

DLM 410 User Guide

All Countries

New Look On-screen Help

Consultation Manager Changes

CVD Risk Calculator Annual Update

SCI Gateway Release 12.3

Search and Report Changes

Vision Online Services Changes

Medical Interoperability Gateway (MiG) Message Changes

Test Requesting – Plumtree Integration with Vision

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Pharmacist Prescribing Number Change

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My Health Online Changes



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Table of Editions and Contents

Date	Version	Contents	Output
05/04/12	001	Created	Docx & PDF
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12/06/12	003	Added SCI Gateway Release 1.23 details to What's New.	Docx & PDF
14/06/12	004	Added New Help details	Docx & PDF
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09/08/2012	008	Vision now integrates with Plumtree test requesting, Add NACS code to all existing preferred pharmacies, referring clinicians need GMC code for SCI referrals. Generic icon missing	

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DLM 410 User Guide

Summary of Changes

New Look Vision On-Screen Help

- **New Look On-screen Help in Vision** – From DLM 410, Vision on-screen help will have an improved, more user-friendly look and feel. See [New Look On-screen Help](#) on page 5.

Consultation Manager

Therapy

- **Prescribing Generics and Brands** – Vision now allows the prescribing of generic preparations which are marked as “not recommended to prescribe - brands not bioequivalent” or “not recommended to prescribe - patient training required” in dm+d, only warning users that they are recommended to be prescribed by brand. Items marked as “never valid to prescribe as a generic” by dm+d will still require a user to select a brand. See [Generic/Brand Prescribing](#) on page 7.
- **Parallel Imports** – Parallel Imports are now hidden from the drug select screen by default. To view Parallel Imports, select the “all Generics” filter on the drug select screen. Parallel Imports are marked with a P and “Parallel Import” is displayed in the drug information screen. See [“Parallel Imports”](#) on page 10.
- **England – EPS Release 2 - Preferred Pharmacy and Nomination** – From DLM 410, if the EPS Nominated Pharmacy is different to the Preferred Pharmacy recorded in Vision, an EPS Nomination Mismatch Alert is displayed in the Alerts Pane in Consultation Manager. See [England – EPS Release 2 - Preferred Pharmacy and Nomination](#) on page 11.

Immunisations

- **New Flu Vaccination Read Codes** – The Read dictionary update Q1 2012 contains new Read codes for recording Seasonal Flu vaccination. The Read Code 65E.. Influenza Vaccination is still present in the dictionary and although still eligible for Seasonal Flu reporting is NOT accepted in the QOF 2012-13 Business Rules. See [Seasonal Flu Vaccination Read Codes](#) on page 13.

Tests SDA

- **Prostate specific Antigen** – Prostate Specific Antigen is now in the Serology Structured Data Area (SDA) with additional Read codes. See [Prostate Specific Antigen](#) on page 13.

CVD Risk Calculations

- **Annual Update** – There have been some changes to the Read codes used to calculate Framingham, Assign, QRISK and CHADS2. See [CVD Risk Calculators - Annual Update](#) on page 14.
- **Auto recalculate** – When switching between CVD risk calculators the risk percentages are now automatically calculated. See [CVD Calculators - Auto Recalculate](#) on page 14.

Medical History

- **Medical History comments font** – The font used for medical history comments, which was changed in a previous DLM, has been changed back to the standard Vision font.

Consultation Manager Tabs

- **Current Consultation Tab** – The consultation pane no longer erroneously displays when changing the Vision 3 view. See [Current Consultation Tab](#) on page 29.
- **Patient Links Browser Tab** – The patient map now links to Google maps. See [Patient Links Browser – Map](#) on page 29.

Test Requesting

- **Test Requesting** – Vision now integrates with Plumtree test requesting systems. See the test requesting user guide [here](#).

SCI Gateway Release 1.23

- SCI Gateway has introduced several new message types that integrate with Vision. The new message types are:
 - **Advice Request** – A message you create that enables you to ask advice from consultants.
 - **Advice Response** – An incoming reply to an advice request.
 - **Discharge Notification** – An incoming message notifying you of patient discharge details.
 - **Supplementary** – A message you can create that acts as an appendage to a pre-existing Advice Request or Referral.

The new messages can be utilised by practices that integrate with: **SCI** – Scottish Care Information, **WCCG** – Welsh Clinical Communications Gateway and **Northern Ireland CCG** – Northern Ireland Clinical Communications Gateway (Northern Irish Practices can only use Supplementary messages at this time). See [SCI Gateway Release 12.3](#) on page 17.

Additionally, the Ethnic Origin section of a Gateway Referral template is now automatically completed from the information recorded in Vision.

Note – Although these messages are available, please check with your Health Board to see if they are being used in your area.

Search and Reports

- **Update to Tab Separated Exports** – Therapy and dispenser notes are now displayed in the dosage column when exporting therapy data to Excel in Tab Separated format. See [Update to Tab Separated Exports](#) on page 26.
- **Miquest** – New referral Read code mappings – At the request of Primis, referral Read codes and Specialities are now included in Miquest queries. See [Miquest - New Referral Mappings](#) on page 26.

GP2GP – England

- **Docx Attachments** – Docx attachments can now be imported and exported as part of the GP2GP message. See [Update to Attachments Included in GP2GP Message](#) on page 27.
- **Allergy Records** – From DLM 410, where an allergy record is received from a non-Vision system without an attached drug, it will be imported as a non-degraded allergy record with the Read code **14L..00 H/O: Drug allergy** instead of 9bJ..00 Transfer-degraded record entity. See [Allergy Changes](#) on page 27.
- **Degraded Test Results** – Degraded GP2GP pathology messages previously filed as medical history entries. From DLM 410, the messages now file as a test entity with the Read code **677 Other lab result information**. See [Degraded Test Results](#) on page 28.
- **Results Outside Reference Range** - Previously pathology results with a test reference of “outside reference range” where shown with the result qualifier of “None”. This has now been updated; “Outside reference range” is now filed as a Result Qualifier and is no longer added to Notes. See [Results Outside Reference Range](#) on page 28 .
- **Pathology Units Change** – From 410, when pathology messages with a Units label are imported, they are mapped to the text equivalent. See [Pathology Units Change](#) on page 28.

Northern Ireland

- **Pharmacist Prescribing Number** – From DLM 410, , Vision now accepts 4 and 5 digit pharmacist prescribing numbers. See [Pharmacist Prescribing Number](#) on page 30.
- **Emergency Care Summary (ECS)** – Has been updated to include repeat dispensing and items prescribed outside of the practice in the ECS message See [NI ECS – Repeat Changes](#) on page 30.

Vision Online Services/My Health Online

- **Non-Viewable Slot Type** – Non-viewable slot appointments can now be viewed in Consultation Manager. Patients booked into non-viewable slot appointments will not receive email/SMS notifications. See [Non-Viewable Slot Types Update](#) on page 33.

- **Did Not Attends (DNAs)** – A new setup option is available to determine whether patients can view their DNA details. See [Did Not Attends \(DNA\) Update](#) on page 33.

Mail Manager

MiG (Medical Interoperability Gateway) Messages

- From DLM 410, there is a new MiG Message type called Clinical Correspondence.
- The sending organisation of incoming MiG messages is now displayed in the Audit Trail tab of the message in Mail Manager.
- A MiG Document Delivery message is now sent as soon as the message is received in Mail Manager (previously, this was sent when the message was filed).

New Look On-screen Help

From DLM 410, Vision on-screen help will have an improved, more user-friendly look and feel. Benefits include:

- Browser-based access – recommended browsers and versions:
 - Internet Explorer 7 and later
 - Firefox 11 and higher
- Improved cross-topic navigation
- Enhanced search capability
- Vision on-screen help is now held on our web server and can be updated directly - and independently of DLM releases. This means a reduction in file volume for DLM downloads.
- Web analytics will allow us at INPS to know which help files are accessed and how often the help is referred to. There is also future scope for customer feedback.

The screenshot displays the 'Consultation Manager' help interface. The breadcrumb trail at the top reads 'Therapy > Print Prescriptions > Record an Acute Prescription Without Printing It'. A search bar is located in the top right corner. The left sidebar contains a 'Contents' tree with various topics, including 'Print Prescriptions' and 'Record an Acute Prescription'. The main content area shows the article 'Record an Acute Prescription Without Printing It', which includes a 'Print Script' hyperlink. A modal dialog box titled 'Unprinted Therapy Warning' is open, providing options to 'Print Items and Continue', 'Continue Without Printing', or 'View Items'. A 'See Also' section at the bottom lists related topics like 'Print Prescriptions' and 'Print Acute Prescription'. Callouts highlight features such as breadcrumbs, search, home/previous/next icons, hyperlinks, and tab headers.

Breadcrumbs: displays where the topic is in the Help structure. Click to move up one or more levels

Print topic

Search the Help

Home, Previous and Next icons

Hyperlink within topic. Click to open the linked topic

Tab headers: Contents, Index and Search (Search tab header will be displayed once a search has been run). Click on the tab header to display tab

See Also: Lists related topics

New Look On-screen Help – Consultation Manager

Consultation Manager Changes

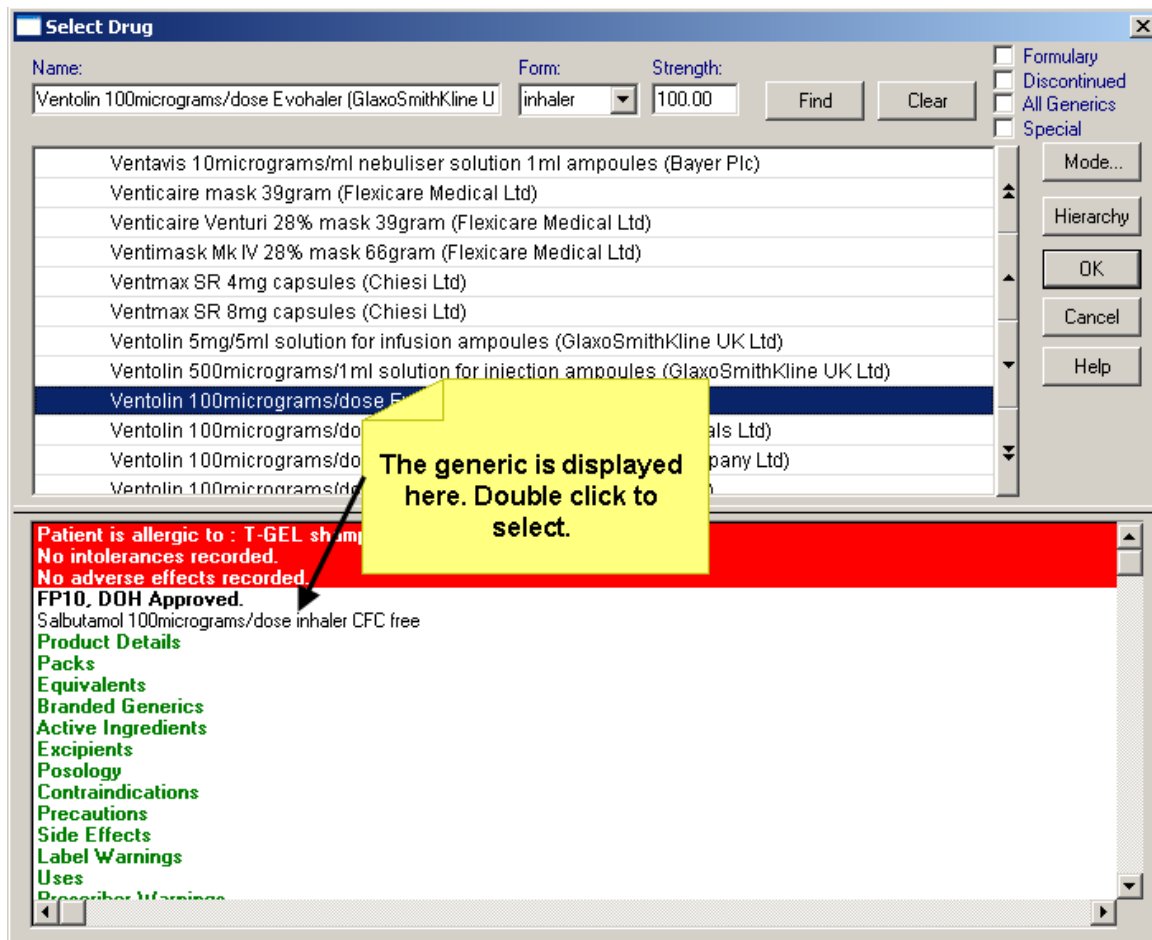
Therapy

Switch to Generic Icon Not Available until DLM 410 August Gemsript

Due to the changes below, you will notice that the switch to generic icon is not available. Once you have DLM 410 and the August Gemsript dictionary, the generic icon will display as it is supposed to.

In the meantime, to switch from the brand to the generic:

1. In Consultation Manager, with the branded drug item selected in the Therapy – Add screen, press F3 or double click on the item to display the Select Drug Screen.
2. The generic equivalent is displayed in the drug information bar, double click to select



Generic Displayed in the Drug Information Bar

3. You can now continue with Therapy – Add as usual.

Generic/Brand Prescribing Changes

Prescribing Brands

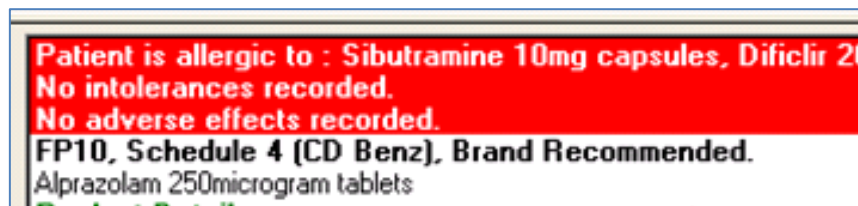
Note – These changes require BOTH the **August 2012** drug dictionary AND Vision **DLM410** to be installed on your system.

We have had discussions with the Department of Health regarding our implementation of their requirement to prohibit the prescribing of some generic preparations, where dm+d lists them as “not recommended to prescribe - brands not bioequivalent” or “not recommended to prescribe - patient training required”.

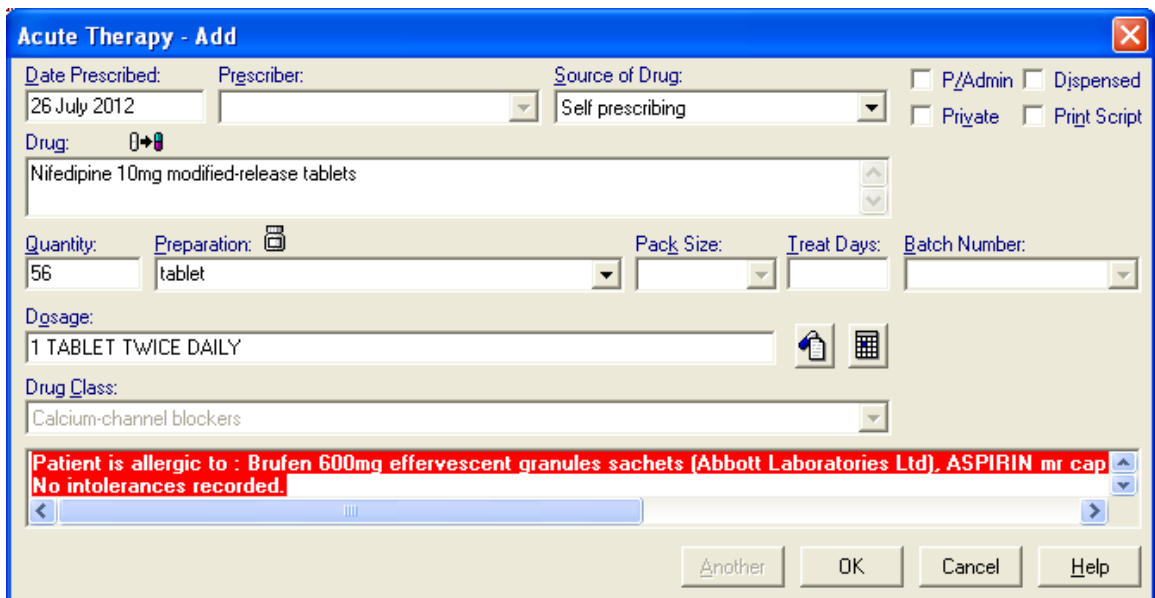
As a result of your feedback, they have agreed to change their requirement and in DLM 410 Vision now allows the prescribing of these generic preparations, only warning users that they are recommended to be prescribed by brand. We hope this significant change will assist users when they do not wish to pick a specific brand. Items marked as “never valid to prescribe as a generic” will still require a user to select a brand. Both updates will be required for a full implementation of this change, but it will not matter in which order the updates are applied.

Where Prescribing the Brand is Recommended:

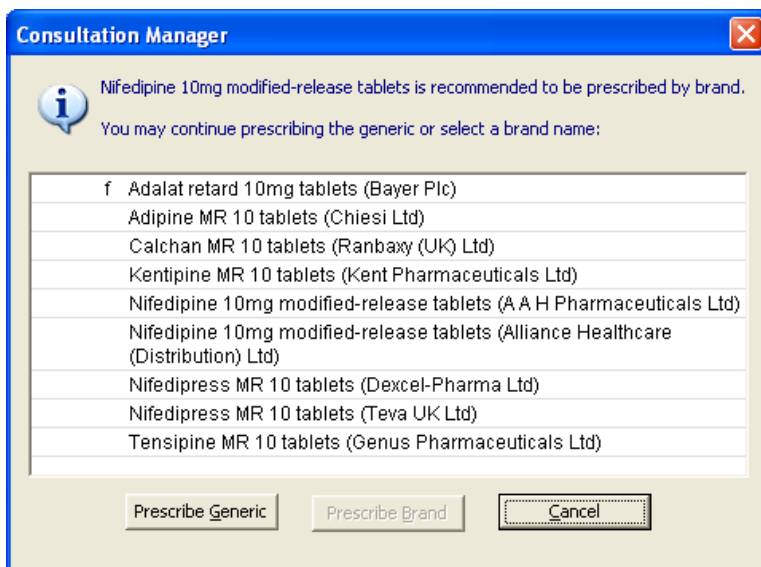
Where it is recommended that the brand be prescribed, “**Brand Recommended**” is displayed in the Drug Information bar on the Drug Select screen in Consultation Manager:



Consultation Manager – Therapy- Drug Select



When you click OK to select the drug item, the following screen is displayed:

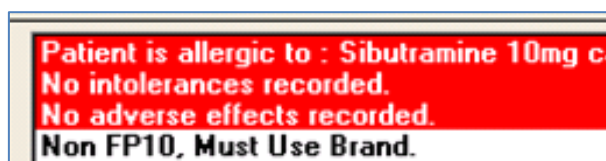


Brand Recommended

You are prompted "*<drug name> is recommended to be prescribed by brand. You may continue prescribing the generic or select a brand name*". Select **Prescribe Generic** to continue with your original selection or select an item from the list and select **Prescribe Brand**.

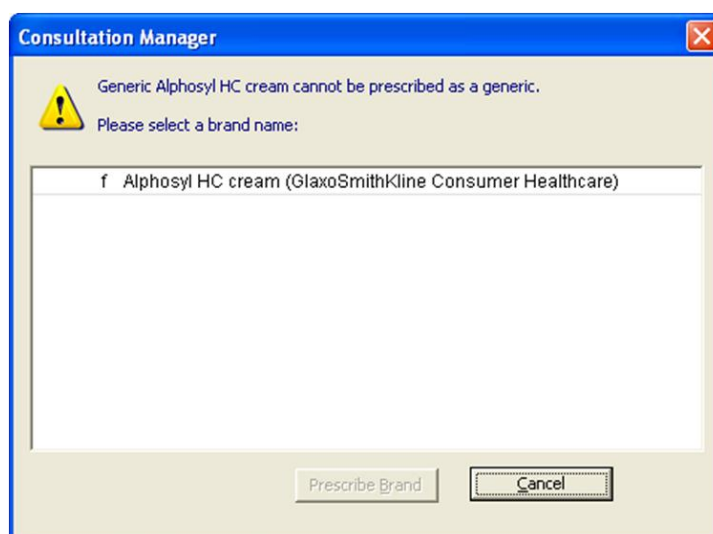
Where Prescribing the Brand is Mandatory

Where it is mandatory that the brand be prescribed, "**Must Use Brand**" is displayed in the Drug Information bar on the Drug Select screen in Consultation Manager:



Consultation Manager – Therapy- Drug Select

When you click OK to select the drug item, the following screen is displayed:



Brand Mandatory

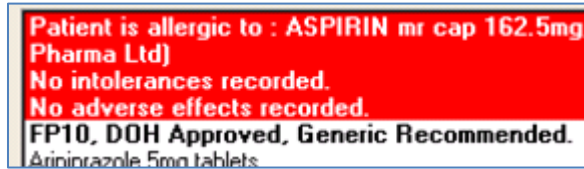
You are prompted "*<drug name> cannot be prescribed as generic*". Select an item from the list and select **Prescribe Brand**.

Prescribing Generics


We have also re-categorised generic advice into Generic Recommended and Use Generic (where generic use is mandatory):

Where Prescribing the Generic is Recommended


Where it is recommended that the generic be prescribed, "**Generic Recommended**" is displayed in the Drug Information bar on the Drug Select screen in Consultation Manager:

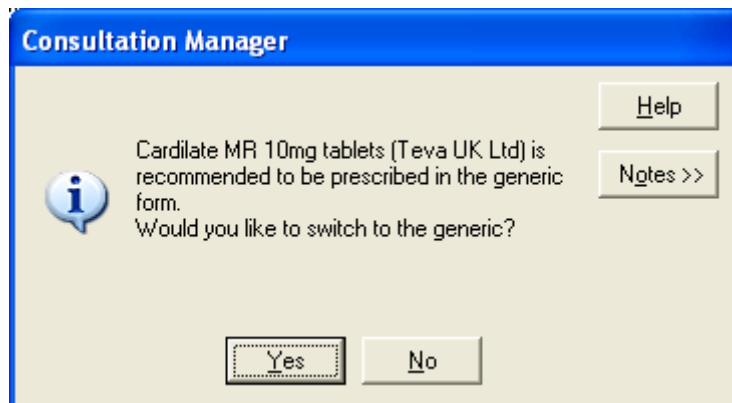


Consultation Manager – Therapy- Drug Select

The switch to generic icon is displayed **Drug: **. On clicking OK any relevant guidance warnings are displayed when you select the item ie "this item is not printable (e.g. secondary care, extemporaneous or parallel import drug) Print script will now be reset".

Where Prescribing the Generic is Mandatory

Where it is mandatory that the generic be prescribed, "**Must Use Generic**" is displayed in the Drug Information bar on the Drug Select screen in Consultation Manager. The switch to generic icon **Drug: ** is also displayed. You are prompted, with "<drug name> is recommended to be prescribed in the generic form. Would you like to switch to the generic?". This prompt has not changed from previous DLMS. You can either select Yes to continue to prescribe the generic or no to cancel and return to the Therapy Add form.



Switch to Generic Removed for Mandatory Use Brand Items

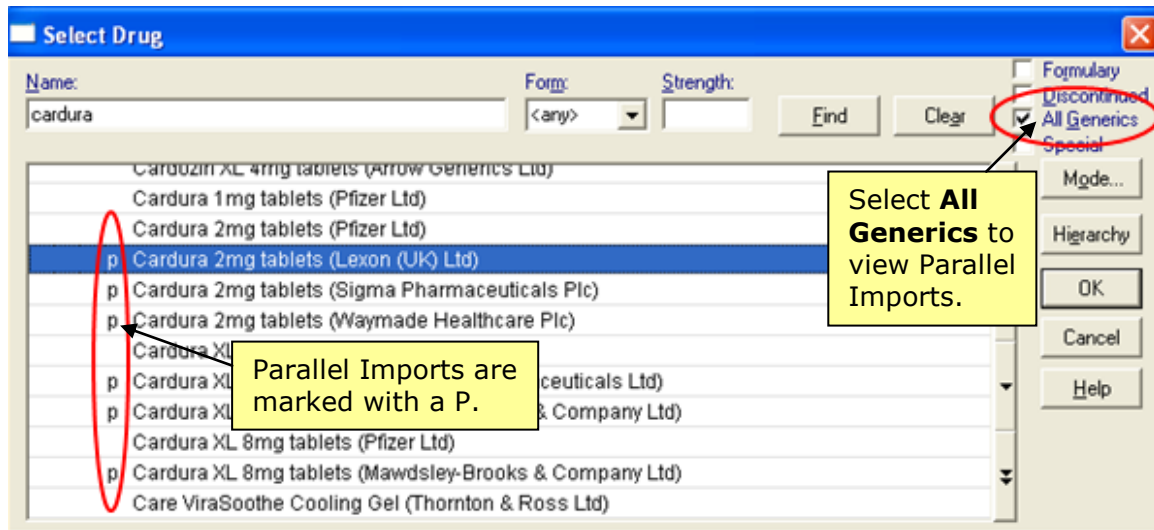
Switch to Generic option has now been removed for items which have a generic equivalent where it is mandatory Use Brand.

Drugs Marked As Unavailable

Unavailable or inactive drugs have now been removed from the screen which recommends brand/generic replacements.

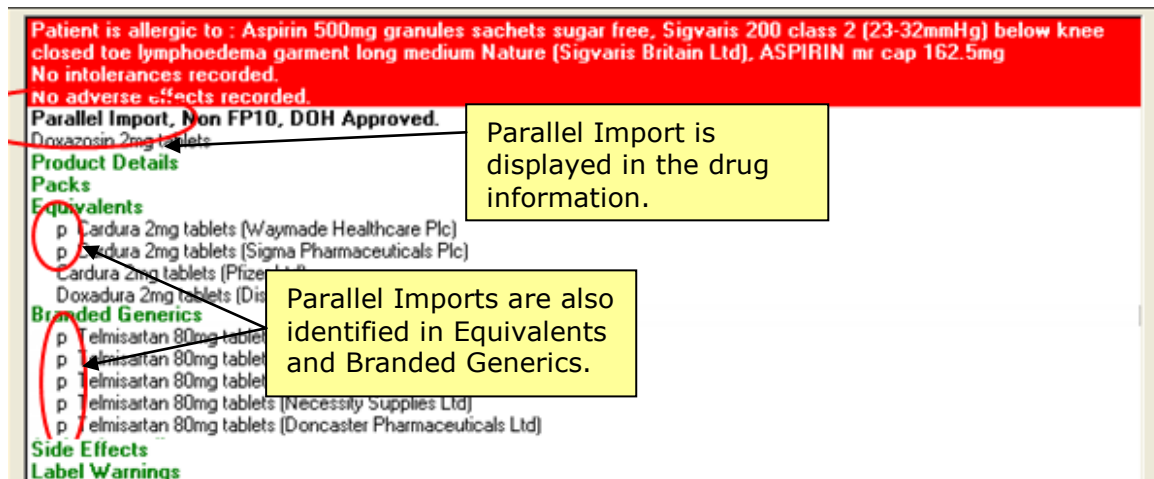
Parallel Imports

Parallel Imports are now hidden from the drug select screen by default. To view Parallel Imports, select the "All Generics" filter on the drug select screen.



Select Drug – All Generics

Parallel Imports are marked with a P and "Parallel Import" is displayed in the drug information screen (including in the Equivalents and Branded Generics lists).



Select Drug – Drug Information

England – EPS Release 2 - Preferred Pharmacy and Nomination

Previously, for non-EPS2 enabled practices, if an EPS Nominated Dispenser is set (either at the practice or externally) the Preferred Pharmacy details are not updated.

From DLM 410, the following changes have been made to the Preferred and Nominated Pharmacy functionality for EPS2 enabled sites:

- If a patient has a Nominated Pharmacy set up, when EPS2 is enabled the Preferred Pharmacy details are no longer used. The Nominated Pharmacy is used by default for all prescriptions issued to the patient.
- If the patient does not have a Nominated Pharmacy the Preferred Pharmacy details are used by default for all prescriptions issued to this patient. (EPS2 eligibility still applies, in that a patient will not be eligible for EPS2 prescriptions without a nomination prior to EPS2 phase 4.)
- If the Preferred Pharmacy differs from the Nominated Pharmacy an alert is displayed to enable you to notify the patient of the change to their dispensing pharmacy. Once informed the alert can be removed and the Preferred Pharmacy will be subsequently changed to the same details as the Nominated Pharmacy to reflect this. See [Viewing and Processing the Mismatched Pharmacy Details](#) on page 12 for further details.

For example, a patient has their Preferred Pharmacy set to Boots and their Nominated Pharmacy set to Lloyds: If the practice is not EPS2 enabled the prescriptions for the patient will, by default, be sent to Boots. If the practice becomes EPS2 enabled, the prescriptions for the patient will be automatically sent to Lloyds (as it is also EPS 2 enabled) by default instead. An alert is displayed in Consultation Manager to enable you to notify the patient of the change.

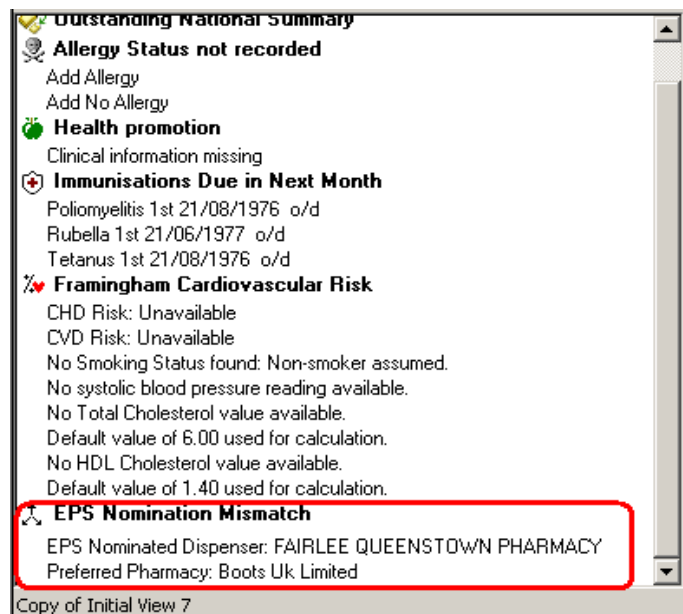
Reminder - The patient's pharmacy preferences can be viewed in **Consultation Manager - Patient Details - Preferences** tab.

****Important** Preferred Pharmacy - NACS Code**

For existing and new preferred pharmacy entries (added in Control Panel – File Maintenance - Organisations which can then be selected in Consultation Manager – Patient Details), it is strongly recommended that you add the preferred pharmacy NACS code in the identifiers tab. If you do not add the NACS code to the preferred pharmacy and the same pharmacy is selected as the patient's nominated dispenser with a different description, the mismatch alert will display in Consultation Manager. You can look up the NACS code in the nominated dispenser list in Consultation Manager – patient details.

Viewing and Processing the Mismatched Pharmacy Details

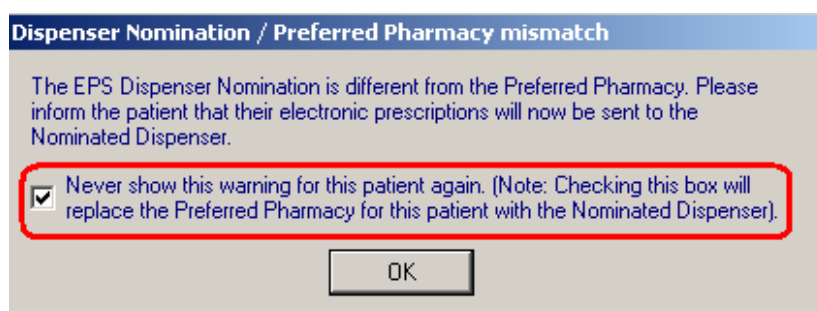
1. An EPS2 Nomination Mismatch alert, if applicable, is displayed in the alerts pane in Consultation Manager.



Alerts Pane – EPS Nomination Mismatch

2. To process the mismatch message, double click the message in the Alerts pane.
3. You are prompted: *"The EPS Dispenser Nomination is different from the Preferred Pharmacy. Please inform the patient that their electronic prescriptions will now be sent to the Nominated Dispenser. Never show this warning for this patient again. (Note: Checking this box will replace the Preferred Pharmacy for this patient with the Nominated Dispenser)."*
4. Check with the patient and make a selection:
 - Box Ticked - The patients Preferred Pharmacy is changed to match the Nominated Dispenser details. The alert will be removed from the Alerts pane.
 - Box Unticked –The alert will remain in the Alerts pane.

Note – All prescriptions will be sent to the Nominated Pharmacy/Dispenser regardless of whether the alert is processed or not. The alert reminds you to notify the patient that their pharmacy details have changed.



Dispenser Nomination/Preferred Pharmacy mismatch - Ticked

5. Click **OK** to finish.

Immunisations

Seasonal Flu Vaccination Read Codes

New seasonal Flu vaccination Read codes have been added in the Q1 2012 Read Dictionary release; these new Read codes will be used for QOF reporting and Seasonal Influenza Reporting to HPA and HPS. New audits incorporating these codes will be issued later this year.

The new Read Codes are used in QOF and Seasonal Flu reporting:

- **65ED** Seasonal influenza vaccination
- **65E20** Seasonal influenza vaccin given by other healthcare provider
- **8I2F0** Seasonal influenza vaccination contraindicated
- **8I6D0** Seasonal influenza vaccination not indicated
- **90X51** Seasonal flu vaccination declined

In addition a new consent code is used in Seasonal Flu call and recall:

- **68NVO** Consent given for seasonal influenza vaccination

Note - The Read Code 65E.. Influenza Vaccination is still present in the dictionary and although still eligible for Seasonal Flu reporting is **NOT** accepted in the QOF 2012-13 Business Rules.

When adding flu immunisations, 65E.. Influenza vaccination has been removed from the picking list and can no longer be selected from the Immunisation - Add data entry form. You are now advised to select either **Influenza Seasonal** (65ED. Seasonal influenza vaccination) or **Influenza – Seasonal OHP** (65E20 Seasonal influenza vaccin given by other healthcare provider).

The screenshot shows the 'Immunisation - Add' form with the following fields and values:

- Date Given:** 09 May 2012
- Given by:** Jupiter, Dr Sarah
- Private:**
- Read Term for Immunisation:** (empty)
- Type of Immunisation:** Influenza - Seasonal (highlighted)
- Stage:** (empty)
- Status:** Given
- Due Date:** (empty)
- Reason:** Routine Measure
- Nature of Risk:** (empty)

Immunisation - Add

Tests - Structured Data Area (SDA) Changes

Prostate Specific Antigen

The Prostate Specific Antigen structured data area (SDA) now resides in the Serology test category. The following Read codes have been added:

- 43ZF Total prostate specific antigen level
- 43ZG Ultra-sensitive prostate specific antigen level

CVD Calculators - Auto Recalculate

When viewing CVD Risk Calculators in Vision, it was necessary to recalculate the percentage values when changing between **Assign, Framingham and QRISK2**. This has now been updated so that when changing between the different calculators the percentage values are automatically recalculated and displayed.

The screenshot shows the CVD Risk Calculator interface. The 'Patient data' section includes fields for Smoking (Smoker, Cigarettes per day), Blood pressure (Systolic blood pressure), Weight (Height, Weight, BMI), Total cholesterol, HDL cholesterol, and Ethnicity. There are also checkboxes for Family History, Hypertension, Diabetes, ECG, Atrial Fibrillation, Arthritis, and Rheumatoid Arthritis. The 'Calculation performed:' dropdown menu is open, showing options for ASSIGN, Framingham, and QRISK2. The 'Results' section displays 'CVD Risk at 10 years 9%'. The 'Notes' section contains two yellow callout boxes: one stating 'The CVD risk is automatically calculated and displayed based on the current patient data.' and another stating 'The Recalculate button is greyed out unless amendments are made to the Patient data.' The 'Recalculate' button is indeed greyed out. The 'Legal information' section at the bottom states 'In Practice Systems accept no liability for clinical decisions based on the results of these calculations.'

Select the ASSIGN, Framingham or QRISK2 calculator.

The CVD risk is automatically calculated and displayed based on the current patient data.

The Recalculate button is greyed out unless amendments are made to the Patient data.

CVD Risk Calculator

CVD Risk Calculators - Annual Update

Every year the way that the Framingham, Assign, QRISK and CHADS2 risk scores are calculated is updated. This has resulted in the following changes:

- **Rheumatoid Arthritis, Chronic Kidney disease, Ethnicity** – These conditions have new Qualifying Read codes added to the existing lists.
- **Smoking** – The data used to calculate smoking risk has changed.
- **Pre-existing CVD** – Removal of some qualifying Read codes for Pre-existing CVD.

New Qualifying Codes

The table shows the new qualifying Read codes for the listed conditions, these have been added to the existing lists for these conditions.

Condition	New Qualifying Read codes
Rheumatoid Arthritis	<p>N041 Felty's syndrome</p> <p>N042* Other rheumatoid arthropathy + visceral/systemic involvement</p> <p>N044 Chronic post-rheumatic arthropathy</p> <p>N045* Other juvenile arthritis</p> <p>N04y Other specified inflammatory polyarthropathy</p> <p>N04y0 Rheumatoid lung</p> <p>N04y1 Sero negative arthritis</p> <p>N04y2 Adult-onset Still's disease</p> <p>N04yz Other specified inflammatory polyarthropathy NOS</p> <p>N04z Inflammatory polyarthropathy NOS</p>
Chronic Kidney Disease	<p>K01wz Congenital nephritic syndrome NOS</p> <p>1Z1* Chronic renal impairment</p>
Ethnicity	<p>9S10, 9S11 - British</p> <p>9S1, 9S12, 9S13, 9S14 - Other British Background</p> <p>9S6 - Indian</p> <p>9S8 - Bangladeshi</p> <p>9S2 - Caribbean</p> <p>9S3 - Black African</p> <p>9SC - Other Ethnic Group</p>

Note - * - Includes all Read codes in the hierarchy for that code.

Smoking

To calculate the risk score for patients smokers, the number of cigarettes per day on the last recorded Read coded entry is used. If this is not entered the last recorded Read code is referred to.

The Number of cigarettes per date is recorded within the Smoking structured data area (SDA) under Tobacco Consumption.

The screenshot shows the 'Smoking - Add' form with the following fields:

- Date of Recording: 25 April 2012
- Clinician: Jupiter, Dr Sarah
- Private:
- In Practice:
- Smoking Read Term: 1371.00 Never smoked tobacco
- Smoking Status:
 - Smoker
 - Never Smoked
 - Ex-Smoker
- Date Started:
- Date Stopped:
- Tobacco Consumption (highlighted in red):
 - Cigarettes per day:
 - Cigars per day:
 - Ounces of Tobacco per day:

Smoking SDA

QRISK Smoking Category	No of Cigarettes per day
Non-smoker	By Read code
Ex-smoker	By Read code
Light smoker	Under 10 cigarettes Under 2 cigars Under 25 oz tobacco
Moderate smoker	Between 10 and 19 Between 2 – 5 cigars Between 25 – 50 oz tobacco
Heavy smoker	Over 19 cigarettes Over 5 cigars Over 50 oz tobacco

Example:

The patient's last smoking entry has the Read code 1375 Heavy smoker – 20/39 cigs/day and the value 2 added to the tobacco consumption, cigarettes per day box.

QRISK calculates this patient as a light smoker based on the consumption recorded, not the Read code.

Pre-existing CVD

ASSIGN, Framingham and QRISK calculators are not valid for use with patients who have pre-existing CVD conditions.

The following Read codes are no longer regarded as being pre-existing CVD for the risk calculation:

- **G58*** – Heart Failure
- **G700*** – Aortic atherosclerosis
- **792*** – Coronary artery operations
- **G73*** – Other peripheral vascular disease (but not **G730**)
- **G71*** – Aortic aneurysm

SCI Gateway Release 12.3

Introduction

SCI Gateway has introduced several new message types that can be utilised through Vision. The new message types are:

- **Advice Request** – An outgoing message you create that enables you to ask advice from consultants. See [Advice Request](#) on page 18.
- **Advice Response** – An incoming message replying to an advice request. See [Advice Response](#) on page 20.
- **Discharge Notification** – An incoming message notifying you of patient discharge details. See [Discharge Notification](#) on page 21.
- **Supplementary** – A message you can create that acts as an appendage to a pre-existing Advice Request or Referral. See [Supplementary Message](#) on page 22.

The new messages can be utilised by practices that integrate with:

Note – Although these messages are available, please check with your Health Board to see if they are being used in your area.

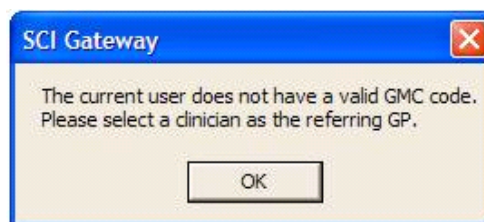
- **SCI** – Scottish Care Information
- **WCCG** – Welsh Clinical Communications Gateway
- **Northern Ireland CCG** – Northern Ireland Clinical Communications Gateway

Note – Northern Ireland can only use the new **Supplementary** message at this time.

The use of these new message types results in an improvement in patient safety and quality of care, as the communication of clinical data is quicker, more secure and the quality of the information itself is increased.

GMC Codes for Referring GPs

Please ensure that you have added the GMC codes for all referring GPs to Control Panel – File Maintenance – Staff. When no clinician is selected or a user without a GMC code attempts to create a SCI referral, the following message is displayed:



SCI Gateway User Guides

For the most up-to-date user guides explaining the function of your Gateway please refer to the following:

Scotland - http://www.sci.scot.nhs.uk/training/train_docs.htm

Wales - <http://www.wales.nhs.uk/nwis/page/52545>

Northern Ireland – Refer to the **Help** option within the CCG menu.

A Summary of the New Message Types

To access the new message types within your Gateway:

1. From Consultation Manager, select **Summary – SCI Gateway, WCCG** or **CCG** depending on your country.
2. Log on to your Gateway in the usual way.
3. You can now access all the new functionality from the list on the left side of your home screen:
 - **New Message** - Advice Request.
 - **Messages** - Advice Response, Discharge Notification and Supplementary Message.

Note – CCG only displays **Supplementary** at this time.



List from SCI Gateway

Advice Request

Advice Request enables you to send a message to a specific Hospital, Department or Consultant asking for advice on a specific patient, and record the query directly into the patient's record. The message includes:

- The free text request you enter.
- The full patient demographic details.
- A list of current and recent medication – The list can be edited if required.
- Details of the requesting GP and practice.

To send an Advice Request:

1. From Consultation Manager, with or without a patient selected click on **Summary – SCI Gateway** or **WCCG**.
2. From the Gateway menu, select **New Message – Advice Request**.
3. If you have not selected a patient within Consultation Manager, the Select Patient screen is displayed. Select the patient required in the usual way.
4. Complete the **Advice Requested** and check the **Patient Details**, **Medication** and **Administration** tabs have completed.

Note – Pink areas are mandatory.

ABALUNAH, ADAM · 22 Sep 1965 · 2209653738 · SCI Gateway - Advice Request · Microsoft Internet Explorer provided by In P...

Advice Patient Details Medication Administration

Advice Request Protocol (v1.0)

Advice

Advice Requested*

Consent to share Yes No

Document sensitivity Sensitive Highly Sensitive

Cancel Attach Preview Letter Park Send

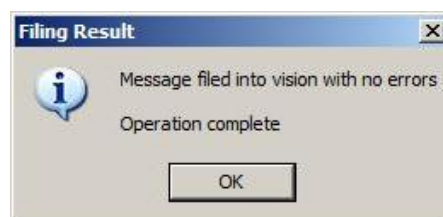
Advice Request

5. Once the request is complete, click on **Send**.
6. Click on **Proceed**.
7. A "Are you sure that you want to send the message now? If so please click on OK" message is displayed, click **OK**.



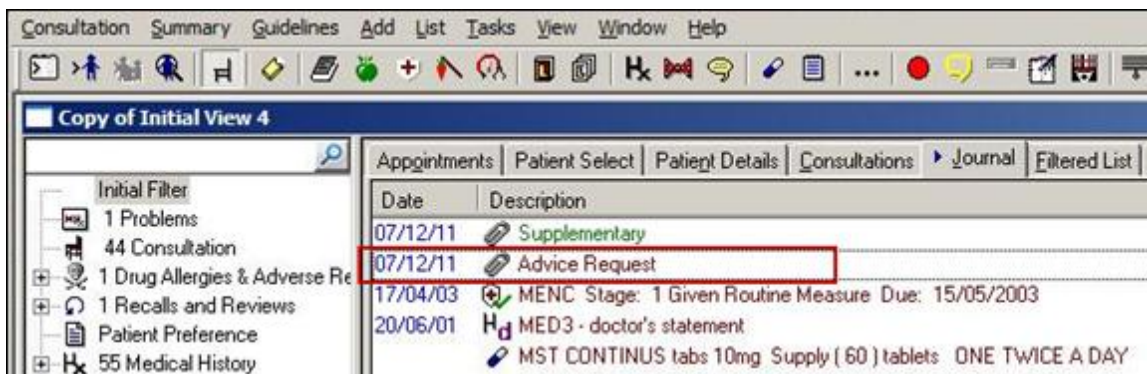
Window Internet Explorer message

8. The request is now filed to the patient record. A confirmation is displayed stating "Message filed into Vision with no errors", Click **OK**.



Filing Result

9. The Advice Request is filed to the patient's record as an **Attachment** (see [Viewing an Attachment](#) on page 24 and [Editing an Attachment Within Vision for Identification Purposes](#) on page 25).



Consultation Manager – Advice Request

Note – If you are writing records back to Vision from your Gateway without first opening the patient and a Consultation, the records are recorded in a **Third Party** consultation.

Advice Response

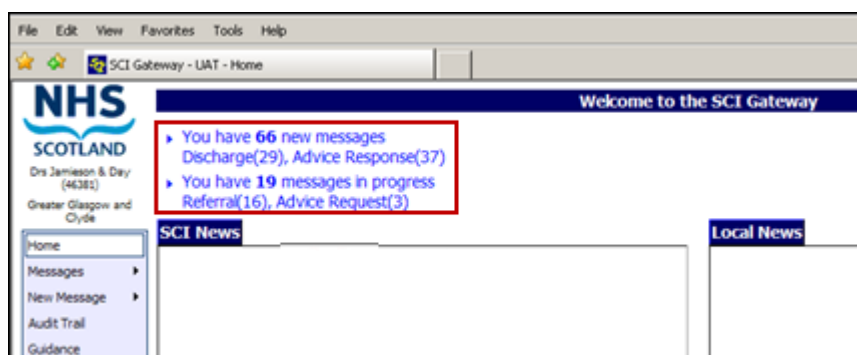
In response to an Advice Request, a consultant can send an Advice Response. These are received by the Gateway, but can only be processed by you checking your messages.

Note – It is good practice to check for messages in your Gateway daily. Messages are sent to the practice account so any member of staff that has Gateway rights can check and process all the messages.

Responses to Advice Requests can be written to the patient record via the Gateway. To access the responses through Vision:

1. From Consultation Manager, with or without a patient selected click on **Summary – SCI Gateway** or **WCCG**.
2. If you have selected a patient within Consultation Manager, any Responses for that patient are displayed within the Gateway screen.

If you have not selected a patient within Consultation Manager, and there are Advice Responses, a link is displayed at the top of the Home page. Click on the link to display. Responses can also be displayed from the Messages menu within the Gateway.



SCI Gateway Home page

3. Double click on the item required, **Advice Response** is displayed.
4. Click **Import** to write back to the patient's record within Vision.
5. A "The Advice Response has been successfully imported into Vision" message is displayed.



Successful import message

6. Click on **OK**.
7. The Advice Response is filed to the patient's record as an **Attachment**.



Consultation Manager – Advice Response

Discharge Notification

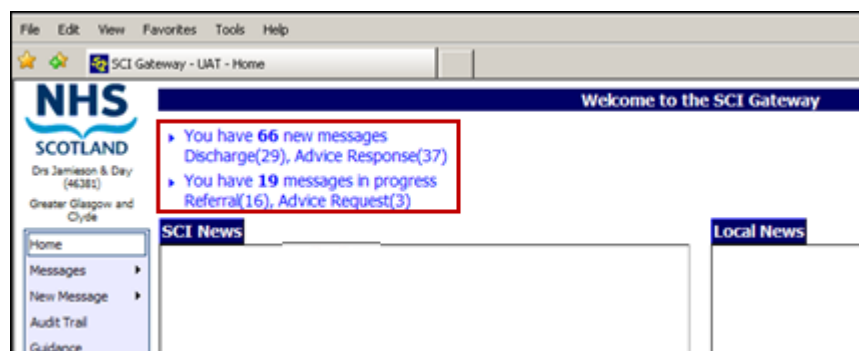
When a patient is discharged from a hospital, the discharge notice can be sent to your Gateway. These are received by the Gateway, but can only be processed by you checking your messages.

Note – It is good practice to check for messages in your Gateway daily. Messages are sent to the practice account so any member of staff that has Gateway rights can check and process all the messages.

Discharge Notification can be written to the patient record via the Gateway. To access the discharges through Vision:

1. From Consultation Manager, with or without a patient selected click on **Summary – SCI Gateway** or **WCCG**.
2. If you have selected a patient within Consultation Manager, any Discharge Notifications for that patient are displayed within the Gateway screen.

If you have not selected a patient within Consultation Manager, and there are Discharge Notifications, a link is displayed at the top of the Home page. Click on the link to display. Discharges can also be displayed from the Messages menu within the Gateway.



SCI Gateway Home page

3. Double click on the item required, the **Discharge Notification** is displayed.
4. Click **Import** to write back to the patient's record within Vision.

5. A "The Discharge has been successfully imported into Vision" message is displayed.



Successful import message

6. Click on **OK**.
7. The Discharge Notification is filed to the patient's record as an **Attachment**.




Consultation Manager – Discharge Notification

Supplementary Message

A Supplementary message is an additional message to one that has already been sent. A Supplementary message can be attached to either:

- Advice Request
- Referral

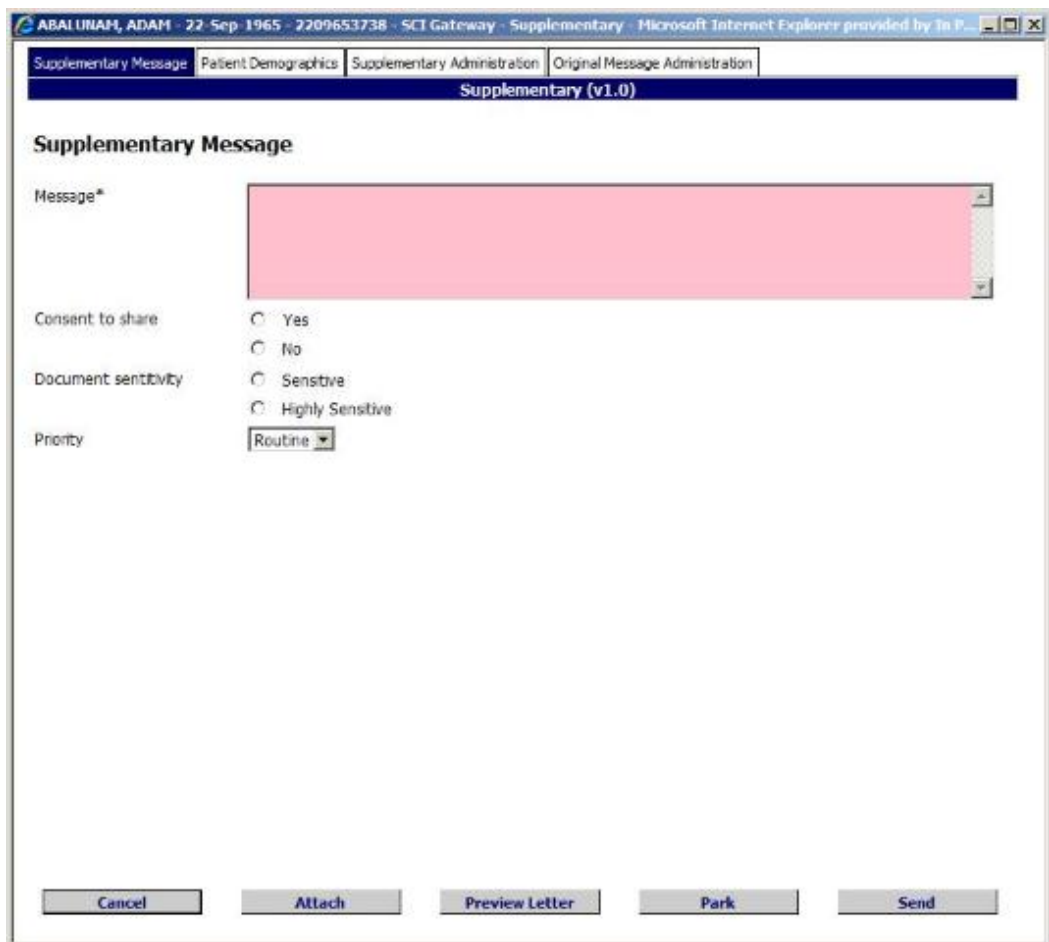
To send a Supplementary message:

1. From Consultation Manager, with or without a patient selected click on **Summary – SCI Gateway, WCCG or CCG**.
2. If you have selected a patient within Consultation Manager, any messages for that patient are displayed within the Gateway screen.
If you have not selected a patient within Consultation Manager, you can list all the messages from the Messages menu.
3. Select **Message – Referral** or **Advice Request**, if a patient was selected in Vision, the work list will display only messages for that patient. If no patient was selected in Vision messages for all patients are displayed.
4. Click on **Click here for options**  to the left of the message concerned and select **Send Supplementary**.



SCI Gateway Send Supplementary

- Supplementary is displayed; type the additional information into **Message** as required.



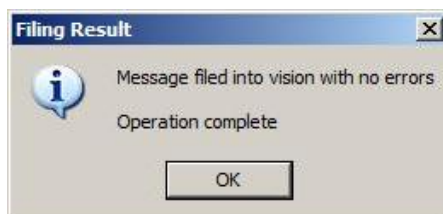
Supplementary Message

- Click on **Send**.
- Click on **Proceed**.
- A "Are you sure that you want to send the message now? If so please click OK" message is displayed, click **OK**.



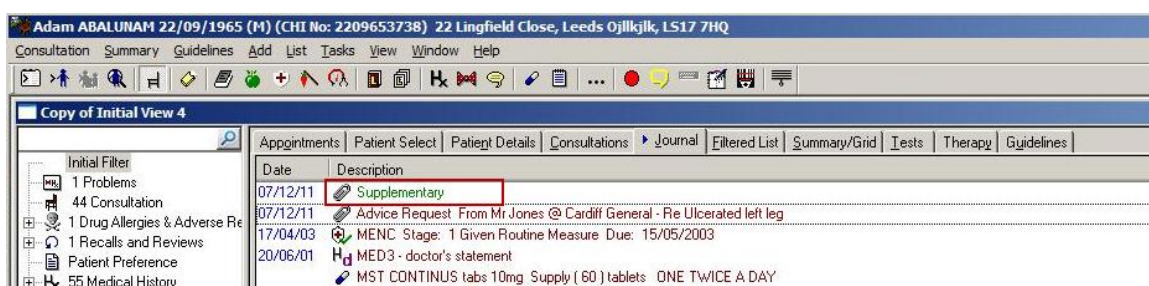
Window Internet Explorer message

- The request is now filed to the patient record. A confirmation is displayed stating "Message filed into Vision with no errors", Click **OK**.



Filing Result

- The Supplementary is filed to the patient's record as an **Attachment**.



Consultation Manager – Supplementary message

Viewing an Attachment in Consultation Manager

The Advice Request, Advice Response, Discharge Notification and Supplementary messages are all written back to Vision as attachments. To view the messages from within Vision:

- From Consultation Manager, select the patient with or without a consultation open.
- Find the Attachment you require, right click and select **Item View**.

Remember – You can click on **Miscellaneous** within the navigation pane to list all **Multimedia Attachments**.

- Attachments - Display** is displayed.



Attachment – Display

- Click on **View** to display the Attachment submitted.

Editing an Attachment Within Vision for Identification Purposes

Advice Requests, Advice Responses, Discharges and Supplementary items are filed in Vision as Attachments, and can therefore be tricky to identify especially on a patient with several requests. It is therefore recommended that you enter a summary to aid in the identification of the message:

1. From Consultation Manager, select the patient ensure a consultation is open.
2. Find the Attachment, right click and select **Edit**.

Remember – You can click on **Miscellaneous** within the navigation pane to list all **Multimedia Attachments**.

3. **Attachments - Update** is displayed.
4. In **Summary**, type a summary of the item.
5. Click on **OK** to save and close.
6. The Attachment is now easily identifiable.



Consultation Manager – Advice Request with Summary

Note – This is for within Vision only, it does not update the Gateway record.

Additional Features

Ethnicity

The Ethnic Origin section of a Gateway Referral template is now automatically completed from the information recorded in Vision. To utilise this facility you must use Read codes starting **9S...** when recording ethnicity within Vision. To add an ethnicity record to Vision:

1. From **Vision – Consultation Manager**, select the patient and open a consultation if one does not open automatically.
2. In Read Term – Add enter **#9S** and press enter.
3. Press **<F3>** to view the Read Dictionary.
4. Double click on **+** next to **9S... Ethnic groups(census)**.
5. **9S... Ethnic groups(census)** is expanded, double click on the ethnicity required for your patient.
6. **Read Term – Add** is completed with the Read code and description selected, click on **OK**.
7. **History – Add** is displayed; enter any notes into **Comment** as required.
8. Click on **OK** to save and close.

The maximum number of characters in **Ethnic Origin** is 70. If the ethnicity within Vision is longer than 70 characters, the description is truncated within the referral.

Search and Report Changes

Miquest - New Referral Mappings

At the request of Primis, referral Read codes and Specialities are now included in Miquest queries. See Miquest on-screen help for further details.

Update to Tab Separated Exports

When exporting therapy data to Excel in Tab Separated format, the therapy and dispenser notes are now displayed in the dosage column. Prior to DLM 410 they were erroneously displayed in the PAT_ID column.

PAT_ID	A	B	C	D	E	F	G	H
		CONSULT_TOPIC		CATEGORY	CLINICIAN	EVENTDATE	ENDDATE	INPRACTICE
		2135	3596...	1	Interventi Dr Alison F.	26/02/2010		Yes
		2190	359692	1	Interventi Dr Alan Smith	27/08/2010		Yes
		5448	359621	3	Interventi Dr Alan Smith	02/03/2010		Yes
		5448	359683	1	Interventi Dr Alison Hill	05/08/2010		Yes
		5448	359724	1	Interventi Dr Alan Smith	05/01/2011		Yes
			30			30 capsule(s)	In practice	
		8559	359605	1	Interventi Dr Alan Smith	12/02/2010		Yes
		9523	359682	1	Interventi Dr Alison Hill	05/08/2010		Yes

Exported Therapy and dispenser notes pre - DLM 410

FORM	STRENGTH	READ_CODE	BNF_CODE	PRESCRIBER	DOSAGE	QUANTITY
tab	10	bxi1.00	2120400		TAKE ONE DAILY	28
tab	2.5	f331.00	6010201		TAKE ONE DAILY	28
tab	300	bk53.00	2050502		TAKE ONE ONCE DAILY	28
tab	100	bd36.00	2040000	Dr Sarah J	Take one once daily	28
tab	2.5	b211.00	2020100	Dr Sarah J	take one each morning	28
dro	40		4030300		USE DAILY	15
dro	40	da97.00	4030300		USE DAILY	15
tab	40	b51y.00	2020400	Dr Fiona V	1 TABLET ONCE A DAY	28
tab	10	eiY1.00	5030301		1 TABLET ONCE DAILY	30
tab	40	b51y.00	2020400		1 TABLET ONCE A DAY	28
tab	25	f921.00	6020100	Dr Fiona V	1 TABLET ONCE A DAY	28
cap	200	j2pj.00	10010100		1 THREE TIMES A DAY WHEN REQUIRED	30
tab	400	j282.00	10010100		TAKE ONE THREE TIMES DAILY	84
tab	5	f332.00	6010201		TAKE ONE DAILY	28
cap	120	a4d4.00	1020200		TAKE ONE THREE TIMES DAILY	60
tab	10	dia6.00	4070100		TAKE 1 OR 2 FOUR TIMES DAILY	100
inh	5	c71k.00	3030100		TAKE ONE FOUR TIMES DAILY	112
tab	0	bl8M.00	2060200		TAKE ONE DAILY	28
tab	500	di21.00	4070100		AS DIRECTED Instalments: this is a test Notes for dispenser: this is a test Notes for patient: Take as directed	100

Exported Therapy and dispenser notes with DLM 410

England – GP2GP Changes

A number of changes have been made to GP2GP. See below for details:

Issues Resolved:

- There have been instances where duplicate GP2GP responses and record transfers have been generated for the same transfer. This problem has now been resolved.
- On receipt of foreign record imports Mail Manager mistakenly displayed import warnings implying code conversions had occurred and advising that the record(s) needed checking. This problem has now been resolved and this type of translation warning will no longer be displayed.

Update to Attachments Included in GP2GP Message

It is now possible to send and receive .docx (Microsoft Office 2007 or higher) documents; the attachments can now be opened and viewed.

Allergy Changes

Where an allergy record is received from a non-Vision system without an attached drug it is now imported as a non-degraded allergy record. For example, if an allergy record is imported with a Read code of 14L..00 H/O: Drug allergy, this Read code will be displayed in the history entry. The record will no longer be degraded to 9bJ..00 Transfer-degraded record entity.

The screenshot displays the GP2GP software interface. The main window shows a list of medical history entries with columns for Date, Description (Medical History), Priority, and Clinician. The entries include patient registration by transfer of GP to GP electronic record and letters from outside agencies. A specific entry for 17/08/09 is highlighted, showing 'H/O: drug allergy' with a priority of 3 and clinician GP2GP.

Date	Description (Medical History)	Priority	Clinician
23/05/12	H Patient registration by transfer of GP to GP electronic record	3	BAILE
	H Letter from outside agency Diabetes Niu-Surgery Regression testing DLM250 QMT-1606 dennis bergkamp	3	GP2GP
	H Patient registration by transfer of GP to GP electronic record	3	
22/05/12	H Patient registration by transfer of GP to GP electronic record	3	
21/05/12	H Patient registration by transfer of GP to GP electronic record	3	
	H Patient registration by transfer of GP to GP electronic record	3	
17/08/09	H/O: drug allergy	3	GP2GP

The bottom window, titled 'History - Display', shows details for the selected record. It includes fields for Event Date (17 August 2009), Clinician, and Read Item for Characteristic (14L..00 H/O: drug allergy). The Type of Characteristic is set to Symptom and the Episode Type is <None>.

Imported Allergy Record

Pathology Changes

Degraded Test Results

Test results which were previously imported as notepad entries are now added to the notes field of the corresponding test result. The result qualifier is also shown and is no longer imported as a history entry.

Results Outside Reference Range

Previously pathology results with a test reference of "outside reference range" where shown with the result qualifier of "None" and the "outside reference range" message was added to the notes field. Now all test results with this reference are filed with this result qualifier.

The screenshot displays a pathology record interface. At the top, a list of test results is shown, including:

- Serum total protein = 79 g/L
- Serum albumin = 35 g/L
- Serum calcium = 2.23 mmol/L
- Corrected serum calcium level = 2.38 mmol/L
- Serum inorganic phosphate = Outside ref range U=Unsuitable for analysis** (highlighted in blue)
- Serum alkaline phosphatase = 130 IU/L
- Urea and electrolytes = (EMISTest) - Normal - No Action
- Serum urea level = 3.2 mmol/L
- Serum sodium = 141 mmol/L
- Serum potassium = U=Unsuitable for analysis
- U=Unsuitable, due to delay in delivery.
- Serum creatinine = 85 umol/L
- Serum C reactive protein level = 16 mg/L Outside ref range (EMISTest) - Abnormal - No Action
- Serum iron level = 4 umol/L Outside ref range (EMISTest) - Abnormal - Contact Patient

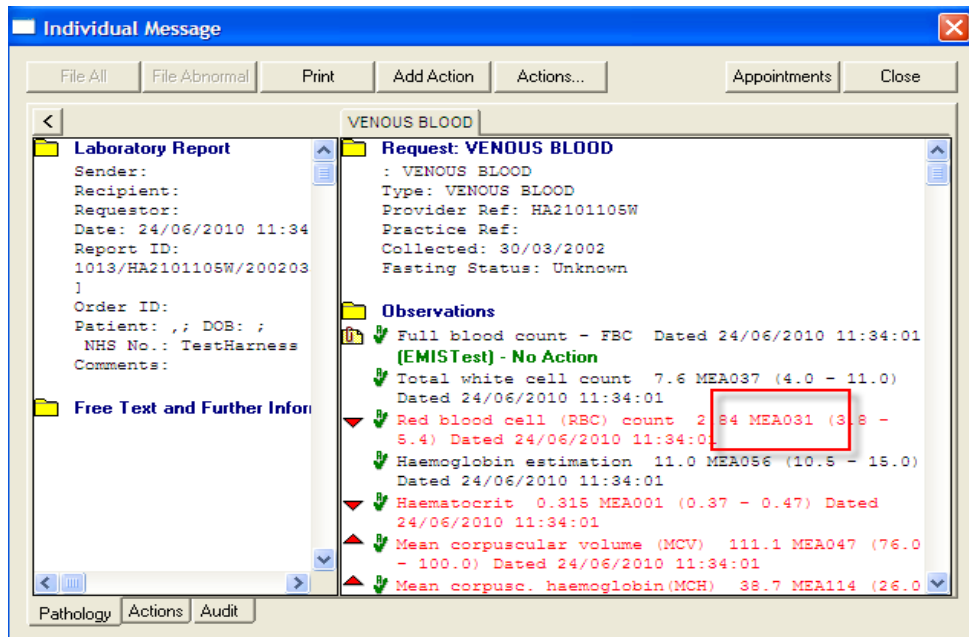
Below the list, the 'Serum Phosphate - Display' window is open. It shows the following details:

- Date of Test Result: 20 January 2010
- Clinician: [Empty]
- Private:
- In Practice:
- Read Term: 4419.00 Serum inorganic phosphate
- Value: [Empty]
- Unit of Measure: <None>
- Result Qualifier: **Outside ref range** (highlighted with a red box)
- Notes: U=Unsuitable for analysis
- Normal Range: From: [Empty] To: [Empty]
- Basis of Normal Range: <None>

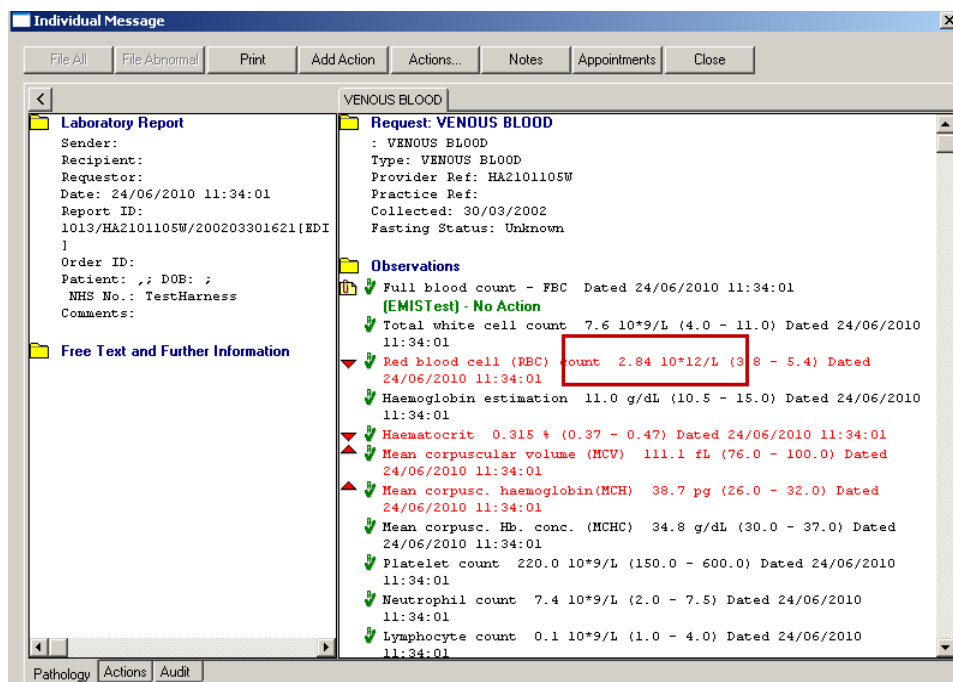
GP2GP Pathology record – Outside Reference Range

Pathology Units Change

Previously, imported pathology reports showed the units label rather than the units text eg MEA031 is shown instead of 10*12/L in the original message. This is now changed, the unit text (10*12/L) is displayed in the original message not the units label (MEA031).



Pathology Message with Units Label Displayed



Pathology Message with Units Text Displayed

Consultation Manager Tab Changes

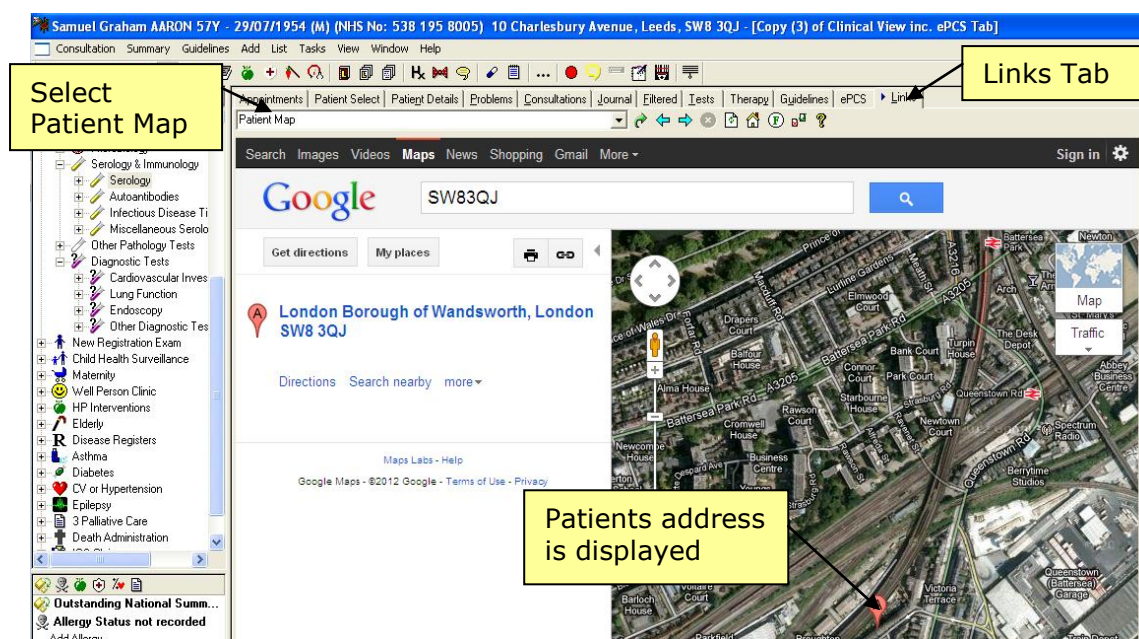
Current Consultation Tab

The current consultation tab no longer displays on your screen after editing the Vision 3 view.

Patient Links Browser – Map

The Patient Links browser has an option to view Patient Map; this uses the current patient's postcode to show a map to the patients address.

The default map is now Google maps, as Multimap is no longer available. See Consultation Manager on-screen help for details of how to set up a tab for Patient Map.



Northern Ireland

Pharmacist Prescribing Number

From DLM 410, for practices in Northern Ireland, Vision now accepts 4 and 5 digit pharmacist prescribing numbers.

NI ECS – Repeat Changes

The following prescribing details are now included in the ECS extract:

- Repeat Dispensing
- Medication issued outside of the Practice

Adding Repeat Dispensing Therapy

Repeat Dispensing enables you to issue a repeatable prescription and a series of 'batch issues' of up to a year's duration. The repeatable prescription is retained by the pharmacy when signed by the GP. The batch issues are post-dated, the patient keeps the remaining batch issues or asks the pharmacist to keep them on his/her behalf, until another issue of the medication is required.

Approval is required from your local Health Board prior to enabling Repeat Dispensing.

NOTE – To turn on Repeat Dispensing go to Consultation Manager, then **Consultation – Options – Setup – Therapy tab** and tick the **Enable Repeat Dispensing** box. You can also define the default interval.

To add a Repeat Dispensing prescription:

1. In **Consultation Manager**, select the patient - Make sure a consultation is started
2. Click **Therapy – Repeats** or press **F5**. The patients list of repeat masters is displayed according to the filter buttons used. The display may include valid, inactive and expired items depending on your settings.
3. To add a new repeat master start typing the name of the drug eg Co-amilof, the **Repeat Master – Add** screen is displayed. Alternatively, press **Esc** to open the screen then type the drug name. Press **Enter** to find the drug.
4. Tick the **Batch** box to turn the repeat into a new batch prescription.
 - An **Interval** box appears, this denotes the interval between issues, this can be altered using abbreviations eg 2m (two months) 6w (six weeks) etc.
 - The **Repeats** box defaults to 6 issues, this can be amended, but cannot exceed 1 year.
 - The **Repeat Until Date** is populated showing the date the last issue expires.

Repeat Master - Add

Date Prescribed: 27 March 2012 Prescriber: Venus, Dr Fiona Source of Drug: In practice

Drug: Co-amilofruse 5mg/40mg tablets

Quantity: 28 Preparation: tablet Pack Size: Treat Days: Repeats: 6 Batch:

Dosage: 1 TABLET ONCE A DAY Interval: 28 days

Drug Class: Potassium-sparing diuretics with other diuretics

No known allergies of H/O: drug allergy

Repeat Master Add – Batch Prescription

5. Click **OK**. Read and deal with any drug warnings. The Batch Repeat prescription is added to the Repeat Master list.
6. When issued and printed a batch prescription and a series of issue prescriptions are produced. The date of the issues will be calculated from the date of issue plus the interval eg 28d.
7. The Repeat Master is displayed on the **Therapy - Repeats** tab with the expired Batch Prescription icon and the date of last issue.

Appointments		Patient Select		Patient Details		Problems		Consultations		Journal		Filtered		Tests	
Therapy				Guidelines				ePCS							
Current		Scripts		Repeats		CMS									
Medication review with patient Due 07 May 2007															
Last Issued	Drug	Iss	Max	Dosage											
22/05/2012	Levothyroxine sodium 25microgram tablets	3	3	1 TABLET ONCE A DAY											
14/08/2012	Co-amilofruse 5mg/40mg tablets	6	6	1 TABLET ONCE A DAY											

Repeat Masters – Issued Batch Prescription


Adding Therapy Details not Issued at Practice



Details of medication issued to patients by Consultants, A & E, or Out-of-Hours (OOH) should be added to the patient's therapy records. This ensures that all medication issued to the patient is included in the ECS extract.

To add Therapy Details not issued at the Practice:

1. In **Consultation Manager**, select the patient - Make sure a consultation is started
2. Click **Therapy – Repeats** or press **F5**. The patients list of repeat masters is displayed according to the filter buttons used. The display may include valid, inactive and expired items depending on your settings.
3. To add a new repeat master start typing the name of the drug eg ibupro, the **Repeat Master – Add** screen is displayed. Alternatively, press **Esc** to open the screen then type the drug name. Press **Enter** to find the drug.
4. Click **Source of Drug** and select one of the following options from the drop-down menu:
 - Self-Prescribing
 - By Hospital
 - By Health Carer in another Practice
 - By GP in another practice

Repeat Master Add – Source of Drug

5. Check the details match the information given, eg dosage, quantity etc. Type the number **1** in the **Repeats** box.
6. Click **OK** to finish.
7. The added Repeat Master record will be listed as expired on the Repeats tab; it is shown with the Bowtie  icon.

Appointments		Patient Select		Patient Details		Problems		Consultations		Journal		Filtered		Tests	
Therapy				Guidelines				ePCS							
Current		Scripts		Repeats		CMS									
Medication review with patient Due 07 May 2007															
Last Issued	Drug	Iss	Max	Dosage											
<input type="checkbox"/> Not Issued	 Ibuprofen 200mg capsules	1		1 THREE TIMES A DAY w REQUIRED											
<input type="checkbox"/> 22/05/2012	 Levothyroxine sodium 25microgram tablets	3	3	1 TABLET ONCE A DAY											

Therapy Repeats – Source of Drug set to By Hospital

NOTE – The prescription cannot be issued or printed unless the source of drug is set to In Practice.

Vision Online Services/My Health Online

Non-Viewable Slot Types Update

Prior to DLM 410, non-viewable appointments could be viewed in Vision Appointments only. This has now changed; non-viewable slots are viewable in Consultation Manager and 3rd party applications. However, they remain unavailable to VOS; patients cannot view or book non-viewable slots in VOS.

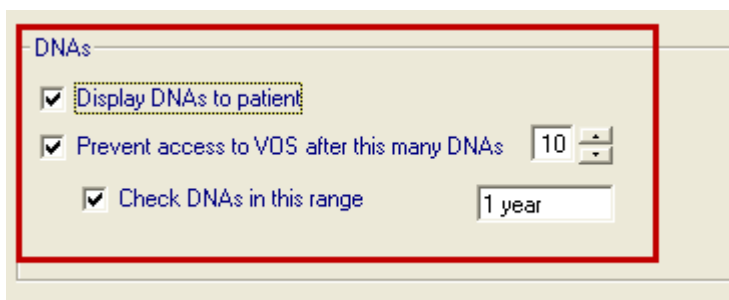
All VOS registered patients receive confirmation emails every time an appointment is booked in Vision or VOS. This has been updated; Non-viewable slots do not generate a confirmation email on booking.

Hint – Practices using appointments for internal messages should ensure the slots used are Non-Viewable. These slots are then viewable throughout Vision and 3rd party applications, but cannot be seen by the patient in VOS.

Did Not Attends (DNA) Update

A new Display DNAs to Patient option has been added to the DNA area in Control Panel – Vision Online Services – Online Appointments Configuration – General Tab. The **Display DNAs to patient** option enables patients to see their DNA'd appointments when they are logged into Vision Online Services/My Health Online. This option is deselected by default.

Note – Practices who use the Appointments slots to send internal messages regarding the patient, should be aware that such slots will count as DNA'd appointments if they have not been marked with an arrive, start or seen consultation time.



The screenshot shows a configuration window titled "DNAs" with three checked options: "Display DNAs to patient" (highlighted with a red box), "Prevent access to VOS after this many DNAs" (set to 10), and "Check DNAs in this range" (set to 1 year).

Control Panel – VOS Config – General Tab