

PracSavvy

Clinical Systems Support and Training

www.pracsavvy.com.au

Edition 103 - March 2025

This past month has seen BP withdraw its Spectra SP1 release as well as the, already modified once, initial release. There has been the spectre of the occasional unexplained disappearance of consult notes which rightly leaves people feeling quite jittery. I think it has to do with a fundamental change to the way BP clients access the database. Hopefully they can fix it quickly so that people like me can stop feeling so sheepish for forcefully recommending the product for so many years. Some of course have already installed it, which makes my review of the SP1 release in this newsletter, a still worthy inclusion.

In possible response to this, AIR have announced that the deadline for changes to their upload rules has been pushed back to October.

On an AI related note a survey has revealed that 1/10 Australians were asking ChatGPT medical questions last year. It always worried me that ChatGPT did sound like it might be medical. You can read an article [here](#) or a summary of the results [here](#). Or you can find out about that troublesome rash [here](#).

Still with AI and those crazy innovators over at Telstra Health have added a feature called [Smart Scribe](#) to their sidebar in [Medical Director](#). For MD users unfamiliar with the sidebar, it's the feature that many practices turn off because the various widgets seem to dramatically slow their system down. Over the last few years, MD have actually added a few smart cloud based features, but these are generally ignored because the sidebar is hidden because of the speed issues. That old expression mentioning cosmetics and farmyard animals does come to mind. Nevertheless I did explore this a little bit, turn to page 2 for my thoughts.

It appears that [Health Pathways Tasmania](#) are going to encourage users to create their own personalised logins after a decade of everybody using the same login details. The pathways are of course a very useful resource, which I'm always promoting to new doctors, especially those arriving from overseas. There is some information on creating your own profile, amongst other things, to be found [here](#).

MyHR

News this month that Parliament has passed legislation mandating the default uploading of investigation/imaging results by the labs concerned. This won't make a lot of difference in this state as the THS along with the 2 major pathology providers and at least one of the imaging labs are already doing this. Around the country though, it is more patchy, so this will definitely be a good thing. As I say to all the GPs I do training with, the main reason for them to access MyHR is if they know an investigation has been done, and they haven't been sent a copy of the results.

In the last issue I mentioned that ecripts were now imported into the [MyHealth app](#) if you happened to be running it. I came across a couple of brief tutorials that are aimed at the patient **and** that also deal with how the [Active Script List](#) (ASL) appears in the app. Given that there seems to be an almost total lack of knowledge of ASL amongst GPs, I'd suggest 10 minutes of your life wouldn't be wasted on [these tutorials](#).

e-referral

Just a bit of an e-referral tip lifted directly from the latest [GPLO](#) newsletter.

If your patient does not meet any of the specified 'Reasons for Referral' or the requirements listed within a specified Reason for Referral, you can use 'Other non-SRC' category.

This will ensure your referral is still received electronically via eReferral.

The 'Other non-SRC' category does not have specified requirements but enables all relevant information to still be included in the referral for example, any pathology, imaging and other investigations may have been completed.

A proposed triage category score will not be allocated but you will receive notification once your referral has been accepted.

Templates

New at the templates section of my website [here](#).

Safe Clinical Labs Request

PracSavvy

Clinical Systems Support and Training

www.pracsavvy.com.au

Relocation of Specialist Rooms (1/3/25)

Dr Lea-Anne May
Consultant Rheumatologist

Calvary Medical Group
Gleeson House
49 Augusta Rd
Lenah Valley

EDI: *chctlvcs* (unchanged)

Ph: 6278 5456

Email: TAS-LVH-CMG@calvarycare.org.au

Relocation of Specialist Rooms (11/3/25)

Centre for Hand, Wrist & Plastic Surgery
Mr Nitin Sharma and Mr Sid Karanth

36 Collins Street
Hobart

EDI: *hobartph* (unchanged)

Phone: 6214 3585 Fax: 6214 6586

Email: surgery@handwristplastic.surgery

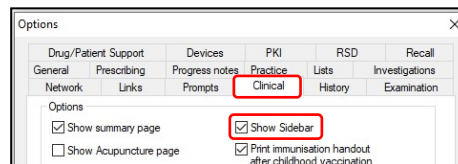
Web: handwristplastic.surgery

MD

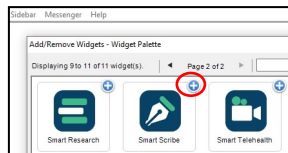
So, as mentioned on the front page, MD have introduced AI integration into their software via their [Smartscribe](#) Widget on their *Smartbar* (previously called *Sidebar* and may be described as *Slowbar*). Like other products and their AI Integration, it's not really as much an integration as a fancy way of calling up the web based AI program.

To this end, by way of preparation you may need to:

A) Enable the sidebar:



B) Ensure the Widget is installed.



C) Ensure the sidebar is pinned in the open position.



You have to do this last step because the main part of MD's integration is displaying what would normally displayed in a separate web page to occupy the area covered by your sidebar. Actually my testing worked better when I uninstalled the other Smartbar widgets. You should do the same as odds are you aren't using them, apart from the [Healthshare Factsheets](#) one. Once you have done all this and clicked on the Smartscribe icon, you should see the following in your SmartBar.



The interface is giving you the choice of 2 products. One is a reasonably well known product called [Heidi](#) and the other is an offering from a company called [Intellitek](#) Health.

I chose to go with Heidi because, a) I already have a free account and b) the name always conjures up a happy image of rolling green fields and carefree girls with blonde ponytails. Having said that, my free account wasn't enough and I needed to start a free 30 day trial for a \$1300 a year product.

PracSavvy

Clinical Systems Support and Training

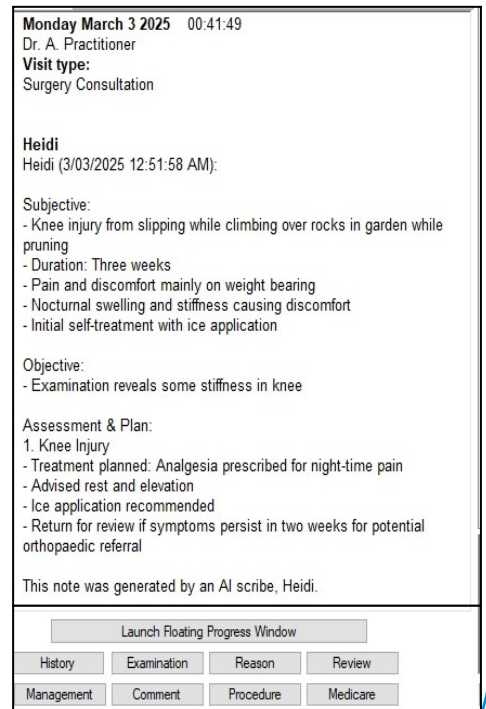
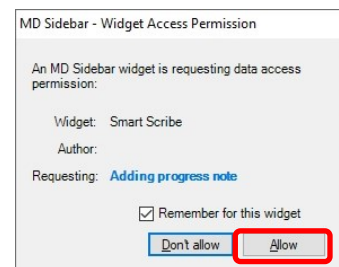
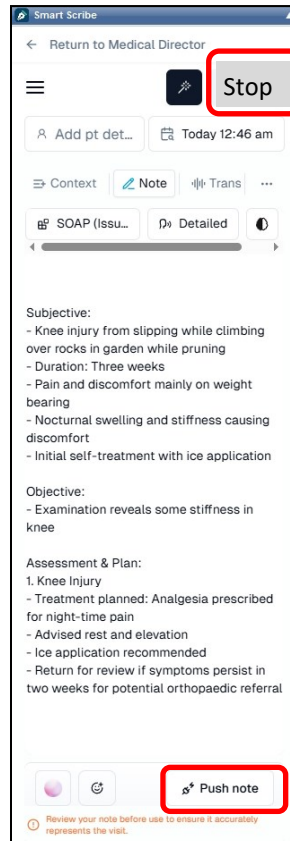
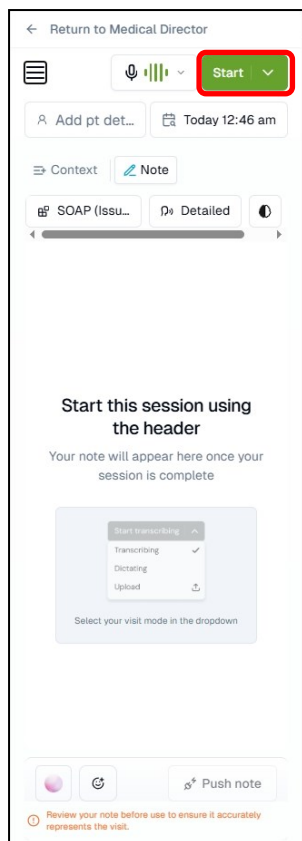
www.pracsavvy.com.au

MD

SmartScribe continued.

Clicking on the Heidi option followed by the *Proceed* link triggered the 2-3 screens for linking to an existing free account or providing some information for a new account, (not depicted).

When all is configured and you have a patient in front of you, ask the patient for their consent to use the tool to record the conversation (document it) and hit the Green start button.



Possibly the surrounding picture isn't worth a thousand words, so I should probably add a few.

Click the green *Start* button as depicted in the first screenshot.

Have the consultation with your patient. The software will ignore social chatter and concentrate on the clinical stuff. Press *Stop* and the transcription of your consultation will fill the Smartbar window. Read the notes and make any edits. Whilst you could edit the notes in MD, doing it in Heidi *should* mean that the software learns more about your communication style and also becomes aware of its own mistakes. Click the *Push Note* button to copy the text to your progress notes. The first time you do this, the widget will ask for a permissions confirmation.

That's the Christmas cracker explanation of this offering. Exploring the menu options at the top of the screen will enable you to set preferences and explore nuances.

PracSavvy

Clinical Systems Support and Training

www.pracsavvy.com.au

BP

So the BP release of it's Spectra edition continues to be *problematic* (as the lefties like to say). At the time of writing both the release and it's SP1 update have been withdrawn. If your IT have downloaded it but not installed it, tell them not to. Having said that I imagine they are already fully aware.

What has been reported has been the occasional loss of consultation notes, so no biggie!! This seems to manifest occasionally, especially in practices which may have millisecond breaks in network connection, sometimes where the pc is running BP locally as opposed to via a remote desktop connection. Thankfully the symptom only seems to occur very occasionally although to be honest it's the sort of error that may be not detected at first.

I do have access to a query that basically compares patients with a completed appointment but no notes in their record for the same day. I have tested it on 4 systems that all updated under 3 weeks ago and happily the query only detected 3 instances where this MAY have occurred. Interestingly, on all 3 occasions the patient saw both a Dr and a nurse, but only one lot of notes was evident. If you have updated and want me to send you the query to check for any **possibilities**, let me know.

For practices that have upgraded already there are some absolute goodies in the SP1 update.

1. eScripts to Pharmacies Hallelujah! I hear you say (thanks spell-checker). Yes, you can now select email to pharmacy as an escript choice.

The screenshot shows a software interface with a table of prescriptions. At the top, there are buttons for 'Add', 'Edit', 'Delete', 'Print', 'eScript', 'Token: Email (Pharmacy)', and 'View MySL'. Below these are buttons for 'Select all', 'Select red', 'Run all checks', and 'Prescription and Dispense View'. A 'Script date' dropdown is set to '25/09/2024'. A note says 'Tick the boxes of the items that you want to print. Items in red have been calculated to have been fully used'. The table below has columns for Drug name, Strength, Dose, Quantity, Rpts., Script type, Long term, and Last script. The first row is 'Amlodipine 5mg Tablet' (5mg, 1 At midday with meals As dir 60, 0, 0, PBS, No, 24/09/2024). The second row is 'Dabrafenib 50mg Capsules' (50mg, 1 In the morning after meals. 120, 0, 0, PBS/RPBS A, No, 24/09/2024). The third row is 'Dithiazide 25mg Tablet' (25mg, 1 In the morning before meals 200, 1, 1, PBS, Yes, 24/09/2024) and is checked with a blue box.

Once you have made the selection and clicked eScript you will be prompted by a further very welcome screen.

The 'Send to pharmacy' dialog box shows a message: 'You have selected the 'Email (Pharmacy)' token for the prescription/s below:'. Below this is a list of selected prescriptions: 'Esomeprazole 20mg Tablet'. There is a checked checkbox for 'Patient consents to have their prescription/s sent directly to their preferred pharmacy.'. Below that, it asks 'Please indicate how you want to send the token/s.' with three radio button options: 'Use Previous email address: escripts@testemailaddress.com', 'Enter the email address to send the token to:', and 'Use Contact details email address' (which is selected). There is an 'Email:' field with 'escripts@testemailaddress.com'. To the right, there is a 'Search for:' field and a list of pharmacy contacts: 'Smith Street Pharmacy (Pharmacy) Email: escripts@smithstreetpharmacy.com.au' and 'West Smith Street Pharmacy (Pharmacy) Email: escripts@testemailaddress.com'. At the bottom right, there are 'Next >' and 'Cancel' buttons, with 'Next >' highlighted in red.

Obviously the proof is in actually using it, but the screen asks you if you want to:

- ◆ Use the previous escript email address (it remembers and displays it)
- ◆ Enter a new email address
- ◆ Display a list of Pharmacies in your Contacts so you can select from there.

So, a great bit of functionality that should more than make up for the loss of the occasional clinical notes. Obviously I'm kidding, but useful now for Spectra SP1 users and something to look forward to once issues have been fixed.

BP

Spectra SP1 enhancements continued

2. Emailing Results. You can now email pathology results direct from the results area.

Date	Test name	Checked by	Date checked	Action	Status	Comment	Note
<input type="checkbox"/> 28/06/2023	Report	Mr Stuart Gunter	21/10/2024	No action	//	Normal	
<input type="checkbox"/> 26/08/2023	Report	Mr Stuart Gunter	21/10/2024	Doctor to advise	//	Unacceptable	

Bp E-mail

To: reuben.dean@emailaddress.com
 Use patient e-mail

CC:

Subject: Result

Attachment: PDF PIN: 1412

Use account: outlook.office365.com

Template: Email Investigation Result to Patients

This is an Example.
Hello, Reuben Dean, Mr Stuart Gunter has reviewed Report 26/08/2023 and the results are within normal ranges. There is no need for an additional appointment.
This email is not monitored. Please do not reply. Call 32133333 if you wish to discuss any further.

Attachment: Result-15.pdf

Send Cancel

As you can see from the above, you are able to select the patients email address as well as an appropriate BP Comms template from the Results category, (Setup..Configuration..Templates). People may be disappointed by the fact that emails done this way have a PIN that can't be disabled. To those people, I suggest you get over it. Heck you could even show a PIN hint in the body of the template.

I would have to say though, much like the new Unactioned Results prompts in the initial Spectra release, ([Jan newsletter](#)) I don't think they quite *stuck the landing*. You can only send results one at a time via this method and watch the screen carefully because it will be the highlighted result that will be sent, not a ticked one (unless it's ticked and highlighted). But one result at a time is the thing that will leave people groaning.

Having said that, I'm not a huge fan of emailing results to patients. Will they understand what they are reading? I'd much rather practices refer patients to their MyHR, and if they haven't got one, well maybe it's time to smarten up.

3. AIR Uploading Requirements. One of the main imperatives for this release was a March 1st deadline for a change in AIR upload requirements. This date has now been pushed back to October. The change relates to merging the *State* and *National* choices to *Other*. It's self-explanatory.

Date: 13/01/2025 Country: Australia

Route: IMI SC Oral Intradermal Site: Sequence: 1

School ID: Vaccine Type: Antenatal, NIP/Commonwealth, Other

Batch No.: Expiry: Save batch details

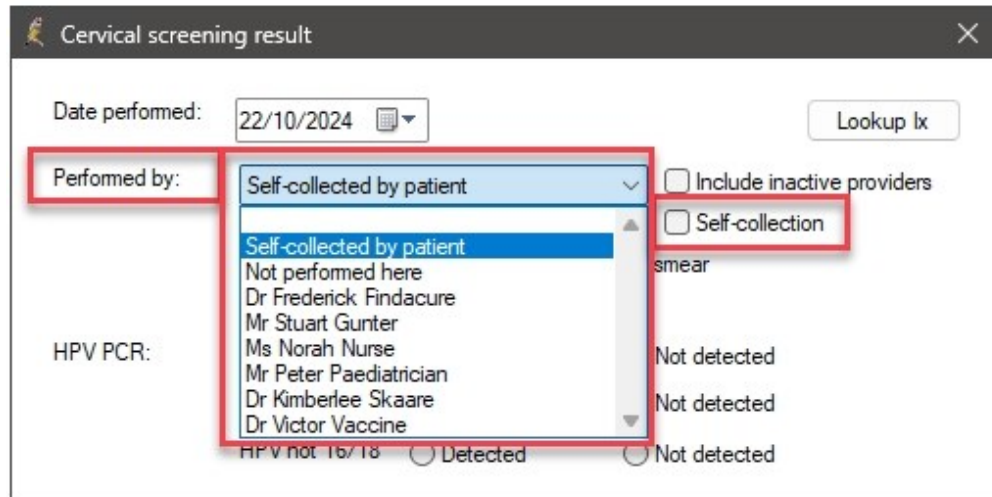
Comment:

Send reminder 13/01/2025

Send to AIR Save Cancel

Spectra SP1 enhancements continued

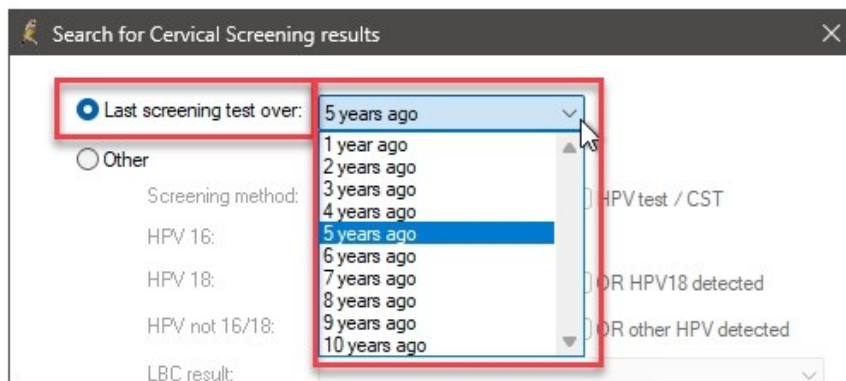
4. Cervical Screening Outcome Recording BP have incorporated fields for self-collected Cervical screening samples, both practice assisted and fully self-collected, as shown by the following screenshot.



The exact circumstances of the collection are also shown on the BP screen that shows the Screening Result History.

Cervical Screening Tests								
Screen Date	HPV 16	HPV 18	HPV Other	LBC Result	Risk Category	Endocervical cells	Self Collection	Performed by
29/08/2023	No	No	No	Low-grade squamous intraepithelial lesion	Higher risk		No	Not performed here
03/03/2025	No	No	No	Negative	Low risk		Yes	Self-collected by patient

Still on this topic, BP has added further choices to the Search area to facilitate practice-wide search requests.



Of course any possible overdue screening can be confirmed by cross-checking with the NCSR register via BP, a piece of functionality that some practices have inexplicably still not enabled.

So let's hope that the Spectra issue get's fixed and soon all practices will be able to install a safe update and enjoy the functionality mentioned above.