

Ref. No: 2489
Date: 02/04/26
Subject: Electronic Prescribing

REQUEST & REPOSE

The questions I have are as follows, and can probably be answered by a pharmacist or a microbiologist:

1. If your organisation uses Electronic Prescribing for in-patient and/or out-patient antibiotic prescribing, which system or systems are in use? I assume most will be proprietary systems but some might have been developed in-house - please make this clear.

Careflow EPMA

2. Ultimately I want to get into discussion with the developer, whether that is an overseas company, UK company or one-person band. Any suggestions about the best way to do this would be appreciated.

System C is the Provider

3. I might have supplementary questions about the specifics of how the system is used in your organisation. I would be grateful for details of the best person in your organisation to contact, if necessary.

Please utilize an additional FOI request for further information

- I am particularly interested in how your system displays complex antimicrobial histories. The example I use is a patient admitted with urosepsis, treated empirically with IV piperacillin-tazobactam plus a dose of gentamicin, then switched to IV co-amoxiclav, then switched to PO co-amoxiclav - but any similar scenario would do. Please could I be sent a screenshot (without patient identifiers) so I can understand how a history like this would be displayed to the user.

Each drug line is shown as a separate instance. If a drug is discontinued it is moved to a separate section of the patient chart called 'discontinued rx'. It does not differentiate between anti microbials and other drugs; it simply shows a line with drug information. It will not in any way link one drug to another drug for a continuation of treatment, however if you wanted to identify this information you could attach a 'note' to the drug in question.

REGULAR	04-APR-2026	05-APR-2026	06-APR-2026	07-APR-2026	08-APR-2026	09-APR-2026	10-APR-2026
PIPERACILLIN 4g / TAZOBACTAM 500mg Injection Dose 4.5 g Rx on 07-Apr-2026 09:43 Route Intravenous Directions Every 8 hours (6am, 2pm and 10pm)							
REGULAR HIGH ALERT GENTAMICIN CHART IN USE- See additional chart Dose 1 instruction Rx on 07-Apr-2026 09:42 Route See paper chart Directions REMINDER- 4 X DAY - CHECK PAPER CHART							

- Finally, bit of a niche question. When a patient receives multiple antibiotic prescriptions for the same reason (see example above) are these linked in any way within the EP system or are they, from the system's perspective, entirely separate prescriptions?

Each individual drug is a separate entry.

