Using SmartTags in Vision 3

Version 1.1

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Using SmartTags in Vision 3

SmartTags is a Microsoft Word utility that enables your patient's data to be merged into Word templates.

Some **Vision 3** provided Word templates are set up to use **SmartTags** to present patient information in a Word document, for example, the Dementia Care Plan.

If you have a managed server, for example, AEROS or WES **SmartTags** is already installed for your use, if you have your own server, you must install **SmartTags** in order to use them.

See **Installing SmartTags** on page **5** for details.

Installing SmartTags

You only need to install **SmartTags** once at your practice, as it is saved in the O:\ drive which is accessible from any **Vision 3** machine.

> **Note** - To install and run the **SmartTags** utility, you must be logged on to your network as a systems administrator.

Own Server only

To install **SmartTags**:

1. Click here to download **SmartTags3.exe**.
2. Save **SmartTags3.exe** to O:\PROGRAM.
3. Now, right click on the file and select **Run as administrator**:
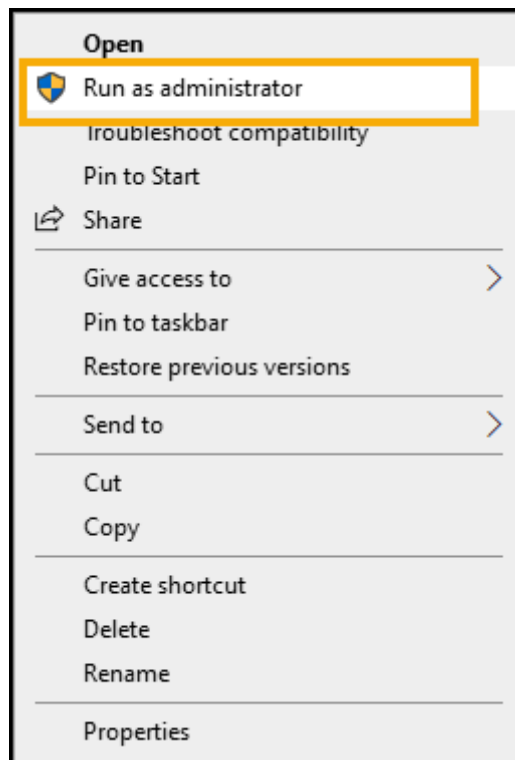
The **SmartTags** utility is now installed.

Own and Managed Servers

You can open any existing **SmartTags** document and using **Save As** create a new document, or you can use our Blank version to get started, this makes the creation of your own templates much simpler.

To download the blank **SmartTags** example:

1. Use this link https://info.visionhealth.co.uk/hubfs/Blank(SmartTags3x4).doc to download the simple Blank(SmartTags3x4) document.

2. Save the document to P:\WORDPROC\TEMPLATE.

Training Tip - To make templates with **SmartTags** easier to find, you may want to create a **SmartTags** folder within P:\WORDPROC\TEMPLATE and add the **Blank(SmartTags3x4).doc** and any **SmartTags** templates you create to that.

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3. From where you have saved **Blank(SmartTags3x4).doc** double click it to open.

4. You may see the following:

   - A prompt to **Enable Macros**, select **Yes**.

   - A prompt to run **P:\Wordproc\Template\MMRefer.txt**, select **Yes**.

5. You should now have a **SmartTags** option above your Word toolbar, if this does not display, select **View - Macros - ShowTagsHelp**.

6. The **SmartTags Helper** screen displays:
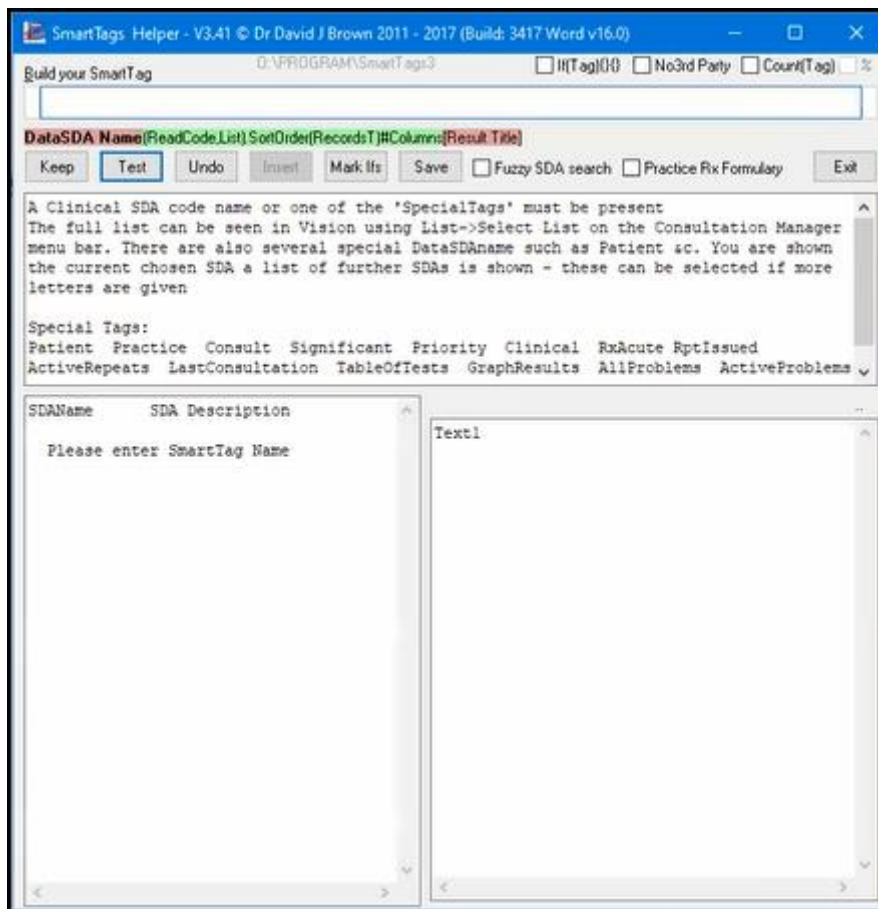
You are now ready to start creating **SmartTags** templates for use in your practice.

Creating a Basic SmartTags Template

The following details how to create a basic **SmartTags** template for use with **Vision 3**:

> ✏️ **Note** - **SmartTags** do not currently work with **Vision Anywhere**.

> ℹ️ **Important** - **SmartTags** rely on the colour of the text in your letter to work, **SmartTags** display in **red** so you must avoid using red in your letter for plain text. If you want to use red in your document use **Dark Red (Maroon)**, this still stands out in the document and does not disrupt **SmartTags**.
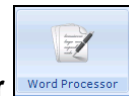
1. From the **Vision 3 front screen**, select **Utilities - Word Processor** .

> 💡 **Training Tip** - You can open a **SmartTag** document directly from **Windows - File Explorer** if required, but you do need at least one standard **Vision 3** merge field within a **SmartTag** document so it makes sense to open them from within **Vision 3**.

2. The **Vision Word Processor** screen displays:
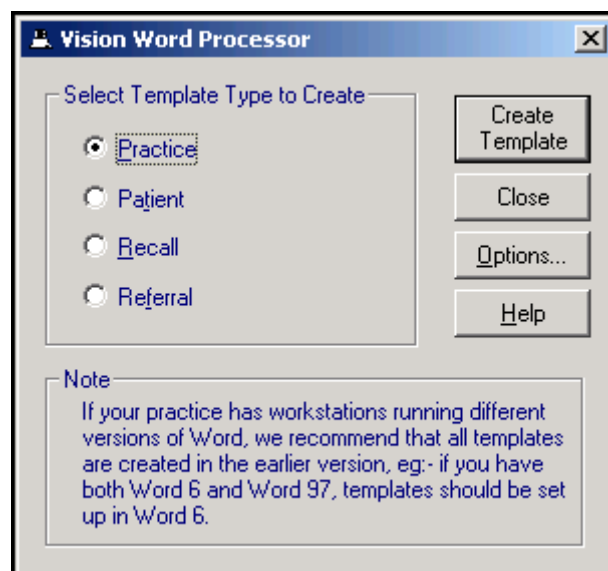
3. Select **Referral**.

> 💡 **Training Tip** - We recommend you select **Referral** as it has the most **Vision 3** merge options available.

4. Select **Create Template**.

5. A new document displays ready for you to create your template.

✏️ **Note** - Up to this point **SmartTags** templates and standard **Vision 3**/**Vision Anywhere** templates are created the same way.

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6. Select **File - Open**.

7. Navigate to the **SmartTags** document you are using as the basis for your template. This can be the **Blank(SmartTags3x4).doc** or any other **SmartTags** document you have access to. Select **Open** and the **SmartTags Word** document displays.

8. A **Microsoft Word** message displays, warning that this document runs a SQL command, select **Yes** to continue:
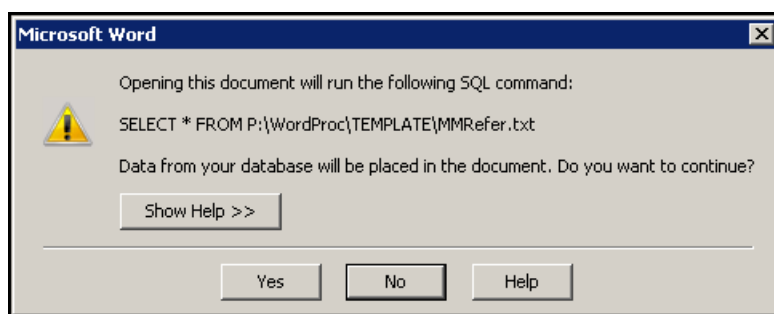
9. Create your template document in the usual way by simply typing where text is required. At least one standard **Vision 3** merge field is required within a **SmartTag** document, select **Insert Merge Field**

 and select the type of data required. Where an existing merge field does not exist, you need to define your own using **SmartTags**.

10. You should have a **SmartTags** option between **File** and **Home** screens:
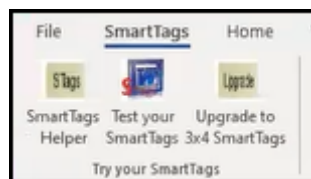
If you do not have this option, select **View - Macros**, select **ShowTagsHelp** and then **Run**.

11. The **SmartTags Helper** screen displays. This is where you define the merges between your letter and the patient record:
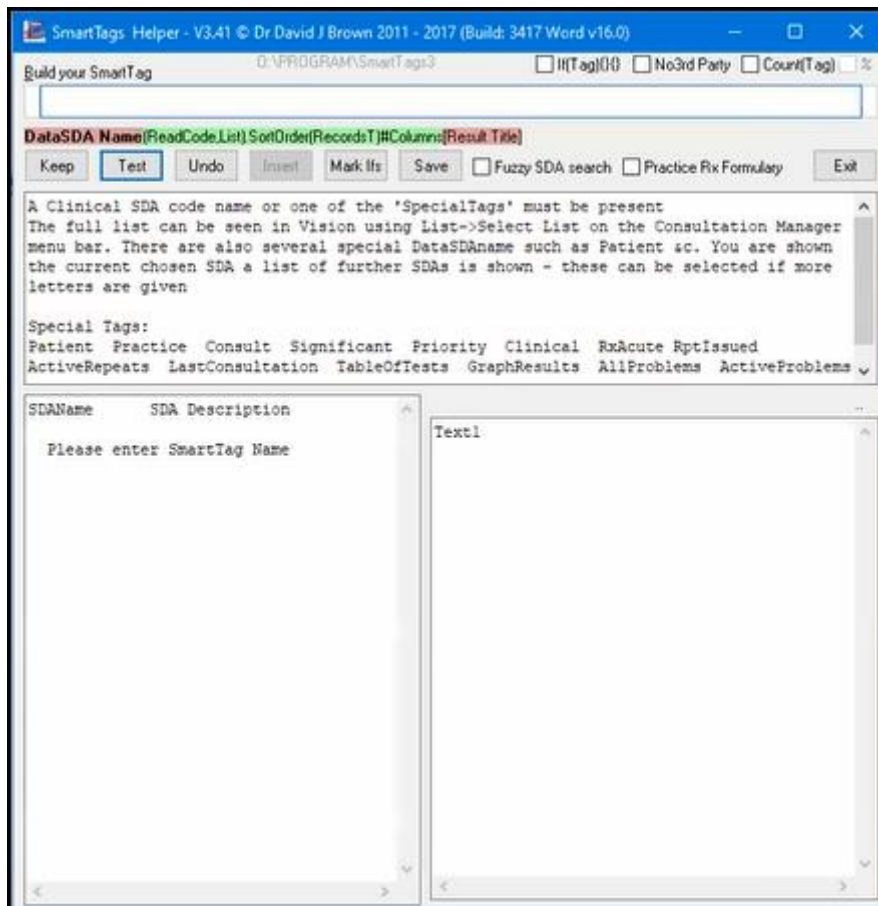
12. With your cursor on the document in the appropriate position, click into **Build your SmartTag** and start defining the merge required. **SmartTags** consist of the following key elements:

Training Tip - With a patient open in **Consultation Manager**, select **Keep** to save the element specified. You can select **Test** after adding an element to check you are on the right track. You can select **Undo** to return to your last **Keep** if you are not happy with the element added.

Data SDA Name
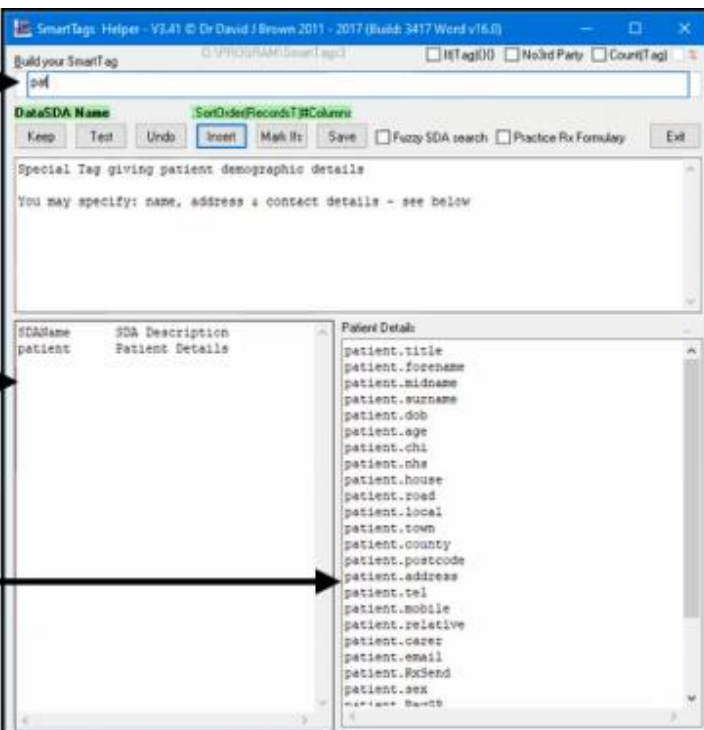
The **SDA** is where the data required is stored in **Vision 3**, start typing the name of the area required, for example, **FREETEXT** for Note Pad entries, **HAE_SCREEN** for Haematology Screening Tests or **GENERAL** for Medical History entries.

Training Tip - You can list all the areas by name from **Consultation Manager - List - Select List**, this is useful if you are struggling to find what you want.
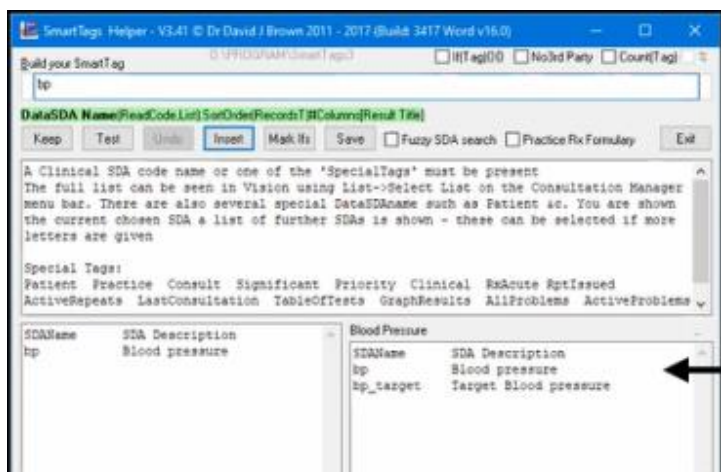
As you type, matching data types display in the bottom left pane of the **SmartTags Helper**, select the Structured Data Area (SDA) required and the details available display in the bottom right hand pane:

If more than one SDA matches your criteria, the options display in the bottom right pane, double click the one required to select it:

Select the detail required and it displays in **Build your SmartTag**.

> 💡 **Training Tip** - The following selections are optional, they simply help define the amount of detail you want in the letter.

Read Code

> ✏️ **Note** - You do not need to enter any clinical terms if you are happy with the terms included in an SDA.

A clinical code is indicated by brackets ( ) straight after the **DataSDA Name** with no space. Enter the Read code required:

- Use the full five digits of a code to select just one code, for example, (246..) only picks up the one code.

- Use less than the full five digits of a code to select the hierarchy under the code, for example, (246) picks up code 246 and everything under it.

- You can include more than one code by separating them with a comma, for example, (C10..,H33..) with no spaces.

- You can exclude a code from the result by preceding it with a minus, for example, (246,-246n.,-246m.) which looks at all codes that start with 246 but excludes 246n. and 246m..

- Defaults to the last matching entry of this type, double click **first** from the bottom right pane to display the first matching entry of this type.

Sort Order

The order and number of records that display is indicated by a full stop . and then the criteria in brackets ( ) with a colon between them, for example, .(3) would return the last three records of this type, .(3:1y) would return the last three records of this type in the last year. You can also enter a t at the end to display the results in a table, for example .(3:1yt).

Columns

The SDA data can be specified by using a # and selecting from the list that now displays in the bottom right pane. This is different for each SDA, for example, #ade to display the information in those sections only, this can be in the order you require.

> **Training Tip** - As you work through the key elements, the text highlighted in green indicates what you are defining by displaying in bold. If you enter invalid criteria, it highlights the invalid section in red, be warned this displays in red if you have not finished a definition too.

A structured **SmartTag**, may look something like this bp.(3)#ade:

Which would return, the Date, Description and Value of the last 3 blood pressure results for a patient.

13. Select **Insert** to add the **SmartTags** to your document.

14. With a patient open **Vision 3**, from **SmartTags Helper**, select **Test** to check the **SmartTags** created does return the information required. Select **Undo** to return to the last time you selected **Keep**.

> **Note** - If there is no data of the type being merged, 'not found' displays after the SDA name. As some SDA names are not useful, for example, '*General*', the **[Result Title]** enclosed in square brackets allows you to replace the SDA name with your own description, for example, **[Asthma]** would display '*Asthma not found*'.

15. Finally, select **Save** to save this **SmartTag**.

Repeat the process from Step 12 - Step 15 wherever you need a **SmartTag** in your document.

> **Training Tip** - You can update **SmartTag** text from the **Word** document without using the **Helper** screen once you are confident in writing them.

Useful SmartTag Examples

The following examples are SmartTag lines provided to help you design your **SmartTags** document. You can copy and updated them to match your requirements.

The following are advanced IF, THEN, ELSE tags. The IF is enclosed in round brackets (), and the outcome of the THEN and ELSE are defined in curly brackets {}.

This means that the IF checks for something and you don't need to include any records or columns. The THEN and ELSE are the usual smart tags explained below.

The ELSE is useful if you don't want to display any "not found" text as you can simply leave empty {} brackets.

Patient Details - Common to all documents

Name	pat#tuv
	• #t Forename
	• #u Middle name
	• #v Surname
Address	pat#w
	• #w Address
Date of Birth	pat.dob
Interpreter needs Displays interpreter read code if present, or 'No interpreter needed'.	If(general(9NU,9Nm,9Nn)){general(9NU,9Nm,9Nn)}{No interpreter needed}
Transport needs Displays transport needs if recorded, or 'Can arrange own transport'.	If(general(9N9,9RV)){general(9N9,9RV) please}{Can arrange own transport}

Common Clinical Information

Consultations Last three consultations – all details without repeat medication Issues.	lastconsult(11,1,18,3,31,9,34).(3)#!0 Displays: • Acute visit • Clinic • Emergency Consultation • Follow-up/routine visit • Residential Home Visit • Surgery consultation • Walk-in Centre
Clinical Information Displays all Priority 1 items or 'No Recorded Significant Problems'	If(priority1.(all)){priority1.(all)}{No recorded significant problems}
Repeat Medication Displays all Repeat Medications giving Drug & Dosage excluding non-drug read chapters, or 'No Regular Medication'	If(active#bo){active#bo}{No regular medication}
Allergies Displays All Allergies, or 'No recorded allergies'	If(allergy.(all)#abghijkc){allergy.(all)#abghijkc}{No recorded allergies}

| **Family History**

Displays all family history entries, or 'No family history available'. | If(general(11,12,ZV1,ZVu60,ZVu61,ZVu62,ZVu63,ZVu64,ZVu65,ZVu66,ZVu67,ZVu68,ZVu69,ZVu6A,ZVu6B,ZVu6C,ZVu6D,ZVu6E) \| family){if(general(11,12,ZV1,ZVu60,ZVu61,ZVu62,ZVu63,ZVu64,ZVu65,ZVu66,ZVu67,ZVu68,ZVu69,ZVu6A,ZVu6B,ZVu6C,ZVu6D,ZVu6E)){general(11,12,ZV1,ZVu60,ZVu61,ZVu62,ZVu63,ZVu64,ZVu65,ZVu66,ZVu67,ZVu68,ZVu69,ZVu6A,ZVu6B,ZVu6C,ZVu6D,ZVu6E).(all)}if(family){family.(all)}}{No family history available} |

Recent Tests and Investigations

The following display as tables with descriptive heading showing the last five dates with relevant results within each group following the usual **Vision 3** grouping.

Only numeric results display, with non-numeric results shown by a dash - and blanks where there are no results.

Full Blood Count & Differential WCC	tableoftests(Hae,pcv,mcv,mchc,plat,rbc,wbc,neut,lymph_no,mono,eosin,baso,esr)[Full Blood Count & Differential]
Urea & Electrolytes	tableoftests(ure,cre,sod,pot,gfr,uric)[Urea & Electrolytes]
Liver Function Tests	tableoftests(ast,alt,cpk,ldh,gamma_gt,alk_p,bil,totp,alb,serum_glo)[Liver Function Tests]
Lipids	tableoftests(chol,hdl,ldl,vldl,hdl_ldl,trig)[Lipids]
Calcium & Bone Studies	tableoftests(cal,calcium_ad,phos,alk,acid_p,pros_acid)[Calcium & Bone Studies]

Note - Normal ranges, if present, are taken from latest result

Breast

Most of these **SmartTags** print a 'Y' to indicate the presence of the Read code used. Where there is no Read code 'N' prints.

💡 **Remember** - You can set a time frame here.

Some have combination criteria that may be other sets of read codes, age or sex.

Using SmartTags for Breast 2 Week Wait Documents

Fixed and hard lump +/- skin tethering	If(general(26G,-26G1,-26G2,26I,26H,-26H1,-26I1)){Y}{N }
Eczema/nipple discharge that is resistant to topical treatment	If(general(1A9,-1A91,26C4,26D,-26D1,K3174)){Y}{N }
Spontaneous unilateral bloody nipple discharge	If(general(26D4,26D5)){Y}{N }
Recent onset of nipple distortion	If(general(26BB,K3172,K3173,K3175,K3177)){Y}{N }
Persistent mastalgia, no lump	If(general(26BD,K3170)&general(1A8,-1A81,26E,-26E1,26F,26G)=0){Y}{N}
Fixed and hard lump +/- skin tethering	If(general(26I2,26I3)&pat.age<30){Y}{N }
Lump	If(general(1A8,-1A81,26E,26F,26G,26H,26I)&pat.age<30){Y}{N }
Lump persisting after next period / post menopausal	If(general(1A8,-1A81,26I2,26I3)&general(151K,66U,K5A)){Y}{N }
Unilateral lump and any man with suspicious lump or nipple discharge	If(general(1A8,-1A81,26D,26E,26F,26G,26H,26I)&pat.sex=male&pat.age>=50){Y}{N }
All patients with clinical evidence of benign breast pathology	If(general(1A8,-1A81,26D,26E,26F,26G,26H,26I)&pat.sex=male&pat.age>20&pat.age<50){Y}{N }

Sarcoma

Most of these **SmartTags** print a 'Y' to indicate the presence of the Read code used. Where there is no Read code 'N' prints.

💡 **Remember** - You can set a time frame here.

Some have combination criteria that may be other sets of read codes, age or sex.

Using SmartTags for Sarcoma 2 Week Wait Documents

X-ray suggestive of primary bone cancer Displays any plane x-ray within 2 months Assumes latest is the significant one	If(test(52).(1m)){Y}{N }
Rest pain, especially if not in the joint	If(general(1DCA,1M0,1M1,R01z1).(1m)){Y}{N }
Unexplained limp	If(general(2998).(1m)){Y}{N }
Increased, unexplained, persistent bone pain or tenderness	If(general(N33A,1DCA,1M0,1M1,R01z1).(1m)){Y}{N }
Suspected spontaneous fracture	If(general(N331).(1m)){Y}{N }
Size is greater than 5cm	If(general(R022,R042,R066,R093).(1m)){Y}{N }
Date of X-ray If found, displays the date of the entry	If(test(52).(1m)){test(52)#a }{ }
Site where X-ray performed If found, displays the Read term of the x-ray.	If(test(52).(1m)){test(52)#b }{ }

Gynaecology

Most of these **SmartTags** print a 'Y' to indicate the presence of the Read code used. Where there is no Read code 'N' prints.

💡 **Remember** - You can set a time frame here.

Some have combination criteria that may be other sets of read codes, age or sex.

Using SmartTags for Gynaecology 2 Week Wait Documents

Speculum exam shows lesion on cervix or in vagina suggestive of cancer	If(general(1J06,2692,2693,2694,2695,2698,269Z)){Y}{N}
Post-coital bleeding in women over 35 years that has persisted for more than four weeks	If(general(1581,K597)&pat.age>34){Y}{N}
Post-menopausal bleeding in women 55 years or more [12 months or more since last menses] Persistent PMB 6 weeks or more after stopping HRT	If(general(1583,K59B,K5A1) pat.age>54){Y}{N}
Persistent Intermenstrual bleeding with normal pelvic and speculum examination	If(general(1582,K595,K596,K59y3,K5E)&general(2688,2692,2694,2698)=0){Y}{N}
Abdominal or pelvic mass [not fibroids, not of GI or urological origin] Please order URGENT CA125 at time of referral	If(general(25J,25K,R093)){Y}{N}
Vulval lesion suspicious of cancer	If(general(267,-2671)){Y}{N}
Pre-menopausal **Note - Read codes here are excluded**	If(general(1512,151K,66U,C163,K171,K59B,K5A,-K5A0,-K5A5,-K5A6)=0){Y}{N}
Peri-menopausal	If(general(K5A5,K5A6)){Y}{N}
Post-menopausal	If(general(151K,1583,K171,K59B,K5A1,K5A3,N3302,N3306,N331B)){Y}{N}

Has had hysterectomy	IF(GENERAL(1599,685H,7E04,7E05,7F1A0,9O8W,K515,L3985) | CONTR(1599,685H,7E04,7E05,7F1A0,9O8W,K515,L3985) | SMEAR(1599,685H,7E04,7E05,7F1A0,9O8W,K515,L3985)){Y}{N}
Is on HRT **Within the last year**	If(therapy(ff,fh).(1y)){Y}{N}
HRT stopped for the past 6 weeks	If(therapy(ff,fh).(1y)&therapy(ff,fh).(2m)=0){Y}{N}
Taking tamoxifen	If(therapy(he4).(1y)){Y}{N}
NOT taking tamoxifen	If(therapy(he4)=0){Y}{N}
Pelvic ultrasound done	If(general(5855,58D,7P061)){Y}{N}
Please give date of any ultrasound exam	If(general(5855,58D,7P061)){ general(5855,58D,7P061)#a}{}

Upper GI

Most of these **SmartTags** print a '**Y**' to indicate the presence of the Read code used. Where there is no Read code '**N**' prints.

💡 **Remember** - You can set a time frame here.

Some have combination criteria that may be other sets of read codes, age or sex.

Using SmartTags for Upper GI 2 Week Wait Documents

Dysphagia	If(general(194,D00y0,R072,-1941)){Y}{ }
Persistent vomiting and weight loss	If(general(199,4A,J16,J680,R070)&(general(1623,1625,1627,1D1A,22A8,R032))){Y}{ }
Age 55 or over with persistent dyspepsia of recent-onset	If(general(1958,9NNK,J16y4)&pat.age>54){Y}{ }
Barrett's oesophagus	If(general(J1016,J1025,J10y6)){Y}{ }
Known dysplasia, atrophic gastritis or intestinal metaplasia	If(general(J17y5,J1510)){Y}{ }
Peptic ulcer surgery 20 or more years ago Update date as required	If(general(J17y5,J1510).f(01/01/2001)){Y}{ }
Progressive unintentional weight loss	If(general(1623,1625,1627,1D1A,22A8,R032)){Y}{ }
Persistent vomiting	If(general(199,4A,J16,J680,R070)){Y}{ }
Epigastric mass	If(general(25J,25K,25L,25M,25N,25R,R093)){Y}{ }
Iron deficiency anaemia	If(general(D00,-D001)){Y}{ }
Suspicious Ba meal or swallow	If(general(547,548,549)){Y}{ }
Chronic GI bleeding	If(general(196B,196C,1994,1995,19E4,19E6,19ED,19EG,J680)){Y}{ }
No Dyspepsia + unexplained weight loss	If(general(195,9NNK,J16)=0&general(1623,1625,1627,1D1A,22A8,R032)){Y}{ }
No Dyspepsia + Unexplained iron deficiency anaemia	If(general(195,9NNK,J16)=0&general(1451,C2943,D00,Dyu00,42C2)){Y}{ }
Unexplained upper abdominal pain + weight loss +/- back pain	If(general(1969,197B,25C3,25C,R090,Ryu11)&general(1623,1625,1627,1D1A,22A8,R032)){Y}{ }
Upper abdominal mass without dyspepsia	If(general(195,9NNK,J16)=0&general(25J,25K,25L,25M,25N,25R,R093)){Y}{ }

Obstructive jaundice (order upper abdo ultrasound to expedite assessment at time of referral]	If(general(14C6,1675,J66y6,R024)){Y}{ }

Haematology

Most of these **SmartTags** print a 'Y' to indicate the presence of the Read code used. Where there is no Read code 'N' prints.

> **Remember** - You can set a time frame here.

Some have combination criteria that may be other sets of read codes, age or sex.

Acute leukaemia	If(general(1J02,B640,B650,B654,B65y,B663,B676,B680,B690,BBr01,BBr21,BBr61,BBr66,BBr67,BBr91,BBrA5)){Y}{N}
Chronic leukaemia	If(general(1J02,B641,B651,B661,B681,B691,BBr03,BBr23,BBr63,BBr68,BBr93)){Y}{N}
Myeloma	If(general(B63,B93,BBn,N3309)){Y}{N}
Lymphadenopathy persistent > 6 weeks	If(general(2C3,-2C31,R056)){Y}{N}
Lymph nodes increasing in size	If(general(2C3,-2C31,R056)){Y}{N}
Lymph nodes greater than 2cm	If(general(2C3,-2C31,R056)){Y}{N}
Widespread lymphadenopathy	If(general(R0563)){Y}{N}
Splenomegaly, night sweats, weight loss	If(general(2C5)&(general(1662,R0084) | general(1625,1627,1D1A,22A8,R032))){Y}{N}
Fatigue	If(general(168,-1681,R007)){Y}{N}
Bruising	If(general(16B,-16B5,2I15,R027,SE)){Y}{N}
Breathlessness	If(general(173,-1731,R060)){Y}{N}
Weight loss	If(general(1625,1627,1D1A,22A8,R032)){Y}{N}
Generalised itching	If(general(1D15,1N04,M18,Myu2A,Myu2B,Myu2D)){Y}{N}
Night sweats	If(general(1662,R0084)){Y}{N}
Recurrent infections	If(general(14D7,1AG,H054,H06z2,K1903,K1904)){Y}{N}
Bone pain	If(general(N33A)){Y}{N}
Pallor	If(general(1674,2272,4222,R0260)){Y}{N}

Bruising/petechia	If(general(16B,-16B5,2I15,R027,SE)){Y}{N}
Hepatomegaly	If(general(25G,-25G1,R091)){Y}{N}
Splenomegaly	If(general(2C5)){Y}{N}
Stomatitis/mouth ulcers	If(general(2523,2533,AA10,J031,J080,J082,J0854)){Y}{N}
Lymph nodes – neck	If(general(2C32,M043)){Y}{N}

Head and Neck

Most of these **SmartTags** print a '*Y*' to indicate the presence of the Read code used. Where there is no Read code '*N*' prints.

Remember - You can set a time frame here.

Some have combination criteria that may be other sets of read codes, age or sex.

Using SmartTags for Head and Neck 2 Week Wait Documents

45 years or older?	If(pat.age>44){Y}{N}
Unintentional weight loss (>3kg in 6 wks?)	If(general(1625,1627,1D1A,22A8,R032)){Y}{N}
Further details Displays relevant last history entry and latest weight.	If(general(1625,1627,1D1A,22A8,R032)){general(1625,1627,1D1A,22A8,R032)#abd weight#abcdef }
Previous surgery (head, neck, UAT or mouth?) States 'See Below' if present.	If(general(710,711,72,73,740,741,742,743,75)){Y}{N}
Smoking?	If(smok#b){Y}{N}
Quantity smoked Number only	If(smok#b){smok#dfh}
Cigerettes, Cigars or oz tobacco	If(smok#b){smok#egi}
Alcohol?	If(alc#b){Y}{N}
Number of units per week	If(alc#b){alc#d}
Over 55 years with a neck lump	If(general(2I1A,R042)&pat.age>54){Y}{N}
Previous neck irradiation	If(general(5A11,5A12,7L1Z4)){Y}{N}

FH of endocrine tumours	If(famil(125) | general(125)){Y}{N}
FH of thyroid tumour	If(famil(1251) | general(1251)){Y}{N}
Stridor and increasing dysphagia for solids	If(general(2DE2,R061)&general(1942,R072)){Contact Consultant and admit}{N}
Hoarseness for more than 3 weeks	If(general(1CA,-1CA1,2DE4,R044).(1m)){Y}{N}
Lump in neck, new or changing over past 3-6 weeks	If(general(2I1A,R042).(2m)){Y}{N}
Persistent swelling of submandibular or parotid gland	If(general(22G).(2m)){Y}{N}
Persistent painful sore throat	If(general(1C93).(2m)){Y}{N}
Unilateral nasal obstruction and discharge	If(general(1C82,1C86,H1y1,R04z4)){Y}{N}
Unilateral nasal discharge Age over 50 years	If(general(1C83,2D2,-2D21)&pat.age>=50){Y}{N}
Unilateral otitis media with effusion Age over 50 years	If(general(F51).(1y)&pat.age>=50){Y}{N}
Orbital masses	If(general(F4Kz2,F4Kz3,F4Kzz)){Y}{N}
Stridor associated with thyroid mass	If(general(22H).(3m)&general(2DE2).(3m)){Y}{N}
Thyroid mass rapidly enlarging over a few weeks (eg 2-4 weeks) In the last 3 months	If(general(22H).(3m)){Y}{N}
Unexplained hoarseness or voice change with thyroid mass Both present in the last 3 months	If(general(22H).(3m)&general(1CA,-1CA1,2DE4,R044).(1m)){Y}{N}
Cervical lymphadenopathy with a thyroid mass Both present in the last 3 months	If(general(22H).(3m)&general(2C32,R0560).(3m)){Y}{N}

New thyroid mass in those over 55 years In the last 3 months	If(general(22H).(3m)&pat.age>=55){Y}{N}
Previous Head Neck Surgery	If(general(710,711,72,73,740,741,742,743,75)){general(710,711,72,73,740,741,742,743,75).(all)}{No previous head neck surgery}

Lower GI Tract

Most of these **SmartTags** print a 'Y' to indicate the presence of the Read code used. Where there is no Read code 'N' prints.

💡 **Remember** - You can set a time frame here.

Some have combination criteria that may be other sets of read codes, age or sex.

Using SmartTags for Lower GI Tract 2 Week Wait Documents

Rectal mass Intraluminal **Within the last 3 months** **Note** - Not pelvic	If(general(25Q3,25QZ).(3m)){Y}
Right sided lower abdominal mass	If(general(25J,-25J1,25K,25L,25M,25N).(3m)){Y}
Unexplained iron deficiency anaemia	If(general(1451,1454,2C2,-2C1,D00,-D001)){Y}
Males with a latest Haemoglobin of under 110	If(haemogl#d<110&pat.sex=male){Y}
Females with a latest Haemoglobin of under 100	If(haemogl#d<100&pat.sex=female){Y}
Latest Haemoglobin figure Shows figure if present.	If(haemogl#d){haemogl#d g/L}
Rectal bleeding for 6 weeks with a change in bowel habit to more frequent and looser stools also for 6 weeks **Age over 40 years**	If(general(196B,196C,J573).(2m)&general(19F,-19F1,-19F3,-19F4,19EA).(3m)&pat.age>=40){Y}

Change in bowel habit to more frequent and looser stools persisting for 6 weeks or more **Age over 60 years**	If(general(19F,-19F1,-19F3,-19F4,19EA).(3m)&pat.age>=60){Y}
Rectal bleeding persisting for 6 weeks or more and NO anal symptoms **Age over 60 years**	If(general(196B,196C,J573).(2m)&general(19F,-19F1,-19F3,-19F4,19EA).(3m)=0&pat.age>=60){Y}
Family History of: • **Gastrointestinal tract** • **Female genital organ** • **Neoplasm of ovary** • **Neoplasm of cervix** • **Neoplasm of uterus** • **Bowel cancer** • **Colitis** • **Crohn's disease** • **Gastrointestinal disease** All entries display where present	If(fam(1241,1245,124C,124D,124E,124F,12E2,12E5,12E)){ fam(1241,1245,124C,124D,124E,124F,12E2,12E5,12E).(all)#ab }{}
Previous colonoscopy for similar symptoms	If(colonos){colonos.(all)#ab } If(general(3617,3618,3618,3619,361A)){general(3617,3618,3618,3619,361A)#ab}
Poor control of angina	If(general(662K)){general(662K)#ab }{}
MI **In the last 3 months**	If(general(G30).(3m)){general(G30).(3m)#ab}
Prosthetic valve	If(general(14S4,14T3,791)){general(14S4,14T3,791)}{ }
Previous endocarditis	If(general(A2704,A7422,A932,A98y3,AB2y0,G01,G14,G51,G54)){general(A2704,A7422,A932,A98y3,AB2y0,G01,G14,G51,G54)#ab}{ }
Vascular graft **In the last 12 months**	If(general(792,7A).(All:12m)){general(792,7A).(All:12m)#ab }{}
Diabetes	If(general(C10)){general(C10)#ab}{ }

Insulin used	If(therap(f1,f2,fw)){Y}{N }
COPD	If(general(H3)){general(H3)#ab }
Poorly controlled asthma	If(general(663)){general(663)#ab}
Warfarin **Within the last 6 months**	If(therapy(bs).(6m)){therapy(bs).(6m)#ad }
Anti-Platelet agents **Within the last 6 months**	If(therapy(bu,di1).(6m)){therapy(bu,di1).(6m)#ad}

Lymphadenopathy

Most of these **SmartTags** print a '*Y*' to indicate the presence of the Read code used. Where there is no Read code '*N*' prints.

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Some have combination criteria that may be other sets of read codes, age or sex.

Using SmartTags for Lymphadenopathy 2 Week Wait Documents

Lymphadenopathy (persisting for >6 weeks)	If(general(2C3,-2C31,R056)){Y}{N}
Lymph nodes increasing in size	If(general(2C3,-2C31,R056)){Y}{N}
Widespread lymphadenomegaly	If(general(R0563)){Y}{N}
Splenomegaly + night sweats + weight loss	If(general(2C5)&(general(1662,R0084) | general(1625,1627,1D1A,22A8,R032))){Y}{N}
Lymph nodes **Larger than 2cm in diameter**	If(general(2C3,-2C31,R056)){Y}{N}
Lymph nodes - Neck	If(general(2C32,2C33,2C38)){Y}{N}
Lymph nodes - Axilla	If(general(2C35)){Y}{N}
Lymph nodes - Inguinal area	If(general(2C36)){Y}{N}

Urology

Most of these **SmartTags** print a 'Y' to indicate the presence of the Read code used. Where there is no Read code 'N' prints.

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Some have combination criteria that may be other sets of read codes, age or sex.

Using a SmartTags for Urology 2 Week Wait Documents

Painless Macroscopic Haematuria	If(general(1A5,-1A51,Ryu4).(3m)=0&general(14D5,1A45,K197.,K1970,K1973,K1974)){Y}{N}
UTI + Haematuria **Age over 40 years with recurrent or persistent UTI and haematuria**	If(general(14D7,1AG,K190)&general(14D5,1A45,K197.,K1970,K1973,K1974)&pat.age>=40){Y}{N}
Unexplained microscopic haematuria **Age over 50 years**	If(general(14D5,1A42,1A45,1A4Z,K197)&pat.age>=50){Y}{N}
Testicular Swelling or Mass **Refer all urgently**	If(general(1J0C,2659,265D,265E,265Z,16J9,1D250)){Y}{N}
Penile Lesion **Progressive ulceration, mass in glands or prepuce, skin cancer**	If(general(2662,266Z,K27).(3m)){Y}{N}
Prostate / Abnormal DRE (digital rectal exam) **Hard, irregular prostate typical of carcinoma (do PSA at time of referral)**	If(general(25Q,-25Q1,-25QB).(3m)){Y}{N}

Raised PSA **With or without LUTS, normal DRE, PSA high for age.** **Note** - PSA should be delayed a month after treatment for UTI	If(pros_ant&(pros_ant#f=0 | (pros_ant#d>=2.5&pat.age<50) | (pros_ant#d>=3&pat.age<60) | (pros_ant#d>=4&pat.age<70) | (pros_ant#d>=5))){Y}{N}

Neurology

The neurology 2 Week Wait letter has 4 scenario presentations that use similar non-distinguishable coded criteria. The potential selection is very broad so an extra section extracts clinical terms that might be required:

Using a SmartTags for Neurology 2 Week Wait Documents

Potential Neurology terms:	general(1B,1JA,1J03,1P,1Q,1S,28,29,2A,2B,311B,3A).(6mT)#abd[Recent Neurological Symptoms & Findings]
• **Nervous system symptoms** • **Suspected neurological disease** • **Suspected brain tumour** • **Behaviours and observations relating to behaviour** • **Character trait observations** • **Mental and psychological observations** • **Nervous system and mental state general examination** • **Motor/sensory systems exam.** • **Examination of reflexes** • **Central nervous system exam.** • **Cognitive assessment** • **Disability assessment – mental** Within the last 6 months	

Dermatology

Most of these **SmartTags** print a 'Y' to indicate the presence of the Read code used. Where there is no Read code 'N' prints.

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Using a SmartTags for Dermatology 2 Week Wait Documents

Growing in size	If(general(1J0G,1N0,2FT,2FY,2FZ,2G,2HD,M2y).(6m)){Y}{N}
Changing colour	If(general(2FT,2FZ,2HD,M2yC).(6m)){Y}{N}
Changing shape	If(general(2F).(6m)){Y}{N}
Rapidly growing non-healing lesion that may be crusted, ulcerated, scaly or bleeding.	If(general(2924,292Z,2F9,2FH,2FT).(6m)){Y}{N}

Children's

Most of these **SmartTags** print a 'Y' to indicate the presence of the Read code used. Where there is no Read code 'N' prints.

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Some have combination criteria that may be other sets of read codes, age or sex.

Using SmartTags for Children's 2 Week Wait Documents

Leukaemia

Hepatosplenomegaly	If(general(25G,-25G1,2C5,-2C51)){Y}{N}
Pallor	If(general(197,-1671,227,-2271,R0260,R026z)){Y}{N}
Fatigue	If(general(168,-1681,R007)){Y}{N}
Unexplained irritability	If(general(1B11,1B15,1B1B,1B1I,1B1O,1B1Q,1B1X)){Y}{N}
Unexplained fever	If(general(14k,165,2E,-2E11,-2E31,-2E32,-2E33)){Y}{N}
Persistent or recurrent upper respiratory tract infections	If(general(1C9,1CB,-1CB1,H0,H1)){Y}{N}
Generalised lymphadenopathy	If(general(2C3,-2C31,R056)){Y}{N}
Persistent or unexplained bone pain	If(general(N33A,1DCA,1M0,1M1,R01z1).(1m)){Y}{N}
Unexplained bruising/purpura	If(general(16B,-16B5,2I15,R027,SE)){Y}{N}

Lymphoma

Mediastinal or hilar mass on chest X-ray	If(chest){If(chest#c=0){Y}{N}}{N}
Lymph nodes non-tender, firm or hard	If(general(2C3,-2C31,R056)){Y}{N}
Lymph nodes greater than 2cm in size	If(general(2C3,-2C31,R056)){Y}{N}
Other features of general ill-health, fever or weight	If(general(168,-1681,R007,1625,1627,1D1A,22A8,R032,14k,165,2E,-2E11,-2E31,-2E32,-2E33)){Y}{N}
Axillary nodes are involved **In the absence of local infection or dermatitis**	If(general(2C35)){Y}{N}
Supraclavicular nodes are involved	If(general(2C34)){Y}{N}

Brain tumour

Reduced level of consciousness	If(general(1B6)){Y}{N}
New onset seizures **Age under 2 years**	If(clinical(14I4,1B6,282,-2821,667)&pat.age<2){Y}{N}
Bulging fontanelle **Age under 2 years**	If(general(2BV)&pat.age<2){Y}{N}
Abnormal increase in head size **Age under 2 years**	If(clinical(22F2,22F4,22FZ,P10,P24)&pat.age<2){Y}{N}
Arrest or regression of motor development **Age under 2 years**	If(clinical(1B3,-1B31,64O,22I,-22I1,64P,R034)&pat.age<2){Y}{N}
Altered behaviour	If(clinical(1P)&pat.age<2){Y}{N}
Extensor attacks **Age under 2 years**	If(clinical(14I4,1B6,282,-2821,667)&pat.age<2){Y}{N}
Persistent vomiting **Age under 2 years**	If(clinical(199,-1991,-1998,J162)&pat.age<2){Y}{N}
Abnormal eye movements	If(clinical(148,1B81,1B8Z,2BJ,-2BJ1)&pat.age<2){Y}{N}

Age under 2 years	
Poor feeding/failure to thrive **Age under 2 years**	If(clinical(163,-1631,22I,-22I1,Q483,R0330,R034)){Y}{N}
Squint **Referral urgency contingent on other features** **Age under 2 years**	If(clinical(1JQ,2BD)&pat.age<2){Y}{N}
Headache and vomiting causing early morning waking **Age under 2 years**	If(clinical(1B1G,1BA,-1BA1,1BB)&clinical(199,-1991,R070)&pat.age>=2){Y}{N}
New and persistent headache **Age under 2 years**	If(clinical(1B1G,1BA,-1BA1,1BB)&pat.age>=2){Y}{N}
New onset seizures with any associate neurological signs **Age under 2 years**	If(clinical(14I4,1B6,282,-2821,667)&clinical(2B)&pat.age>=2){Y}{N}
Cranial nerve abnormalities **Age under 2 years**	If(clinical(2BQ,2BR,2BS)&pat.age>=2){Y}{N}
Visual disturbances **Age under 2 years**	If(clinical(2B7)){Y}{N}
Gait abnormalities **Age under 2 years**	If(clinical(299,-2991,R012)&pat.age>=2){Y}{N}
Motor or sensory signs **Age under 2 years**	If(clinical(29,2A,2B)&pat.age>=2){Y}{N}
Unexplained deteriorating school performance or developmental milestones	If(clinical(1B3,-1B31,64O,22I,-22I1,64P,R034,13ZJ)&pat.age>=2){Y}{N}

Age under 2 years	
Unexplained behavioural and/or mood changes **Age under 2 years**	If(clinical(28)&pat.age>=2){Y}{N}

Thyroid Lump

Pre-pubertal and adolescents with new thyroid mass	If(general(1J0G,1N0,2FT,2FY,2FZ,2G,2HD,M2y)){Y}{N}

Neuroblastoma

Abdominal or thoracic mass **Age under 1 year**	If(general(25J,25K,25L,25M,25N,264)&pat.age<1){Y}{N}
Child with abdominal mass and either leg weakness and /or unexplained urinary retention **May be due to cord compression**	If(general(25J,25K,25L,25M,25N,264)&(general(1A32,2644,R082) | general(1B32,283,298,2GZ,F22,F23,F24))){Y}{N}
Persistent or unexplained bone pain	If(general(N33A,1DCA,1M0,1M1,R01z1)){Y}{N}
Pallor	If(general(197,-1671,227,-2271,R0260,R026z)){Y}{N}
Fatigue	If(general(168,-1681,R007)){Y}{N}
Unexplained irritability	If(general(1B11,1B15,1B1B,1B1I,1B1O,1B1Q,1B1X)){Y}{N}
Unexplained fever	If(general(14k,165,2E,-2E11,-2E31,-2E32,-2E33)){Y}{N}
Persistent or recurrent upper respiratory tract infections	If(general(1C9,1CB,-1CB1,H0,H1)){Y}{N}
Generalised lymphadenopathy	If(general(2C3,-2C31,R056)){Y}{N}
Unexplained bruising	If(general(16B,-16B5,2I15,R027,SE)){Y}{N}
Any mass identified	If(general(25J,25K,25L,25M,25N,264,R022,R042,R066,R093)){Y}{N}
Proptosis	If(general(22E8)){Y}{N}
Unexplained back pain	If(general(16C,-16C1,N12,N14)){Y}{N}
Leg weakness	If(general(1B32,283,298,2GZ,F22,F23,F24)){Y}{N}
Unexplained urinary retention	If(general(1A32,2644,R082)){Y}{N}

Wilm's Tumour

Progressive abdominal distension	If(general(19A,-19A1)){Y}{N}
Abdominal mass	If(general(25J,25K,25L,25M,25N,R0734)){Y}{N}

Soft Tissue Sarcoma

Associated with regional lymph node enlargement	If(general(2C3,-2C31,R056)){Y}{N}
Size >2 cm in diameter	If(general(2C3,-2C31,R056)){Y}{N}
Proptosis	If(general(22E8)){Y}{N}
Persistent unexplained unilateral nasal obstruction with or without discharge and/or bleeding	If(general(1C86,1C8Z,2D1,2D2,R04z4)){Y}{N}
Aurul polyps/discharge	If(general(1C4,2D6,-2D61)){Y}{N}
Urinary retention	If(general(1A32,2644,R082)){Y}{N}
Scrotal swelling	If(general(16J9,1D25,265,-2651,-265F,R08z3)){Y}{N}
Bloodstained vaginal discharge	If(general(1A7,-1A71,26A6,26AZ)){Y}{N}

Bone Sarcoma

Persistent localised bone pain and/or swelling	If(general(1DCA,1M0,1M1,N33A,R01z1)){Y}{N}
Rest pain, back pain or unexplained limp	If(general(16C,-16C1,1DCA,299,-2991,N12,N14)){Y}{N}
X-ray suggestive of osteosarcoma **Note** - Both no x-ray and abnormal return, hence double check	If(test(5).(3m)){If(test(5).(3m)#c=0){Y}{N}}{N}

Retinoblastoma

White papillary reflex (leukocoria)	If(clinical(F4044)){Y}{N}
New squint or change in visual acuity	If(clinical(1JQ,2BD)){Y}{N}
Suspicion of cancer	If(clinical(1J0)){Y}{N}

Skin Cancer

Rapidly changing skin lesion Changing pigmented skin lesion	If(general(1J0G,1N0,2FT,2FY,2FZ,2G,2HD,M2y)){Y}{N}

All Attachments

All Attachments In a simple table	attach.(t)#adc

All Letters

All Letters In a simple list	letters.(all)

Back Pain Proforma

Last Diabetic Entry	gen(C10)#abd0[Diabetes]
Steroid Therapy: last Prescription	Ther(fe)#adefgi[Steroid Therapy]
Priority 1 Malignancies	Priority1(B).(all)#abd0

Chest Pain Proforma

Identified Risks

Latest MI/IHD entry	If(general(G3)){general(G3)#ab}{No Hx MI or IHD}
Latest Smoking entry	Smok#abi[Smoking History]
Latest Weight recording	Weight#aief[Weight]
Latest Cholesterol entry	Chol.high#abde[Cholesterol]
Latest Diabetic Entry	General(C1,14O8,44V)#ab[Diabetes Glucose Tolerance]
Latest Hypretension Diagnosis	General(G2)#ab[Hypertension]
Shows lastest BP record	Bp#ade[Blood Pressure]

Current Drug Therapy

Show latest Aspirin type drug/date	If(Therapy(bu)){Therapy(bu)#ad}{Aspirin not taken}
Show latest GTN type drug/date	If(Therapy(blz)){Therapy(blz)#ad}{GTN not used}
Show latest Nitrates type drug/date	If(Therapy(bl3,blk)){Therapy(bl3,blk)#ad}{Nitrates not used}
Show latest Ca Blockers type drug/date	If(Therapy(blc,bld,ble)){Therapy(blc,bld,ble)#ad}{No Ca Blockers used}
Show latest BetaBlockers type drug/date	If(Therapy(bd)){Therapy(bd)#ad}{BetaBlockers not used}
Show latest Nicorandil type drug/date	If(Therapy(blf)){Therapy(blf)#ad}{Nicorandil not used}
Show latest diuretic type drug/date	If(Therapy(b2,b3,b4,b5)){Therapy(b2,b3,b4,b5)#ad}{Diuretics not used}
Show latest ACE/ARB type drug/date	If(Therapy(bi,bk)){Therapy(bi,bk)#ad}{ACE/ARB not used}

District Nurse Letters

Last opiate drug name	if(ther(dj,o4)[Opiate]){ther(dj,o4)#d}
Last anti-emetic drug name	if(ther(dh,o5)[Anti-emetic]){ther(dh,o5)#d
Last relaxant drug name	If(ther(d2)[Relaxant]){ther(d2)#d}
Patient capacity	gen(28N,9NdL,9Ng6,Z7CJ,ZR1h)#bd[Patient has capacity?]
Consent to share records	gen(93C,9Nd)#bd[Consented to share records?]
Lone worker risk	gen(13HA,13HC,13HD,13HI,13VE,13VF,14X,1P5,9kH)#bd[Lone worker risks?]
Carer contact details	gen(918)#bd[Carer contact details – if required?]
Table of prescriptions issued in the last week	therapy(dj,o4,dh,o5,d2,d4,i312).(1wt)#adi4[Authority to Administer]
Current Clinical Audit reminders	Remind(1).(t)

Encounter Form

All Clinical Audit Reminders	Reminder(001).(t)[Reminders for Action]
Past 3 months clinical consultations	lastconsul(11,24,3,27,8,7,9,10,21,33,34).(3mt)#!0[Recent Consultations]
All Current Repeats in pre-formatted table	active.(t)#fbol[Current Repeats]
Last 3 months Acute Prescriptions only in pre-formatted table	RxAcute.(3mt)#adif[Recent Acute Prescriptions]
All Allergies in pre-formatted table	allerg.(t)#aibkc[Allergies & Intolerances]
All Priority 1 Medical History Entries in pre-formatted table	priority1.(t)#abd[Priority 1 Entries]
Last 3 months of test results in pre-formatted table	test.(3mt)#abfed0[Recent Test Results]

Insurance Report

Date Records held from	general(9R8)#ad[Date Records help from:]
Last 3 months Surgery consultations in a preformatted table	Ntp.lastcon(09).(3mt)[All Consultations in past 3 months (includes all issued medication)]
Certified Sickness (Old Med3)	Ntp.gen(9D1,9D2,9D3,9D4,9D5,9DC,9DG,9DF,ZV680).(3yt)#abd[Sickness record over the last three years]
Certified Sickness (eMed3)	emed3.(t)#bahfl0[Certified Sickness Absence]
Insurance Discloseable Priority 1 only **Excluding the clinical terms listed**	Ntp.Priority1(-43B,-8CAE,-13N5,-13N9,-6827,-A789,-A78A,-43W7,-43W8,-Z4B2,-43d5,-43d6,-ZGB4,-43h2,-4J34,-4J35,-43j7,-4JR7,-4JDT,-677N,-8I3p,-9Op0,-43h9,-R109,-J631,-J632,-J633,-43b4,-6771,-677C,-D402,-14O6,-5775,-6828,-6829,-4JR1,-43d5,-43d6,-43d7,-43d8,-43dA,-43dB,-43dC,-43dD,-43dE,-4JDT,-43k0,-43jG,-65PL,-677R,-68Nn,-8I3r,-8I3u,-4J3D,-9Op1,-43JK,-43X2,-43h3,-43X6,-43j5,-43k1,-4J3B,-4JQ3,-677Q,-8I3s,-8I3v,-6829,-65PM,-65PS,-N011,-AyuC,-A9,-4L,-2J1,-43q,-A7882,-A788U,-A788V,-A788W,-A788X,-A7054,-7Q052,-A70z0,-Eu024,-65V3.).(t)#abd0[Significant Medical History]
Other discloseable Medical History Entries on past year only	Ntp.priority35678(-9N32,-43C,-43X4,-43B3,-43B7,-14OP,-14OZ,-43B.,-8CAE,-13N5,-13N9,-6827,-A789,-A78A,-43W7,-43W8,-Z4B2,-43d5,-43d6,-ZGB4,-43h2,-4J34,-4J35,-43j7,-4JR7,-4JDT,-677N,-8I3p,-9Op0,-43h9,-R109,-J631,-J632,-J633,-43b4,-6771,-677C,-D402,-14O6,-5775,-6828,-6829,-4JR1,-43d5,-43d6,-

Excluding the clinical terms listed	43d7,-43d8,-43dA,-43dB,-43dC,-43dD,-43dE,-4JDT,-43k0,-43jG,-65PL,-677R,-68Nn,-8l3r,-8l3u,-4J3D,-9Op1,-43JK,-43X2,-43h3,-43X6,-43j5,-43k1,-4J3B,-4JQ3,-677Q,-8l3s,-8l3v,-6829,-65PM,-65PS,-N011,-AyuC,-A9,-4L,-2J1,-43q,-A7882,-A788U,-A788V,-A788W,-A788X,-A7054,-7Q052,-A70z0,-Eu024,-65V3.).(1yt)#abd0[Other relevant history]
Renal Function As a table	tab(sod,pot,ur,cr,gfr)[Renal Function]
Liver Function As a table	tab(ast,alt,cpk,ldh,gam,alk,bil,totp,alb,serum_g)[Liver Function]
Glucose & Diabetic Control As a table	tab(bld,fast,hba,fru)[Glucose & Diabetic Control]
Lipids As a table	tab(chol,hdl,ldl,vldl,hdl_ldl,trig)[Lipids]
Bone Chemistry As a table	tab(cal,calcium_a,alk,ac,pros_ant)[Bone Chemistry]
Thyroid Function As a table	tab(T3,t4,free_t3,free_t4,tsh)[Thyroid Function]
Full Blood Count As a table	tab(Haem,pcv,mcv,mch,mchc,plate,rbc,rbc_size,neu,mono,eos,baso,esr)[Full Blood Count]
Urine Glucose	Urine_gluc.(3yt)[Urininalysis - Glucose]
Urine Protein	Urine_prot.(3yt)[Urininalysis - Protein]
Chest XRay in last 3 years	chest.(3yt)#0[Chest XRays in past 3 years]
Endoscopies in last 3 years	endos.(3yt)#0[Endoscopy in last 3 years]
Colonscopies in last 3 years	colon.(3yt)#0[Colonoscopy in last 3 years]
ECGs in last 3 years	ecg.(t)#0[ECG in past 3 years]
Echocardiograms in last 3 years	echo.(t)#abhi0[Echocardiogram in past 3 years]
Blood Pressure readings in last 3 years	bp.(3yt)#aoep0

Mental Health Services (including Older Persons)

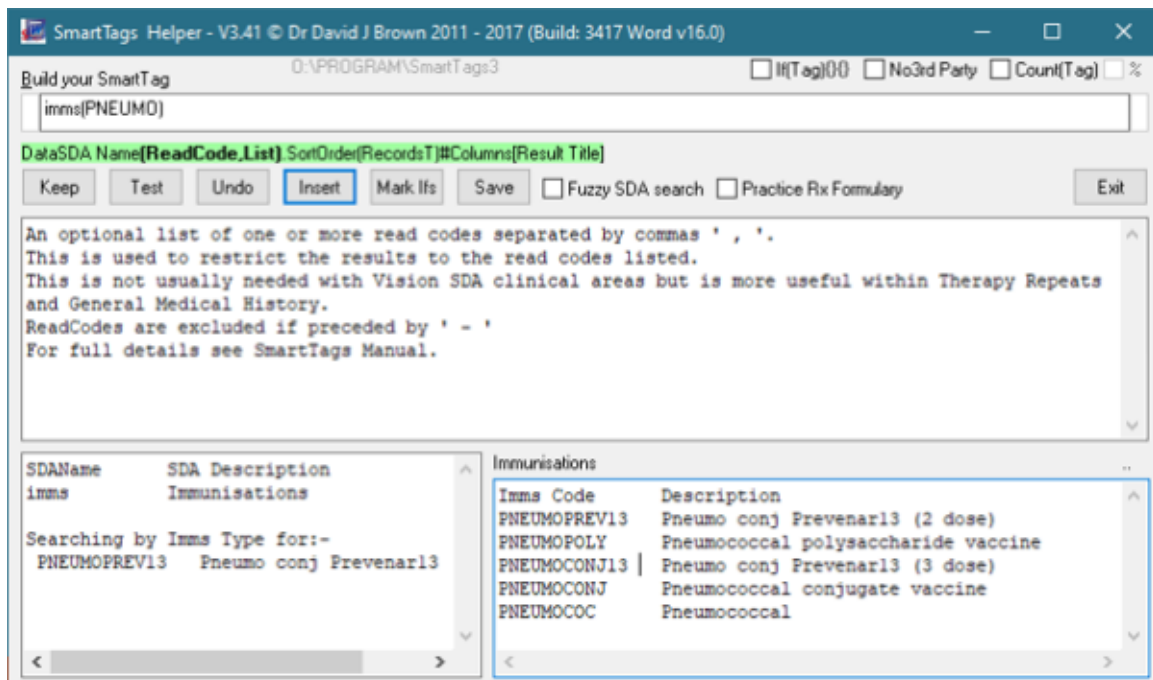|	
Interpreter Needs	gen(9NU)[Interpretation Needs]
Ethnicity	gen(9S,9i)#bd0[Ethnicity]
Risks to self and others	gen(1BD,ZX,146B,14OE)#abd0[Self Harm:]
Past psychiatric history	priority1(E)[Significant Psychiatric History:]
Current Medication (& when commenced)	rxacute.(3mt)#adfi[Recent Medication]

Immunisations

Immunisations are different to normal **SmartTags**, you must define the IMMSCODE where you would normally enter the Read codes.

Immunisation should be tagged separately for each one, and by default displays the latest one, for example, imms(FLU) displays the last influenza vaccine. Use the number of records to define more than one.

If you string multiple immunisations into a single tag with the number of records, the number of records takes precedence over the immunisation, for example, imms(FLU,PNEUMO).(2) displays the last 2 of either, which could be 2 influenza vaccines. To display the latest of each they must be tagged separately, for example, imms(FLU) and imms(PNEUMO).

The above examples display any influenza or pneumococcal immunisation, but if you need to be specific, you must define the IMMSCODE, for example, imms(PNEUMOCON,PNEUMOPREV13) displays PCV vaccines and imms(PNEUMOCOC,PNEUMOPOLY) displays PPV vaccines, see Types of Immunisations for details of immunisation codes.

Example immunisation SmartTags:

Personal Diabetic Report

✎ **Note** - The background colouring is for illustration purposes only.

Paragraphs have been highlighted using the <Mark Ifs> button to demonstrate the If(){}{} (If(condition) then{} else{}) clause elements.

Diabetic First Paragraph

If(gen(C10).f(6m)) searches Medical History for the earliest diabetic diagnostic read code and if this was within the past 6 months only the {} element is used the {} part will be discarded completely. If the earliest diagnosis is over 6 month old the {} will be used instead

If(gen(C10).f(6m)){You have recently been found to be diabetic. This means that you will need to consider a number of lifestyle choices that can improve your health. The main considerations for you are: to maintain a healthy weight with a good Body Mass Index: yours is weight#f. If(weight#f>28){It would be to reduce this by losing weight and eating healthily.} Try to exercise regularly. If(smok#b){It would be wise to stop smoking.} We will help keep you blood pressure under control and maintain a good cholesterol level.}{ It was good to see you for your diabetic review. You were found to be diabetic on gen(C10).f#a and currently takeIf(active(f1,f2,f3,f4,f5,ft,fw).(t)){:active(f1,f2,f3,f4,f5,ft,fw).(t)#bfo[Regular Diabetic Medication]}{no regular diabetic medication.}}Diabetics need to be careful in several areas:

If {} is used then weight#f simply gives the latest BMI.

If(weight#f>28){It would be to reduce this by losing weight and eating healthily.} adds the losing weight sentence only if the BMI is over 28.

If {} is used then:

gen(C10).f#a gives the date of the earliest diagnostic entry

If(active(f1,f2,f3,f4,f5,ft,fw).(t)){:active(f1,f2,f3,f4,f5,ft,fw).(t)#bfo[Regular Diabetic Medication]}{no regular diabetic medication.}

Checks for any active diabetic repeat medications and if found presents them in the pre-formatted table provided

It filters searching by Read Code for:

- f127. Actrapid 100units/ml solution for injection 10ml
- f25a. Humulin I 100units/ml suspension for injection 10ml vials
- f3a1. Tolbutamide 500mg tablets
- f41u. Metformin 1g modified-release tablets
- ft5z. Pioglitazone 15mg tablets
- fw11. Humalog Mix25 100units/ml suspension for injection 3ml

Diabetic Control

Paragraphs have been highlighted using the <Mark Ifs> button to demonstrate the If(){}{}(If(condition)then{} else{}) clause elements. Colouring is for illustration only.

If(hba1(42W4).(2y)>=hba1(42W5).(2y)){hba(42W4)#d. We aim to keep this below 7.5 as far as possible}{hba(42W5)#d. We aim to keep this below 58 as far as possible}

If(hba1(42W4).(2y)>=hba1(42W5).(2y)) checks whether there are more IFCC standardised HbA1c readings than older style DCCT aligned ones. Then the relevant Hba value is given with the relevant comment

Using:

If(hba1(42W4).(10)>1){Your readings overall: If(hba1(42W4).(2y)>hba1(42W5).(2y)){ Graph(Hba1,GoodControl7.5,PoorControl8.5,Message=LowerReadingsAreBetter,read=42W4)}{ Graph(Hba1,GoodControl58,PoorControl70,Message=LowerReadingsAreBetter,read=42W5)} If(hba1(42W4)#d<=7.5|hba1(42W5)#d<=58){Your control is steady}{Your control is not ideal. If(active(f1,f2,f3,f4,ft,fw)<3){It may be possible to improve you control with extra medication}{however you are already on several diabetic medications}}}

A graph is shown if there are 2 or more readings and;

If(hba1(42W4).(2y)>hba1(42W5).(2y)){Graph(Hba1,GoodControl7.5,PoorControl8.5,Message=LowerReadingsAreBetter,read=42W4)}{Graph(Hba1,GoodControl58,PoorControl70,Message=LowerReadingsAreBetter,read=42W5)}

Is used to select the relevant IFCC or DCCT values to display as a graph with Good Control, Poor Control tramlines and a message encouraging lower readings.

Using:

If(hba1(42W4)#d<=7.5|hba1(42W5)#d<=58){Your control is steady}{Your control is not ideal.If(active(f1,f2,f3,f4,ft,fw)<3){It may be possible to improve you control with extra medication}{ however you are already on several diabetic medications}}

If(hba1(42W4)#d<=7.5|hba1(42W5)#d<=58) checks for good control for IFCC or DCCT values.

If control is poor:

If(active(f1,f2,f3,f4,ft,fw)<3){It may be possible to improve you control with extra medication}{however you are already on several diabetic medications}

If(active(f1,f2,f3,f4,ft,fw)<3) checks whether 3 or more active diabetic repeat medications and suggests additional treatment if not otherwise stating patient is already on several medications.

Weight

Graph(weight,ideal,obese,bmi=,Message=YourWeightShouldBeBeneathTheObeseLinePreferablyBelowTheIdealOne)

BMI graphed with ideal BMI & Obese BMI tramlines plus a message recommending weight reduction.

As the graph shows your weight If(weight#f<=27){ is satisfactory}{needs improvement as it is on the high side. We considered dietetic/nutritional assessment and spoke about diets you might try - the best diet for you is the one you can continue most easily, Weight Watchers, Slimming World, Atkins all work and have helped many diabetics. It is important to try and increase your activity levels and exercise as much as possible as well as being careful with the types and quantities of food you eat.}

If BMI is over 27 the weight reduction advice displays.

If(weight#f>40){As you are unhealthily overweight it is most important for you future health that you really try very hard to loose weight, your weight is making you less well than you should be.}

Adds a sentence especially for those with a BMI greater than 40.

Blood Pressure

Paragraphs have been highlighted using the <Mark Ifs> button to demonstrate the If(){}{}(If(condition)then{}else{}) clause elements. Colouring is for illustration only.

If(active(b2,b3,b4,bb,bd,be,bf,bh,bi,bk,bl)){You are on treatment for blood pressure and currently take:

active(b2,bd,be,bf,bg,bh,bi,bk,bl).(t)#bfo[Regular Blood Pressure Medication]}{You are not currently taking any blood pressure medication.
}We aim to keep your top reading below 145/130 and your lower reading below 85/80.

If(active(b2,b3,b4,bb,bd,be,bf,bh,bi,bk,bl)) searches Active Repeats by Drug Read Code.

If any hypotensive repeats are found they are then show in a preformatted table.

Graph(BP,Target140,TightControl130,Target85,Message=LowerBloodPressureReadingsAreBetterForYou)

Shows a graph with tramlines for tight control and target control giving a message: Lower Readings Are Better For You.

As you see your current control If(bp#x>150|bp#y>90){needs improvement. If(weight#f>25){People with an ideal weight tend to have better control and need less medication .}After discussion we agreed to try and loose more weight, increase you medication, add a new tablet.}{is good.}

States either 'As you see your current control needs improvement' with a comment on weight if BMI over 25 and some italic text likely to require manual editing, or 'As you see your current control is good'.

Kidneys

Paragraphs have been highlighted using the <Mark Ifs> button to demonstrate the If(){}{}(If(condition)then{}(condition)then{}(condition)then{} else{}) clause elements. Colouring is for illustration only.

ACE inhibitor and ARB medications help improve kidney health

If(active(bi,bk)){ – you take active(bi,bk)#b}{, you have not needed one yet}

Inserts a comment if an ACE or ARB is taken naming the drug used or states', you have not needed one yet'.

Graph(gfr,GoodGFR60,LowGFR30,Message=HigherRatesAreBetterForYourKidneys)[Kidney Function – blood tests]

Inserts a graph of eGFR with Good/Low tramlines and suitable message.

if(general(G2)&gfr#d>=60){Your kidneys are working well but we like to keep your blood pressure below 145/90 as you have gen(G2,C10).f#b, your blood pressure on bp#a was bp#e.}(general(G2)&gfr#d<60&gfr.(5)#d>45){We like to keep your blood pressure below 130/85 - your blood pressure on bp#a was bp#e.}

(gfr.(5)#d>=60){Your kidney function is fine, the graph may show a dip at the end but only because the labno longer report values over 60.}(gfr.(5)#d<60&(gfr.(5)#d>=45)&(gfr#d>=gfr.(5)#d)){Your kidney function is borderline (CKD3a) but your latest test shows a steady result}(gfr.(5)#d<60&(gfr.(5)#d>=45)&(gfr#d<gfr.(5)#d)){Your kidney function is borderline (CKD3a) and your latest test shows we need to be careful.}(gfr.(5)#d<45&gfr.(5)#d>=30&gfr#d>=gfr.(5)#d){Your kidney function is mildly impaired (CKD3b) but your latest test is showing a steady result.}(gfr.(5)#d<45&gfr.(5)#d>=30&gfr#d<gfr.(5)#d){Your kidney function is mildly impaired (CKD3b) and your latest test shows we need to be careful.}(gfr.(5)#d<30&gfr#d>=gfr.(5)#d){We need to be especially careful of your kidney function (CKD 4/5) and you may need help from a kidney specialist but your latest result is giving a steady result.}(gfr.(5)#d<30&gfr#d<gfr.(5)#d){We need to be especially careful of your kidney function (CKD 4/5) and you may need help from a kidney specialist.}

Shows how you can create a complex **SmartTag** using '&' (and) '|' (or) and comparisons: '>', '<', '>=', '<=', '='. Within a condition **SmartTags** averages numeric values from several records for comparisons. It can perform simple arithmetic calculations with +, -, * & /. you can also use brackets to ensure logic is processes in the intended order.

SmartTags	Checking	Displays as
if(general(G2)&gfr#d>=60)	Hypertension & eGFR over 60	Your kidneys are working well but we like to keep your blood pressure below 145/90 as you have gen(G2,C10).f#b, your blood pressure on bp#a was bp#e.
(general(G2)&gfr#d<60 &gfr.(5)#d>45)	Hypertension & eGFR between 45 - 60	We like to keep your blood pressure below 130/85, your blood pressure on bp#a was bp#e.
(gfr.(5)#d>=60)	Average of last 5 eGFR readings are 60(+)	Your kidney function is fine, the graph may show a dip at the end but only because the lab no longer report values over 60.
(gfr.(5)#d<60&(gfr.(5)# d>=45)&(gfr#d>=gfr.(5) #d))	Average of last 5 eGFR readings is between 45 - 60 with last reading at average or higher	Your kidney function is borderline (CKD3a) but your latest test shows a steady result
(gfr.(5)#d<60&(gfr.(5)# d>=45)&(gfr#d<gfr.(5)# d))	Average of last 5 eGFR readings is between 45 - 60 but last reading is lower than the average	Your kidney function is borderline (CKD3a) and your latest test shows we need to be careful
(gfr.(5)#d<45&gfr.(5)#d >=30&gfr#d>=gfr.(5)#d)	Average of last 5 eGFR readings is between 30 - 45 with last reading at average or higher	Your kidney function is mildly impaired (CKD3b) but your latest test is showing a steady result.
(gfr.(5)#d<45&gfr.(5)#d >=30&gfr#d<gfr.(5)#d)	Average of last 5 eGFR readings is between 30 - 45 but last reading is lower than the average	Your kidney function is mildly impaired (CKD3b) and your latest test shows we need to be careful.
(gfr.(5)#d<30&gfr#d>= gfr.(5)#d)	Average of last 5 eGFR readings is between under 30 with last reading at average or higher	We need to be especially careful of your kidney function (CKD 4/5) and you may need help from a kidney specialist but your latest result is giving a steady result.
(gfr.(5)#d<30&gfr#d<gf r.(5)#d)	Average of last 5 eGFR readings is between under	We need to be especially careful of your kidney function (CKD 4/5)

SmartTags	Checking	Displays as
	30 but last reading is lower than the average	and you may need help from a kidney specialist.

When using cascading If(conditions) they are checked in the order given so place the tighter/narrower conditions earlier. This is why the G2(hypertension) filters are earliest in the sequence above.

Foot Care

Paragraphs have been highlighted using the <Mark Ifs> button to demonstrate the If(){}{}(If(condition)then{}(condition)then{}(condition)then{} else{}) clause elements. Colouring is for illustration only.

Uses recent foot risk codes to insert relevant paragraphs.

The {Else} clause is inserted if there is no recent record and gives a table of foot examinations within the past 2 years with a reminder to check the feet

If(foot(2G5E).(6m)&foot(2G5I).(6m)){were in good condition. Please remember that if any cuts, abrasions, scratches or ulcers happen please see the nurse if they are in any way slow to heal.}(foot(2G5J,2G5K,2G5F,2G5G).(6m)){need special care and attention due to reduced blood flow or reduced sensation (numbness). This means that any problems should be assessed by our nurse to ensure proper treatment.}(foot(2G5L,2G5H).(6m)){are ulcerated. This needs special care that the nurse will ensure that you receive.}{Absent/old Diabetic Risk Score – please check foot care and risks foot(2G5E,2G5I,2G5J,2G5K,2G5F,2G5G,2G5L,2G5H).(24mt)}

Cholesterol and Heart Disease

If(smok#b){risks increase if smoking (smok#ai) especially if your cholesterol is high, if you would like help to stop smoking please let us knows.} adds a comment about smoking for current smokers.

Graph(Chol,Target5,TightControl4,Message=LowCholesterolReadingsAreBetterForYou) displays a graph of cholesterol levels with control tramlines and a message about lower cholesterols.

If(active(bx)&chol#d>5){You take:active(bx).(t)#bfo[Regular Cholesterol Medication]

Your cholesterol is high despite the medication, it needs to be taken regularly. We can also consider increasing your dose.}(active(bx)&chol#d<=5){You take:active(bx).(t)#bfo[Regular Cholesterol Medication]Your latest cholesterol level shows that your medication is working well}(chol#d>5&pat.age>40){You are not currently taking any cholesterol lowering medication but as your latest cholesterol is high at chol#d You may wish to consider starting a cholesterol lowering medication to reduce your risk of heartattacks and strokes.}(chol#d>5){You are not currently taking any cholesterol lowering medication but your latest cholesterol is high at chol#d You may wish to consider starting a cholesterol lowering medication to

reduce your risk of heart attacks and strokes but this is not always justified in younger people.}{Even without medication your cholesterol level is fine.}

SmartTags	Checking	Displays as
If(active(bx)&chol#d>5)	On a Statin and Cholesterol is 5+	**A preformatted table of lipid agents taken and states:** Your cholesterol is high despite the medication, it needs to be taken regularly. We can also consider increasing your dose.
(active(bx)&chol#d<=5)	On a statin and Cholesterol below 5	A preformatted table of lipid agents taken and states: Your latest cholesterol level shows that your medication is working well
(chol#d>5&pat.age>40)	Cholesterol over 5 and aged over 40	You are not currently taking any cholesterol lowering medication but as your latest cholesterol is high at chol#d. You may wish to consider starting a cholesterol lowering medication to reduce your risk of heart attacks and strokes
(chol#d>5)	High Cholesterol	You are not currently taking any cholesterol lowering medication but your latest cholesterol is high at chol#d. You may wish to consider starting a cholesterol lowering medication to reduce your risk of heart attacks and strokes but this is not always justified in younger people.
If none of the above	Else clause	Even without medication your cholesterol level is fine

Repeat Medication Schedule with blank columns

activerepeats. (t)#bo4444444[Regular Medication – dose schedule								
Medication or	Dosage	Breakfast		Lunch		Teatime		Night
Drug Name	Instruction	Before	After	Before	After	Before	After	

Presents current active repeats showing Drug Name with dosage and 7 spare columns (using #bo4444444) to allow a dosage time table to be created to give to patients and carers. Each #4 produces a blank column.