



# ePrescribing: What functionality should you start with?

Neil Watson  
Director of Pharmacy  
The Newcastle upon Tyne Hospitals NHS Foundation Trust



This presentation is not going to provide you with a list of recommended go live functionality, but rather guidance as to how you should approach the question.

# Principles

- Safe
- Simple
- Locally defined
- “Go live” is the beginning, not the end. So consider where you want to start your journey.
- Do you want to start your journey in chaos?

# Pre-go live

- Scope
  - Build
  - Testing
  - Training....what can you achieve?
  - Managing expectations
    - Under promise, Over deliver
- 
- Timescales

# Go Live

- Expecting the unexpected and capacity to react.
- Go Live team
  - Experience
  - Capacity to train and react

# Functionality/Benefits at go live

## IN

- Prescribing!
- Medicines Administration records (actual times)
- Critical care (simple)
- Complex meds (plan)
- Simple order sets
- Formulary control
- Plan for reporting requirements

## OUT

- Complex meds
- Critical care (complex)
- Fully integrated with results
- Large numbers of complex order sets
- Reporting

# Decision Support at go live

## IN

- Order Sentences
- Allergy Checks
- Dose range (Paeds)

## OUT

- Drug-Drug Interactions
- Patient-centric decision support
  - Checking against renal function, age etc
  - Checking against laboratory results
  - Checking against documented co-morbidities

“Go live” is the beginning, not the end.  
Consider very carefully where you  
want to start your journey.

