

Vision Business Continuity (VBC)

In Practice Systems Ltd



Table of Editions and Contents

| Date | Version | Contents | Output |
|-------------|----------------|-------------------------------------|---------------|
| 17.05.06 | PVE 1.1.1 | VBC (Vision Business Continuity) | pdf |
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| 13.08.07 | | Updated screenshot - To Open Vision | pdf |
| 21.01.08 | | No prescribing support decision | Pdf |
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Vision Business Continuity

Overview

Vision Business Continuity (VBC) is designed to provide off-line access to the practice clinical data in the event that the full Vision system is not available. The software is designed specifically for deployment at Vision Enterprise System (VES) practices (formerly Bureau Sites).

Vision Business Continuity (VBC) is installed on nominated local desktops and provides the same functionality as Pocket Vision.

The software is not designed to replicate the complete functionality of Vision, but provides read and write access to key clinical data, acting as an 'insurance policy' for the practice.

The solution utilises the same infrastructure and components used by Vision Enterprise.

At the practice, Vision Business Continuity (VBC) requires a Pocket Vision Server (PV Server) workstation. This controls the upload/download of data between the Vision Enterprise System and the practice.

The PV Server will update automatically each night at a time scheduled by the installation engineer, typically in the early hours of each morning. This update is a copy of the main Vision System data taken from the previous day.


To allow these updates to run, the PV server MUST be left on overnight.

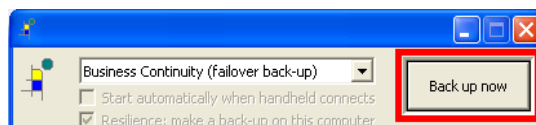
Please ensure that when any technician is inspecting your computer system, they are made aware which machine is your designated Pocket Vision Server and VBC server.

Synchronising Data and VBC

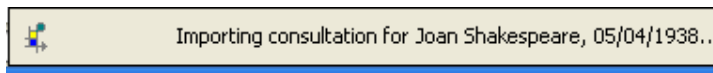
With Vision Business Continuity (VBC), clinical work can continue with minimum disruption in the event of a communications failure between the Practice and the Data Centre. This will allow the use of the Vision data from the last consultation of the previous day, allowing you to carry on dealing with patients until a connection to the Vision Data Centre is re-established.

Each VBC client workstation will need to be synchronised with the PV Server on a **daily basis** to ensure that the VBC data is up to date in the event that you need to use it and to make sure any data added in VBC is uploaded to Vision. To synchronise:

1. Double-click on the Sinch  icon (each VBC client workstation has two icons labelled Pocket Vision and Sinch which are either located on the local desktop or in a folder on the local desktop labelled Business Continuity).
2. Click on the **Back up now** button.



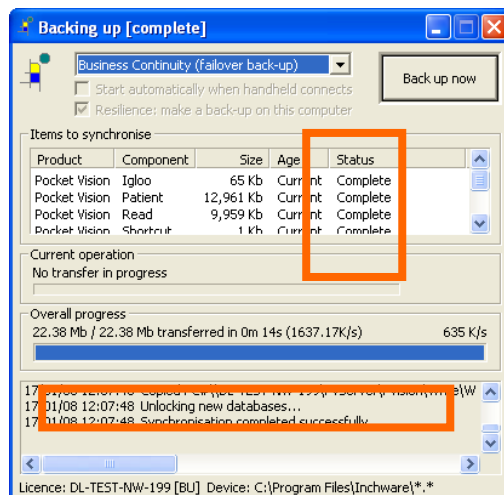
3. The synchronisation/backup will run through. If any Patient Data is sent from VBC to Vision during the synchronisation process, you will be asked to sign into Vision and you will see the following screen near your task bar which displays the patient details of the records being imported:



Next, please check whether the synchronisation was successful.

Successful Synchronisation

If the synchronisation process was successful, all status will display as complete and *Synchronisation completed successfully* will display in the log file at the bottom of the window.



Re-Synchronisation/VBC extraction

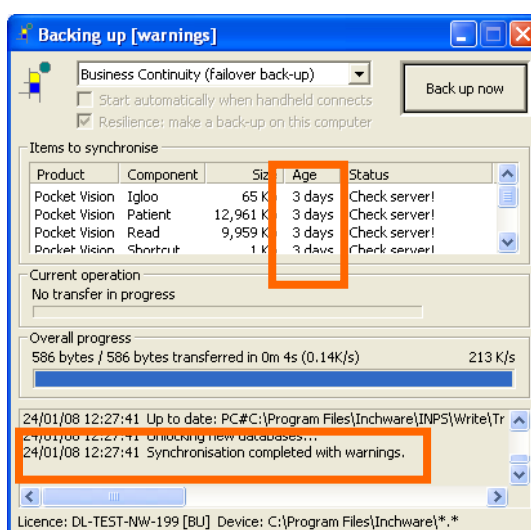
After using VBC, once your access to the Vision Data Centre has been restored, you **MUST** re-synchronise the VBC data with the Vision data. This is done using the same method as above; using the Sinch icon on your local desktop or within the Business Continuity folder on your desktop. Note that this data will appear within the Vision data (e.g. Consultation Manager) immediately. Data from Vision will not appear in VBC until the day after it was added.

Note: The synchronisation must be run **DAILY** on each workstation that has used Business Continuity.

Unsuccessful Synchronisation

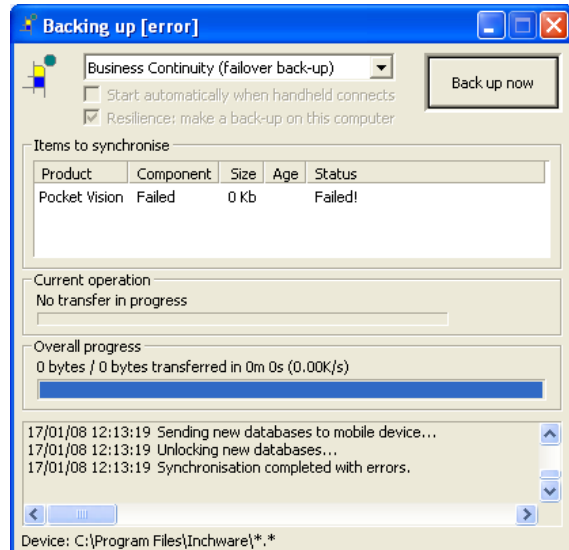
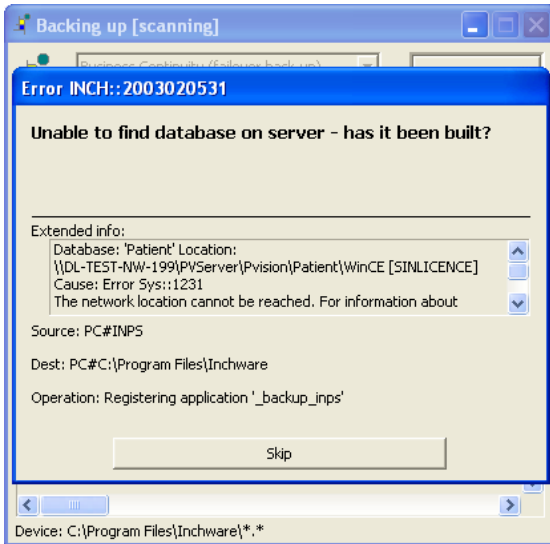
Database older than 3 days

Check the last synchronisation status. If you find that the backup is successful but the database on the PV server is 3 days old, shown in the **Age** column in the **Items to Synchronise** window, and the message *Synchronisation completed with warnings* displayed in the log window, your synchronisation process is not working properly. You must call the Helpline to rectify this on your dedicated support number.



Unable to find database on server

If you receive the message *Unable to find database on server*, there are issues preventing your machine from connecting to the PV server.



Once you click on **Skip**, you will see *Synchronisation completed with errors* message in the log window. Please call the helpline on your designated number to rectify this error.

Red Sinch Icon in the notification area of Windows Taskbar



The Sinch icon will flash red in the notification area of the Windows as an indicator of any problems i.e. if the backup is out of date, or connection to the PV server has been lost.

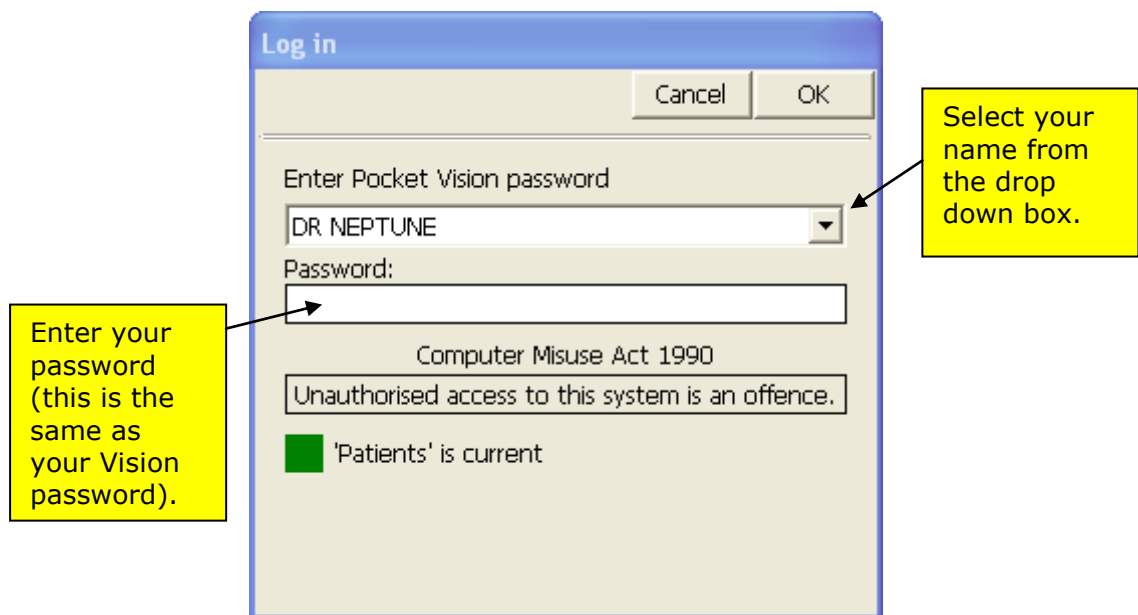


Changing Passwords

When changing your password in Vision, the changed password will not take effect in VBC until a synchronisation is run.

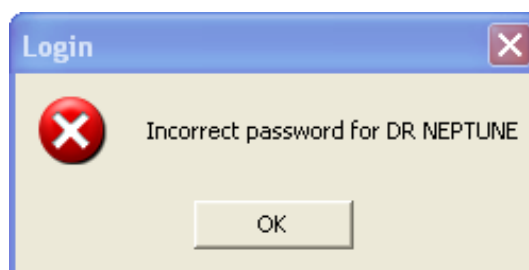
Logging into Vision Business Continuity

1. To login to Vision Business Continuity, double click on the Vision Business Continuity Icon  on the local desktop (depending on how your VBC was configured, you might find this icon within the VBC folder  on your local desktop).
2. Select your name or initials from the drop down list and enter your VBC password. This is the same as your Vision user name and password.



Note Login credentials and preferences (i.e. number of login retries allowed) for VBC are the same as your settings within Vision.

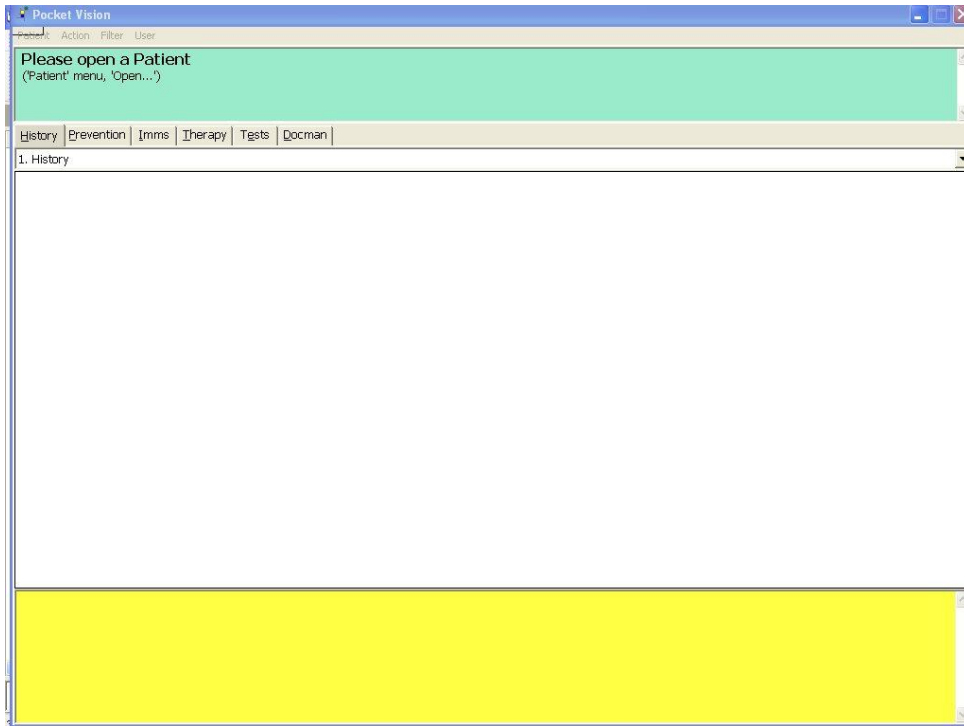
If you enter your password incorrectly you will be prompted with the following screen:



Click OK and retry.

If you have recently changed your password in Vision, the password change will not take effect in VBC until you have run a synchronisation.

3. If login is successful, you will be taken to the VBC main screen where you are prompted to select a patient:



VBC Main Screen

Note If the workstation is left untouched or unused for a short period of time, you will be forced to log back in.

Selecting a Patient

All applied, permanent and non-expired temporary resident patients are available for selection in VBC. Patients who have a registration status in Vision as Transferred out are not synchronised and therefore are not accessible from VBC.

To select a patient:

1. Select **Patient – Open**.

| Patient | Action | Filter | User |
|------------------|--------|--------|------|
| Open... | | Ctrl+O | |
| Exit and log out | | | |

2. To select by name, move the cursor to the window beneath the Search tab and start to type the patient name (surname first).

Once you have found the required patient, click on their name....

| Search... | Recent |
|-----------------|------------|
| abbot | Show all |
| Abbot Zhaeir B | 14/10/1942 |
| Abbott Zoe | 20/03/1966 |
| Abbott Zoe A | 10/01/1939 |
| Abbott Zoe Mary | 18/01/1927 |
| Abbott Zoe Mary | 20/06/1940 |

Type: []
Time: 07- Jul 15:09

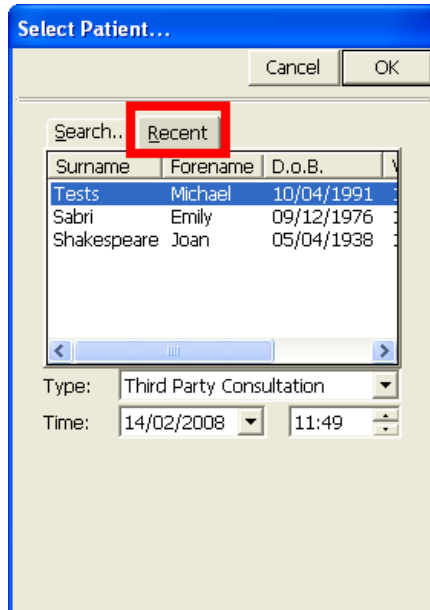
...then select the Consultation type from the Type drop down box.

Search Tab

3. As you type the patient name, you will see a list of all patients with similar names along with their Date of Births. (If there are lots of patients with a similar name, it is possible to sort each column by clicking on the column heading.)
4. Highlight the patient line you want, using the scroll arrow if necessary.

Recent Tab

You can also select a patient from a list of recently selected patients from the **Recent** tab. This list is cleared on synchronisation.



Recent Tab

Selecting a Consultation Type

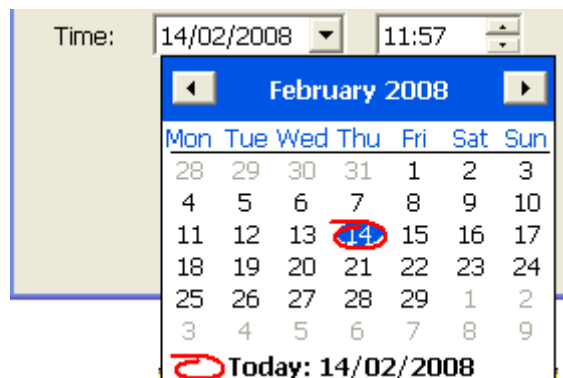
- Once you have selected the required patient, you must then select the correct consultation type for the consultation to be started. In the **Type** window, use the scroll arrow for an alphabetical pick list of consultation types. These are identical to the list in Consultation Manager.



Note The consultation type selected for the last patient is remembered for the next patient so does not need to be selected again if it is the same. Also if no data is added to a consultation, the empty consultation will not be written back to the main Vision database upon synchronisation.

Date and Time of the Consultation

You are also able to change the date and time of the consultation. Click on the arrow next to the date to display a calendar to select from:



And/or use the arrows to change the time or over type the existing time.

- When ready click OK to open the patient record. The patient's name, date of birth, NHS number, phone and address are listed at the top of the screen.

The screenshot shows the 'Pocket Vision' patient record interface. At the top is a blue header with the 'Pocket Vision' logo and name. Below this is a navigation bar with 'Patient', 'Action', 'Filter', and 'User' options. The main content area has a light green background and displays the patient's name 'Ms Deborah Louise Taht' in large blue text. Below the name, the date of birth is listed as 'DoB: 20/12/1980 (27y1m)', followed by the NHS/CHI number '4473863794' and the address '5, Maynard Close, Leeds, Z99 9ZZ'. At the bottom of the main area is a navigation bar with tabs for 'History', 'Prevention', 'Imms', 'Therapy', 'Tests', and 'Docman'.

Patient Details

Finding and Adding Data in VBC

When you are in an open consultation in VBC, you will be able to see six tabs across the patient record: **History, Prevention, Imms, Therapy, Tests** and **Docman** (currently unavailable). From within each tab you can look at existing data and add new data using **Action – Add**.

History Tab

Display Patient History and Referrals

Click **History** tab. By clicking on the window beneath the History tab, you can choose to display either **History** or **Referrals**.

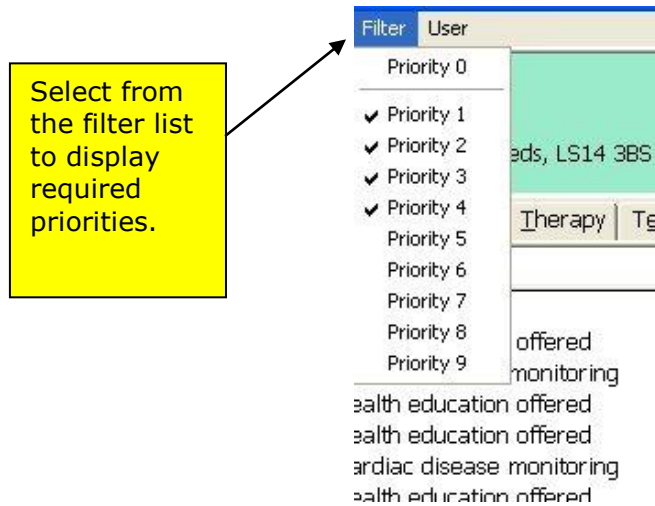
The screenshot shows the 'Pocket Vision' application window. At the top, the patient's name 'Ms Joan J Shakespeare' is displayed, along with her DOB (05/04/1938), NHS/CHI numbers, and address. Below this is a navigation bar with tabs for 'History', 'Prevention', 'Imms', 'Therapy', 'Tests', and 'Docman'. The 'History' tab is selected, showing a list of medical events. The list is ordered from most recent at the top. The most recent entry is '14/02/08 2 C/O - a headache', where the '2' is highlighted by a yellow box with the text 'The priority is displayed here.' Below this entry, there is a yellow box with the text 'Click here to view referrals.' pointing to the entry. At the bottom of the list, there is a yellow box with the text 'Click on the entry to display the details below.' pointing to the entry '14/02/08 C/O - a headache severe headache 48 hours'.

- History entries are written in reverse chronological order, latest first.
- Lines in red are the entries that have been added in this Pocket Vision session.
- Priority numbers, if used, are shown in the column between the event date and the history.
- You can click on an entry line to see further details of Notes and Clinician name in the bottom window. If you have added incoming letters to Consultation Manager by copying the text of the correspondence in the free text part of the Read entry, you are able to see the freetext in VBC once you have selected the relevant entry in the history tab. Scanned images are not accessible.

Filter history by priority

Using the **Filter** menu option, you can vary the way the history entries are displayed by priority. Ticking Priority 0 will display sensitive entries with this priority number. . If you do not select from the filter menu all history items will be displayed by default.

Select **Filter** then tick the priority you want displayed. To display more than one priority, re-select Filter and tick a further priority. Repeat until you have selected all the priorities you want to view.

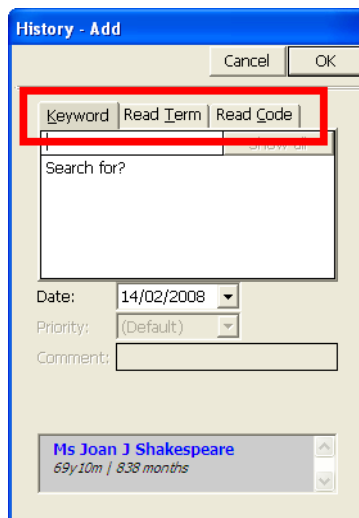


Adding History

To add a History

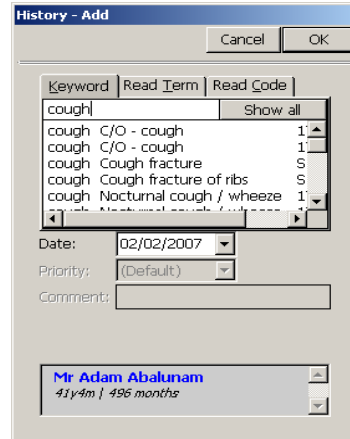
Every history entry or diagnosis must be associated with a Read code as in Consultation Manager. To add a history entry:

1. Click on the **History** tab.
2. Select **Action - Add Medical History**.
3. To can select too add a Read Term by Keyword, Read Term or Read code.



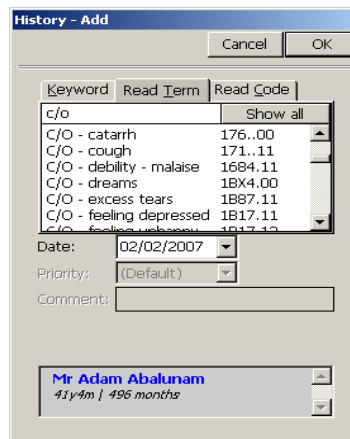
To select by Keyword

Start to type a Read keyword. As you type, matching Read keywords are listed. The more letters you type, the more precise is the match to the keyword. Click on one of these to select it.



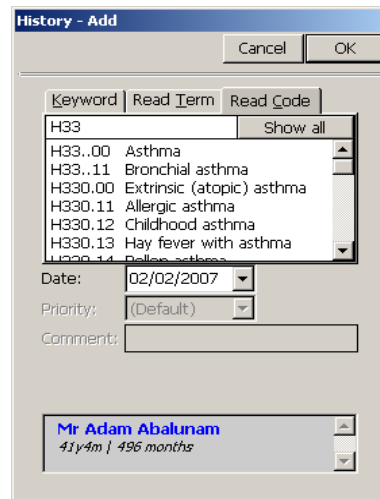
To select by Read Term

Click on the Read term tab as an alternative way to select. For example, type **c/o** to list all the Read terms beginning with c/o. Scroll down if necessary and click on one of these to select it. Incorrect entries can be deleted and re-entered

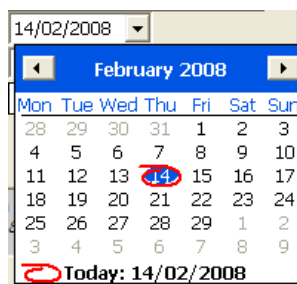


To select by Read code

Click on the Read code tab and type a Read code, for example, H33. Scroll down if necessary and click on one of these to select.



- Date** - Using the scroll arrow displays a calendar, useful, for instance, if you are entering retrospective data or a past medical history.



- Priority** - Priority 0-9 can be applied to any new History record in VBC. If the priority value is left blank, the Vision default priority of the appropriate SDA will be applied (set up in **Consultation Manager - Consultation - Options - Setup - Data Entry**) if that Read code is normally filed in the Vision Medical History SDA. If a priority value is entered in VBC, the record will always be filed in Medical History as this is the only SDA that supports priorities. Choose a suitable priority number between 0 (sensitive data) and 9, priority 1 usually being used for major diagnoses. If you want to record data in the SDA appropriate to the Read code, you should leave the priority blank.
- Comment** - to add notes, move into the Comment window and type in free text.

Comment: 2 weeks, chest clear

If you enter data on more than one line, you will need to use the arrow keys on the keyboard to find it later.

- Click **OK** at the top right to save the entry
- The new line is shown in red at the top of the list under History. Highlight this line to view your new entry in detail on the bottom pane, and use the scroll arrows to see the full text.

The screenshot shows a software interface with a menu bar at the top containing 'History', 'Prevention', 'Imms', 'Therapy', 'Tests', and 'Docman'. Below the menu is a list of history entries. The entry '14/02/08 1 C/O - cough' is highlighted in red. Below this list, a detail pane is open, showing the full text of the selected entry: '14/02/08 C/O - cough', '2 weeks, chest clear', and 'Clinician: DR NEPTUNE'. The detail pane has a yellow background.

History - Note the following:


- All entries are made via the Read dictionary, and rely on you using the correct Read description for the entry to be uploaded back to the correct SDA, if applicable, or to a general History entry. For instance, if you are adding, Contraception, you need to choose one of the Read descriptions on the Contraception Add screen for the entry to be filed under the Contraception SDA.
- Disease register entries are shown as a history entry. However, if you add a diagnosis for one of the disease registers e.g. Asthma, when uploading to Vision during synchronisation, the process will pause and

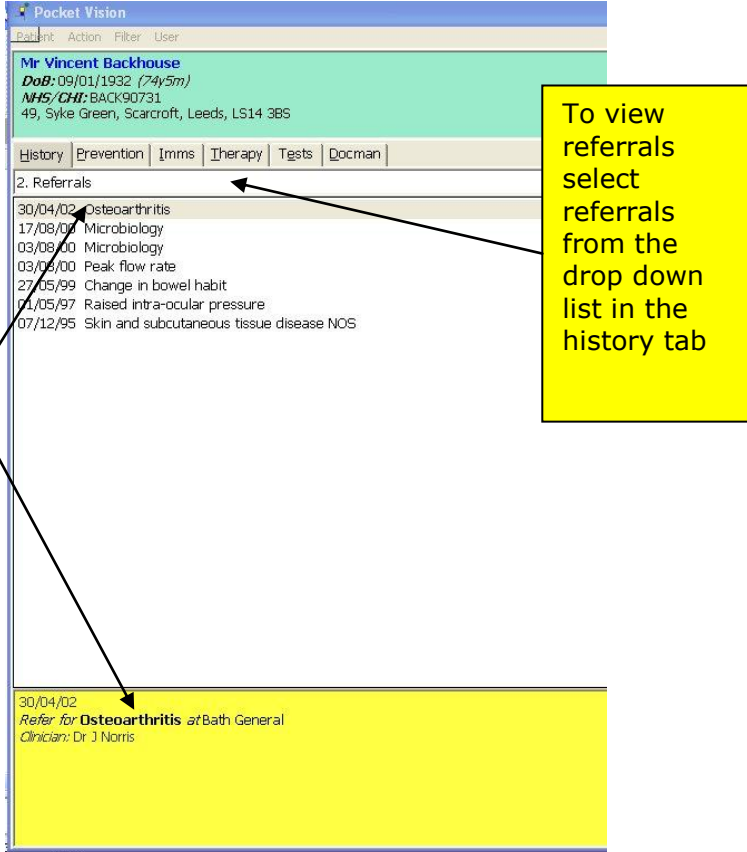
ask you if you want to include this patient on the [disease] chronic disease register.

- Although the data within problems is shown, actual problem headings are not shown.

Referrals

Display Referrals

1. To view a list of referrals, switch to the **History** tab.
2. Click in the window beneath the History tab and select **2. Referrals**, or click on the selection arrow  beneath the tabs. This will display referrals in chronological order.
3. Highlight a line to see further details in a bottom window. The full text of scanned letters is also shown if stored as free text in Consultation Manager.



The screenshot shows the 'Pocket Vision' software interface for a patient named Mr Vincent Backhouse. The 'History' tab is selected, and a dropdown menu is open showing '2. Referrals'. A list of referrals is displayed, including '30/04/02 Osteoarthritis'. A yellow box highlights the '2. Referrals' tab, and another yellow box highlights the '30/04/02 Osteoarthritis' entry. A third yellow box shows the details of the selected referral: '30/04/02 Refer for Osteoarthritis at Bath General Clinician: Dr J Norris'.

Listing referrals

Note it is not possible to add a referral in Pocket Vision.

Prevention

Display Prevention

Click on the **Prevention** tab to display a summary of the patient's Prevention record.

There are two options to display a summary list: **Examination Findings** and **Allergies/Peak Flow**. If you click in the window beneath the tabs, the pick list is displayed.

The screenshot shows the 'Pocket Vision' interface for Mrs Zoe Abbott. The patient details include: DoB: 20/03/1966 (40y3m), NHS/CHI: ABBO200965, and address: 21, Woodsley Terrace, Leeds, LS2 9NA. Below the details are tabs for History, Prevention, Imms, Therapy, Tests, and Docman. A list of options is shown: 1. Examination Findings (highlighted) and 2. Allergies / Peak Flow.

Examination Findings lists Blood Pressure, Height, Weight (with BMI if both Height and Weight data), Alcohol status and Smoking status. Only the latest five entries are shown.

The screenshot shows the 'Examination Findings' section for Mrs Zoe Abbott. It displays a list of findings with the following data:

| Date | BP | Height | Weight | Current Drinker | Never Smoked |
|----------|----------|--------|---------------|-----------------|--------------|
| 20/02/00 | 130 / 70 | 1.47 m | 76.21 kg 35.2 | 1 /wk | 0 0 0 |
| 21/01/00 | 0 / 0 | | | | |

The latest entry is highlighted in yellow: 20/02/00 BP = 130 / 70, Clinician: Dr Lorraine Gold.

Prevention - Examination Findings

The most **recent** entry for prevention data is listed first. To see the other entries for a particular type of prevention, you must use the PDA navigation button to scroll through. On a laptop or workstation, use the scroll arrows.

| History | Prevention | Imms | Therapy | Tests | Docman |
|-------------------------|------------|------|---------|-------|--------|
| 1. Examination Findings | | | | | |
| 14/02/08 BP: 120 / 80 | | | | | |
| 20/04/06 BP: 130 / 70 | | | | | |
| 22/12/04 BP: 150 / 90 | | | | | |
| 14/12/00 BP: 155 / 85 | | | | | |
| 24/05/97 BP: 140 / 90 | | | | | |

Use the scroll bar to see older prevention data.

View older prevention data

Allergies/Peak Flow lists drug and non-drug allergies and peak flow.

| Pocket Vision | | | |
|--------------------------------------|------------|--------|---------|
| Patient | Action | Filter | User |
| Mrs Zoe Abbott | | | |
| DoB: 20/03/1966 (40y3m) | | | |
| NHS/CHI: ABBO200965 | | | |
| 21, Woodsley Terrace, Leeds, LS2 9NA | | | |
| History | Prevention | Imms | Therapy |
| Tests | Docman | | |
| 2. Allergies / Peak Flow | | | |
| 10/07/06 Penicillin V Tabs 250mg | | | |
| | | | |
| 10/07/06 House dust allergy | | | |
| | | | |
| 10/07/06 Pk Flow: 450 L/min | | | |
| | | | |
| 10/07/06 450 L/min | | | |
| Clinician: DKEI | | | |

Prevention - Allergies / Peak Flow

Add Prevention entry

To add a **Prevention** entry, select one of the following from the **Action menu**:

- Add Blood Pressure
- Add Height
- Add Weight
- Add Alcohol
- Add Smoking
- Add Drug Allergy
- Add Non-Drug Allergy
- Add Peak Flow

Add Blood Pressure

Actions –Add Blood Pressure, simply enter values in the systolic and diastolic fields then OK.

BP - Add

Cancel OK

Systolic:

Diastolic:

Date: 10/07/2006

Mrs Zoe Abbott
40y3m | 483 months

Add Height

1. From **Actions – Add Height**, enter the height in the Height field. **Note** this field is metric and not imperial - it is not possible to enter imperial values.
2. Click OK.
3. The BMI will be calculated if both the height and weight are entered

Height - Add

Cancel OK

Height: 1.47 m

Weight: 76.21kg @ 20/02/2000

BMI: 35.27

Date: 10/07/2006

Mrs Zoe Abbott
40y3m | 483 months

Add Weight

1. From **Actions – Add Weight**, enter the weight in the Weight field. **Note** this field is metric and not imperial - it is not possible to enter imperial values.
2. Click OK.
3. The BMI will be calculated if both the height and weight are entered

Add Alcohol

- 1 From **Actions – Add Weight**, select from the initial drop-down box labelled **Drinker?** and choose either Current Drinker, Ex-Drinker or Teetotaler.
2. Then from the further drop-down boxes, select the relevant **Read term** for the patient.
3. **Units/week** - optional entry.
4. **Started / Stopped** - optional dates. To enter, tick the box then enter a date.
5. Click OK.

Add Smoking

1. From **Actions – Add Smoking**, select from the **Smoker?** drop-down box whether the patient is a Smoker, Ex-smoker or Never smoked.
2. Then from the further drop-down boxes, select the relevant **Read term** for the patient.
3. **Cigarettes per day/Cigars per day / Tobacco oz per day** - optional entry.
4. **Started / Stopped** - optional dates. To enter, tick the box then enter a date.
5. Click OK.

Add Drug Allergy

1. From **Actions – Add Drug Allergy**, place the cursor in the window beneath **Drug** and above **Search for?**
2. Start typing the drug name to which the patient is allergic or has an adverse reaction.
3. Highlight the drug and press OK.

Drug Allergy - Add

Cancel OK

Drug: penici Show all

- Penicillamine Tabs 125mg
- Penicillamine Tabs 250mg
- Penicillin G Inj 600mg/Vial
- Penicillin V Elixir 125mg/5ml
- Penicillin V Elixir 250mg/5ml
- Penicillin V Sf Oral Soln 125mg/5ml
- Penicillin V Sf Oral Soln 250mg/5ml
- Penicillin V Syrp 250mg/5ml
- Penicillin V Tabs 250mg

Date: 10/07/2006

Mrs Zoe Abbott
40y3m | 483 months

Note that the Allergy default value is uploaded from desktop Vision, e.g. Severity - Moderate, Certainty - Likely. But there is no way to enter a qualifier on an allergy entry made on VBC. So entries made on the PDA will always carry the default value, i.e. Moderate.

Add Non-drug Allergy

1. From **Actions – Add Non-Drug Allergy**, find the relevant description of the allergy by either Keyword, Read Term or Read code (see page 12). For example, in Keyword, type **dust** to select House dust allergy.
2. Optionally add some free text in Comments.
3. Click OK.

Non-Drug Allergy - Add

Cancel OK

Keyword | Read Term | Read Code |

pollen Show all

pollen Pollen asthma H330.14

Date: 02/02/2007

Comment:

Mr Adam Abalunam
41y4m | 496 months

Add Peak flow

1. From **Actions – Add Peak Flow**, enter the value in litres/min.
2. In the Comments field, it would be good practice to record which type of peak flow machine has been used.
3. Click OK.

The screenshot shows a software dialog box titled "Peak Flow - Add". At the top right are "Cancel" and "OK" buttons. The main area contains the following fields:

- Result:** A text input field containing the number "450", followed by the unit "L/min".
- Notes:** A large, empty text area with vertical scroll bars.
- Date:** A dropdown menu currently displaying "10/07/2006".
- Patient Selection:** A dropdown menu at the bottom showing "Mrs Zoe Abbott" in blue text, with "40y3m | 483 months" in smaller text below it.

Immunisations

Display Immunisations

Click on the **Imms** tab to list the patient's immunisations. Highlighting a line shows more details in the bottom section: the immunisation code, stage, status (eg Given), Source and the clinician.

The screenshot shows a software interface with four tabs: History, Prevention, Imms, and Therapy. The 'Imms' tab is selected and highlighted in red. Below the tabs is a list of immunisation entries. The first entry, '12/09/05 Influenza vaccination', is highlighted in red. A yellow callout box on the right points to the 'Imms' tab with the text: 'To display immunisations results, click on the Imms tab.' A second yellow callout box on the left points to the first entry in the list with the text: 'Click on an entry to display further information.' Below the list, a detailed view of the selected entry is shown in a yellow box with a red border. The details are: '12/09/05 Influenza vaccination', 'Code: FLU', 'Stage: 0', 'Status: Given', 'Source: In this Practice', and 'Clinician: Dr J Reeves'.

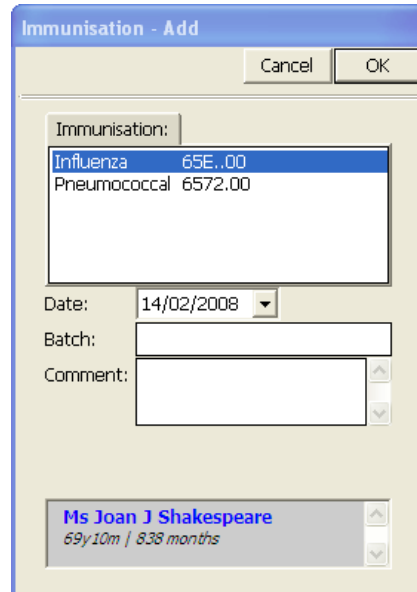
| History | Prevention | Imms | Therapy |
|---------|------------|--------------------------------------|---------|
| | | 12/09/05 Influenza vaccination | |
| | | 26/10/04 Influenza vaccination | |
| | | 05/09/03 Influenza vaccination | |
| | | 12/09/01 Influenza vaccination | |
| | | 13/10/99 Influenza vaccination | |
| | | 16/12/97 3rd hepatitis B vaccination | |
| | | 30/07/97 2nd hepatitis B vaccination | |
| | | 30/06/97 1st hepatitis B vaccination | |
| | | 28/01/97 Booster tetanus vaccination | |

12/09/05 Influenza vaccination
Code: FLU
Stage: 0
Status: Given
Source: In this Practice
Clinician: Dr J Reeves

Add Immunisation

You may only add immunisations for influenza and pneumococcal in VBC. You can also add a Therapy entry. To add an immunisation:

1. With the focus in the Imms tab, select **Action – Add** from the menu.
2. From the data entry form select either Influenza or Pneumococcal.



Immunisation Add

3. Enter the Batch number (optional).
4. Enter any free text comments.
5. Click OK.
6. The new line is added at the top of the immunisations list in red.

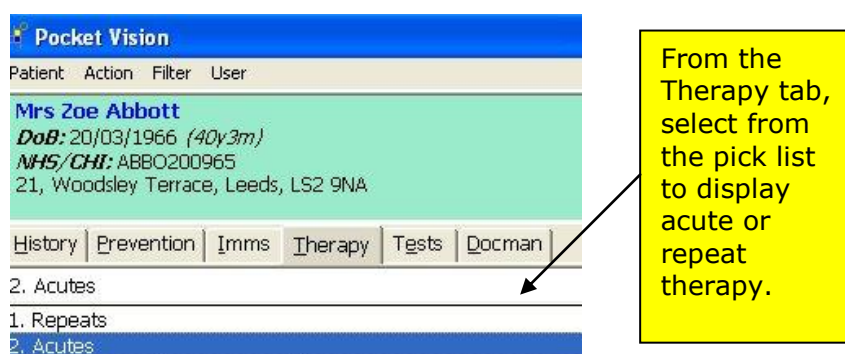
Note - The batch number and text are displayed in VBC but the information will not be written back to Vision.

| History | Prevention | Imms | Therapy | Tests | Docman |
|----------|-----------------------------|------|---------|-------|--------|
| 14/02/08 | Influenza vaccination | | | | |
| 12/09/05 | Influenza vaccination | | | | |
| 26/10/04 | Influenza vaccination | | | | |
| 05/09/03 | Influenza vaccination | | | | |
| 12/09/01 | Influenza vaccination | | | | |
| 13/10/99 | Influenza vaccination | | | | |
| 16/12/97 | 3rd hepatitis B vaccination | | | | |
| 30/07/97 | 2nd hepatitis B vaccination | | | | |
| 30/06/97 | 1st hepatitis B vaccination | | | | |
| 28/01/97 | Booster tetanus vaccination | | | | |

Therapy

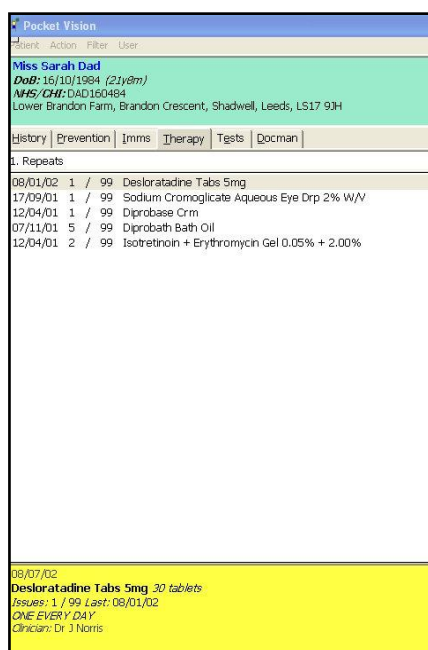
Display Therapy

To display Therapy, click on the **Therapy** tab. If you click on the drop down box beneath the tabs, you can choose between the display of either Repeats or Acutes.

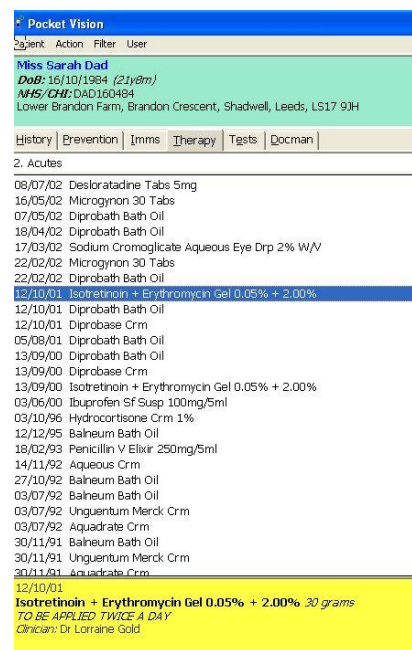


From the Therapy tab, select from the pick list to display acute or repeat therapy.

Highlight each drug line for fuller details of Dose and Quantity in a window below. The details of repeat issues including last issue date and the prescriber is also listed. (At the moment there is no way to distinguish between the acutes and issues).



Repeat Therapy



Acute therapy and issues of repeats

Adding Therapy

Acute and Repeat Therapy is added from the same place:

1. With the focus in the Therapy tab select **Action – Add Therapy** from the menu
2. Place the cursor in the window below the drug tab.

The screenshot shows the 'Therapy - Add' dialog box. At the top right are 'Cancel' and 'OK' buttons. Below the title bar is a 'Drug:' label and a search box with a 'Show all' button. The search box contains the text 'Search for?'. Below the search box are input fields for 'Quantity:', 'Rpts:', 'Prep'n:', and 'Dosage:'. There are also checkboxes for 'Print' and 'Issue'. The 'Date:' field is set to '02/02/2007'. At the bottom, there is a patient selection box showing 'Mr Adam Abalunam' with '41y4m | 496 months'.

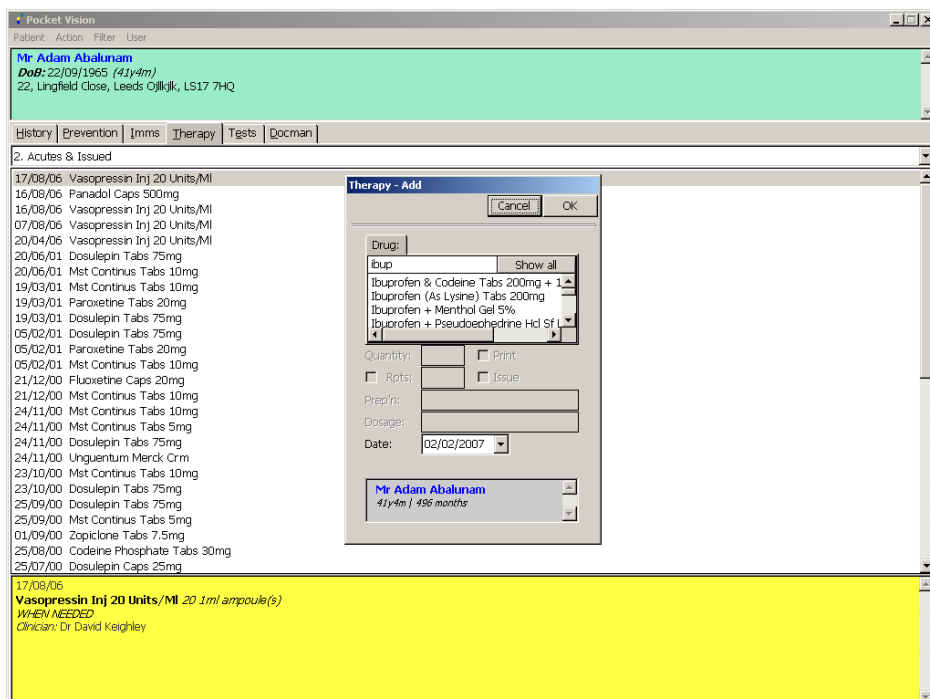
3. Type the drug name – it will list drug names that match as you type.

The screenshot shows the 'Therapy - Add' dialog box with the 'Drug:' field containing 'ibup'. A list of drug names is displayed below the search box: 'Ibuprofen & Codeine Tabs 200mg + 1', 'Ibuprofen (As Lysine) Tabs 200mg', 'Ibuprofen + Menthol Gel 5%', and 'Ibuprofen + Pseudoephedrine Hcl Sf L'. The other fields are the same as in the previous screenshot.

4. Select and highlight the drug on the list that you want.

5. Place the cursor in **Quantity**. Any user-defined defaults of quantity, preparation, and dosage are downloaded over from the drug dictionary (though the Normalex defaults are not). Either accept these, or overwrite, or if blank, type these in.
6. In **Preparation**, we advise that you type the full name, e.g. tablets, not Tabs. IF ETP is switched on, the format must match that in Multilex.
7. **Dosage** can now be entered as free text up to 256 characters. You can use abbreviations in **Dosage**, e.g. 1 od.
8. If the **Print** box is selected, the script will be set to print in Vision when a connection has been re-established. If the Print box is left blank, it will not be set to print in Vision.
9. If this is to be new repeat master, tick the box in **Rpts**. Leave this blank if you are prescribing an acute.
10. Ticking the **Rpts** box enables the **Issue** box. If you tick **Issue**, this records that you have issued at the time of creating the repeat. Ticking both the Print box and the Issue box when a new repeat master is created, the issue will be set to print on import to Vision.
11. Select **OK**.
12. The new entry will be added as a red line at the top of the Therapy list.

Note - You are not able to print from within VBC.



Note - There is no prescribing decision support in Pocket Vision as with full Vision which has drug checks for contraindications, interactions etc. **Prescribers must take responsibility for all prescribing decisions when using Pocket Vision.**

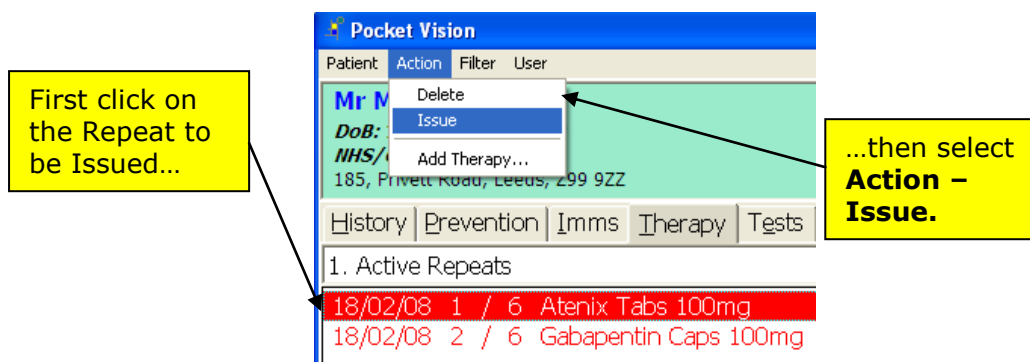
Issuing Repeats

It is possible to record an issue of a repeat medication:

1. From the therapy tab select **Active Repeats**.



2. Click on the required item you wish to issue.
3. Go to **Action – Issue** to record that the item has been issued.



Note you cannot print therapy from within VBC.

Therapy - Note the following:

- The system will not let you issue a repeat over the maximum permitted number of issues but there is no warning.
- **There are no drug check warnings re contraindications, interactions, drug doubling. These warnings will be displayed (according to your own Consultation Manager settings) if appropriate, when uploading the data to desktop Vision.**
- There are no details of drug costs.
- You cannot mark therapy as Personally Administered or Dispensing.

Tests

Tests Display

To display test results click on the **Tests** tab. The test results are listed chronologically. Select a line to list the details in the bottom section.

Mr Vincent Backhouse
DoB: 09/01/1932 (74y6m)
NHS/CHI: BACK90731
49, Syke Green, Scarcroft, Leeds, LS14 3BS

History | Prevention | Imms | Therapy | **Tests** | Docman

| | | |
|----------|------|--------------------------------|
| 18/11/01 | 15.4 | Haemoglobin estimation |
| 18/11/01 | 0.47 | Haematocrit - PCV |
| 18/11/01 | 4.77 | Red blood cell (RBC) count |
| 18/11/01 | 32.3 | Mean corpusc. haemoglobin(MCH) |
| 18/11/01 | 32.8 | Mean corpusc. Hb. conc. (MCHC) |
| 18/11/01 | 98.5 | Mean corpuscular volume (MCV) |
| 18/11/01 | 5.57 | Total white cell count |
| 18/11/01 | 3.49 | Neutrophil count |
| 18/11/01 | 0.09 | Eosinophil count |
| 18/11/01 | 0.05 | Basophil count |
| 18/11/01 | 1.54 | Lymphocyte count |
| 18/11/01 | 0.4 | Monocyte count |
| 18/11/01 | 255 | Platelet count |
| 18/11/01 | 13 | Serum bilirubin level |
| 18/11/01 | 67 | Serum alkaline phosphatase |
| 18/11/01 | 26 | ALT/SGPT serum level |
| 18/11/01 | 26 | AST - aspartate transam.(SGOT) |
| 18/11/01 | 4.3 | Serum potassium |
| 18/11/01 | 145 | Serum sodium |
| 18/11/01 | | Serum bicarbonate |
| 18/11/01 | 0.88 | Serum inorganic phosphate |
| 18/11/01 | 2.3 | Corrected serum calcium level |
| 18/11/01 | | Blood urea/renal function |
| 18/11/01 | 92 | Serum creatinine |
| 18/11/01 | 371 | Blood urate |
| 18/11/01 | 75 | Serum total protein |
| 18/11/01 | 44 | Serum albumin |

18/11/01 **Haemoglobin estimation**
Result: 15.4 g/dL
Clinician: Dr J Norris

Tests Tab

To add a test result

To add a test result:

1. Select **Action – Add Test** from the menu whilst the focus is in the test tab.
2. Select the Read term by keyword, Read term or Read code (see page 12).
3. In **Result**, enter any numerical result.
4. **Comment** is optional but you may type in free text for text based results, such as NAD, Normal.
5. Click **OK**.
6. New test lines are shown in red at the top of the list.

Test - Add

Cancel OK

Keyword Read Term Read Code

Show all

Search for?

Date: 02/02/2007

Result:

Comment:

Mr Adam Abalunam
41y4m | 496 months

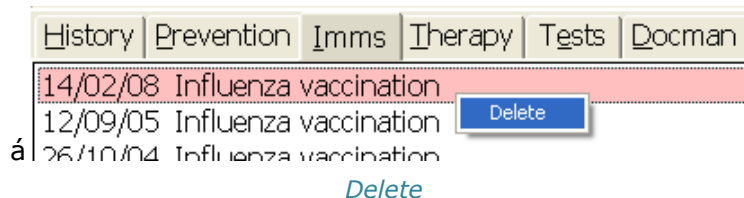
Tests - Note the following

There is no means of entering a qualifier (e.g., abnormal, very high) or test result on Test result screens in VBC. The result will carry the default qualifier, e.g. Normal. Any change will have to be made as an Edit in Consultation Manager once the result is uploaded to Vision.

Deleting and Editing Data in VBC

You cannot select an entry directly edit it. The only way to change an entry is to delete it entry and then re-add it correctly. To delete an entry:

1. Right click on the entry to be deleted.
2. Select **Delete**.



3. The entry will be removed. If required you can re-enter the correct data from **Action – Add**.

Note that you can only delete entries made during the current session. You are not able to delete existing data which has transferred from Vision.

Deselecting a Patient

If you have finished in a particular patient record and would like to look at another patient record go to **Patient - Open**. The current consultation will be closed and the a new one started as you select the next patient.

Logging Out

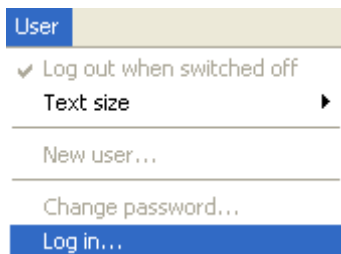
To log out select **Patient – Exit and Log Out** to close VBC.

| Patient | Action | Filter | User |
|---------|------------------|--------|--------|
| | Open... | | Ctrl+O |
| | Exit and log out | | |

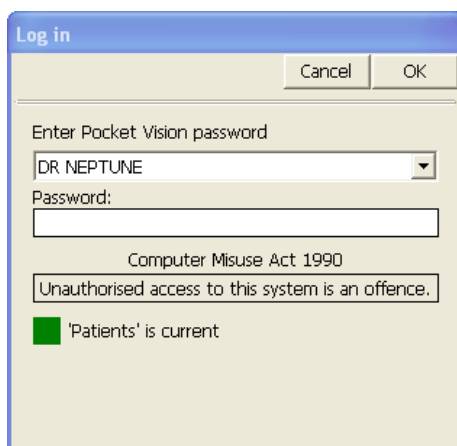
Changing User

To change user within VBC:

1. Select **User – Login**



2. The login screen appears and a different user can select their name from the list and login with their password. This will in turn logout the current user.

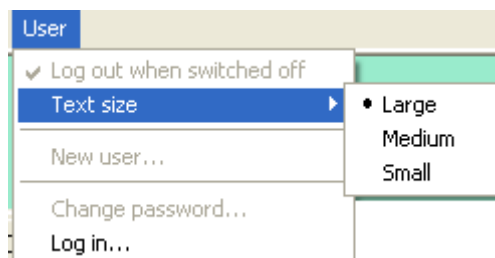


Change user

Adjusting Text Size

To adjust the text size within VBC:

1. Select **User – Text**
2. Select Small, Medium or Large.



Adjust Text Size

Other options in the user menu, with the exception of Adjusting Text Size and Changing user, are not currently available.

Appointments Data

The VBC does not allow access to the Vision Appointments module.

In the event of a Vision server failure, there is an Appointments back-up process which is set-up from within the Vision Appointments system. This facility allows for the automatic back-up of future Appointments up to 30 days ahead, which are saved to a text file on the local drive. Please see Vision Appointments User Guide or On-screen help within Appointments for further details.