## REPEAT PRESCRIPTIONS.

The system for monitoring patients on repeat prescriptions at Idle Medical Centre has evolved over a number of years. The aim is to review all patients who are on repeat medication every 6 months, although on some occasions where the patient is completely stable, this can be a year. The latter is at the doctors discretion. Most medication is issued for 2 months at a time with 3 prescriptions allowed before a review appointment is needed. The daily job of doing the prescriptions is more complicated than it used to be but hopefullyhelps us provide a well monitored service. Prescriptions in the box will either a)just need signing...easy

b) have a small form attached asking for an extra item(see below). Hopefully this will include the dose and instructions for taking, but quite often the doctor needs to investigate the patients records for more info. If this is a drug that the patient has had before and it seems reasonable to repeat it then the doctor does a prescription, if the indications are not clear, or there is no obvious record of the patient being prescribed the drug in the fairly recent past, then it is probably advisable either to phone the patient to try and find out more, or ask them, by writing on the slip of paper, to make an appointment.

Date Taken		Script taken by:			
Time					
Prescribing GP					
Patient Name					
Address					
D.O.B					
Drug Name	Instruc	Strength Oty	For Comp		
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Notes					

c)have a larger piece of paper attached (see example later.)

The computer flags up a message when the patient has had 6 months supply of tablets. At this point the receptionist will attach a piece of paper with tick boxes to the prescription.

The doctor then needs to look at the patients record and decide whether they need to make an appointment to see the doctor, practice nurse, asthma nurse, etc.

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	Date		Receptionist		
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			Shidhine & S		
	Medication re-authorised			•	
	Yes	₩	umber		
	Make an appointment	i MAGA			
, . 	A doctor	For: A	blood test (specify)		
	Practice Nurse [	BI	ood pressure check		
	Asthma Clinic	<b>⊣</b>	general review		
et e f	Diabetic Clinic	<b>5</b>	An district		
. N	Doctor's Signature				
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You can get an overall view of the patients main problem areas by looking at the left hand headings on the computer and on the right side of the prescription. The latter lists all the medication prescribed either as repeat or acute.

For instance if the patient is taking antihypertensives look under" hypertension monitoring" and see when BP was last checked. This info can sometimes also be found under "preventive procedures" or "adult screening" If this is all that is needed then an appointment with the practice nurse may be sufficient and this can be noted on the form. Diabetic patients are regularly reviewed and a recent BP can often be found under the "diabetes heading".

Blood tests may be needed. For example if a patient is on a diuretic ...annual U+E'S ace inhibitor....annual bioprofile thyroxine... annual tft's lithium annual li level.

If patients are house bound the district nurses are able to visit and check BP and do blood tests. For the latter a pathology form needs to be completed and left in their pigeon hole.

If patients need blood tests doing, this is noted on the computer by adding( if is not already there) a heading on the left "laboratory procedures" as a Read code. Under this heading on the right side then add "blood test due" ( also as a read code) then free text what is required eg bp check and bioprofile. This ensures that the practice nurses know what to do when they see the patient. The relevant box on the form is ticked and completed and this is handed to the patient, at the reception desk, when they collect the prescription.

Obviously some patients have more than one problem, or are more complex, many will have been seen in the preceding 6 months and it is at the doctors discretion to decide whether another review is due. In some cases patients will be under regular review at the hospital, and it is often worth looking in Docman for a recent letter from a specialist. If a patient has been reviewed at the hospital and medication is optimal then it can can be updated

. Patients who have asthma should generally be seen in the asthma clinic every 6 months. Once they are "in the system" they will be recalled automatically, but may not attend. If they do not seem to have been seen recently they should be advised to make an appointment for the asthma clinic via the box on the form.

If the doctor puts yes in the "medication reauthorised "box, one of the receptionists will then reauthorise the medication. On some occasions it is wise to allow the drug to be reauthorised even though the patient needs to be seen. Most patients do not abuse the system and will make an appointment, but need to continue receiving their medication in the meantime. However on some occasions it is better not to allow the patient anymore until they have been seen. This is at the doctors discretion.

Of course the doctor is quite at liberty to reauthorise the medication him or herself. If I do this I put "done" in the box. This obviously saves the staff time but does take a little more of the doctors. Depends how pressured you are feeling!

When reviewing patients in surgery the medication should be brought up to date ,otherwise we run the risk of repeating the whole cycle again which is in nobodys best interests!

## Medication Review

	Date			Receptionist		
	Patients Name			D.O.B		A. Pur Yesit pahent
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for bot check or	A doctor		For: A bl	ood test (specify)		Par NO of paner has
Bloodtest	Practice Nurse		Blo	od pressure check		barrecian medication
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