

DAWN Rheumatology Software 6th Annual User Group Meeting

Wednesday 24th April 2013

Introduction

Heather Stevenson, Applications Consultant, 4S DAWN

Heather welcomed everyone to the user group meeting. An overview was given of the developments to the DAWN RH software over the last year and introductions were then carried out around the table.

Safer dose records for methotrexate

George Kitching, Lead Developer, 4S DAWN

- More Visible Therapies (Main Drugs)

George highlighted that a new custom module is now available to make patient's therapies more visible on the patient screen (highlighted below). This enables users to change the therapy on the drugs tab without having to change the therapy template. This was welcomed by users who believed the update would help to streamline their processes and improve visibility on the patient screen.

The screenshot shows the DAWN RH software interface for a patient named Tina Altincum. The patient's details include NHS number 0123456789, DOB 01/04/1965, and address 4 The Square, Milnthorpe, West Rural PCT, Archibold. The therapy section is highlighted, showing Methotrexate (DMARDs) with a phase of monitoring monthly. The therapy details table lists various tests and their results, including Gold, Neutrophils, ESR, CRP, Platelet count, Albumin, ALT, and Bilirubins (total). The interface also includes tabs for Interventions, Contacts, Letters, Drugs, Events, Procedures, Reviews, Reminders, Groups, and Documents.

- Custom printing from DAWN RH

A demonstration was given to show how prescriptions and blood forms can be printed directly from the DAWN software, both of which are currently being used by DAWN RH customers. See example blood form below.

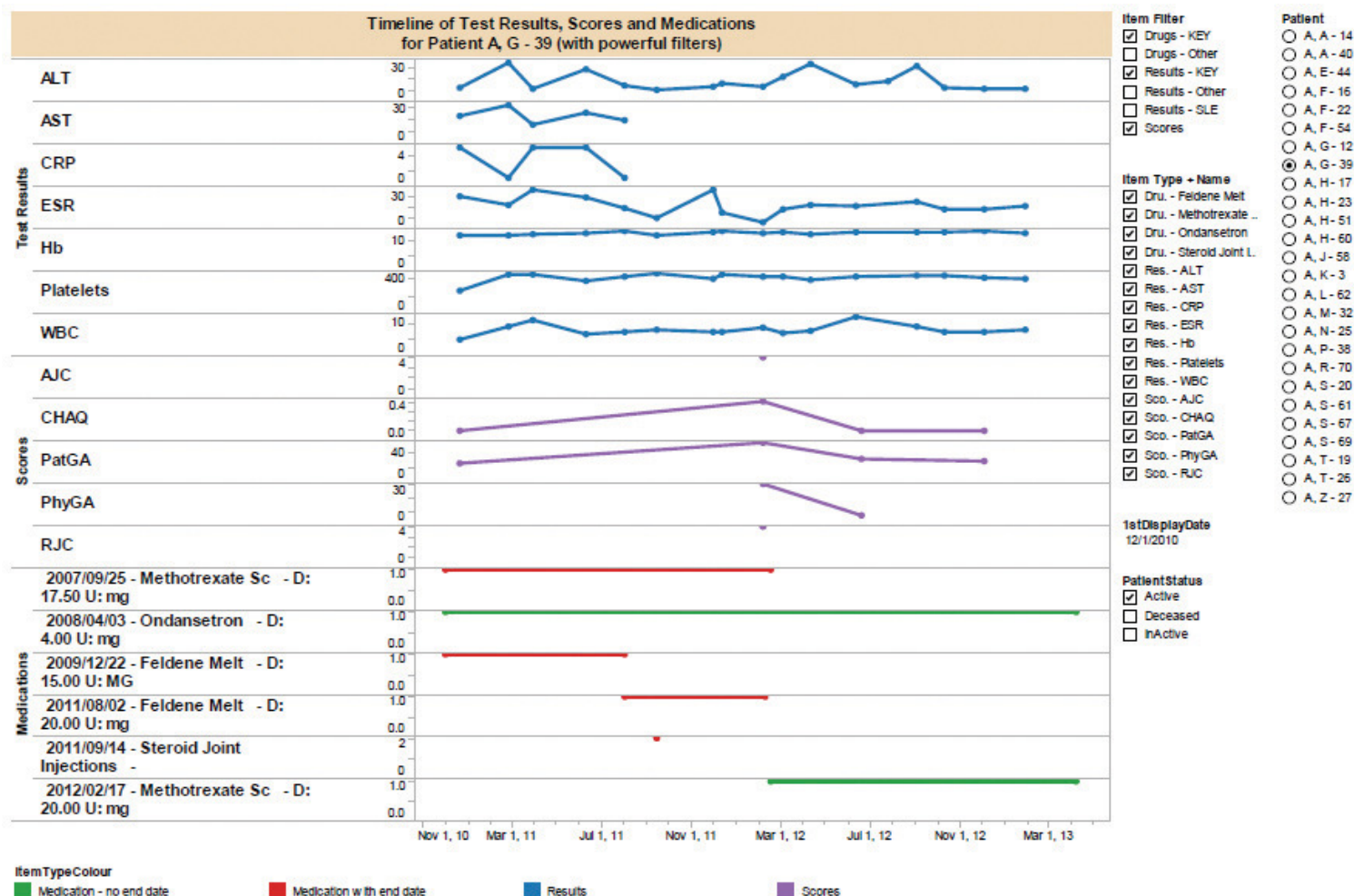
NHS No: 0123456789 DOB: 01/04/1965		<input checked="" type="checkbox"/> FBC <input type="checkbox"/> Sickie/Thalassaemia Screen* <input type="checkbox"/> (Urgent Pre-op)		Collection Date Time Collected by:
Hosp No: a12 45 67		<input checked="" type="checkbox"/> ESR <input type="checkbox"/> Please state ethnic origin		
Title & Family Name Altincum		<input type="checkbox"/> INR <input type="checkbox"/> Warfarin <input type="checkbox"/> IM Screen		SAMPLE TYPE <input type="checkbox"/> X if fasting BLOOD
First Name Tina		<input type="checkbox"/> APTT <input type="checkbox"/> Heparin therapy <input type="checkbox"/> HbA1C		
No/Street 4 The Square		<input type="checkbox"/> ANA <input type="checkbox"/> Require separate sample		CLINICAL INFORMATION
Town/Postcode Milnthorpe LA7 7QJ		<input checked="" type="checkbox"/> U&E <input type="checkbox"/> Initial Pt Assessment <input type="checkbox"/> Fasting Lipid Profile		
Tel: 015395 63091		<input type="checkbox"/> Glucose <input type="checkbox"/> Cardiac Enzymes <input type="checkbox"/> Cholesterol		Rheumatoid arthritis - seropositive: Erosive,
Sex M <input type="checkbox"/> F <input checked="" type="checkbox"/> NHS <input checked="" type="checkbox"/> Private Patient <input type="checkbox"/> Category II <input type="checkbox"/>		<input type="checkbox"/> Bone Profile <input checked="" type="checkbox"/> Liver Function Tests <input type="checkbox"/> Iron Studies		
Requesting Location: West Rural PCT		<input type="checkbox"/> Renal Profile <input type="checkbox"/> Thyroid Function Tests <input type="checkbox"/> B12 & Folate		ALKA SELTZER: 2 tablets twice weekly Methotrexate: 5mg weekly
Requesting Clinician: Archibold, Jeremy		<input type="checkbox"/> Therapeutic Drug Monitoring (Including Antibiotics)		
Additional Copies To: Dawn Rheumatology DAWN		Please state drug(s) to be tested in Any Other Tests below. Please indicate the following in Clinical Information: Reason for request (toxicity, therapeutic confirmation) Dose, dosage interval, time of last dose, how long on this dose All other drug therapy. Patient weight (kg)		LMP: EDD: Bloggs, Joe
<input type="checkbox"/> Antenatal Group and Blood Group Antibody Screen EDD: Gravida: Para: Delivery Date: Time: <input type="checkbox"/> X if previously transfused <input type="checkbox"/> Kleihauer ? <input type="checkbox"/> Group, Antibody Screen and Save <input type="checkbox"/> DCT		<input type="checkbox"/> Routine Culture (MC&S) <input type="checkbox"/> Mycobacteria (AFB) <input type="checkbox"/> Mycology <input type="checkbox"/> Parasitology <input type="checkbox"/> *Respiratory/Virus Antibody Screen <input type="checkbox"/> Syphilis Antibodies <input type="checkbox"/> Antenatal Serology (HbsAg, HIV, rubella & Syphilis antibodies) <input type="checkbox"/> Rubella <input type="checkbox"/> Hepatitis A <input type="checkbox"/> Hepatitis B <input type="checkbox"/> Hepatitis C <input type="checkbox"/> *Suspected Case <input type="checkbox"/> *Contact <input type="checkbox"/> Immunity Screen *Date of Contact: / / *Onset of Symptoms: / / Requests for viral/bacterial serology require a separate blood sample <input type="checkbox"/> Virus Culture <input type="checkbox"/> Chlamydia <input type="checkbox"/> Respiratory Virus Immunofluorescence <input type="checkbox"/> Non-Cervical Cytology <input type="checkbox"/> Requires separate sample <input type="checkbox"/> Histology		
		ANY OTHER TESTS CRP		

Example blood form similar to that printed from DAWN RH at Royal Berkshire Hospital

Visualising data within your DAWN system with a timeline of Medications and Results – Tableau

Heather Stevenson, Applications Consultant, 4S DAWN

Users were shown examples of sample data and possible reports available through the Tableau software, a powerful data visualisation tool that sits on top of the DAWN database and enables analysis of any information contained within. Examples shown included information for individual patient case review and patient population mapping. Heather discussed the two levels of Tableau software that were available for users and what each option provided in terms of usability and functionality.



A timeline of drug therapies, disease scores and blood test results can be mapped against each other for carrying out individual patient review

Disease Activity Scores

George Kitching, Lead Developer, 4S DAWN

George discussed the free online DAS28 calculator which is now used by over 3000 unique users per month from all across the world.

Users are also able to access the DAS28 calculator from within the patient record under the questionnaires tab. Users asked if the DAS score can be made visible under the history tab alongside other test results –linking questionnaire scores to patient history tab would improve visibility.

DAS28 Calculator

www.4s-dawn.com/

[DAS28](#)

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Following the popularity of 4S DAWN's on-line Web-DAS DAS-28 calculator, the team have been developing a similar web page for calculating PsARC scores. A first-cut version of this was demonstrated at the BSR and was met with a very positive response. 4S DAWN aim to have the finished version available for on-line use in the coming months.

DAWN PsARC calculator web page

Reporting on your DAWN RH system

Heather Stevenson, Applications Consultant, 4S DAWN

Heather discussed the reporting capabilities within the DAWN RH system. Users highlighted the fact that in Version 2 they could produce the reports themselves whereas in Version 7 they need to contact the 4S DAWN team to set up the report for them. George explained that it would take a large amount of work to produce an easy report writer and highlighted that the Tableau module discussed earlier was a great tool for users to analyse their data.

Heather put forward the option of having a list of common reports on the 4S DAWN website that customers could pick from and download the setup instructions for. This is currently done for other DAWN customers and the general consensus across the DAWN RH users was that this would be a very useful tool to have.

General Discussion

A general discussion was then held which focussed around three key questions:

- 1) What one thing would you change about the software?

Therapy templates and the need to change them often

The first question brought similar responses in relation to the therapy templates and the need to change them often; however users agreed that this issue had been addressed in the first presentation covering the use of the drugs tab within the patient record.

2) What is the most tedious part of your work day?

Chasing Non-attenders

Discussions around the second question highlighted two areas. Firstly phoning / chasing non-attenders was seen as an element of the work day that took up a lot of time and this pulled out a further discussion thread on the use of a text message reminder service. Text messaging is used by some DAWN customers who send reminder texts at set intervals, 10 days and 1 day before the patient's appointment in an attempt to reduce the number of non-attenders and ultimately the amount of time chasing them after the test date has passed.

A second part of the work week that some users highlighted in response to the second question is the amount of time emailing GPs. Often, users do not send emails by batch as they have to be checked prior to sending. This can take up to 2hrs to complete as a task. It was suggested that perhaps the batch emails can be set-up with conditions e.g. those with no abnormalities or review needed can be added to the batch and sent out to the GP's, leaving only emails that need checking thereby reducing the amount of time required to carry out this specific weekly task.

3) What couldn't you do without the software?

Increased Efficiencies and Patient Safety

With regards to the third question, both improved patient safety and efficiency were highlighted as key benefits that users got from the software.

4) Any other Issues?

Referrals

DAWN Rheumatology allows you to add a question or comment against a patient and refer this to a particular team member to be addressed. The referral form is like an internal messaging system. It provide a convenient way of opening a dialog and recording input from different teams about a particular patient or set of tests results.

Two issues with Referrals within DAWN were debated. The first issue is resolved in version 7.9.29 with the Referral tab closing on moving to a different patient. The second issue centres on the use of Referrals for patient issues not related to a set of laboratory results. The 4S team took note of this problem which could be addressed in later version of DAWN.

5) General Feedback

A brief discussion about the practicalities of the user group highlighted the following:

- Good idea to hold it at the BSR due to travel and funding
- If holding it separately to the BSR, a central location such as Birmingham is preferred over travelling to the Lake District
- More time for open/guided discussions with peers rather than the time filled with DAWN presentations, leaving little time for discussion
- General agreement that a preferred approach would be for each user to spend 10 minutes summarising their clinic set-up, work practices and how they use DAWN followed by user discussions