11/2008	Diastix testing strips (Bayer Diagnostics Manufacturing Ltd)	7		AS DIRECTED
<input type="checkbox"/>	24/08/2012	Atenolol 50mg tablets	1	7	1 IN THE MORNING [FOR BP]
<input type="checkbox"/>	06/10/2011	ATENOLLOL tabs 50mg	1	7	1 IN THE MORNING [FOR BP]
<input type="checkbox"/>	Not Issued	ATENOLLOL tabs 50mg	7		1 IN THE MORNING [FOR BP]
<input type="checkbox"/>	07/11/2008	Diastix strips [BAYER]	7		AS DIRECTED

Non practice items are represented by the 'bow tie' icon. They can be sorted and grouped by clicking on the icon column header:

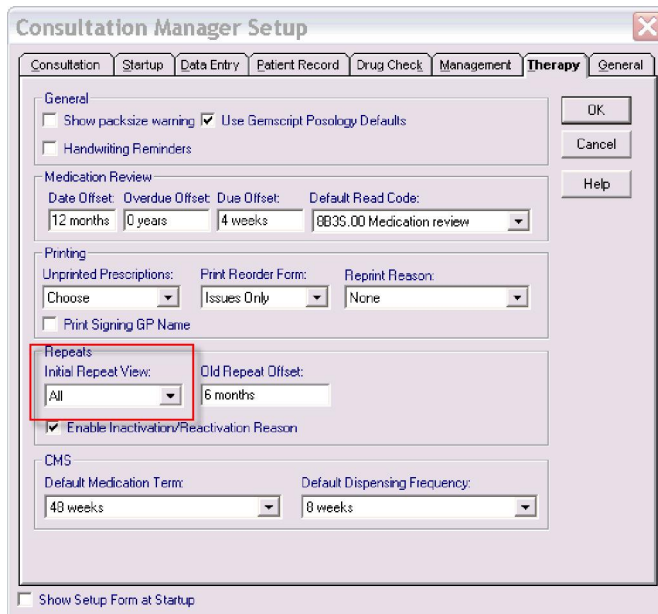
Current Scripts Repeats CMS

Repeat prescription monitoring Due 20 August 2013

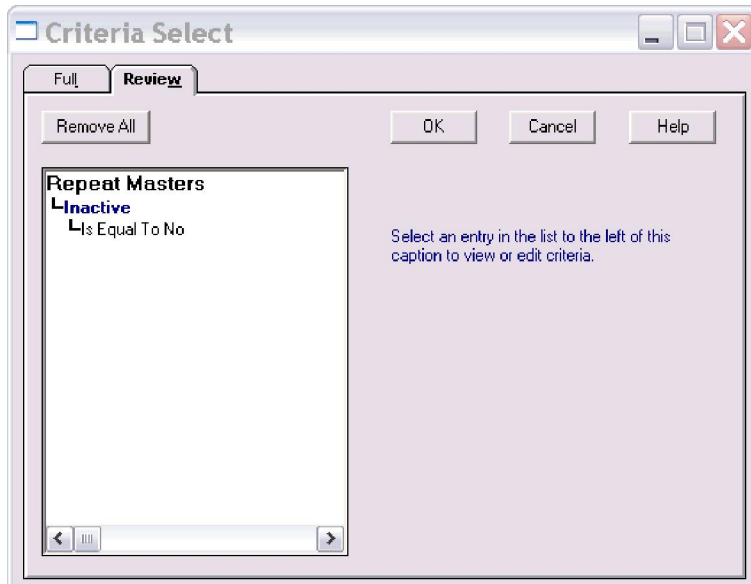
Click here to sort by status

	Last Issued	Drug	Iss	Max	Dosage
<input type="checkbox"/>	24/08/2012	Atenolol 50mg tablets			1 IN THE MORNING [FOR BP]
<input type="checkbox"/>	Not Issued	Paracetamol 500mg tablets	13		TAKE ONE TO TWO TABLETS EVERY FOUR TO SIX HOURS IF NEEDED (FOR PAIN)
<input type="checkbox"/>	Not Issued	Methotrexate 10mg/1ml solution for injection pre-filled syringes	1		inj (10mg/ 1ml) This drug is only to be taken WEEKLY
<input type="checkbox"/>	Not Issued	ATENOLLOL tabs 25mg	6		1 DAILY [FOR ANGINA]
<input type="checkbox"/>	07/11/2008	Diastix testing strips (Bayer Diagnostics Manufacturing Ltd)	7		AS DIRECTED
<input type="checkbox"/>	06/10/2011	ATENOLLOL tabs 50mg	1	7	1 IN THE MORNING [FOR BP]

An alternative is to change a user's default view on entering 'Repeats' view to display 'All', as set up in Consultation Manager, Options, Setup.



Note that although users need to de-select the 'Inactive' filter to view non-practice items, the non-practice items are not flagged as 'Inactive' in Vision and will be reported on in searches looking for Repeat Masters where 'Inactive' equals 'No'. For example:



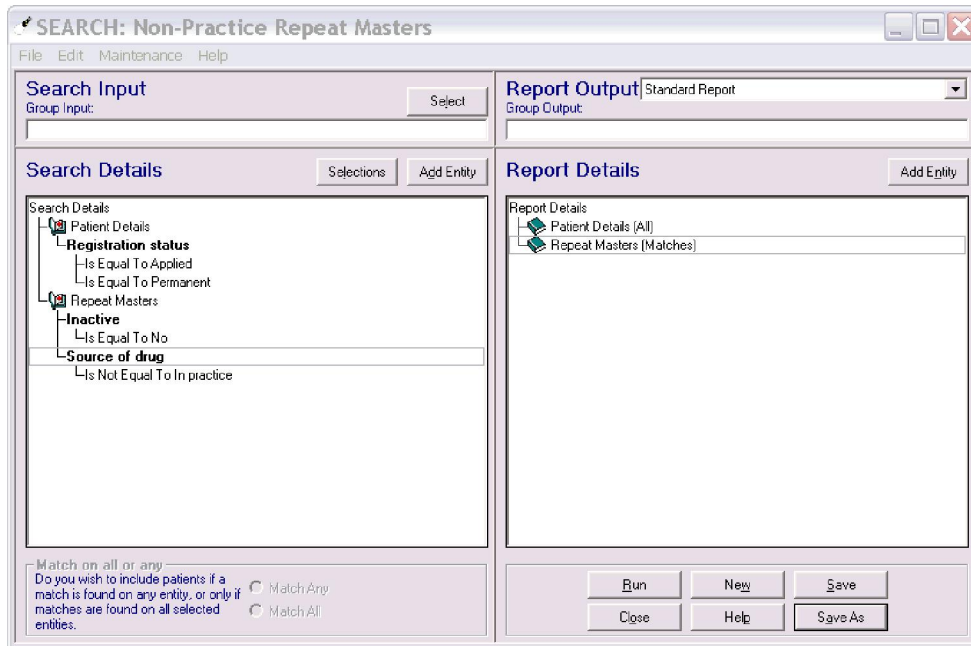
Date Prescribed – which date to use

Note that the prescription date used does not need to correspond exactly with the date of the dispensing or administration of the drug. Typically this information may not be available to the practice. A pragmatic decision should be made on the appropriate date to use, bearing in mind the date offset issue for Acutes as described above.

When adding a repeat master as issues cannot be made from it, the repeat master record itself is the current item, indicating that the patient is receiving this from an external source.

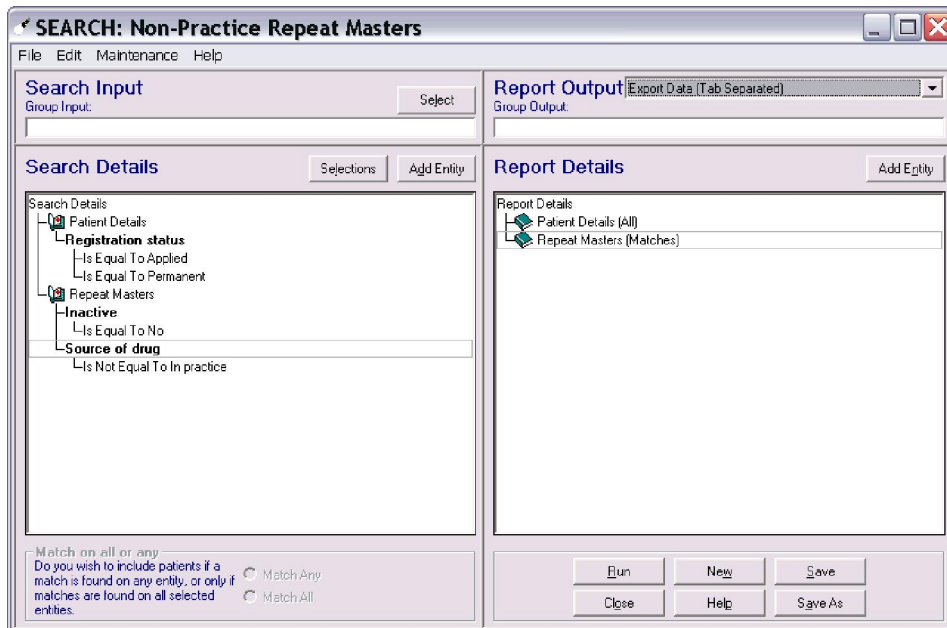
Housekeeping

Practices should regularly run searches to review non-practice active Repeat Masters and inactivate any that no longer apply. Configure a search as below to provide a printable report with all Active, non-practice repeat masters:



This report will not display the 'Date Prescribed' (the date it was added to the patient's record) of the Repeat Master, which can make identifying historical items more difficult.

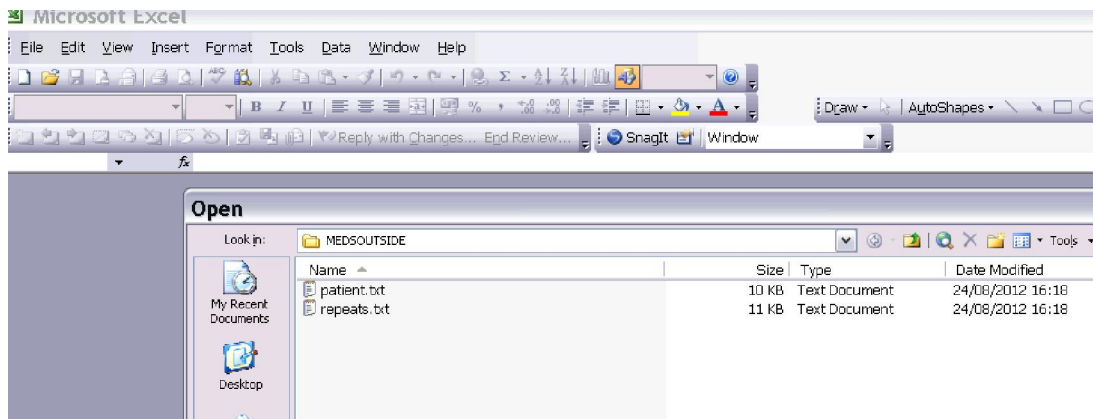
An alternative, although technically more challenging, approach is to export the search results as a Tab Separated file.



This will save two text files:

- patient.txt
- repeats.txt

Open the file 'repeats.txt' in Microsoft Excel:



And Excel will recognise it as a Tab Separated file and import it accordingly. The 'Notes for Patient' field, if used, creates additional lines in the report, but these can be ignored as they will be grouped when the table is sorted.

There are three steps in the MS Excel Text Import Wizard:



Click 'Next' on the form above.

Text Import Wizard - Step 2 of 3

This screen lets you set the delimiters your data contains. You can see how your text is affected in the preview below.

Delimiters:

Tab Semicolon Comma
 Space Other:

Treat consecutive delimiters as one

Text qualifier: "

Data preview

PAT_ID	CONSULT_ID	TOPIC
112	307472	1
185	263430	1
Notes for patient: started a couple of years ago	56	
685	537149	1

Buttons: Cancel, < Back, Next >, Finish

Click next on this form as well.

Text Import Wizard - Step 3 of 3

This screen lets you select each column and set the Data Format.

'General' converts numeric values to numbers, date values to dates, and all remaining values to text.

Advanced...

Column data format:

General
 Text
 Date: DMY
 Do not import column (skip)

Data preview

General	Skip Column	Skip Column	Skip Column	General	General
	CONSULT_ID	TOPIC	CATEGORY	CLINICIAN	EV
	307472	1	Intervention		09
	263430	1	Intervention		06
d a couple of years ago	56				tal
	537149	1	Intervention		20

Buttons: Cancel, < Back, Next >, Finish

In this step, select 'Do not import column (skip)' for all columns apart from:

- PAT_ID
- EVENTDATE
- DRUGNAME
- DRUGSOURCE

Then click 'Finish' and the data will be show in Excel:

	A	B	C	D
1	PAT_ID	EVENTDATE	DRUGNAME	DRUGSOURCE
2		112	09/03/2009 ADALIMUMAB inj 40mg	By Hospital
3		185	06/08/2008 ASPIRIN disp tab 75mg	
4	Notes for patient: tablet(s)			
5		685	20/06/2012 ROACCCUTANE caps 20mg	By Hospital
6		862	06/05/2009 ACITRETIN caps 10mg	By Hospital
7		913	21/05/2012 FUMADERM gr tab	By Hospital
8		989	17/03/2009 ETANERCEPT inj soln 50mg	By Hospital
9		1101	01/03/2007 DEPIXOL -CONC inj 100mg/1ml	By Hospital
10		1204	19/01/2010 ADALIMUMAB inj 40mg	By Hospital
11		1220	20/10/2011 CYCLOPHOSPHAMIDE inj 1000mg	By Hospital
12		1341	20/06/2012 WARFARIN SODIUM tabs 1mg	By Hospital
13		1389	13/04/2010 LANSOPRAZOLE caps(ec grans) 30mg	By Hospital
14		1755	14/08/2008 CLARELUX foam 500 micrograms/g	By Hospital
15		1904	14/03/2006 SERTRALINE tabs 50mg	By Hospital
16		2108	18/12/2007 METHADONE oral soln 1mg/ml	
17	Notes for patient: mls			
18		2108	20/10/2009 DEPIXOL oily inj 40mg/2ml	By Hospital
19		2123	19/08/2008 METHADONE sf oral soln 1mg/ml	By Hospital
20		2283	17/08/2010 METHADONE oral soln 1mg/ml	By Hospital
21		2283	07/06/2012 FLUPENTIXOL DECANOATE oily inj 200mg/1ml	By Hospital
22		2543	05/07/2007 METHADONE oral soln 1mg/ml	By Hospital
23		2543	29/06/2010 DIAZEPAM tabs 5mg	By Hospital
24		2543	29/06/2010 MIRTAZAPINE tabs 45mg	By Hospital
25		2543	29/06/2010 CHLORPROMAZINE tabs 25mg	By Hospital
26		2664	28/05/2008 CLOPIXOL oily inj 200mg/1ml	By Hospital
27		2838	28/01/2008 METHADONE oral soln 1mg/ml	By Hospital
28		2838	28/01/2008 DIAZEPAM tabs 2mg	By Hospital
29		2920	26/09/2007 MELATONIN caps 5mg	By Hospital

Sort this by EVENTDATE. 'EVENTDATE' is the date the Repeat Master was added to Vision.

	A	B	C	D
1	PAT_ID	EVENTDATE	DRUGNAME	DRUGSOURCE
2		112	09/03/2009 ADALIMUMAB inj 40mg	By Hospital
3		185	06/08/2008 ASPIRIN disp tab 75mg	
4	Notes for patient: tablet(s)			
5		685	20/06/2012 ROACCCUTANE caps 20mg	
6		862	06/05/2009 ACITRETIN caps 10mg	
7		913	21/05/2012 FUMADERM gr tab	
8		989	17/03/2009 ETANERCEPT inj soln 50mg	
9		1101	01/03/2007 DEPIXOL -CONC inj 100mg/1ml	
10		1204	19/01/2010 ADALIMUMAB inj 40mg	
11		1220	20/10/2011 CYCLOPHOSPHAMIDE inj	
12		1341	20/06/2012 WARFARIN SODIUM tabs 1	
13		1389	13/04/2010 LANSOPRAZOLE caps(ec g	
14		1755	14/08/2008 CLARELUX foam 500 micro	
15		1904	14/03/2006 SERTRALINE tabs 50mg	
16		2108	18/12/2007 METHADONE oral soln 1mg	
17	Notes for patient: mls			
18		2108	20/10/2009 DEPIXOL oily inj 40mg/2ml	
19		2123	19/08/2008 METHADONE sf oral soln 1	
20		2283	17/08/2010 METHADONE oral soln 1mg	
21		2283	07/06/2012 FLUPENTIXOL DECANOAT	
22		2543	05/07/2007 METHADONE oral soln 1mg/ml	By Hospital
23		2543	29/06/2010 DIAZEPAM tabs 5mg	By Hospital
24		2543	29/06/2010 MIRTAZAPINE tabs 45mg	By Hospital
25		2543	29/06/2010 CHLORPROMAZINE tabs 25mg	By Hospital

Sort

Sort by: **EVENTDATE** Ascending Descending

Then by: Ascending Descending

Then by: Ascending Descending

My data range has Header row No header row

This will then list the items with the earliest ones at the top:

	A	B	C	D
1	PAT_ID	EVENTDATE	DRUGNAME	DRUGSOURCE
2	1904	14/03/2006	SERTRALINE tabs 50mg	By Hospital
3	1101	01/03/2007	DEPIXOL -CONC inj 100mg/1ml	By Hospital
4	2543	05/07/2007	METHADONE oral soln 1mg/ml	By Hospital
5	2920	26/09/2007	MELATONIN caps 5mg	By Hospital
6	2108	18/12/2007	METHADONE oral soln 1mg/ml	
7	2838	28/01/2008	METHADONE oral soln 1mg/ml	By Hospital
8	2838	28/01/2008	DIAZEPAM tabs 2mg	By Hospital
9	2664	28/05/2008	CLOPIXOL oily inj 200mg/1ml	By Hospital
10	4366	28/07/2008	METHADONE oral soln 1mg/ml	
11	185	06/08/2008	ASPIRIN disp tab 75mg	
12	1755	14/08/2008	CLARELUX foam 500 micrograms/g	By Hospital
13	2123	19/08/2008	METHADONE sf oral soln 1mg/ml	By Hospital
14	4366	16/09/2008	PERICYAZINE tabs 2.5mg	By Hospital
15	4468	30/09/2008	MELATONIN caps 5mg	By Hospital
16	4637	14/10/2008	METHADONE sf oral soln 1mg/ml	By Hospital
17	5252	23/10/2008	KIVEXA FC tab	By Hospital
18	5252	23/10/2008	NEVIRAPINE tabs 200mg	By Hospital
19	5409	20/11/2008	METHADONE oral soln 1mg/ml	By Hospital
20	5409	20/11/2008	MIRTAZAPINE orodisp tab 30mg	By Hospital
21	5409	20/11/2008	ZOLPIDEM tabs 10mg	By Hospital
22	112	09/03/2009	ADALIMUMAB inj 40mg	By Hospital
23	999	17/03/2009	ETAMBUCEBT inj soln 50mg	By Hospital

Individual patients can then be reviewed and their non-practice Repeat Masters Inactivated if no longer in use. Patients can be found from the select patient form in Vision by using the 'PAT_ID' value and searching on the 'Vision Identifier'.

Select Patient

<p>Search Details:</p> <input style="width: 95%;" type="text"/> <p><input type="checkbox"/> Active Patients only</p>	<p>Search Attribute:</p> <div style="border: 1px solid #ccc; padding: 2px;"> Vision Identifier </div> <p style="text-align: right; margin-top: 5px;">Find</p>
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How to record non-practice medications in EMIS

Non practice medications are added to EMIS in exactly the same way as other drugs. The distinction is made at the issue stage where the drugs are issued using the method “outside”

It is recommended that to ensure that errors are not made in issuing medications that should not be issued by the practice, additional text is added to the dose instructions.

Add Drugs

Problem Titles: NOT LINKED Authorised By: [User]

Name: INFLIXIMAB POWDER FOR SOLUTION FOR INFUSION 100 MG VIAL

Dosage: GIVEN BY RHEUMATOLOGY CLINIC - DO NOT ISSUE - CLINIC NUMBER - 01234 567

Day/Qty: 1 VIAL

Rx Type: [Dropdown]

Duration: ACUTE, REPEAT, AUTOMATIC

Re-Issues: [Dropdown] Main Review: NONE Urgent:

Pack Description

Pack Size	Price
1 vial	£419.62

Options: [Dropdown] Formulary: Dumfries and Galloway Formulary

Warnings & Status | Preparations | Drug Details

GENERAL WARNINGS

- ◆ ADDITIONAL SCRIPT FOR DILUENT REQUIRED

Buttons: Clear, G/T Switch, BNF Data, Next, Issue & Print, Issue, Cancel

Add Descriptive Text to the 'Dosage' Field

It can be helpful to add a description to the dosage field to indicate further the source of the drug, or other information regarding it.

For example entering the text 'HOSPITAL SUPPLIED – NOT TO BE PRESCRIBED BY THE PRACTICE' would add some additional clarity and safety to out of practice items.

More detail such as 'PROVIDED BY RHEUMATOLOGY – ANYWHERE GENERAL HOSP – Tel: 0141-123-4567' could also be supplied.

Issue Medications

Issue Details

Authorising User: [User] Issue Date: 23/10/2012

Set as course Authoriser

Script Destination Text: [Empty] Total NHS Cost: 419.62 est.

Issue Method

- N) None
- P) Print
- H) Hand Written
- X) Private
- O) Outside**
- Q) Issue Without Scripts

Buttons: OK, Cancel

The drug should be “Issued” rather than “Issue and Printed”, and the Issue Method should be selected as **O) Outside**

It is IMPORTANT that the drug is issued as an “Outside” as ECS is a record of ISSUED medication, and items that are not issued will not be uploaded to ECS.

Medication can be added as either acute or repeat in PCS in the normal manner.

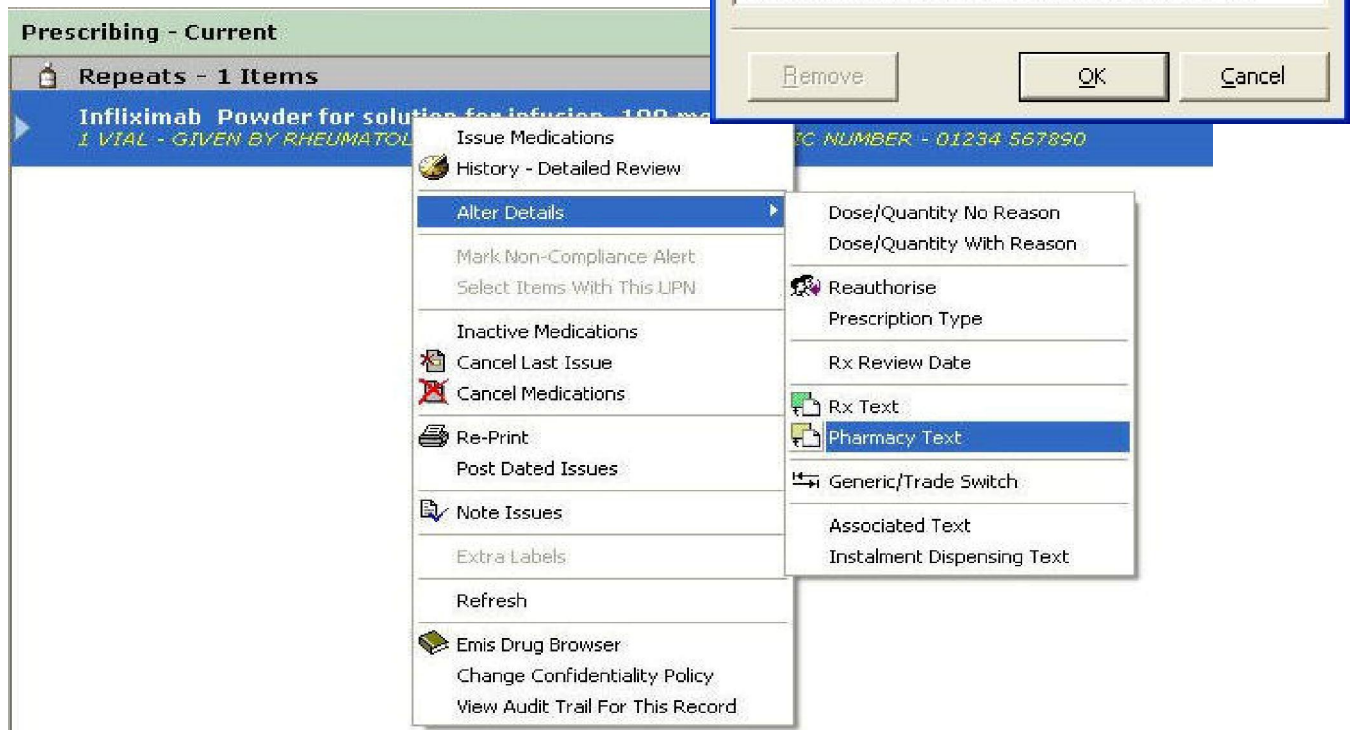
Note for prescriptions to appear indefinitely on the Emergency Care Summary it is recommended that the prescription is recorded as a REPEAT MEDICATION.

Acute medication will time expire in EMIS PCS and no longer be transmitted to ECS.



The medication will appear in the prescribing screen with an "O" at the end of the issue date to indicate it was issued out with the practice.

Pharmacy Text can also be added to ensure that it is clear that the medication is issued from the pharmacy. Right click the drug, Alter details, Pharmacy Text



Additional information is then displayed against the medication, and will be printed on a script.

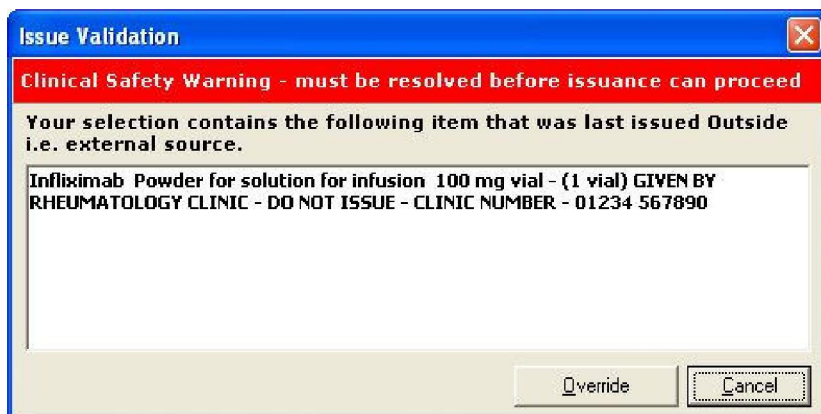
Prescribing - Current

 Repeats - 1 Items

Infliximab Powder for solution for infusion 100 mg vial

1 VIAL - GIVEN BY RHEUMATOLOGY CLINIC - DO NOT ISSUE - CLINIC NUMBER - 01234 567890
PHARMACY TEXT: THIS IS NOT TO BE ISSUED VIA GENERAL PRACTICE

In addition to the text warnings to prevent inadvertent issue, should a user attempt to issue a drug that has been issued outside previously, then they will be presented with a warning...

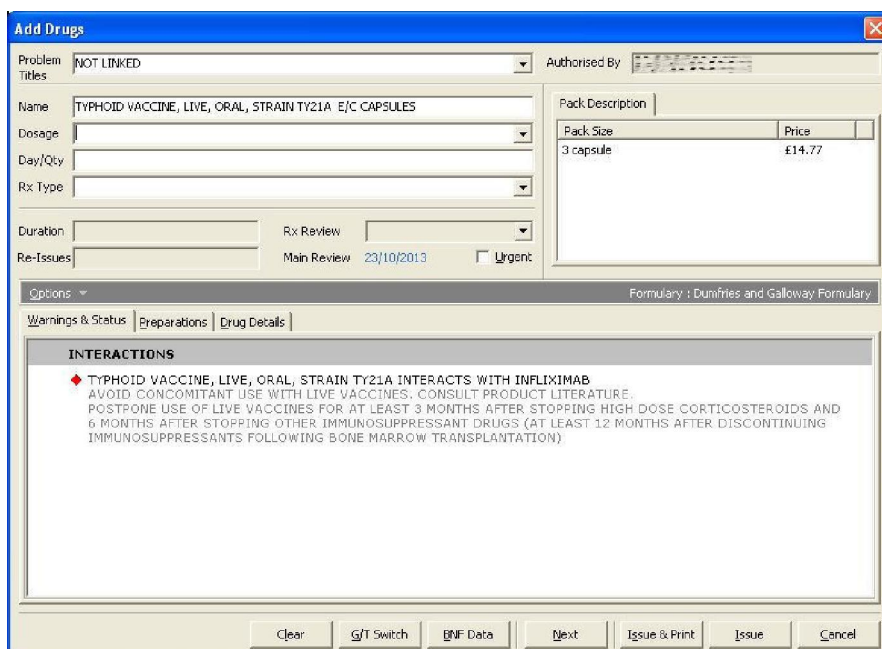


Date Prescribed - which date to use

Note that the prescription date used does not need to correspond exactly with the date of the dispensing or administration of the drug. Typically this information may not be available to the practice. A pragmatic decision should be made on the appropriate date to use.

Safety benefits of adding medication outside

As well as uploading to ECS, the EMIS system will use drugs prescribed outside when checking interactions.



House Keeping

It is important to have a system for maintaining accurate medication lists of non-practice medications.

Unfortunately EMIS PCS does not have the search capability to identify patients with drugs with the issue method "Outside". For those practices that are streaming to EMIS Web and have the Search and Report functionality within that, a simple search can be created very easily.

