Examples of how a safe prescribing template will appear on a saved consultation.

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| --- | --- | --- | --- | --- | --- |
| **Date** | |  | | **Consultation Text** | |
| 25-Apr-2018 11:58 | |  | | GP Surgery (Lime Square Medical Centre) TEHSEEN, Aneela (Mrs) | |
| Comment | |  | | Amiodarone monitoring • Thyroid function test • Liver function test • Urea and electrolytes • 12 lead ECG | |
|  | |  | |  | |
| Follow up | |  | | [Inactive] Diary Entry Blood test due (14-Sep-2018) | |
|  | |  | |  | |
| 25-Apr-2018 11:41 | |  | | GP Surgery (Lime Square Medical Centre) TEHSEEN, Aneela (Mrs) | |
| Comment | |  | | Rheumatology drug monitoring - Sulfasalazine • Full blood count - FBC • Liver function test • Urea and electrolytes | |
|  | |  | |  | |
| Follow up | |  | | [Inactive] Diary Entry Blood test due (08-Jun-2018) | |
|  | |  | |  | |
| 25-Apr-2018 11:22 | |  | | GP Surgery (Lime Square Medical Centre) TEHSEEN, Aneela (Mrs) | |
| Comment | |  | | Rheumatology drug monitoring - d-penicillamine • Full blood count - FBC • Renal profile • Liver function test • Test strip urinalysis | |
|  | |  | |  | |
| Follow up | |  | | [Inactive] Diary Entry Blood test due (02-Jul-2018) | |
| 25-Apr-2018 11:09 |  | | GP Surgery (Lime Square Medical Centre) TEHSEEN, Aneela (Mrs) | |
| Comment |  | | Mycophenolate mofetil monitoring undertaken in primary care • Full blood count - FBC • Liver function test • Renal profile | |
|  |  | |  | |
| Follow up |  | | [Inactive] Diary Entry Blood test due (18-May-2018) | |
|  |  | |  | |
|  |  | |  | |
|  |  | |  | |
|  |  | |  | |
| 25-Apr-2018 10:49 |  | | GP Surgery (Lime Square Medical Centre) TEHSEEN, Aneela (Mrs) | |
| Comment |  | | Warfarin indicated Atrila Fibrillation | |
|  |  | | International normalised ratio 2.2 | |
|  |  | |  | |
| Follow up |  | | Diary Entry Annual warfarin assessment (14-Jan-2019) | |
| 23-Apr-2018 10:26 |  | | GP Surgery (Lime Square Medical Centre) TEHSEEN, Aneela (Mrs) | |
| Comment |  | | High risk drug monitoring - primary care ciclosprin | |
|  |  | | Full blood count - FBC • Renal profile • Liver function test • Blood glucose level 5.6 mmol/L | |
|  |  | |  | |
| Follow up |  | | [Inactive] Diary Entry Blood test due (18-Jun-2018) | |
|  |  | |  | |
| 23-Apr-2018 10:12 |  | | GP Surgery (Lime Square Medical Centre) TEHSEEN, Aneela (Mrs) | |
| Comment |  | | Rheumatology drug monitoring - Azathioprine • Full blood count NOS • Renal function tests • Liver function tests NOS | |
|  |  | |  | |
| Follow up |  | | Diary Entry Rheumatology drug monitoring - Azathioprine (27-Apr-2018) patient agreed to have bloods done on Friday. | |
|  |  | |  | |
| 23-Apr-2018 10:00 |  | | GP Surgery (Lime Square Medical Centre) TEHSEEN, Aneela (Mrs) | |
| Comment |  | | Rheumatology drug monitoring - Methotrexate | |
|  |  | | Diagnosis RA | |
|  |  | | Full blood count - FBC • Liver function test • Renal profile | |
|  |  | |  | |
| Follow up |  | | Diary Entry Rheumatology drug monitoring - Methotrexate (11-May-2018) | |
|  |  | |  | |
| 23-Apr-2018 09:54 |  | | GP Surgery (Lime Square Medical Centre) TEHSEEN, Aneela (Mrs) | |
| Comment |  | | On lithium Lithium | |
|  |  | | Diagnosis bipolar disorder | |
|  |  | | Renal profile • Serum lithium level 1.3 | |
|  |  | |  | |
| Follow up |  | | Diary Entry Lithium monitoring (06-Jul-2018) | |
|  |  | |  | |
| Assessment |  | | Serum calcium 9.7 mmol/L • Thyroid function test | |
| **Date** | |  | **Consultation Text** | |
| 20-Mar-2018 11:55 | |  | GP Surgery (Lime Square Medical Centre) TEHSEEN, Aneela (Mrs) | |
| Medication | |  | (NOT ISSUED) Flurazepam 15mg capsules 1 When Required, 5 capsule | |
|  | |  | (NOT ISSUED) Zopiclone 3.75mg tablets One To Be Taken At Night, 7 tablet | |
|  | |  |  | |
| Comment | |  | Diagnosis bereavement | |
|  | |  | Agreement of care plan only for up to 6 weeks | |
|  | |  |  | |
| Follow up | |  | [Inactive] Diary Entry Medication review due (01-May-2018) any following issues must be reviewed | |
|  | |  |  | |
| **Date** | |  | **Consultation Text** | |
| 31-Jul-2019 16:56 | |  | GP Surgery (Lime Square Medical Centre) TEHSEEN, Aneela (Mrs) | |
| Problem | |  | **Diagnosis** *(First)* Pregabalin 75 BD for Neuropathic pain | |
|  | |  |  | |
| Assessment | |  | Agreement of care plan Patient has had trial of Gabapentin, ADR unacceptable therefore agrees to try this | |
|  | |  | Drug dependence No | |
|  | |  |  | |
| Additional | |  | Drug side effect - acceptable to patient Since Patient could not tolerate Gabapentin has been informed what to expect, Pt also takes regular Zapain so warned against sedation. New CD status discussed too. | |
|  | |  |  | |
| Follow up | |  | Diary Entry Medication review due (14-Aug-2019) To be reviewed in 3 weeks | |

***Following implementation and success of Safe prescribing templates I have also designed some Red Flags templates to help Clinicians identify and exclude them in acute presentations.***

***So far I have written Red flags templates for Lower back pain, Headache, Eye symptoms, Acute abdomen , Vomiting/Diarrhoea ( this is linked to Diabetic Ketoacidosis template for Diabetics).***

***Following is an example of one of the red flags template as it would appear once documented and saved;***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date** |  | **Consultation Text** |  |  |
| 30-May-2019 09:39 |  | GP Surgery (Lime Square Medical Centre) TEHSEEN, Aneela (Mrs) |  |  |
| Problem |  | **Viral gastroenteritis** *(First)* |  |  |
|  |  |  |  |  |
| History |  | 6 year old child having symptoms of increased bowel movements for last 3 days |  |  |
|  |  | No urinary symptoms |  |  |
|  |  | Mother says not eating as well but drinking plenty |  |  |
|  |  | Has been for a sleepover to nanna's over the weekned and symptoms started 48 hours later. |  |  |
|  |  |  |  |  |
| Examination |  | A happy and alert child seen with mother, happy to partcipate in ducussion |  |  |
|  |  | O/E - tympanic temperature 37.2 degrees C • Capillary refill time 1 s |  |  |
|  |  | Soft abdomen, no masses, no guarding, |  |  |
|  |  | no Conjunctival pallor |  |  |
|  |  | Describes some abdominal pain prior to bowel movement, doesn't wake him up from sleep, |  |  |
|  |  | No vomiting so far, but has been nauseous few days ago. |  |  |
|  |  |  |  |  |
| Assessment |  | [D]Hypovolaemic shock No observation of Decreased consciousness, Pale skin, Cold extremeties, Sunken eyes, Tachycardia, Techypnoea, Weak pulse, Prolonged capillary refill time, Hypotension (Adult Systolic Bp lower than 90mm of Hg, or Tachycardia |  |  |
|  |  | Red flag symptom No observation of non-blanching rash, neck stiffness, sensitivity to bright light especially in children |  |  |
|  |  | Red flag symptom Premature birth , severe cardiac/renal /autoimmune dysfunction or patient receiving immunosuppressents (none seen) |  |  |
|  |  | Red flag symptom Not passed urine in 12 hours, presence of Bloody Diarrhoea (none seen) |  |  |
|  |  | Red flag symptom Inability to retain oral fluids (none seen) |  |  |
|  |  | Red flag symptom Please use Acute abdomen template if indicated ( not indicated) |  |  |
|  |  |  |  |  |
| Comment |  | Reassured parent re possibility of Gastroenteristis |  |  |
|  |  | Child is well in himself |  |  |
|  |  | Discussed value of hygeine to contain infection, hydration and PRN simple analgesia (paracetamol) discussed . |  |  |
|  |  | Saftey netted re worsening, signs of how to recognise dehydration explained, understanding checked. |  |  |
|  |  |  |  |  |