

## **Therapy Support Suite (TSS)**

### **User Manual**

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#### **1 IMPORTANT INFORMATION**

#### **1.1 IMPORTANT INFORMATION ABOUT THE USER MANUAL**

**Identification** The document can be identified by the following information on the title page and on the labels (as required):

- software version of the application program
- User Manual Edition

Page identification Each page footer contains the page, document and section number.

**Editorial information** The editorial information, e.g. 4/06.11, refers to: fourth edition, June 2011.

**Illustrations** The illustrations used in the documents (e.g. screenshots, photos, etc.) may differ from the original, if this is of no significance to its functioning properly.

**Importance of the instructions** This User Manual is part of the accompanying documentation and is thus an integral part of the software. It includes information necessary for the use of the system. The User Manual is intended for the initial approach and reference. Before the responsible organisation may start operating the system, the person responsible for the operation must have been instructed by the manufacturer and must be thoroughly familiar with the contents of the User Manual. The software may only be used by individuals who can prove that they have been instructed on its proper use and handling.

**Changes** Changes to the technical document will be issued as new editions or supplements. In general, this document is subject to change without notice.

Reproduction

Reproduction, even in part, is subject to written approval.

#### **1.1.1 SIGNIFICANCE OF THE WARNINGS**



#### Warning

**Risk types and causes** 

Possible consequences of exposure to risk and measures to avoid them.

Warns the operator that failure to comply with warnings may result in personal injury.

Warnings may deviate from the above model in the following cases:

- If a warning describes several risks
- If a specific risk cannot be detailed

#### **1.1.2 SIGNIFICANCE OF NOTES**

Note



Advises the operator that failure to follow the steps as specified may result in the specific function not being executed correctly, not being executed at all, or not producing the desired effect.

#### **1.1.3 SIGNIFICANCE OF TIPS**



#### Тір

Useful information for better software handling.

#### **1.2 INTENDED PURPOSE AND RELATED DEFINITIONS**

Therapy Support Suite is a client-server software system that supports medical staff (doctors and nurses) and paramedical staff (technicians and administrators) in the management of dialysis clinics.

#### **1.2.1 INTENDED PURPOSE**

Dialysis dose calculation and treatment data display.

#### **1.2.2 MEDICAL INDICATION**

Renal failure that requires renal replacement therapy.

#### **1.2.3 INTENDED PATIENT POPULATION**

No restrictions on patients expected unless the connected (medical) devices are subject to limitations.

The standard use of Therapy Support Suite is in hospitals; however, outpatient assistance is not excluded.

#### **1.2.4 INTENDED USER GROUP AND INTENDED ENVIRONMENT**

The system will be used by physicians, nursing, administrative and technical personnel. Therapy Support Suite is not intended to be used by patients. The system, like client-server software, can be used in any setting where compatible hardware can be used; it is usually used on a PC / work stations in clinical settings.

#### **1.2.5 CONTRAINDICATIONS**

None.

#### **1.2.6 UNDESIRED EFFECTS**

None.

#### **1.3 IMPORTANT INSTRUCTIONS REGARDING THE OPERATIONS**

If the verification of patient data reveals a deviation between parameters prescribed by the physician and those displayed by the dialysis system, the operator must check and correct the system's default settings prior to the start of the treatment. Displayed device settings must be compared with the prescriptions specified by the physician.

The software may only be installed, operated and used by individuals with the appropriate training, knowledge and experience.

Installation operations, extensions, adjustments or repairs are to be carried out only by the manufacturer or persons authorised by the same.



#### Warning

Clinic or technical support personnel must take necessary precautions and measures to ensure Hardware and Software reliability.



#### Warning

Data processing is the responsibility of the manager.

To eliminate the possibility of entering wrong values, the operator must ensure that the data entered are correct. The operator must ensure that values read back after being sent to the server correspond to the information entered.

Data loss cannot be excluded.

#### **1.3.1 CONDUCT IN EXCEPTIONAL SITUATIONS**

Under unfavourable conditions such as after a disconnected network connection to the server or after program crashes, deviations between the data on the server and those in the client program may occur. In this case it is recommended that the program be shut down and restarted.



#### Warning

The operator should always have access to patient data (e.g. in written form) for every patient.

#### **1.3.2 INTERACTIONS WITH OTHER SYSTEMS**

- Therapy Monitor
- Communication Data Link (cDL)
- Patient OnLine
- Nephrological Cockpit

#### **1.4 SYSTEM REQUIREMENTS**

Therapy Support Suite requires the complete installation of a FIS (Fresenius Interface Server) communication server.

Therapy Support Suite must be installed by authorised technical personnel.

#### **1.4.1 IT ENVIRONMENT**

Therapy Support Suite is a complex client-server software application comprising dialysis devices, application servers, web servers, database servers, user workstations and a broad range of network equipment (switchers, routers, plugs, connection cables, etc.) to be used inside hospital IT networks.

Clear IT requirements for both hardware and software have been defined for each component of this complex network.

Please see the relevant Service Manual for additional and more detailed information about the IT environment required for operation of Therapy Support Suite.

	Note	
	The recommende	ed client configuration is as follows:
	Processor	Minimal: Intel or AMD processor 1GHz Preferred: Intel or AMD processor Dual-Core 2GHz
	RAM	Minimal: 2 GB Preferred: 4 GB
NO.	Hard disk	Minimal: 100 MB for each window user
	Video card	DirectX 10 compliant
	Screen resolution	Minimal: 1280x1024 Preferred: 1680x1050
	Network	Ethernet 100/1000 MBit/s
$\sim$	Note	
	PCs used in an en	vironment in contact with patients must comply with the

EN60601-1-1 standard.

#### **1.5 DUTIES OF THE RESPONSIBLE ORGANISATION**

The responsible organisation assumes the following responsibilities:

- Compliance with the national or local regulations for installation, operation, use and maintenance;
- Compliance with workplace health and safety regulations;
- Permanent availability of the Operating Instructions.



#### Warning

The IT environment must be maintained and protected as defined in the Service Manual.

#### **1.6 OPERATOR RESPONSIBILITY**

The following must be observed when entering parameters. The parameters entered must be verified by the operator, i.e. the operator must check that the values entered are correct. Should the desired value deviate from the parameters displayed, the setting must be corrected before activating the function. The current values displayed must be compared with the desired values.

#### Note

#### **Fault reports**



In the EU, users must report any serious anomalies that may occur to the manufacturer. The report must be made to the manufacturer of the device

based on the label and to the competent authority in the EU Member State where treatment is performed.

#### **1.6.1 OPERATIONS**



#### Warning

Therapy Support Suite can work properly only once all hardware and software requirements have been met and each component has been installed and configured correctly.

Installation and configuration must be performed by qualified technical personnel.

A hardware or software error can lead to corruption of the treatment data displayed by Therapy Support Suite. Errors in treatment decisions may be made on the basis of these incorrect data.

Treatment data received from the device cannot substitute good clinical judgement. The patient and all available data should be evaluated by the physician.

PC hardware and software requirements as well as installation and configuration instructions are available in the Therapy Support Suite Service Manual.



#### Warning

It is strongly recommended that the user/principal encrypts the data in the TSS Database. If the database is not encrypted and someone steals the database files, there may be a loss of personal patient data.

#### **1.6.2 DOCUMENTS REFERENCED**

- Therapy Monitor Instructions for Use
- TSS Service Manual
- Functional Manual for the DataProtection 1.9 Plugin

#### **1.7 LIABILITY DISCLAIMER**

The software has been developed for the functions described in the User Manual. The manufacturer assumes no liability for personal injury or other damages and excludes any warranty for damages to the system and the software resulting from the use of non-approved or unsuitable accessories.

Please check the list of accessories:

- Therapy Monitor
- cDL Interface
- Patient OnLine

# **1.8 WARRANTY Guarantee extensions** The extent of the guarantee is stipulated in the respective purchase orders. **Warranty** The purchaser's warranty rights are governed by the applicable legal regulations.

#### 1.9 CE MARK

Therapy Support Suite, version: 1.9



Fresenius Medical Care AG & Co. KGaA

Else-Kröner-Str.1

61352 Bad Homburg

Germany

Phone: ++49-(0)6172-609-0

Declaration of Conformity certificate available upon request.

#### **1.10 CERTIFICATES**

The products covered by this technical documentation are Class IIa medical devices pursuant to Standard 11 of Annex VII to Regulation (EU) 2017/745 (MDR).

Upon request, the current versions of the CE certificates will be provided by local support.

#### 1.11 SVHC (REACH)

For information on SVHC, pursuant to Article 33 of Regulation (EC) No 1907/2006 ("REACH"), please refer to the following page:

www.freseniusmedicalcare.com/en/svhc



#### **1.12 HELP AND SUPPORT**

Please forward any requests to:

#### **1.12.1 MANUFACTURER**

Fresenius Medical Care AG & Co. KGaA

Else-Kröner-Str.1

61352 Bad Homburg, GERMANY

Phone: ++49-(0)6172-609-0

www.fmc-ag.com

#### 1.12.2 SERVICE

Fresenius Medical Care Deutschland GmbH

Geschäftsbereich Zentraleuropa

Projektierung & Support Dialyse-IT-Systeme

Steinmühlstraße 24, Anbau 1

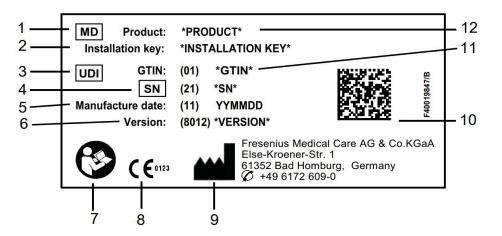
61352 Bad Homburg, GERMANY

Phone: +49 6172 609-7000

Fax: +49 6172 609-7106

E-mail: dialysis-it@fmc-ag.com

#### **1.13 IDENTIFICATION LABEL**



- 1. Medical Device
- 2. Installation key
- 3. Unique Device Identification
- 4. Serial Number
- 5. Manufacture date (build date of the software product)
- 6. Version
- 7. Follow Instructions for Use
- 8. CE mark
- 9. Manufacturer's address
- 10. Data matrix code with UDI information
- 11. Global Trade Item Number
- 12. Product

#### 1.14 SYMBOLS

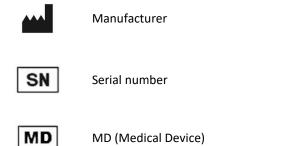
In compliance with applicable legal and regulatory requirements, the following symbols are used in the Information menu or on the identification label:



See User Manual

**C E** 0123

CE mark



#### **1.15 GENERAL DATA PROTECTION REGULATION (GDPR)**

GDPR (General Data Protection Regulation) is a law enacted in the European Union to ensure the security and privacy of sensitive data.

The dedicated features listed below have been implemented in the Therapy Support Suite:

- All sensitive patient data in the Therapy Support Suite database have either been encrypted or pseudonymised depending on the configuration;
- All sensitive user data in the FME User Management database have been encrypted;
- All communications between the components of the Therapy Support Suite listed below have been encrypted:
  - TSS Client Vs TSS Server;
  - TSS Server Vs #400;
  - TSS Server Vs #401;
  - TSS Server Vs #55.
- The integrity of all communications is ensured by specific technical features such as cyclic redundancy check;
- Sensitive patient data is used only when strictly necessary, such as, for example, when it is mandatory and vital to correctly identify the patient;
- Patients can request a printed report of the most common patient data set processed over a specific time period by the Therapy Support Suite. If a patient requests a different or extended data set, it is possible to generate an agreed report upon request.
- Patients may request that their sensitive data be anonymised or deleted from the Therapy Support Suite. This
  is made possible by the Data Protection Plugin;
- Patients may request a copy of their personal and clinical data in a computer readable format for a defined period of time saved in the Therapy Support Suite.
- Patients may request that their personal data be corrected in the Therapy Support Suite;
- Therapy Support Suite logs all actions performed by users. Logs of the operations performed by each user can be filtered using different search criteria and can be displayed and printed;

- Each user operations log not only records all data entry or deletion operations completed by the user but also the reading, which gives a detailed record of all information read, modified or deleted by any user;
- Therapy Support Suite uses a complex user access management system, which includes user authentication, authorisation, roles, permissions, etc. Only users with the correct permissions can access certain features of the Therapy Support Suite.
- Therapy Support Suite applies a special permission that allows only those users who are using it to edit or delete information entered by other users. Depending on the configurable security level defined by the client, Therapy Support Suite will require users to log in when the application starts up or after a logout due to a system timeout;
- Therapy Support Suite's security measures are configurable;
- Pseudonymisation of sensitive data can be applied during data export or report generation.

Please refer to the DataProtection 1.9 Functional Manual for further details and information on the functionality provided by this plugin.

#### 1.15.1 SENSITIVE DATA PROCESSED BY THERAPY SUPPORT SUITE

Sensitive patient data (i.e. those data that might be pseudonymised or encrypted) can be defined by users. Therapy Support Suite defines an initial set of sensitive data, comprising a patient's administrative and clinical data, normally identified as sensitive. The default pool of sensitive data is defined as such because these data are involved in identifying the patient's identity, his or her closest relatives or organising transportation.

This data set can be expanded or reduced by selecting the properties of the dedicated fields in the Designer role functionality.

#### **1.15.2 USER TOPICS AND SPECIFIC FEATURES**

As already mentioned, Therapy Support Suite has introduced a set of features that ensure data security and privacy, especially when used together with the TSS Data Protection plugin. The plugin enables a user configuration option that provides access to a specific section of the Therapy Support Suite menu. Through this, the following features will be enabled:

- Extract patient data in a legible format
- Physically delete patient data
- Anonymise patient data
- Extract and delete patient data
- Extract and anonymise patient data
- Removal of sensitive data from the clinic staff section if those subjects are no longer authorised to use the system

Please refer to the DataProtection 1.9 Functional Manual for further details and information.

There is a second specific option (also available without the TSS Data Protection plugin) that can be enabled for each user that allows data export and printing from the Therapy Support Suite.

As explained in detail in the TSS Service Manual, a user, for whom this last option has been enabled, can choose a special data pseudonymisation feature in a scenario where sensitive data is going to be involved in data export or report printing

#### **2 INSTALLATION AND START-UP**

Please refer to the Therapy Support Suite Service Manual for all information regarding Therapy Support Suite installation steps.

#### **3 GENERAL PROGRAM OPERATION**

Therapy Support Suite has been developed for the user-friendly Windows operating system.

In this document, we assume that the user is familiar with the basic operating functions in Windows. These include functions such as starting and exiting Windows, starting a program, using the mouse (left-click, double-click, right-click) and opening, moving and deleting files.

This chapter describes the basic operating functions of Therapy Support Suite. It also provides information regarding terms and their meanings in the User Manual.

#### **3.1 STARTING AND EXITING THE PROGRAM**

Therapy Support Suite can be started in several ways:



The first way is using the icon on the Windows desktop (if available): double-click the Therapy Support Suite icon or right-click the icon and then left-click Open.

The program can also be started using the Start Menu (Start  $\rightarrow$  All Programs  $\rightarrow$  Fresenius Medical Care  $\rightarrow$  Therapy Support Suite)

When the software is loaded, a window is displayed showing the product logo, with the version number in the bottom right-hand corner.



The cursor automatically locates on the user name field. Enter your username and password and click the access button.

If "Login Assistance" was selected when the service was installed, as soon as the first two letters of the user name have been typed, a list of all users whose name starts with those letters will appear.

If the credentials entered are correct, you will be logged on as an active user and allowed to work with Therapy Support Suite. For further information about user management, please refer to the Fresenius Interface Server User Management documentation.

#### **3.2 WINDOW LAYOUT**

The Therapy Support Suite application window is divided into three principal areas: the Top Bar, the Navigation Bar and the Summary.

Top Bar



This bar allows the user to access a specific area of Therapy Support Suite. The third tab shows the name of the clinic, and where there are several clinics the user can switch between them without having to log in and out every time. This section shows/hides areas depending on the user permissions of the specific user's account (e.g. an administrator account will see more options than a 'normal' user).

The Suite button on the left-hand side of this section allows the user to perform specific operations related to his/her profile (e.g. activate special roles or view the Therapy Support Suite version).

6	Therapy Support Suite					
	demouser					
Use	er roles	۲				
Car	d reader					
Use	er profile					
Abo	out					
Log	out					
Exit	from application					

#### **Navigation Bar**

This menu contains sub-sections related to the general area selected in the section menu (the screenshot below refers to the Patient menu).

C	demouser Pati	ients
	<b>▼</b> Open patient list	
Basic	data	
<u> </u>	Patient summary	
Т	reatment overview	
A	Administrative data	
N	Medical data	
۲	lospitalisations	
F	Patient status	
N	Medical prescription	
F	Patient agenda	
HD		
	/ascular access	
	reatment prescription	
	Checklist	
	reatment schedule plan	
	Pharmacological prescription	
	Messages	
	Treatments	
	1D survey	
	ratories	
	aboratory test aboratory data	
	aboratory test schedule	
	cal Data	
	Clinical diary	
	Allergies	
	/accinations	
F	amily medical history	
	Serm situation	
T	Transfusion list	
C	Comorbidity	
	pecialist examination	
	Diagnostic test	
	self-sufficency	
C	Outpatient clinic visit	
	Patient medical history	
A	Amputations	
	linical case	
PD		
F	PD access	
F	PD prescription	
F	D treatment scheduler	
F	Review	
F	lome visit	
F	PD treatments	
F	Peritonitis	
Ţ	iunnel exit site	
	Adequacy and nutrition	

The Patient menu allows patients to be changed quickly with the aid of the "Patient List" window. This window can be

opened by clicking the button or pressing F3 on the keyboard. Display of the patient's photograph is disabled by default.

It can be activated in the "Clinic Manager" role, by clicking on "Configuration parameters" and setting the "Hide patient picture" field to "No".

demouser	Patients	
📥 Close patien	t list	
Active patients (9)		•
Search	C	2
Aitken Lambert, David	്	2
15/08/1952	39807	11
Brennan , Nicholas	♂	
28/10/1962	399489	
Freeman , Mason	്	
19/07/1936	3478	
Hartley , Sarah	ę	
21/05/1957	93710	
Metcalfe , Jonathan	₫	
04/11/1940	16821	
Middleton , Mary	Ŷ	
09/01/1935	63416	
Morton , Katherine	Q	
06/08/1925	47829	
Saunders , Benjamin	്	
20/09/1957	72362	
Thompson , Josie	Ŷ	
23/10/1950	166334	

#### Summary

This area displays details of the selection made in the Top/Navigation Bar. For example, if a patient is selected from the Patient List, his or her Summary page will be displayed by default in this section.

demouser Patier	nts Default Clinic 🔻 F	leporti	ng			FRE MED	SENIUS ICAL CARE			Search in Patient	
Open patient list	<ul> <li>Aitken Lambert, David [39807</li> </ul>	+									
sic data	🔺 Aitken Lambert , David 🖇	orn 15/0	8/1952 (67y) C	Gender 🗗 Co	d. 39807 Status I	Active/Hemodia	alysis 🔟 兌				
Patient summary	Summary										
Treatment overview											-
Administrative data	Last forty treatments								Active leading pro	escription	ŀ
Medical data		7	20 Nov 2010	18 Nov 201	16 Nov 2010	13 Nov 2010	11 Nov 2010		Prescription	name Test 1	
Hospitalisations	Pre-dialysis weight	Kg		66.80	68.20	67.40	68.30		Crastion	date 20 Jan 2016 11:30	
Patient status	Post-dialysis weight	Kg	84.10	65.20	65.20	65.20	65.40		Creation	Tuble 2018/12010 11.50	
Medical prescription		13.92			-				Vascular access		ŀ
Patient agenda	Dry body weight	Kg	65.2	65.2	65.2	65.2	65.2		Creation	date 01 Jan 1999	
	Weight gain	Kg		1.60	3.00	2.00	1.90				
Vascular access	Weight gain percent	%		2.35	4.45	2.93	2.78		Type and po	sition Fistula	
Treatment prescription	UF volume	mi	2480	1900	3300	2492	3300			<u>Upper arm brachial mea</u> <u>Left</u>	ial -
Checklist			an reader of	125255	1000	40.5057	20202000			24	
Treatment schedule plan	Pre-systolic/Diastolic pressure		142/74	167/76	173/80	162/83	156/82			Status Functioning	
Pharmacological prescription	Post-systolic/Diastolic pressure		136/66	140/73	134/81	146/80	147/78		3	status Functioning	
Messages	Pre-dialysis heart rate	bom	74	68	77	71	70		Active regular the	erapy	+
Treatments			1000	200		1.00			Drug / Active	e ingredient Dosage and frequ	ency
HD survey	Post-dialysis heart rate	bpm	66	74	83	88	77		Fascox	12 - 0 - 32 - 0 mg	
oratories	Critical RBV	%	83								
Laboratory test	Min RBV	%	98.9								
Laboratory data	Effective Kt/V	-	1.43						Active dialysis rel	ated therapy	•
Laboratory test schedule			10000	The local day	C. and the				Prug / Active	e ingredient Dosage and frequ	ency
dical Data	Total substitution volume	L	17.0	37.1	28.2	35.4	33.5		Fepili	12ml All treatme	nt
Clinical diary	1 Y									W 1 Mo: 12 Tu: 1	
Allergies									Mitopep	W 2 Mo: 10 Tu: 1 See more	.2 We:
Vaccinations				0						SEE MORE	
Family medical history	Last twenty lab tests			Ť				+			
Germ situation		¥	Last	1	9 Oct 2010 00:00	21 Sep 3	2010 00:00		Messages		-
Transfusion list	Dialysis dose Daugirdas DPVV Kt/V		1.47	1	.47	1.37			F Status	Message	
Comorbidity			action of		38.597	7.050			Active	Check blood pressure at dialys	is end"
Specialist examination	Dialysis dose equil. Kt/V	-	1.47	1	.47	1.36			Active	Need Potassium at dialysis end	1
Diagnostic test	Haemoglobin	g/dl	13.2	1	3.2	11.7					
Self-sufficency	Sodium	mEq/I	140.00	1	40.00	145.00					
Outpatient clinic visit	Potassium	mEg/I	7.20		.20	7.03			Comorbidity		+
Patient medical history		-	7.20	1	.20	7.05			🗣 Code	Name	
Amputations	Bicarbonate	mEq/I								No data	
Clinical case	Total protein	g/dl	6.5						Residual diuresis		+
	Total calcium	mg/dl	9.8	9	.8	9.4			Residual diuresis	Amount	
PD access		mg/dl	6.5		5	5.0			F Lab test date	e ml	
PD prescription	Phosphate	mg/ui		0	.5	5.0			-	and the second second	
PD treatment scheduler	РТНІ	ng/l	64							No data	
Review	Albumin	g/dl							Hospitalisations		-
Home visit	C-reactive protein	mg/l	5.60						F Start date of	hospitalisation End date of ho	ospitali
PD treatments										No data	
Peritonitis	ALT (GPT)	IU/L	14			14				NO data	
Tunnel exit site	Ferritin	µg/I	115.5						Patient allergies		+
Adequacy and nutrition									P Date Alle	erg Allergy ty Details	

#### **3.3 WINDOW CONTROL ELEMENTS**

The **Title bar** is in the top of the screen and shows the name of the application on the left, with the following icons on the right:

The "Minimise" button minimises the program. This does not close Therapy Manager Support Suite but shifts it to the task bar where it can be clicked to call it up again. No entries can be made in windows which have been minimised. However, the processing of tasks continues in the background.

The "Restore" button allows Therapy Support Suite to be used in a reduced view. If Therapy Support Suite is restored with a smaller window, re-click the "Restore" button to return to the full-size window.

Click the "Close" button to

exit Therapy Support Suite.

#### Scroll bar

Click the scroll bar to move the contents of windows or fields up or down as required. If your mouse features a mouse wheel, this is a convenient way of moving the window up and down. If the window or field is displayed in its entirety, the scroll bars are invisible.

#### Cursor

The cursor (mouse pointer) only appears if a mouse is installed. If the mouse is moved, the position of the mouse pointer changes on the screen. If the computer is just executing a command, the mouse pointer changes its appearance into a wait cursor.

#### **Button**

Clicking a button will directly initiate the corresponding function (e.g. create/ save/ delete information).

#### **3.4 TABS**

#### Window tabs

In Therapy Support Suite several tabs can be open at once. You can switch between them by navigating through the window tabs. The tabs can be closed using the close icon, with the exception of the last tab which always remains visible with the close icon deactivated.

•	Aitken Lambert, D	avid [39807]	$ \times $	Messages and	tasks	+				
Δ	Aitken Lambert	, David B	Born 15	/08/1952 (67)	i) Gender 🔗	Cod. 3980	7 Status Active/Hemo	odialysis	2	
Tre	atment prescrip	tion								
A	ctive prescriptions	Disabled	Full lis	st						

#### Tab

Some sections are divided into sub-areas. In such cases you can navigate through them by clicking your tab of choice. For example, see the second selection in the screenshot below:

•	Aitken Lambert, David [39807] 🗙 🛛 C	linic Home Page	Messages and tasks	+					
Δ	Aitken Lambert, David Born 15/	08/1952 (67y) Gender	Cod. 39807 Status Activ	s Active/Hemodialysis 🔼 🕏					
Tre	atments						Cancel	Save O	
Treatment date		24/09/2019 08:13	E		Treatment	it doctor	<u>PP</u>	×	
	Responsible user	Responsible user			Second resp	ponsible	Second responsible	•••	
	Prescription name	Default Prescription	<u>24</u> × …		Ur	nique ID	790		
G	eneral data Consumables used	Anticoagulant agent	Treatment information	dXp Dialysis	device settings	CI Assistance	Detailed information	Medical services	

#### **3.5 BUTTONS WITHIN THE APPLICATION**

Therapy Support Suite features buttons for functions that are required frequently. Clicking on these buttons allows you to directly open tabs or execute commands.

<b>▼</b> Open patient list	Opens the Patient List
▲ Close patient list	Closes the Patient List (or press F3)
	Returns to the previous item in a series of data (e.g. Laboratory tests)
$\mathbf{>}$	Moves on to the next of a series of data (e.g. Laboratory tests)
	Returns to the initial view of the section (e.g. when you are in a specific laboratory test, clicking this button returns you to the complete list of Laboratory tests)
+	Creates a new empty window tab.
×	Closes the relative window tab
Aitken Lambert, David Born 15/08/1952 (65y) Gender d Cod. 39807 Status Active/Hemod         Patient risks         Risks Allergies         Date       Allergy type         Allergy type       Allergy type specification         2010       Active ingredient         2009       Food         Milk	Click this button in the patient header bar to open the "Patient Risks" window (this button is only displayed for patients with risks)
	Minimises patient details (only the patient's name will be shown, with no additional information)
	Maximises patient details (additional info is shown).
	Displays the data in the window in table mode
	Displays the data in the window in chart mode

	Displays the calendar and selects a specific date
New	Creates a new item in the current section (e.g. Dialysis treatment, Laboratory test)
Delete	Deletes an item from a collection (this button can only be used by users who have the necessary permissions)
•••	Opens a pop-up that links to another section, (e.g. to open Consumables List/Vascular Accesses from the HD Prescription section). The user must select an item or press the Cancel button to close the pop-up
Cancel	Exits the current section without saving pending changes
Save	Saves the pending changes made to a section. If this button is 'grey shaded' saving is not possible. This occurs when a mandatory field is empty or incorrect or when there are no pending changes
Copy to	Enables the user to make a copy of the current section (e.g. to duplicate the dialysis prescription).
Print	Opens and prints reports related to the current section.
Export Excel	Exports the current view to Excel (e.g. lab tests, HD Treatments). Once the export is complete, the new file will be automatically opened by the default program for the extension .xlsx (for example: Microsoft Excel, Open Office, etc)
Add new	Opens a window and prepares for creation of a new element (e.g. Pharmacological therapy)
Suspend	Opens a pop-up where it is possible to suspend an Active drug.
Terminate	Terminates an Active drug.
Reactivate	Opens a pop-up where it is possible to reactivate a Suspended drug.

Suspended	Opens a pop-up where it is possible to modify the suspension date or cancel the suspension of an active drug for which a future suspension has been inserted.
Delete suspension	Cancels the suspension of a drug before the suspension start date is reached.
Copy to	Creates a pharmacological prescription identical to the one which has just ended, except for the start and end dates.
Print prescription	Opens the pop-up for preparation of the Italian NHS red prescription form.
Select from Shift Group	Used for planning the treatment schedule.
Optimise shift and resources	Used to optimise the planning of the treatment schedule.
Remove all scheduling	Used to remove all the treatment schedules with a single click.
	Used to switch clinics if TSS is configured for more than one clinic.
Create donor data	Used to access the donor data creation window directly from the administrative data
Export	Used to export inactive patients.
New movement	Used to create a new transplant waiting list movement
New transplant	Used to create a new transplant
See transplant	Used to view a transplant already created
Add failure	Used to record a failure for a transplant already performed

New	Used to create a new entity (for example medical orders or scheduled Laboratory tests)
Perform	Used to perform an outpatient clinic visit
No show	Used to mark a scheduled visit as a no-show
Confirm	Used to confirm the creation of an off-line patient transfer.
Import data	Used to start importing the data of an off-line patient transfer
Import	Used to import the data of an off-line patient transfer
Confirm review	Used to confirm the data imported by means of an off-line patient transfer
View import data	Used to review the data imported by means of an off-line patient transfer
See lab test	Used to display Laboratory tests
Close treatments	Used to close multiple treatments, both PD or HD
Close	Used to close individual treatments/consultation visits
Re-open	Used to re-open individual treatments/consultation visits previously closed
Create treatments from scheduling	Used to create treatments for peritoneal dialysis patients directly from the clinic schedule
Delete real treatments	Used to delete treatments for peritoneal dialysis patients directly from the clinic schedule
New message	Allows the creation of a new message to be sent to one or more recipients

New task	Allows the creation of a new task to be assigned to one or more recipients
Send	Allows a message/task to be sent once the recipients and subject have been entered
Refresh	Updates the list of messages/tasks displayed in the relevant table
Reserve	Allows the current user to book a task for him or herself
Add comment	Adds a new comment to a task
Remove reserve	Allows the current user to remove a booked task
Reject	Closes a task with "Refused" status
Complete	Closes a task with "Completed" status
Archive	Moves the selected messages/tasks to the corresponding section of the archive
Second endorsements	Allows a pop-up to open that shows the second missing approvals for a HD treatment if the option has been enabled.
	Indicates the presence of a "Message" type element
	Indicates the presence of a "Scheduled Message" type element
	Indicates the presence of a "Task" type element
	Indicates the need for the recipient to confirm/refuse a message
	Indicates the presence of one or more files attached to the message/activity

o	Indicates the presence of one or more elements linked to the message/activity
8	Indicates that a task is booked by a user connected to TSS
6	Indicates that a task has been booked by others
See history	Allows the medical data log to be viewed
<b>*</b>	Therapy to be administered at home
<b>S</b>	Therapy to be administered during dialysis
2	Therapy to be administered as needed
11	Suspended therapy
	Indicates that a medical order is valid for unscheduled treatments
<b>5</b>	Copies the PD solution (or volumes or standby time) to the next cycle
	Copies the PD solution (or volumes or standby time) to subsequent cycles of the same base cycle
5	Copies the PD solution (or volumes or standby time) to the cycle corresponding to subsequent base cycles
	Copies the values of all cycles of a base cycle into the subsequent base cycles (only available on the first cycle of each base cycle)
H	Indicates that the patient is hospitalised
€.	Magnifies an image or graph to be

8	Displays the data of a treatment already performed (viewable in the clinic scheduler)
	Displays the data of a treatment scheduled for the future (viewable in the clinic scheduler by resource)
	Displays the conflicts between treatments (viewable in the clinic scheduler by resource in weekly view)
	Displays the drugs for a scheduled treatment (viewable in the clinic scheduler)
2	Displays the scheduled laboratory tests for a scheduled treatment (viewable in the clinic scheduler)
	Displays the medical orders for a scheduled treatment (visible from the clinic scheduler)
6	Selects an image and attaches it to the correlated entity
	Pastes an image in the Windows clipboard
*	Refreshes the current section (e.g. Clinic Scheduler).
<u>×4</u>	Roll the cursor over this button to see the preview of the linked image
<b>F</b>	Selects the columns to be displayed and their order. Available in all sections.
₩	Roll the cursor over this button to view the interaction of the drug chosen for administration with the drugs already administered
	Roll the cursor over this button to see whether the drug's active ingredient has already been prescribed.
	Roll the cursor over this button to see whether the patient is allergic to the active ingredient.

×	Clears the contents of a field (if applicable).
o mini	Shows the identity of the user who has modified a field (only visible in the Euro transplant data section)
0	Shows the date of the last modification, the expiry date and the user who has modified a field (only visible in the Euro transplant data section)
×	Used to exclude a test from a prescription printout, starting from the scheduled tests by clinic
*	Used to include a test on a prescription printout, starting from the scheduled tests by clinic
	With the "Designer" role enabled, users can customize the content of the pull-down fields
Drag and drop to add new item	With the "Designer" role enabled, a new value can be created inside a pull-down field.

# **3.6 INFORMATIVE SYMBOLS USED IN THE APPLICATION**

Therapy Support Suite uses a number of icon and dialogue window conventions

Date of birth 🛛 24/10/2019	<b>Red cross icon</b> : the information entered is not valid
First name 🔢	<b>Purple asterisk icon</b> : this field is mandatory. In order to save the section valid data must be entered
Max. UF rate 1 505 ml/h (100 - 4000)	<b>Blue icon</b> : the lowest error level in Therapy Support Suite. It simply alerts the user that something is worth checking
Dry body weight 🚦 300 Kg (10 - 299.9)	Some fields indicate a specific unit of measure and range of data validity. If out-of-range data are entered, a <b>yellow exclamation mark icon</b> warns of a possible error
Error: 130008 User authentication failed: -10	A <b>red dialogue box</b> warns of a blocking error
Warning:         100547           Do you want to save the changes you made to 'Treatment prescription - Test 1, 1'?           Yes         No         Cancel	An orange dialogue box contains a warning.
Today 🥈 Planned 📕 Patient is hospitalised 👘 Vacation/Temporary movement 🗄 Real treatment 📄 Messages 🕢 Drug	An orange line shows that the patient is hospitalised. Visible in the clinic schedule and in the patient agenda



## Note

When the cursor is moved over any of the **information symbols**, a message containing the relative information appears.



### Note

If a section contains an invalid value information symbol, a number in the tab at the top indicates the number of errors. Drag the mouse over the error icon to show all the descriptions of the invalid data errors.

See example below.

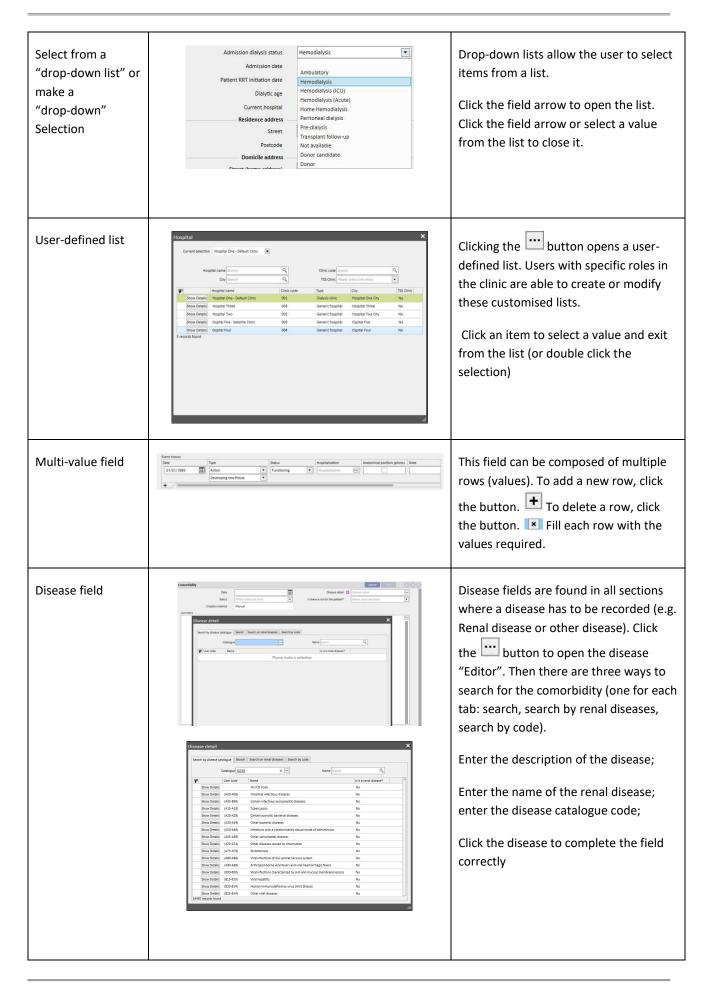
There are 3 erro					Cancel Save Delete	
	rs					
eatment frequen	cy: The value range is	ption must be enabled 1 to 7, you inserted 12 of field (Numeric) [100	2 Days/Week [133]	Prescription name	e Test 1	_
General data	Consumables A	nticoagulant agent	Dialysis device settings	Comments		
	General information					
	Leading prescription	Yes	•	Prescription enabled	Disabled	[
	Valid from	20/01/2016		Valid to	24/09/2019	1
		20/01/2016				_
	Prescription version	1		Unique ID	49	
	<ul> <li>Basic information</li> </ul>					
	Treatment type	2 Cronic	•	Treatment category	1 HD - High Flux	[
	Treatment duration	04:00		Treatment frequency	☑ 12 Days/Week	x (1
	Fluid intake		Kg (0 - 10)	Estimated tara weight	🛛 aaa Kg (C	0 - 3
	Dry body weight	65.2	Kg (10 - 299.9)	Vascular access selection	<u>Fistula</u>	
	(date) Ig term target weight			(BCM) Target TAFO (Time Averaged Fluid Overload)		-4
Device	preparation duration	hh:mm		Device cleaning duration	hh:mm	_
Allergy list						
P Date		Allergy type	Allergy type spe	ecification Detai	ils	
2010		Active ingredient	(Nunpan)			
2009 2 records found		Food		Milk		

The tab shows the icon related to the most important error.

# **3.7 INPUT FIELDS AND HOW TO USE THEM**

Therapy Support Suite provides the same types of input fields for data entry throughout the program. The way they are used depends on the type of data they are intended to contain. The table below provides an overview of the main characteristics of the different types of field.

Numeric field	Dilution factor IU/ml	Numbers are typed on the keyboard. (The value range permitted is generally specified)
Text field	Birth name	Direct entry of free text from the keyboard.
Link prompt text field	Medicinal product Tiz Administration route Tizeb - 50pieces 1mg Tablets 50pieces 1mg	Used to select an item from a list. The list can be filtered by inserting part of the search text.
Comment field		Direct entry via the keyboard of free text distributed on multiple rows with the possibility to use text formatting functions by clicking the •••• button.
Date field	Date of birth         15/08/1952         IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	Dates can be entered either via the keyboard or via the calendar tool. To open the calendar, click the relative button. To close the calendar click the relative button or click the date you wish to select. The current date is highlighted.



Drug field		Drug fields are present in the sections where information about drugs is to be entered (e.g. anticoagulant section). Click the $\overline{\cdots}$ button to open the relevant pop-up. Here there are several options for choosing a drug: All drugs used; All drugs in the clinic; All drugs in the clinic; All drugs in the Farmadati DB Drug field search during administration of a new drug therapy.
Search field	Search in Patient	Clicking on the field or pressing "CTRL+F" buttons positions the cursor inside the field. The user can now type text or numbers to search inside the selected tab.
Selectable field	Jan Feb Mar	Click the field and it will automatically be selected and highlighted. Used within the monthly scheduling rules
Radio button field	Negative         Positive         Unknown           HBs Ag         Image: Constraint of the second se	Click the field to select one of the options available
Multiple selection field	Available modules BPM BTM BVM Low Volume Mixed CM Single-Needle	Multiple selection field. Can only be created from the medical history section
Field that changes colour automatically	Result Negative Result Positive	It changes to green to indicate a favourable outcome or to red for an unfavourable outcome (currently only visible in the transplant and transplant waiting-list sections).

#### **4 SEARCH FIELD**

It is possible to search for elements of menus, messages, patients, entity and data fields using the search box in the top right hand corner.

### **4.1 START A SEARCH**

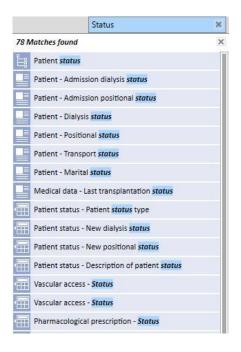
To start a search, click inside the search box or simply press "CTRL+F" on the keyboard. The text search is only carried out within the current section (if you are in the Patient section, the system only looks for the requested text in that section).

	demouser Patients	Default Clinic 🔻	Reporting		Status X	¢.
--	-------------------	------------------	-----------	--	----------	----

To search in the "Dialysis unit" section, click on that section with the cursor.

Therapy Support Su	uite				_ 🗗 🗙
demouser	Patients	Default Clinic 🔻	Reporting	Search in Dialysis Unit	0,

To start to get results, it is necessary to type at least two characters in the search field. As the user gradually types in more characters the research is updated, gradually excluding results which no longer correspond to the requested search.



The list of results can be hidden by clicking on any part of the screen outside the list. To see the results again, start typing again or press "Send" after clicking on the search box.

It is possible to remove the typing by clicking on the button on the far right of the search box. The text and the search results are then deleted.

#### **4.2 INTERPRETING THE RESULTS**

The results obtained are viewed in the search box. At the top of the list a number appears to show the number of references found. Every element of the list is composed of:

- Icon: this defines the type of entity found:
  - The search text is part of the name of a patient;
  - EII The search text is part of a line in the navigation menu;
  - The search text is part of the name of an entity field;
  - The search text is part of an email message;
  - The search text is part of the object of a task or its identifier;
  - Image: The search text is part of a data item that can have different values;
- Text: displays the search text inside the path to reach it. The search text appears in bold and is azure in colour.

See a search example below.

Invey - Single treatmit       External reports       Col       78 Matches found         39807 Status Active/Hemodialysis       Image: Color of the status       Patient status       Patient status         9807 Status Active/Hemodialysis       Image: Color of the status       Patient - Admission dialysis status       Patient - Admission positional status         9807 Status Active/Hemodialysis       Image: Color of the status       Patient - Admission positional status         9807 Patient - Dialysis status       Patient - Dialysis status       Patient - Positional status         9807 Patient - Transport status       Patient - Marital status       Patient - Marital status         1 Rows found       Image: Color of the status type       Patient status - Patient status - Patient status - Patient status - New dialysis status         12 Apr 2010 00:00       Incoming - New patient admission       Patient status - New dialysis status         Image: Patient status - New patient admission       Patient status - New positional status         Image: Patient status - New positional status       Patient status - New positional status         Image: Patient status - New patient admission       Patient status - New positional status         Image: Patient status - New positional status       Patient status - New positional status         Image: Patient status - New patient status - New positional status       Patient status - New positional status         <	×
39807 Status Active/Hemodialysis       Patient status         39807 Status Active/Hemodialysis       Patient - Admission dialysis status         Patient - Admission dialysis status       Patient - Admission positional status         Patient - Dialysis status       Patient - Dialysis status         Patient - Dialysis status       Patient - Dialysis status         Patient - Dialysis status       Patient - Dialysis status         Patient - Dialysis status       Patient - Norital status         Patient - Narital status       Patient - Marital status         Patient - Marital status       Medical data - Last transplantation status         1 Rows found       Image: Patient status type         Event date       Patient status type         12 Apr 2010 00:00       Incoming - New patient admission         Patient status - New dialysis status         Patient status - New positional status <tr< th=""><th>×</th></tr<>	×
Image: Patient - Admission dialysis status         Patient - Admission positional status         Patient - Admission positional status         Patient - Dialysis status         Patient - Dositional status         Patient - Positional status         Patient - Nordata         Patient - Marital status         Patient - Marital status         Patient - Marital status         Patient - Marital status         Patient status type         Patient status - Patient status - Patient status - New dialysis status         Patient status - New patient admission         Patient status - New positional status         Patient status - Description of patient status         Patient status - New positional status         Patient status - Description of patient status         Patient status - Description of patient status	
I Rows found       Medical data - Last transplantation status         I Rows found       Medical data - Last transplantation status         I Rows found       Medical data - Last transplantation status         I Rows found       Medical data - Last transplantation status         I Rows found       Medical data - Last transplantation status         I Rows found       Medical data - Last transplantation status         I Rows found       Patient status - New dialysis status         I Rows found       Patient status - New dialysis status         I Rows found       Patient status - New dialysis status         I Rows found       Patient status - New dialysis status         I Rows found       Patient status - New dialysis status         I Rows found       Patient status - New dialysis status         I Rows found       Patient status - New dialysis status         I Rows found       Patient status - New positional status         I Rows found       Patient status - New positional status         I Rows found       Patient status - New positional status         I Rows found       Patient status - New positional status         I Rows found       Patient status - New positional status         I Rows found       Patient status - New found status         I Rows found       Patient status - New found status	
No data       Patient - Positional status         Patient - Transport status       Patient - Transport status         Patient - Marital status       Patient - Marital status         Patient - Marital status       Patient status - Last transplantation status         Patient status - Patient status type       Patient status - New dialysis status         12 Apr 2010 00:00       Incoming - New patient admission       Patient status - New positional status         Patient status - New positional status       Patient status - Description of patient status         Patient status - Description of patient status       Vascular access - Status	
No data       Patient - Transport status         Patient - Transport status       Patient - Transport status         Patient - Marital status       Patient - Marital status         1 Rows found       Image: Patient status repeated by the status	
No data       Patient - Marital status         Patient - Marital status       Medical data - Last transplantation status         1 Rows found       Patient status - Patient status type         Event date       Patient status type         12 Apr 2010 00:00       Incoming - New patient admission         Patient status - New positional status         Patient status - New positional status         Patient status - Description of patient status         Vascular access - Status	
Patient - Marital status       Patient - Marital status       Patient - Marital status       Medical data - Last transplantation status       Patient status - Patient status type       Event date     Patient status type       12 Apr 2010 00:00     Incoming - New patient admission       Incoming - New patient admission     Patient status - New dialysis status       Patient status - New positional status       Patient status - New positional status       Patient status - Description of patient status       Vascular access - Status	
1 Rows found       Patient status - Patient status type         Event date       Patient status type         12 Apr 2010 00:00       Incoming - New patient admission         Image: Patient status - New patient admission       Patient status - New positional status         Patient status - New positional status       Patient status - New positional status         Patient status - New positional status       Patient status - New positional status         Patient status - New positional status       Patient status - New positional status         Vascular access - Status       Vascular access - Status	
Event date       Patient status type       Patient status - New dialysis status         12 Apr 2010 00:00       Incoming - New patient admission       Patient status - New positional status         Patient status - New positional status       Patient status - New positional status         Patient status - New positional status       Patient status - New positional status         Patient status - New positional status       Patient status - New positional status         Patient status - New positional status       Patient status - New positional status         Patient status - New positional status       Patient status - New positional status         Patient status - New positional status       Patient status - New positional status	
12 Apr 2010 00:00       Incoming - New patient admission         Image: Application of patient status - New diarysis status         Patient status - New positional status         Patient status - New positional status         Patient status - Description of patient status         Vascular access - Status	
12 Apr 2010 00:00       Incoming - New patient admission         Patient status - New positional status         Patient status - Description of patient status         Vascular access - Status	
Vascular access - Status	
Vascular access - Status	
Pharmacological prescription - Status	
Messages - Status	
Treatments - Status	
Treatments - Status	
Treatments - Status	

Default Clinic 🔻 Reporti	ng		FRESENIUS MEDICAL CARE		Status	_
Aitken Lambert, David [ 🗙 Manag	e patient groups	HD survey - Single treatme	External reports	Co	78 Matches found	
Aitken Lambert , David Born 15/0	8/1952 (67y) Gende	er 👌 Cod. 39807 Status Activ	e/Hemodialysis 😰 🕏		Patient status	
Patient status					Patient - Admission dialysis status	
Event date	12 Apr 2010 00:0	0	New dial	ysis status	Patient - Admission positional status	
Hospital	Hospital One - De				Patient - Dialysis status	
Patient status type	Incoming - New p		New positio	anal status	Patient - Positional status	
Unique ID	4	BLIETE BUTTISSION	New positio		Patient - Transport status	
Unique ID	4				Patient - Marital status	
					Medical data - Last transplantation status	
		1 Rows found		<	Patient status - Patient status type	
		Event date	Patient status type		Patient status - New dialysis status	
		12 Apr 2010 00:00	Incoming - New patient admis	ssion	Patient status - New positional status	
					Patient status - Description of patient status	
					Vascular access - Status	
					Vascular access - Status	
					Pharmacological prescription - Status	
					Messages - Status	
					Treatments - Status	
					Treatments - Status	
					Treatments - Status	
					Treatments - Status	
					Treatments - Status	
					Treatments - Status	
					Treatments - Status	
					Treatments - Status	
					Treatments - Status	
					Treatments - Status	
					Treatments - Dialyzer status	
					Treatments - Status	
					Treatments - Circuit status	
					Treatments-Medical service data - Status	
					Laboratory test - Status	
					Laboratory test - Status Date	
					Laboratory test - Status Date	

If you click on the highlighted line the following screen appears, highlighting the search text.

#### **5 PERSONALISING THE VIEW**

It is possible to personalise the view of Therapy Support Suite. Two main types of personalisation are possible: pivot view and standard view.

## **5.1 CUSTOMISATION OF A PIVOT VIEW**

In the case of pivot views (for example the "Patient summary page", "Treatment overview", etc.), by clicking on the customise button it is possible to define which fields we want to see. All are ticked by default, and therefore visible. By removing the tick the field becomes invisible and disappears from the pivot view. It only becomes visible again by ticking the appropriate box.

Cust	tomise view	×
	Pre-dialysis weight	
$\checkmark$	Post-dialysis weight	
☑	Dry body weight	
	Weight gain	
☑	Weight gain percent	
	UF volume	
	Pre-systolic/Diastolic pressure	
☑	Post-systolic/Diastolic pressure	
✓	Pre-dialysis heart rate	
	Post-dialysis heart rate	
☑	Critical RBV	
	Min RBV	
☑	Effective Kt/V	
	Total substitution volume	
	Save Cancel Restore view	

Summary						
ast forty treatments						
	Ę	20 Nov 2010	18 Nov 2010	16 Nov 2010	13 Nov 2010	11 Nov 2010
Pre-dialysis weight	Kg		66.80	68.20	67.40	68.30
ost-dialysis weight	Kg	84.10	65.20	65.20	65.20	65.40
Pry body weight	Kg	65.2	65.2	65.2	65.2	65.2
Veight gain	Kg		1.60	3.00	2.00	1.90
Veight gain percent	%		2.35	4.45	2.93	2.78
IF volume	ml	2480	1900	3300	2492	3300
re-systolic/Diastolic pressure		142/74	167/76	173/80	162/83	156/82
ost-systolic/Diastolic pressure		136/66	140/73	134/81	146/80	147/78
re-dialysis heart rate	bpm	74	68	77	71	70
ritical RBV	%	83				
/in RBV	%	98.9				1
ffective Kt/V		1.43				
otal substitution volume	L	17.0	37.1	28.2	35.4	33.5

Within the personalisation it is also possible to change the order of the data viewed, by keeping the mouse clicked on a field and dragging it to the new position.

# **5.2 CUSTOMISATION OF A STANDARD VIEW**

For the standard views, by clicking on the appropriate button it is possible to define which fields we want to see (by using the flag to the left of the field name), and in which order we want to see them (again by dragging), but unlike the Pivot views it is also possible to define the order (e.g. descending, ascending) in which we want to see them.

Therapy Support Suite demouser Patient	s Default Clinic ▼ Reporting	TE FE	RESENIUS EDICAL CARE		Search in Patient	
	Thompson , Josie [166334] × Manage patient			Configuration		
asic data	Thompson , Josie Born 23/10/1950 (68y) G			comguration	parameters 1	
Patient summary		ender Q Cod. 100334 Status Active/ Iransplant				
Treatment overview	Vascular access				New Export Excel	Print
Administrative data	All Active Not active List of events					
Medical data				1	1	
Hospitalisations	Creation date Vascular access type		Status	Closure date	Date of first use	
Patient status	02 Apr 2010 Fistula	Upper arm brachial medial - Left	Functioning		03 Apr 2010	
Medical prescription	26 Aug 2009 Fistula	Upper arm brachial medial - Left	Functioning		26 Aug 2009	
Patient agenda	2 records found					
)				~		
Vascular access	Customise view			×		
Treatment prescription	Creation date	Descending		-		
Checklist						
Treatment schedule plan	Vascular access type	None		•		
Pharmacological prescription	Anatomical position	None		-		
Messages						
Treatments	Status	Ascending		•		
HD survey	Closure date	None		-		
poratories						
Laboratory test	Date of first use	None		-		
Laboratory data						
Laboratory test schedule						
edical Data						
Clinical diary	•					
Allergies						
Vaccinations						
Family medical history						
Germ situation						
Transfusion list						
Comorbidity						
Specialist examination						
Diagnostic test						
Self-sufficency		Save Cancel Restore view				
Outpatient clinic visit		Save cancer Restore view				
Patient medical history						
Amputations						
Clinical case						
chines case						
PD access						
PD prescription						
PD treatment scheduler						
Review						
Home visit						
PD treatments						
Peritonitis						
Tunnel exit site						
Adequacy and nutrition						
Peritoneal equilibration text	1 S					

# **6 USER MANAGEMENT**

User creation and management are administered directly by the Fresenius Interface Server.

For further information, see the documentation on Fresenius Therapy Monitor.

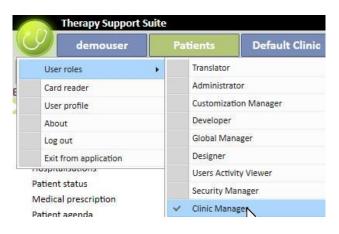
#### **7 SUITE MENU**

# 7.1 SUITE MENU USER MANAGEMENT

#### **7.1.1 ACTIVATION OF ROLES**

A role can be activated via the Suite menu. Click on the Suite menu, move the mouse cursor to User Roles and click on

the desired role to activate or deactivate it. When a role is active, the symbol appears to the left of its description.





#### Note

For a role to be displayed in the Suite menu, it has to be activated through the Fresenius Medical Care User Management application.

# 7.1.1.1 DESCRIPTION OF ROLES

Role	Permissions enabled	Feedback on Therapy Support Suite	References
Administrator	Enables the Therapy Support Suite User Management session and the Batch Commands Window section.	Batch Commands Windows entry in Suite menu.	
Clinic Manager	Access to Menu Entities. Clinic configuration and personalisation of the clinic's list of elements.	"Clinic Master Data" main section available.	

Security Manager	Enables you to see all logging information.	"Logging" main section available. "See Deleted Entities" button available on each Therapy Support Suite view. "Open entity log" button available on each Therapy Support Suite entity form.	Logging Menu
Developer	Shows the system name of each Therapy Support Suite field.	The field name appears under the description label.	
User Activity Viewer	Gives the user access to the User Activity window	"User activity" becomes visible in the suite menu.	Suite menu

## 7.1.2 USER PROFILE

This section allows you to change your user preferences:

• The section of Therapy Support Suite shown after the login

Profile		×
Name - Surname	demouser	
User name	demouser	
Password	*****	
Email		
Language	English (United Kingdom)	
Starting Section	Patient	-
	OK Cancel	.#

As shown in the following image, by clicking on the three dots next to the field "Password", it is possible to change the password:

ame - Surname	demouser	
User name	demouser	
Password	•••••	
Email		
Language	English (United Kingdom)	
itarting Section	Patient	
		ew one
	Please type the current password and the nu	ew one
	Vord Please type the current password and the ne Old password	ew one
ange passw	Please type the current password and the nu	ew one

### **7.2 PATIENT CARD READER**

This section allows you to prepare a Patient card for integration with other components of TDMS. In other words, it allows management of the patient card to be used as the identifier of the patient in the TDMS components.

- The card reader can be activated via the Suite menu. Click on Suite menu, move the cursor to card reader and click.
- The header informs you about the status of the card reader with 2 LED indicator (whether the card reader is connected or not, chipcard detected or not) that can be green or red depending on the positive or negative status and the button "Show driver details" that will open a pop up where are shown the installed driver. In the header there is also the Card Type field that informs you which type of card is inserted (this can be a Patient card, a BCM card, a Patient card with BCM extension, an empty card or an invalid card if the card is not recognised by the system).

Type No card inserted	Reader is connected     Chip card detected     Show driver details
	Driver list
	Driver Status
	OMNIKEY Driver not installed
	SCR Driver not installed
	UniCard Driver installed
	ОК

- The Patient card section displays confidential patient data contained in the chip card, listing the last recorded dialysis treatment for the patient at the bottom. The rows of this section show the most important data of every single treatment. By clicking on a row the system opens up the treatment details.
- The BCM section displays the confidential BCM patient data contained in the chip card, listing the last recorded BCM measurements at the bottom. The rows of this section show the most important data of every single measurement. By clicking on a row the system opens up the measurement details.

ard reader	
ard Type No card inserted	Reader is connected     Chip card detected     Show driver details
	PatientCard

The Card Reader window provides a set of buttons that let you interact and execute actions on the card:

- Create. You can create a new Patient card with BCM extension selecting the patient from the clinic's patient list.
- Create BCM chipcard. You can create a new patient card only for BCM selecting the patient from the clinic's patient list.
- Import. You can import different information into Therapy Support Suite from the card:
  - HD treatments
  - BCM measurements
- **Update.** You can update certain information stored in the chipcard by taking them from Therapy Support Suite.
- Delete. You can delete:
  - the entire chipcard
  - the BCM measurements

## 8 USER

#### **8.1 MESSAGING SYSTEM**

#### 8.1.1 USER INBOX

The Therapy Support Suite messaging system allows you to send/receive messages and tasks (activities) to/from clinic staff. The **User tab** button displays information about unread messages.

Therapy Support Suite									
demouser 🖂 1	Patients	Def	ault Clinic	•	Reporting			Ţ	FRESENIUS MEDICAL CARE
User inbox	1			4 (20207)	D.f		× +		
Inbox		* Altka	en Lambert, Dav	ia [2990.1]	Messages an		T		
Sent items		Inbox me	essages						Refresh De
Scheduled items		<b>F</b>		Type	Acknowledge	Attachments	Linked entities	Sender	Date
Archive			Show Details	Line en al		National	1	demouser	17000 KT 1
Archive inbox			Contraction of the second					demouser	24 Sep 20
Archive sent		1 record	found						
Analytic and a sharehold and									

When a new message arrives for the user connected to the system, the user tab button will flash alternately green and azure and the message count will increase. This number is given by the sum of the *Unread messages* with the tasks in a *Received* status and *Reserved by me*.

To open a message or task, click on the Show details button.

The User inbox section contains six menu entries:

- Inbox: all unread messages received by the user;
- Sent messages: list of messages that have been sent by the user;
- Scheduled messages: messages that have been scheduled for future delivery.
- Archived inbox: all important messages that the user saved (by clicking on "Archive" button). Archived messages are marked with a floppy disk icon;
- Archived sent: all important messages that the user saved (by clicking on "Archive" button). Archived messages are marked with a floppy disk icon;
- Archived scheduled: all important messages that the user saved (by clicking on "Archive" button). Archived messages are marked with a floppy disk icon;

Therapy Support Suite									
demouser 🖂 1	Patients	Defa	ult Clinic	•	Reporting			Ţ	FRESENIUS MEDICAL CARE
User inbox	1		n Lambert, Davi	1 (20007)	Messages a		< +		
Inbox		• Allke	i Lambert, Davi	1[29901]	Wiessages di				
Sent items		Inbox me	isages						Refresh De
Scheduled items		<b>F</b>		Type	Acknowledge	Attachments	Linked entities	Sender	Date
Archive		, _	Show Details	Phone and a				demouser	
Archive inbox			Contraction of the					demouser	24 Sep 20
Archive sent		1 record f	bund						
Archived schedulad									

TSS messaging is divided into two different modes: messages and tasks. .

## 8.2 MESSAGES

## 8.2.1 CREATE A NEW MESSAGE

To create a new message, click the New message... button in the email inbox section. To populate the list of recipients you can type their name in the **Recipients** box or select them from the pop-up window by clicking on the **button**:

Inbox messag	ges						Refresh	Delete	Reply	Reply to all	Forward	Archive	New message
🗭 Type	Acknowledge	Attachments	Linked entities	Sender		Date Subjec	t						
	Care on the second												
	Messag	e										×	
	Sender												
	demous	er										- 18	
	Recipien												
	Insert re	ecipient											
	Needs a	cknowledgemei	nt 🗌		Create a	s Task 📃							
	Is sched	uled											
	No					•••							
	Subject												
												_	
	Linked d	ata										-	
	Attachm	ents											
	Messag	e											
		3											
													<u> </u>
Inbox tasks													New task
🐙 Type	A												tatus Comment
-	_												
		_	_			Send	Cancel	_	_		_		

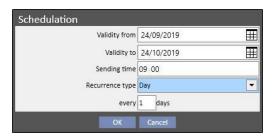
- **Recipients**: In this custom list there are different ways to identify the recipient of the message;
- Users: This tab lists all users. You may select more than one recipient;

User	Patient	Patient group	User groups		
Searci	'n				0,
Se	elect all rec	tipients			
	demouser	(demouser)			
			OK Can	rel	

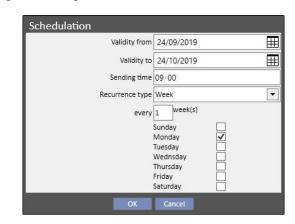
Patient: This tab lists all patients. Users may select one or more patients to target this message with. In this case all users that go into the Patient Inbox section will see this message;

User Patient Patient group User groups	
Search	0,
Select all recipients	
Aitken Lambert, David [39807]	
Brennan , Nicholas [399489]	
Freeman , Mason [3478]	
Hartley , Sarah [93710]	
Metcalfe , Jonathan [16821]	
Middleton , Mary [63416]	
Moore , Eleanor [39841]	
Morton , Katherine [47829]	
Newman , Noah [137560]	
Saunders , Benjamin [72362]	
Thompson , Josie [166334]	
OK Cancel	

- Patient group: This tab lists the patient groups. The user can select one or more patient groups. The message
  will be displayed in all Inbox sections related to patients belonging to the selected patient groups;
- Group of FIS patients: This tab lists the groups of patients created by FIS. The user can select one or more
  patient groups. The message will be displayed in all **Inbox** sections related to patients belonging to the selected
  patient groups;
- Sender: Read-only field, filled in automatically with the name of the logged-on user;
- Acknowledgement needed: Allows you to specify if a receipt is required from each receiver who reads the message;
- Create as task: Allows automatic movement to the task mode.
- Is scheduled: Enabled only if this is a new message. Custom list that allows you to schedule the message with the following options:
  - Define daily message scheduling:



Define weekly message scheduling:



Define monthly message scheduling:

Schedulation	~	
Validity from	24/09/2019	Ħ
Validity to	24/10/2019	Ħ
Sending time	09:00	
Recurrence type	Month	•
every	2 Month (s)	
Day of month	14	
ОК	Cancel	

- **Subject**: Text field containing the title of the message;
- Linked Data: In this custom list you can add to the message entity belonging to a certain patient. By clicking on the ivit button, a pop-up will appear asking you to select a patient and a specific patient's data (prescription, treatment, vascular access, etc.) or entities belonging to the configuration sections (if the user has permissions to view them) or the Dialysis Clinic.
- Attachments: In this field you can select multiple files stored on your computer and attach them to the message;
- Message: Text field where you can insert the body of the message.

#### 8.2.2 PRINT A MESSAGE

A message can be printed by opening it with a double-click and clicking on the **Print**button in the pop-up window that shows the details of the message.

## **8.2.3 PATIENT INBOX**

In the patient top bar there is an envelope button. When you send messages with a certain related patient, this button shows that someone sent information about the selected patient. By clicking on the envelope button, the **Inbox** section is automatically opened and the sent message (in the example "sent by Test User") is shown. When the message has been read the *mark* on the envelope disappears.

Inside the previous view, by clicking on the New message... button, the message form appears. The only difference is that the Refer to field is automatically filled in with the relevant patient name. This is a read-only field.

Nessage		:
Sender		
demouser		
Recipients		
Insert recipient		
Needs acknowledgement	Create as Task	Refer to Aitken Lambert David
Is scheduled		
No		
Subject		
Linked data		
Attachments		
Message		
L		
	Send Cancel	

### **8.3 TASKS**

*Tasks* are messages that must comply with a predefined flow of states and that only users (or user groups) and not patients are intended as recipients. Inside the user tab you can find the tasks received in the area at the bottom of the main window.

The progress flow of the states, after the creation of the task, is as follows. The initial state is **Received**. As long as this is the status, the user who generated the task can make changes by opening the task, changing it and clicking on **Refresh**.

When one of the recipients decides to take charge of the task, , he or she can do that by opening the task and clicking on the *Reserve* button, which gives the task a **Reserved** status. For all other recipients the status of the task becomes **Reserved by others**. Hereinafter, these recipients will not be able to operate on the activity unless they add comments to it.

The user who has reserved the task for him/herself, will have to analyse the content and work on it. At the end of the entire activity, based on its outcome, the task can be brought to the **Completed** state, if everything foreseen for that activity has been completed. If the task is incoherent, it can be refused using the **Refuse** option. The activity reservation can also be removed using the **Remove booking** button.

Each time the task progresses, the system will propose a possibility to the user to insert a comment to give a reason for a change of state. A comment is required to move a task to the *Refused* and *Completed* states as well as to *Remove booking*.

It is still possible for a task recipient to add a comment to it. The last comment entered can be updated, but only by the user who entered that comment.

All tasks to which a new comment has been added and that have not yet been read by the user will also appear in bold in the user inbox.

The Completed or Refused tasks can be archived by clicking the appropriate button.

#### **8.3.1 CREATE A NEW TASK**

#### New task

To create a new task, click on the button in the tasks received area. The fields to be filled in are the same as those described for messages with the following differences:

- The list of recipients can only include users and/or user groups
- The Create as task field is automatically selected
- The ability to schedule a task's transmission is inhibited.

Using the same procedure as used for messages, the contents of a task can also be printed.

# 8.3.2 TASK SECTION FOR THE SELECTED PATIENT

In the patient upper menu bar there is a folder button. When a task is sent with a certain related patient (or a specific patient entity) attached, this icon is displayed with an orange background. The number indicates how many tasks (not completed or rejected) there are for the patient or for one of its entities.

Δ	Aitken Lambert, David	Born 15/08/1952 (67y)	Gender 7	Cod. 39807	Status Active/Her
---	-----------------------	-----------------------	----------	------------	-------------------

Clicking on the icon will open a pop-up that will list the tasks with their object and their status. If the task has been previously booked by the user connected to the system he or she can easily complete it by clicking on the complete button. Selecting a task in the list will open it in detail.

1 tasks found	×
test	A demouser Complete
Create task li	inked with this entity

When navigation in patient entities is open in a *summary* entity, such as, for example, the summary page, or one of the lists that allows a patient entity to be selected, the task counter will display all tasks (not completed or rejected) that are listed for the patient or for one of its entities.

Instead, when navigation is open for a particular entity (e.g. allergy to a particular food) the indicator refers to that specific entity. In this case the user can also create a new task by directly attaching it to the open entity by clicking the **Create a task related to this entity** button from the task pop-up.

The same button is enabled in the pop-up, in the patient summary page and in the treatment overview page. Activating this will create a new task with just the patient attached.

### **9 PATIENTS**

# 9.1 SELECTING A PATIENT

To select a patient simply click the Patients tab in the Sections menu. The patient list appears automatically. There are several ways to select a patient:

- Use the scroll bar to search through the full patient list;
- Enter part of the patient's name in the search bar. The patient list is updated in real time according to the letters entered in the search bar.



Select one of the patient groups (some of them are pre-entered).

demouser	Patiente
	Patients
▲ Close patient	list
Active patients (9)	
Active patients (9)	
Patients by status (9)	
Diabetic patients (0)	
Patients with haemoglobin <11 (3	)
Inactive patients (2)	
Patients disabled after merge (0)	
Patients by bed (5)	
Patients by shift (5)	
By Machine (0)	
19/07/1936	3478
Hartley , Sarah	Ŷ
	93710
21/05/1957	
21/05/1957 Metcalfe , Jonathan	ď
Metcalfe , Jonathan	<b>∂</b> 16821
	0 <sup>7</sup> 16821 ♀

When the zone relating to a specific patient is clicked it turns 'dark grey' and information related to the patient is loaded onto the screen. Double clicking on that area automatically collapses the patient list and the patient menu is displayed on the navigation bar.

The following screenshot shows the patients menu, which appears after selecting a patient and *collapsing the patient list.* 

/	Therapy Support Suite
(	demouser Patients
	<b>V</b> pen patient list
Bas	ic data
	Patient summary
	Treatment overview
	Administrative data
	Medical data
	Hospitalisations
	Patient status
	Medical prescription
	Patient agenda
HD	
	Vascular access
2	Treatment prescription
	Checklist
	Treatment schedule plan
	Pharmacological prescription
	Messages
	Treatments
	HD survey
Lab	oratories
	Laboratory test
	Laboratory data
	Laboratory test schedule
Me	dical Data
	Clinical diary
	Allergies
	Vaccinations
	Family medical history
	Germ situation
	Transfusion list
	Comorbidity
	Specialist examination
	Diagnostic test
	Self-sufficency
	Outpatient clinic visit
	Patient medical history

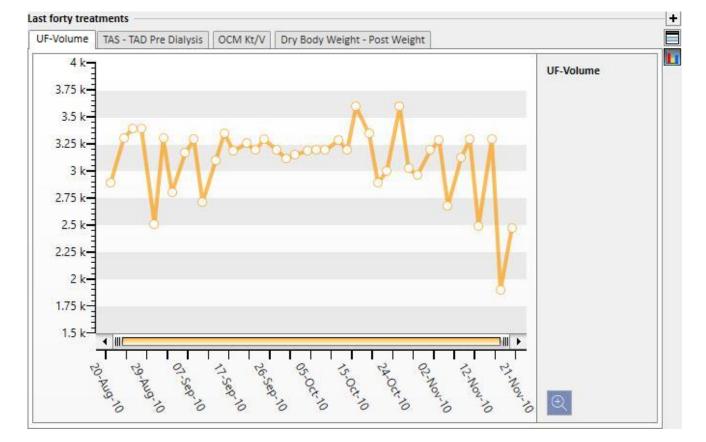
## 9.2 BASIC DATA

### 9.2.1 PATIENT SUMMARY

This section is the patient's Home Page. This section lists all the main information about the patient's dialysis history. The screenshots below display the default *summaries* with standard configurations. Users can also customise patient summaries in the "configuration parameters" of the "Master Data" (Clinic Manager) section.

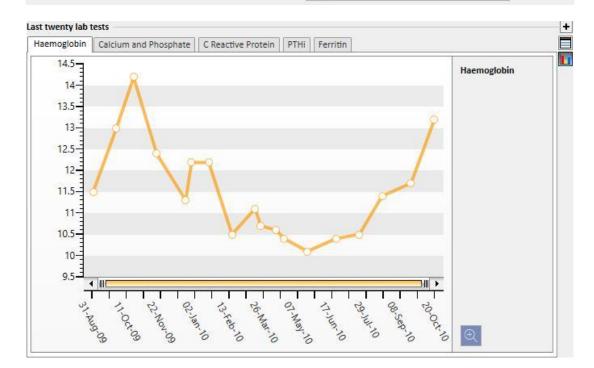
The HD patient dashboard shows:

 HD Treatment History: this screen contains the patient's last forty treatments, allowing the user to navigate easily through the details of each treatment, or simply to examine the trend of some key values via the chart view.



Laboratory test history: this screen displays the patient's last twenty laboratory tests, allowing the user to
navigate through them or examine the trend of some key values via the chart view.

Last twenty lab tests				
	7	Last	19 Oct 2010 00:00	21 Sep 2010 00:00
Dialysis dose Daugirdas DPVV Kt/V		1.47	1.47	1.37
Dialysis dose equil. Kt/V		1.47	1.47	1.36
Haemoglobin	g/dl	13.2	13.2	11.7
Sodium	mEq/I	140.00	140.00	145.00
Potassium	mEq/I	7.20	7.20	7.03
Bicarbonate	mEq/I		1	
Total protein	g/dl	6.5		
Total calcium	mg/dl	9.8	9.8	9.4
Phosphate	mg/dl	6.5	6.5	5.0
ртні	ng/l	64		
Albumin	g/dl			
C-reactive protein	mg/l	5.60		
ALT <mark>(</mark> GPT)	IU/L	14		14
Ferritin	µg/I	115.5		
	~			



- Active prescription: Review or edit the Active Prescription HD.
- Vascular access: Allows the review or change of the active Vascular Access.
- Active home medication: The user can view, modify or add new drugs prescribed to be taken at home.
- Active dialysis related therapy: Allows the view, change or addition of new drugs prescribed for the Dialysis Treatment.
- **Medical orders**: Allows all the patient's current medical orders, i.e. those with "active", "suspended" and "scheduled" status, to be checked and edited. New medical orders can also be added to the patient.

- Comorbidities: Shows all comorbidities affecting the patient, allowing the user to change them or add new ones.
- Residual diuresis: A quick view of the patient's residual renal function based on laboratory test results. The user can modify the laboratory tests or add new ones.
- **Hospitalisations**: A quick view of the patient's hospitalisations.
- **Patient allergies**: Allows patient allergies to be viewed and managed.

Date	e ) /	Allerg	. 4	Allergy typ	Details		
			P	lo data			
Act	ive lead	ing pres	cripti	on			
	Prescription name Default Prescription						
	c	reation	date	30 Jun 2016 15	:41		
						_	
Vas	cular ac						
	C	reation	date	13 Aug 2010			
	Туре	and pos	ition	Fistula Upper arm brad Left	chial medial -		
		St	atus	Functioning			
Act	ive regu	lar thera	apy			+	
1	-	Statistics and services		dient Dosage ar	nd frequency		
-				No data			
Act	ius dish	sis relat	ad th	arany		+	
1	1	10		dient Dosage ar	nd frequency		
7	Adolaf				treatment		
	Fasco	¢		Tu: 45 Th	: 45 <i>Sa</i> : 45 mg		
-	ssages					+	
*	Status	M	essag	1000			
_	1.000			No data		1.55	
-	norbidit	y			1	+	
Ŧ	Code		Nam				
-	C43.0			gnant melanom			
	C43.0		Mali	gnant melanom	a of lip		
-	idual di	uresis –				+	
Res	iqual ul			Amount		24	
	Lab te	st date		ml			
	1	st date		14 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C			
	1	st date		No data			
Hos	Lab te	tions		No data		+	
7	Lab te	tions	ospit	No data alisation End da	ate of hospital		
Hos	Lab te	tions	ospit	No data	ate of hospital		
Hos	Lab te	tions late of h	ospit	No data alisation End da	ate of hospital		

The PD patient dashboard shows:

• Adequacy and Nutrition: Navigable list of the patient's adequacy and nutrition information.

	₹	15 Nov 2017
Body mass index	Kg/m²	24.61
Real weight	Kg	63.0
ldeal weight	Kg	57.6
Lean body mass	Kg	42
Teehan real		1.08
Teehan ideal		1.18
Renal GFR	ml/min	6.76
Weekly creatinine clearance	L/w/1.73m²	90.0
wKT/Vr		1.72

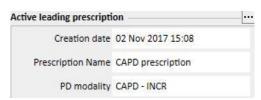
• Peritoneal Equilibration Test: Navigable list of the patient's peritoneal equilibration test information.

	7	15 Nov 2017
D/D0 glucose	mg/dl	0.30
D/P creatinine	mg/dl	0.70
D/P Na	mEq/I	0.92
Delta Na Fr.ST1	mEq/l	16.00
Delta Na TO-T1	mEq/I	8.00

• Last 20 laboratory tests: The patient's last twenty laboratory tests, and trend of certain key values via the chart view.

Last twenty lab tests					
	Ŧ	Last	04 Nov 2010 09:54	19 Oct 2010 00:00	
Dialysis dose Daugirdas DPVV Kt/V				0	
Dialysis dose equil. Kt/V					
Haemoglobin	g/dl	11.1		11.1	
Sodium	mEq/l	143.00		143.00	
Potassium	mEq/I	4.87		4.87	
Bicarbonate	mEq/l				
Total protein	g/dl	6.0			
Total calcium	mg/di	9.1	<i>i.</i>	9.1	
Dhochata	mø/dl	25		2 5	

• Last PD Prescription: The last PD Prescription can be viewed and edited.



PD Access: The active PD Access can be viewed and edited.

D access	
Catheter type	Curved swan-neck
Creation date	12 Apr 2010
Anatomical position	Above the umbilical line

Active home therapy: The user can view, modify or add new drugs prescribed to be taken at home.

Acti	ve regular therapy		+
7	Drug / Active ingredient	Dosage and frequency	
	Zaminreum	1 Every 1 Days	

• **Comorbidities**: All comorbidities related to the patient, allowing the user to modify them or insert new ones.

Code	Name	
r		

• **Residual diuresis**: Quick view of the patient's residual renal function based on laboratory test results. The user can modify the laboratory test or add new ones.

Resi	dual diuresis		+
Ŧ	Lab test date	Amount ml	
	11 Aug 2010 00:00	1000.00	

• Hospitalisations: A quick overview of the patient's hospitalisations.

Hos	pitalisations	+
7	Start date of hospitalisation	End date of hospitalisation
	No dat	а

• Patient allergies: Allows review and editing of the patient's allergies.

7 Dat	te	Allerg	Allergy typ	Details	
-------	----	--------	-------------	---------	--

The Transplanted patient summary shows:

• **Transplant summary**: this is a summary of the transplants by organ. This section is the same of the one available in the Transplant menu.

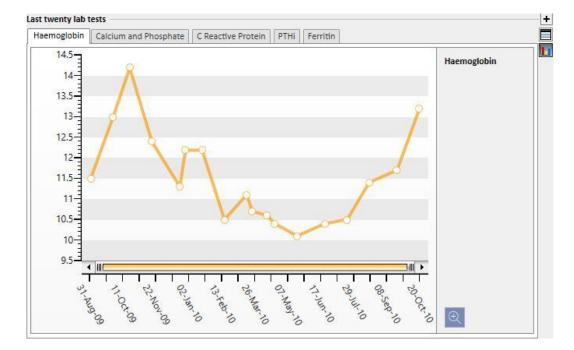
▲ Thompson ,	Josie Born 2	3/10/19	50 (68y) G	Gender♀ Cod. 1	66334 Status Activ	ve/Transplant follow-up							
Summary													
1	Kidney		Kidney (Se	cond) Pa	ncreas	Heart	Liver	Tran	splant h	istory		22 - 27	-
	2	1	Kiulicy (Se	conu) ra	IILICOS	Ticalt	LIVEI	7	Date		Event type	e Organs	
Status	Functioning								25 Feb	2015 11:33	Transplan	t Kidney	
Survival time	4 years 3 month	IS											
Waiting list status	Excluded for transplant		Excluded for transplant	EV	cluded	Included	Excluded			ar therapy	diant Doca	ge and freque	+
Donor	Johnston Emm		anspiane	2				*	Baxada			Every 1 Days	
Transplant	and the second se	-					-		Fascox	0	1000	0-8-0 mg M	-
number	1					-			Mitope	p	5 mg	/ml Every 1 D	ays
Actions	See transplan Add failure	it						10000					
	Add tallure						-	Imm	unosup	pressive the	erapy		+
Last consultation v							+	7	Drug / A	Active ingre	dient Dosa	ge and freque	
Visit type	Visit date		Status	Reason name			4				No data		
	visit 19 Nov 20	10 12.00		Lithiasis Docum	ented								+
1 record found	1310 13 1404 20	10 12.00	open	Cicilia Sis Docum	crited			1000	orbidity	i bara			+
								*	Code	Nam			
											No data		
								Resi	dual diu	resis			+
								7	Lab test	t date	Amou	nt	
								-			ml		
											No data		
								Hos	oitalisati	ons			+
								7	Start da	te of hospi	talisation E	nd date of hos	pitalisatio
											No data		
								Patie	ent aller	gies			+
				0	-		La Parti	7	Date	Allerg	Allergy typ.	Details	
Last twenty lab tes	ts		2					1	24 Fe	Anim			
		¥	Last		19 Oct 2010 00:0	0 21 Sep 2010 00	100 C 100 C		23 Fe	Food			
Dialysis dose Daug	rdas DPVV Kt/V		1.03		1.03	1.12		L)					
Dialysis dose equil.	Kt/V		1.01		1.01	1.10							
Haemoglobin		g/dl	12.4		12.4	12.9							
Sodium		mEq/I	139.00		139.00	141.00							
Potassium		mEq/I	4.88		4.88	4.65							
Bicarbonate		mEq/I											
Total protein		g/dl	7.0										
Total calcium		mg/dl	9.3		9.3	9.5							
Phosphate		mg/dl	<b>4.</b> 6		4.6	4.7							
PTHi		ng/l	101		-								

• **Outpatient clinic visit history**: here the last ten outpatient clinic visits are listed with the option to edit or just see some basic data.

Last	outpatient clinic vi	sits			+
F	Visit type	Visit date	Status	Reason name	
	Programmed visit	19 Nov 2010 12:00	Open	Lithiasis Documented	
1 red	cord found				

• Laboratory test history: this screen displays the patient's last twenty laboratory tests, allowing the user to navigate through them or examine the trend of some key values via the chart view.

Last twenty lab tests				
	¥	Last	19 Oct 2010 00:00	21 Sep 2010 00:00
Dialysis dose Daugirdas DPVV Kt/V		1.47	1.47	1.37
Dialysis dose equil. Kt/V		1.47	1.47	1.36
Haemoglobin	g/dl	13.2	13.2	11.7
Sodium	mEq/I	140.00	140.00	145.00
Potassium	mEq/I	7.20	7.20	7.03
Bicarbonate	mEq/l			
Total protein	g/dl	6.5		
Total calcium	mg/dl	9.8	9.8	9.4
Phosphate	mg/dl	6.5	6.5	5.0
ртні	ng/l	64		
Albumin	g/dl			
C-reactive protein	mg/l	5.60		
ALT <mark>(</mark> GPT)	IU/L	14		14
Ferritin	µg/I	115.5		
	~			



- Transplant history: Allows review and editing of all events related to the patient's transplants.
- Active home medication: The user can view, modify or add new drugs prescribed to be taken at home.
- Immunosuppressive therapy: The user can view, modify or add new immunosuppressive drugs.
- Comorbidities: Shows all comorbidities affecting the patient, allowing the user to change them or add new ones.
- Residual diuresis: Quick view of the patient's residual renal function based on his lab results. The user can
  modify the laboratory tests or add new ones.
- Hospitalisations: A quick view of the patient's hospitalisations.

• **Patient allergies**: Allows review and editing of the patient's allergies.

Tran	nsplant his	story					
7	Date		Eve	nt type	Organs		
12.5	25 Feb 2	015 11:33	Tra	nsplant	Kidney		
Acti	ve regula	r therapy					+
7	Drug / A	ctive ingrea	dient	Dosage	and frequ	iency	
	Baxada			6 mg E	very 1 Da	ys	
	Fascox			78 - 0 -	8 - 0 mg	Mo We	Fr
	Mitopep	0		5 mg/r	nl Every 1	Days	
	1	ressive the ctive ingree	dient	St 1032 To	and frequ	ency	+
			No	data			
on	orbidity	-					+
	Code	Nam	e			T	-
T		1.44444	-	lata			
			140 1	Jata			
Resi	idual diun	esis					+
7	Lab test	date		Amount ml			
			No	lata			
los	pitalisatio	ons					+
7	Start dat	e of hospit	alisat	ion End	date of h	ospital	isati
			No	data			
Pati	ent allerg	ies					+
7	Date	Allerg	Aller	gy typ	Details		
	24 Fe	Anim					
	23 Fe	Food					

The outpatient dashboard shows:

• **Clinical diary**: The Clinical diary section contains information about the clinical history of the patient. The view is very similar, though more compact, than what can be found in the Patient *Clinical Diary* menu item.

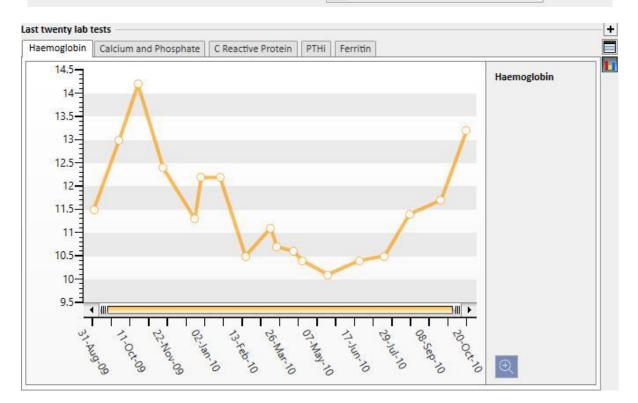
iical diary		_
Nurse HD comment	15	
Date	Diary	
03 Dec 2010 09:54	Nurse Comment for the treatment Made on Dec 3 2010 9:54AM.	
20 Nov 2010 15:46		
17 Nov 2010 00:00	Nurse Comment for the treatment Made on Nov 17 2010 12:00AM.	
15 Nov 2010 00:00	Nurse Comment for the treatment Made on Nov 15 2010 12:00AM.	
12 Nov 2010 00:00	Nurse Comment for the treatment Made on Nov 12 2010 12:00AM.	
10 Nov 2010 00:00	Nurse Comment for the treatment Made on Nov 10 2010 12:00AM.	
08 Nov 2010 00:00	Nurse Comment for the treatment Made on Nov 8 2010 12:00AM.	
05 Nov 2010 00:00	Nurse Comment for the treatment Made on Nov 5 2010 12:00AM.	
records found	N	

• **Outpatient clinic visit history**: here the last ten outpatient clinic visits are listed with the option to edit or just see some basic data.

Visit type	Visit date	Status	Reason name	
Programmed visit	19 Nov 2010 12:00	Open	Lithiasis Documented	

Laboratory test history: this screen displays the patient's last twenty laboratory tests, allowing the user to
navigate through them or examine the trend of some key values via the chart view.

	Ŧ	Last	19 Oct 2010 00:00	21 Sep 2010 00:00
Dialysis dose Daugirdas DPVV Kt/V		1.47	1.47	1.37
Dialysis dose equil. Kt/V		1.47	1.47	1.36
Haemoglobin	g/dl	13.2	13.2	11.7
So <mark>dium</mark>	mEq/I	140.00	140.00	145.00
Potassium	mEq/I	7.20	7.20	7.03
Bicarbonate	mEq/I		1	
fotal protein	g/dl	6.5		
Total calcium	mg/dl	9.8	9.8	9.4
Phosphate	mg/dl	6.5	6.5	5.0
тні	ng/l	64		
Albumin	g/dl			
C-reactive protein	mg/l	5.60		
ALT (GPT)	IU/L	14		14
erritin	µg/l	115.5		
		1		



- Active home medication: The user can view, modify or add new drugs prescribed to be taken at home.
- Comorbidities: Shows all comorbidities affecting the patient, allowing the user to change them or add new ones.
- Residual diuresis: Quick view of the patient's residual renal function based on his lab results. The user can
  modify the laboratory tests or add new ones.
- Hospitalisations: A quick view of the patient's hospitalisations.
- Patient allergies: Allows review and editing of the patient's allergies.

Acti	ve regula	r therapy				+				
7	Drug / A	ctive ingredi	ent Do:	and frequency						
	Fepili			<i>Mo We Th Sa Su</i> 43 - 0 - 54 - 0 ml						
Com	orbidity					+				
7	Code									
		N	lo data	а						
Resi	dual diur	esis				+				
Ŧ	Lab test	date	10.000	Amount mi						
		IN	lo data	а						
Hos	pitalisatio	ons				+				
7	Start da	te of hospita	lisation	End	date of hospital	isati				
0.555.75		N	lo data	а						
Pati	ent allerg	jies				+				
7	Date	Allerg A	llergy ty	р	Details					
	10 N	Activ (	Eriramu	iramuf)						
	08 A	Activ (	Iraderad	.)						

The left-hand side of both screens can be customised with a custom query; this allows the user to *enter* a *query* to be displayed instead of: *HD Treatment History, Laboratory Test History, PD dialysis dose, and PD fast peritoneal test.* To this, the user must create a query using the *query builder*. The query must meet the following requirements:

- The query's main entity will be a patient entity but not the patient's administrative data;
- The query must not contain parameters. This means no items must be put in the "Drag and drop field to create a parameter" section;
- The query will be published as a view;

Query Builder is only available if the "Analysis and Reportt" writing module is active.

Once the query has been created it should be linked inside the related group of the Configuration Parameter entity in the Master Data (Clinic Manager) menu.

## 9.2.2 TREATMENT OVERVIEW

This section shows the principal data from the patient's last three treatments. All the other treatments can be viewed by clicking the arrow button.

																		. Menth		0
	Treatment	date 20	) Nov 20	010 14:5	8			Treatmer	nt date 18	B Nov 20:	10 00:0	D			Treatme	nt date 1	6 Nov 2	010 00:0	0	
Device					Device FMC5008 FMC5008001							Device FMC5008 FMC5008001								
Dry body veight	Weight pre	Weight post	UF to	tre tim			Dry body weight		Weight post	UF tot		ective atment e		Dry body weight	ly Weight pre	Weight post	UF to		ective atment Ie	
5.2		84. <b>1</b> 0	2480	23	nutes	FX 1000	65.2	66.80	65.20	1900			FX 1000	65.2	68.20	65.20	3300		10	FX 100
				-	14:58	15:09	Actual bo	du tampa	ratura	0	rc ¥	07:08	08:39	Actual b	ody tempe	ratura		°C	07:06	08:23
Actual body temperature °C				Actual body temperature				-	68	69			-	U I	77	79				
ntra-dialy	tic heart r	ate			74	66	Intra-dialytic heart rate					00	180/	Intra-dialytic heart rate 77					190/	
	: 						Arterial/\	/enous pre	essure				-225	Arterial/	Venous pr	essure				-215
Arterial/Venous pressure							Systolic/Diastolic pressure						105/ 59	Systolic/Diastolic pressure						142/ 81
Systolic/Diastolic pressure						-	TMP pressure			r	mmHg		255	TMP pressure				mmHg		131.
TMP pressure			2	mmHg			Actual net UF volume (acc.)			r	nl	0.0	601.0	Actual net UF volume (acc.)				ml	0.0	844.0
Actual net UF volume (acc.)			1	ml	0.0	248	HDF/HF r		r	ml/min		160.0	HDF/HF rate FMC				ml/min		124.	
HDF/HF rate FMC				ml/min			Blood flo	w rate		r	ml/min		300.0	Blood flo	w rate			ml/min		300.
Blood flow rate				ml/min			Body tem	perature	change	0	'C			Body temperature change				°C		
Body tem	perature ci	hange		°C			5 records	found						5 records	found				_	
6 records				1903/00				Dia	alysate bit	bag AC-F	313/2				Di	alysate bi	bag AC	F 313/2		
	Dial	ysate	AC-F 31	13/2			Antico	bagulant N	Aanual Ti:	zeb - 50p	vieces 1	mg Tab	lets	Antic	oagulant M	Aanual Ti	izeb - 50	pieces 1	mg Tab	lets
Antico	agulant M	anual					Ad	ditional N	/lanual					A	dditional N	/anual				
Additional Manual			Total manual 1000,00 IU						Total manual 1000,00 IU											
Total manual						An	dipnaf - 1	Oniece	; 120m	l vials	Anticoagulant Auto Adipnaf			dinnaf -	pnaf - 10pieces 120ml vials					
Anticoagulant Auto				Total auto 4500,00 IU						Total auto 4500,00 IU										
Total auto											Vascular access Fistula									
Vascular access Fistula			stula	la			Vascular access <u>Fistula</u> selection				per arm brachial medial - Left				selection			<u>ustala</u> Upper arm brachial medial - Lef		
selection Upper of		393	n brachi	al medi	al - Left										Ē	pper an	n brochi	armea	ui - Leji	
				Arterial needle DIALYSEKANUELE ART. 17GA						GA	Arterial needle DIALYSEKANUELE ART. 1				ART. 17	GA				
Arterial needle			1,5X15MM A711G 1ST STCK.						Anternar	1,	,5X15M	M A7110	G 1ST ST	CK.						
Venous needle		Venous needle							Venous	needle										

## 9.2.3 ADMINISTRATIVE DATA

This section contains the patient's administrative data, such as name, address, date of birth, etc. For more information about how to edit the individual fields and field types.

As an alternative to the mouse, press the **Tab** key to move from one field to the next. To move back, press the **Shift** key and the **Tab** key simultaneously.

After editing this section the **Save** and **Cancel** buttons will be activated. Click **Save** to store the data in the database. To discard the changes click **Cancel**.



#### Warning

Patients with the **Gender** field marked "Unknown" will be sent to Therapy Monitor but it will not make them selectable as treatable patients.

By default, the patient's picture is not visible in this section. However, it can be displayed by setting the "Hide patient picture" field to "No" in Master Data, under the "Configuration parameters" item.

Aitken Lambert , David Born 15/0	08/1952 (67y) Gender 🖓 Cod. 39807	Status Active/Hemodialysis 💈 🕏	
Administrative data			Edit Print 🔻 🔇
Title		First name	David
Last name	Aitken	Second last name	Lambert
Birth name		Date of birth	15 Aug 1952
Nationality		Gender	Male
Patient number	11	Patient regional autonomic number	
Patient code	39807	Patient monitor ID (key code)	41
Admission dialysis status	Hemodialysis	Admission positional status	Active
Admission date	12 Apr 2010 00:00	Reason for patient admission	New ESRD patient
Patient RRT initiation date		First dialysis in centre	06 May 2010
Dialytic age		First contact with clinic	
Current hospital		Patient exoneration codes	

**Patient code**: This is an ID which is automatically assigned by Therapy Support Suite during patient admission and cannot be changed. This ID is the unique identifier of the patient inside Therapy Support Suite.

**Patient monitor ID (key code):** This is the ID that identifies the patient's connection between Therapy Support Suite and Therapy Monitor/Patient On Line. This code cannot be changed. It is assigned if one of the following events occurs:

- The patient is admitted with an "Active" Admission status and a Clinic admission procedure compatible with the patient's need to undergo treatment, namely: "Hemodialysis", "Hemodialysis (Intensive Care)", "Hemodialysis (Acute)", "Home HD" or "Peritoneal Dialysis".
- A New dialysis status that compatible with the patient's need to undergo treatment, namely: "Hemodialysis", "Hemodialysis (Intensive Care)", "Hemodialysis (Acute)", "Home HD" or "Peritoneal Dialysis". The destination hospital, for the new status, should coincide with what has been provided for in one of the Therapy Support Suite clinics.
- A Patient Tab is to be created for a patient without a **Patient monitor ID (key code)**.
- A Hemodialysis prescription is saved regardless of the patient's dialysis status.

## 9.2.4 MEDICAL DATA

The Medical Data section contains the patient's basic medical data, such as height, blood group and renal diagnosis. For more information about how to edit the fields and field types.

As an alternative to the mouse, press the **TAB** key to move from one field to the next. To move back, press the **Shift** key and the **Tab** key simultaneously.

After editing this section, the **Save** and **Cancel** buttons will be activated. Click **Save** to store the data in the database. To discard the changes click **Cancel**.

	al data	ů.												See	history E	dit	Print	
		P	atient height	185	cm							Pati	ient weig	ght	85.00 Kg			
		Bod	y mass index	24.8	4 Kg/m	2					E	Body si	urface ar	rea	2.10 m²			
		Wrist ci	rcumference									В	lood gro	up	o			
			Rh factor	neg							Alco	hol co	onsumpti	on	Does not drink a	lcohol		
		Tobacco	consumption	Curr	ent smo	ker						Patie	ent mobil	lity	walks unaided			
	Last	transplar	itation status							EDTA number								
		Re	nal diagnosis															
		Re	nal diagnosis															
		Renal d	iagnosis date									Bio	psy prov	en				
Me	dical Data H	listory (L																_
Ŧ	Date User	Source	Patient height cm		weight g	Body m	ass index g/m²	Body sur	tace area	Wrist ci	cm	Blood	d group	Rh factor	Alcohol consur	nption	Tobacco consump	tion
									No	lata								
Amj	putation hi	story																
Ŧ	Date of am	putation	Is traumatic in	jury ? Le	eft arm p	position	Right arr	n position	Left leg	position	Right leg pos	ition	Weight Kg	Weight a	fter amputation	Heigh	t after amputation cm	Bod
									No	lata								
	inormotio	n comme	nt															
		n comme	nt															
			nt y information															
			v information															
			v information															
			v information															
			v information															
			v information															
			v information															
			v information															
			v information															
			v information															

If the user modifies the **height, weight, blood type or Rh factor** and if donor data are available for the patient or if there is a value in the **waiting list field,** the system will ask the user if these data are also to be updated for these sections.



## 9.2.4.1 MEDICAL DATA (HISTORY)

Modifying any field in the Medical data section and saving will create a log of the values before saving. At the top of this section, the symbol is displayed, which, if pressed, will show when and by which user the last change was made.

Medical data			
	Last update date	24 Sep 2019 13:41	
	Modified by	demouser	
W	rist circumference		

Medical data will also be updated following the modification of or addition to the following fields in the following entities:

- Medical data: any changes made to the fields of this entity.
- Amputations.
- Donor data: all fields in the medical data section.
- Outpatient examination: weight and height of the anthropometric data section.
- Adequacy or nutrition: (if the PD plugin is enabled) weight, height or wrist circumference.
- POL QA test: (if the PD and POL plugin is enabled) weight and height.

Changes made to the Medical Data can be seen in two sections:

• in the table Medical data history (Last 5), which shows the last 5 changes made.

7	Date	User	Source	Patient height	Patient weight Kg	Body mass index Kg/m <sup>2</sup>	Body surface area m <sup>2</sup>	Wrist circumference cm	Blood group	Rh factor	Alcohol
	16 May 2019 14:37	demouser	Outpatient clinic visit	195	83.00	21.83	2.11		В	neg	Drinks a
	20 Apr 2011 15:08		Medical data	195	85.00	22.35	2.14		В	neg	Drinks a

See history..

button, the complete list of all the times that a change in the medical data has by clicking on the been made will be displayed.

/ledi	ical data (History	)										Export E	Excel Print
<b>F</b>	Date	User	Source	Patient height cm	Patient weight Kg	Body mass index Kg/m²	Body surface area m <sup>2</sup>	Wrist circumference cm	Blood group	Rh factor	Alcohol consumption	Tobacco consumption	Patient mobili
8	24 Sep 2019 13:41	demouser	Amputations	194	82.00	24.82	2.25		В	neg	Drinks alcohol	Non-smoker	walks unaided
	16 May 2019 14:37	demouser	Outpatient clinic visit	195	83.00	21.83	2.11		В	neg	Drinks alcohol	Non-smoker	walks unaider
- 84	20 Apr 2011 15:08		Medical data	195	85.00	22.35	2.14		В	neg	Drinks alcohol	Non-smoker	walks unaide

n both sections you can see when the change was made, by which user and also in what entity.

# 9.2.4.2 AMPUTATION HISTORY

This medical data section shows all amputations undergone by the selected patient.

7	Date of amputation	Is traumatic injury ?	Left arm position	Right arm position	Left leg position	Right leg position	Weight Kg	Weight after amputation Kg	Height after amputation cm
	24 Sep 2019 13:41	Yes	Arm below elbow	Hand	Leg below knee	Foot	82.00		194

### 9.2.5 HOSPITALISATIONS

The patient's hospitalisations can be entered in this section. Simply record the start and end date and the hospital where the patient has been hospitalised. It is also possible to specify the reason for admission. After saving the hospitalisation, the relative transfers are automatically created in the Patient Status section. It is also possible to create hospitalisations which last one day only.

Start date of hospitalisation	24/09/2019 00:00	Ħ	End date of hospitalisation	dd/mm/yyyy hh:mm	##
Days	0		Hospital	Hospital Two	× •••
Hospital department		•	Patient remains treatable		
Hospitalisation					
Reason	Comment				
+ Hospital system external ld			Attachment		
	<u></u>			Drop a file here or click on the to open file selector	e button below

When a patient is hospitalised in a <u>non-TSS clinic</u>, it is possible to specify whether or not the patient remains "treatable".

|--|

A hospitalised patient who is "treatable", meaning that the relative field is set as true, will still be applied in the "Clinic Scheduler" and his status will not be changed to "Not Active".

It is possible to create hospitalisations "in the same clinic", "in other TSS clinics" and "in external/non TSS clinics".

- In the same clinic: the patient's status does not change and the user can choose the ward to which the patient will be moved. The hospitalisation can be deleted using the "Delete" button (if the user has the necessary user rights).
- In other TSS clinics: this type of hospitalisation can be created by selecting a TSS clinic as the "Ward". When a hospitalisation is saved, the patient's status will depend on the event start day. If the hospitalisation is planned for the future, the patient's status will not change. If instead it starts at the time it is saved (or before) the movement is automatically accepted and the patient will have the status of "hospitalisation -in transit." If the hospitalisation is planned for the future, the clinic that created it can delete it with the "Delete" button (if the user has the necessary permissions) or cancel it in the Clinic Name section of the "Patient Transfers" menu item.

Default Clinic													
Patient transfers								Refresh	Add	Export Excel	l Print		
Draft transfers Comp	lete transfers												
Patient name	Transfer reason	Status	Start date	End date	Hospital name	TSS clinic	TSS clinic name	Transfer direction					
Middleton , Mary 1 record found	Temporary transfer	Draft	24 Feb 2017 09:36		Ospital Five - Satellite Clinic	Yes	Satellite Clinic	Outgoing					
Patient transfers					^		Cancel tunsfer	Return to start clir		Print	00		
Pat			ton <u>Mary</u>					Temporary transfer					
	Start date 24 Feb 2017 09:36						End date						
	Centre type TSS Centre								Satellite Clinic				
	Start clinic	<u>Default</u>	Clinic			Transfer	direction	Outgoing					
	Status	Draft											

Once the hospitalisation has been accepted, the patient will appear in the list of active patients at the destination clinic. At this point the hospitalisation can no longer be cancelled. It is possible to send the patient back to his clinic of origin by clicking on the "Return to start clinic" button in the clinic name section of the "Patient Transfers" menu item.

atellite Clinic											
atient transfers								Refresh	Add	Export Excel	Prin
Draft transfers Comple	te transfers										
Patient name	Transfer reason	Status	Start date	End date	Hospital name	TSS clinic	TSS clinic name	Transfer di	irection		
	Temporary transfer	Draft	24 Feb 2017 09:36		Ospital Five - Satellite Clinic	Yes	Satellite Clinic	Incoming	() ()		
Thompson , Josie 2 records found	Hospitalisation transfer	Active	31 May 2019 00:00		Ospital Five - Satellite Clinic	Yes	Satellite Clinic	Incoming			
atient transfers					^	Gancel	transfer Retu	ırn to start cl	inic	Print	30
	Patient name Tho	mpson ,	Josie		Тг	ransfer reas	on Hospi	talisation tra	nsfer		
	Start date 31 M	May 2019	00:00			End da	ste				
	Centre type TSS	Centre			Des	stination cli	nic <u>Satelli</u>	Satellite Clinic			
	Start clinic <u>Def</u>	ault Clini	2		Trar	nsfer directi	ion Incom	ing			
	Status Acti	ive									

Now the patient is no longer present in the destination clinic and has returned to "Active" status in his clinic of origin.

In external/non-TSS clinics: it is possible to create this kind of hospitalisation by selecting a non TSS clinic as "Ward". As it is not possible to see the destination clinic, it is assumed that all hospitalisations are accepted automatically (except those created with a start date in the future). The clinic that created the hospitalisation cannot cancel it (unless the start date is in the future) but can send the patient back to his original clinic by clicking on the "Return to originating clinic" button in the clinic name section of the "Patient Transfers" menu option.

tient transfers								efresh Add	Export Exce	el Prin
raft transfers Complete tran	nsfers									
Patient name Trans	fer reason	Status	Start date	End date	Hospital name	TSS clinic	TSS clinic name	Transfer direction		
Brennan , Nicholas Hosp	italisation transfer	Active	31 May 2019 00:00		Hospital Three	Yes	Default Clinic	Outgoing		
Middleton , Mary Tem; records found	oorary transfer	Draft	24 Feb 2017 09:36		Ospital Five - Satellite Clinic	Yes	Satellite Clinic	Outgoing		
tient transfers						Cancel t	ransfer Return	n to start clinic	Print	00
Patient to t	ransfer <u>Breni</u>	nan <u>Nich</u>	iolas		Tra	ansfer reaso	n Hospita	lisation transfer	12	
Start date 31 May 2019 00:00		00:00		End date						
Cent	re type Hosp	ital			Destina	tion hospit	al <u>Hospita</u>	Hospital Three		
Sta	rt clinic <u>Defau</u>	Default Clinic			Tran	n Outgoir	Outgoing			
	Status Activ	e								

If the end hospitalisation date has been entered, the "Date of return to the originating clinic" will be displayed in the patient data summary bar.

Born 28/10/1962 (56y) Gender 👌 Cod. 399489 Status Transit - temporary/Hemodialysis Return to start clinic 08/06/2019

Each time a hospitalisation is created, a task is automatically generated, which is associated with this type of event, only if the authenticated user is enabled to receive notifications. To do this, the user must be selected among the "Notification Users" or belong to a group selected among the "Notification Groups" in the "Configuration Parameters" in the Master Data section under "Movement Notifications" (see section 4.1.1 of the Service Manual).

The tasks generated by the "Hospitalisation" event will be visible to the user according to these rules:

- internal hospitalisation, task not generated;
- hospitalisation to TSS clinic, tasks generated for enabled users in the departure clinic and destination clinic;
- hospitalisation to non-TSS clinic, tasks generated for enabled users in the departure clinic;

If a clinic does not have users or user groups enabled to receive movement notifications, this type of event will never generate the creation of a task for any user.

A patient who has an active/ ongoing hospitalisation will have an "H" symbol displayed in the top summary menu bar. This symbol will be displayed from the day the hospitalisation starts until midnight of the day the hospitalisation ends.

In the case of hospitalisation, on the other hand, the presence or absence of the symbol will depend on the logic set in the configuration parameters in the section "logical configuration of the selection of clinical cases (hospitalisations)" (see section 4.1.1 of the Service Manual). If the hospitalisation does not consider an exact time for its closure, the symbol will be displayed until midnight of the day the hospitalisation ends. If, however, the exact time for the closure of the hospitalisation is set, the image will disappear as soon as the hospitalisation is "closed".



## 9.2.6 PATIENT STATUS

Movements (changes in status or position) relating to patients can be entered in this section. Movements describe changes in the patient's status; for example, entering and accepting a movement in a clinic other than the current one will change the patient's status to "Not Active".

This section is divided into two Tabs: "Patient status" and "Patient change status"

Patient status					
Patient status	Patient change status				

where essentially the second tab shows the structure and the logic described below and related to the "Patient status" tab, relating only to status changes and there are no position changes, to permit a more immediate and exclusive display of these records.

The dialysis statuses available are: Ambulatory, Hemodialysis, Hemodialysis ICU, Hemodialysis Acute, Peritoneal Dialysis, Pre-Dialysis, Transplant follow-up, Lost contact, Treatment stopped, Deceased, Donor candidate and Donor.

New dialysis status 🔣	Please select one entry	•
	Please select one entry	
	Ambulatory	
New positional status	Hemodialysis	
	Hemodialysis (ICU)	
	Hemodialysis (Acute)	
	Home Hemodialysis	
	Peritoneal dialysis	
	Pre-dialysis	
	Transplant follow-up	
	Lost in follow-up	
	Treatment stopped	
	Deceased	
	Donor candidate	
	Donor	

The mandatory fields during creation of a movement are Event Date, New Dialysis Status and Hospital.

Event date 🙁		Ħ	New dialysis status 🚦 Please select one entry	•
Hospital	Hospital One - Default Clinic	×		
Patient status type			New positional status	

Additional mandatory fields may appear depending on the value of these three fields (i.e. if the hospital selected is not the current one, a "Transfer type" field appears and must be selected).

All movements accepted to another hospital/clinic compared to the local one, move the patient and modify his status based on the type of transfer performed and the clinic to which he is moved. Even hospitalisation changes the status of the patient.

Following are the various possible combinations for status changes for a patient after a movement:

Type of movement	To the clinic	Status in originating clinic	Patient group in originating clinic	Status in destination clinic	Patient group in destination clinic
Temporary	TSS	Transit - Temporary	Active	Transit - Temporary / "Originating clinic"	Active
Temporary	Non- TSS	Transit - Temporary	Active	-	-
Holiday	TSS	Transit - Holiday	Active	Transit - Holiday / "Originating clinic"	Active
Holiday	Non- TSS	Transit - Holiday	Active	-	-
Final	TSS	Active - "Destination clinic"	Inactive	Active Active	
Final	Non- TSS	Not Active	Inactive	-	-
Hospitalisation	TSS	Transit - Hospitalisation	Active	Transit - Hospitalisation / "Originating clinic"	Active
Hospitalisation	Non- TSS	Not Active	Inactive	-	-

"Originating Clinic" is the name of the clinic the patient is leaving. "Destination Clinic" is the name of the clinic the patient is transferred to. In the event of transfer to a Non-TSS clinic, the patient remains only visible in the "Originating Clinic".

A patient's past movements can also be logged and movements can be scheduled for the future. If the "Deceased" status is assigned to a patient, all the related treatment prescriptions and active drug prescriptions will be deactivated/terminated, while the vascular access will be changed to the "Terminated" status. Movements after death will be deleted. The date of death shown in the administrative data will be set automatically in order to reflect the date of movement and vice-versa.

# 9.2.6.1 MOVEMENT TYPES

Movement types are split into three groups: Internal Transfer, Incoming and Outgoing.

## Internal transfer

Internal transfers take place in the same hospital. These movements change the patient's dialysis status (Pre-Dialysis, Hemodialysis, Peritoneal Dialysis, Transplant follow-up, etc.).

Patient status			Cancel Save	0
Event date	24/09/2019 00:00	New dialysis status	Hemodialysis	-
Hospital	Hospital One - Default Clinic × …			
Patient status type	Internal transfer - Modality change to hemodialysis	New positional status	Active	
Unique ID				

If the patient is in a "Not active" status, the internal transfer allows the patient to be reactivated.

## Incoming

"Incoming" movements are all those movements that indicate the hospitalisation of the patient in the current hospital, while the "New patient admission" movement is created through the "New patient" item. Other examples are the "Transfer in from a TSS centre", "Vacation return" and "Return from a temporary transfer". These movements can occur when the patient is not in the current hospital; this means that the patient previously had an "Outgoing" movement. For an "Incoming" movement the user can add a comment to describe the event.

Patient status			Cancel Save	0
Event date	31/05/2019 00:00	New dialysis status	Hemodialysis	-
Hospital	Hospital One - Default Clinic × …			
Patient status type	Incoming - Transfer In from a non-TSS unit	New positional status	Active	
Comment on return				
Unique ID				

Otherwise, an "Incoming" movement is generated automatically when the user in the destination clinic clicks the "Return to clinic of origin" button in the clinic name section of the "Patient transfer" menu.

### Outgoing

Outgoing movements are used to move patients to other clinics, either TSS or non-TSS. If a hospital other than the current one is selected, the "Transfer Type" field appears. This field can be used to describe the type of transfer, e.g. whether the transfer is for "Vacation", "Definitive", or "Temporary".

Vacation: patient is not in the clinic for a limited period of time. Typically used for patients who are on holiday. It is possible to specify the holiday "End date". The movement is considered accepted as soon as it has been executed. If the destination clinic is a non-TSS clinic, it is considered accepted automatically. At any time, even if a holiday end date has been specified, both clinics can send the patient back to the clinic of origin at any moment by clicking the "Return to clinic of origin" button in the clinic name section of the "Patient transfer" menu item. Once an outgoing movement has been executed, therefore accepted automatically it can no longer be cancelled.

Patient status			Cancel Save	3
Event date	24/09/2019 00:00	New dialysis status	Hemodialysis	•
Hospital	Ospital Five - Satellite Clinic × …			
Patient status type	Outgoing - Vacation to a TSS unit	New positional status	Transit - vacation	
Transfer type	Vacation			

Definitive: for patients permanently transferred to other hospitals. After a definitive transfer, all the patient's data in TSS are switched to "Read-only" mode: all the data in the system are then available but cannot be modified. The movement is considered accepted as soon as it has been executed. If the destination clinic is a non-TSS clinic, it is considered accepted automatically.

Patient status			Cancel Save	000
Event date	22/09/2019 00:00	New dialysis status	Hemodialysis	•
Hospital	Hospital Two × ···			
Patient status type	Outgoing - Transfer to a non-TSS unit	New positional status	Not active	
Transfer type	Definitive			



#### Note

To add a new movement for a "Read-only Patient", the user must have been assigned the rights to the "Enable patient status for read-only patients" section in the clinic configuration parameters. Temporary: patients who are transferred to another hospital for a limited period of time. The movement is considered accepted as soon as it has been executed. If the destination clinic is a non-TSS clinic, it is considered accepted automatically. Even if an end date has been specified, both clinics can send the patient back to the clinic of origin at any moment by clicking the "Return to clinic of origin" button in the clinic name section of the "Patient transfer" menu item. Once an outgoing movement has been executed and automatically accepted, it can no longer be cancelled.

ient status				Cancel Save L	
Event date	24/09/2019 00:00	Ħ	New dialysis status	Hemodialysis	•
Hospital	Ospital Five - Satellite Clinic	×			
Patient status type			New positional status		
Transfer type 🐰	Please select one entry	•			
Unique ID	Please select one entry				
onique to	Definitive				
	Temporary				
	Vacation				

During a temporary or holiday movement the patient is visible in both clinics. All activities carried out on the patient during the period he is at the destination clinic will also be visible in the clinic of origin once the patient returns to the clinic of origin.

Treatment stopped, Deceased and Lost contact are also considered to be outgoing movements. In the case of "Treatment stopped" a new field, "Stopped by", will appear.

Stopped by	Patient		
Unique ID	Please select one entry		
Unique iD	Patient		
	Physician		

In the case of Deceased, the "Cause of death" can be entered. Neither field is mandatory.

Patient status			Cancel Save	0
Event date	24/09/2019 00:00	New dialysis status	Deceased	-
Hospital	Hospital One - Default Clinic × ···			
Patient status type	Outgoing - Deceased	New positional status	Not active	
Cause of death	Cause of death			

Additionally, at the time of motion rescue, the user will be alerted to all the various sections that will be deactivated by the patient.

Warning: 100763
You are assigning the status "Deceased" to this patient. All active information (Treatment prescription, scheduling, drugs and dialysis access) will be closed with the date you define in this patient status, all organs in waiting list will be excluded and future movements deleted. Do you want to continue?
OK. Cancel

If a patient is set to dialysis status equal to "Lost contact" or "Hold on treatment", the user is advised that all medical section sections such as prescriptions, pharmacological therapies, and active schedule plans will be deactivated; aware of this, the user can decide whether to proceed.

Warning: 100762
You are going to de-activate the patient in this hospital, all active treatment prescriptions, scheduling and drugs will be closed with the date you define in this patient status. Do you want to continue?
OK Cancel

If the request has been provided for among the configuration parameters (for more details, see section 4.1.1 of the Service Manual) and when one of the dialysis statuses below is set: Hemodialysis, Hemodialysis ICU, Hemodialysis

Acute, Peritoneal Dialysis, Pre-Dialysis, Outpatient Clinic, or Transplant follow-up and the patient has a waiting-list with all organs excluded, the system asks the user whether he wishes to add organs to the waiting list:

1	Warning:	150020	(	
Do	you want t	o include	patient ir	waiting list?
		Yes	No	

If the user presses the "Yes" button, he is prompted to select the organs for which the "Pre-Included" status will be set on the waiting list by default (4).

Kidney	Pancreas	Heart	Liver

#### Patient Transfer Offline

Patients can also be transferred between clinics that do not belong to the same TSS installation. This type of transfer is carried out by means of an import and export procedure known as "Patient Transfer Offline", described in detail in the relevant section.

#### **Relations with tasks**

All temporary, holiday or permanent movements can generate tasks, as explained for hospitalisations (see section 9.2.5 in the User Manual and section 4.1.1 in the Service Manual).

If a user is enabled to receive notifications following a movement, task creation will follow the rules below:

- internal hospitalisation, task not generated;
- temporary/holiday to TSS clinic, tasks generated for enabled users in the departure clinic and destination clinic;
- temporary/holiday to non-TSS clinic, tasks generated for enabled users in the departure clinic;
- final to TSS clinic, tasks generated for enabled users in the destination clinic;
- final to non-TSS clinic, tasks not generated.

#### 9.2.6.2 SETTING THE END OF MOVEMENT DATE

When a <u>temporary or holiday outgoing movement</u> is saved, the program asks the user to enter the end of movement date.

Transfer end date		
Return date	dd/mm/yyyy hh:mm	
ОК	Cancel	.:

The end of transfer date is used to set the return movement to the departure clinic. This date must be later than the transfer start date.

The user can avoid entering the date in the field shown in the previous screenshots by simply clicking the "OK" button; in this case, the return movement will not be created. The "Cancel" button can be clicked to return to the outgoing movement creation phase.

If the end transfer date has been entered, the "Date of return to the originating clinic" will be displayed in the patient data summary bar.

Born 28/10/1962 (56y) Gender 👌 Cod. 399489 Status Transit - temporary/Hemodialysis Return to start clinic 08/06/2019

During the transfer period, the patient will be "Not Active" and not "treatable". At the end of this period, set by the user, the patient will be active and treatable again.

#### **Relation to Hospitalisation movements**

The hospitalisation start and end dates will correspond to two equivalent incoming and outgoing movements. As already explained, the patient will be "Not Active" and not "treatable" throughout the transfer period (unless the user ticks the "Patient remains treatable" field).

Hospitalisations				Cancel Sav	e 🛛 🔇 🔇
Start date of hospitalisation	24/09/2019 00:00	I	End date of hospitalisation	26/09/2019 00:00	Ħ
Days	2		Hospital	Hospital Two	× •••
Hospital department		•	Patient remains treatable		
Hospitalisation					
Reason	Comment				
+					
Hospital system external ld			Attachment	Drop a file here or click on the to open file selector	button below



## Note

The creation of the transfer end movement depends on whether or not the user enters the end of hospitalisation date, which is not a mandatory field. When a new hospitalisation is created, it will be checked to make sure it does not overlap with other movements created previously. If that happens, an error message will be displayed indicating this overlap.

			fiefresh Ex	port Excel
Start date of hospitalisation	End date of hospitalisation	Hospital name		
	No	data		
		^		
			Cancel Save	
Start date of hospitalisation 30/	05/2019 10:46	C End date of hospitalisation	Cancel Save	
			dd/mm/yyyy hh:mm	
Start date of hospitalisation		End date of hospitalisation	dd/mm/yyyy hh:mm	
Start date of hospitalisation Days 3 Hospital department	05/2019 10:46	End date of hospitalisation	dd/mm/yyyy hh:mm	
Start date of hospitalisation Days 3 Hospital department cospitalisation Reason C	05/2019 10:46	End date of hospitalisation	dd/mm/yyyy hh:mm	
Days 3 Hospital department	05/2019 10:46	End date of hospitalisation	dd/mm/yyyy hh:mm	
Start date of hospitalisation Days 3 Hospital department cospitalisation Reason C	05/2019 10:46	End date of hospitalisation	dd/mm/yyyy hh:mm	

The same check is also made when a Return to the clinic of origin is performed. In fact in that case, the return movement could create an overlap with an already existing hospitalisations (typically where an end is planned in the future).

atient transfers								Refresh	Add	Export Ex	cel Prir
Draft transfers Compl	lete transfers										
F Patient name	Transfer reason	Status	Start date	End date	Hospital name	TSS clinic	TSS clinic name	Transfer direct	tion		
Hartley , Sarah	Temporary transfer	Active	25 Jun 2019 12:59		Ospital Five - Satellite Clinic	Yes	Satellite Clinic	Incoming			
Middleton , Mary	Temporary transfer	Draft	24 Feb 2017 09:36		Ospital Five - Satellite Clinic	Yes	Satellite Clinic	Incoming			
	Return to start cl			re is an ho	spitalisation still open						
atient transfers			Dossible because the	re is an ho	spitalisation still open		incel transfer	Return to start	clinic	Print	00
atient transfers	"Return to start cl		ОК	re is an ho	spitalisation still open	Transfer		Return to start emporary transf		Print	00
itient transfers	"Return to start cl	inic" not p Hartley ,	ОК	re is an ho	spitalisation still open	Transfer				Print	00
tient transfers	"Return to start cl Patient name Start date	inic" not p Hartley ,	ОК Sarah )19 12:59	re is an ho	spitalisation still open	Transfer	reason T			Print	00
tient transfers	"Return to start cl Patient name Start date Centre type	inic" not ; Hartley , 25 Jun 20	ОК Sarah 019 12:59 re	re is an ho	spitalisation still open	Transfer	reason T nd date on clinic <u>S</u>	emporary transf		Print	00
itient transfers	"Return to start cl Patient name Start date Centre type Start clinic	inic" not p Hartley , 25 Jun 20 TSS Centr	ОК Sarah 019 12:59 re	re is an ho	spitalisation still open	Transfer E Destinatio	reason T nd date on clinic <u>S</u>	emporary transf atellite Clinic		Print	00
tient transfers	"Return to start cl Patient name Start date Centre type Start clinic	inic" not p Hartley , 25 Jun 20 TSS Centu <u>Default C</u>	ОК Sarah 019 12:59 re	re is an ho	spitalisation still open	Transfer E Destinatio	reason T nd date on clinic <u>S</u>	emporary transf atellite Clinic		Print	0
tient transfers	"Return to start cl Patient name Start date Centre type Start clinic	inic" not p Hartley , 25 Jun 20 TSS Centu <u>Default C</u>	ОК Sarah 019 12:59 re	re is an ho	spitalisation still open	Transfer E Destinatio	reason T nd date on clinic <u>S</u>	emporary transf atellite Clinic		Print	00

### 9.2.6.3 DELETING A MOVEMENT

A movement can be deleted by modifying it and clicking the "Delete" button.

Patient status			Cancel Delete Save	
Event date	28 Nov 2017 00:00	New dialysis status	Hemodialysis	
Hospital	Ospital Five - Satellite Clinic			
Patient status type	Outgoing - Temporary transfer to a TSS unit	New positional status	Transit - temporary	
Transfer type	Temporary			

All movements created with an earlier or equal start date when saved, will be automatically accepted and therefore cannot be deleted.



#### Warning

Risk for the patient as a result of incorrect patient data being shown

Deleting a movement only affects the patient's status and the relative scheduling when the movement deleted is the latest one. In this case, the patient's position and dialysis status, and the relative scheduling, will be defined by the penultimate movement, which will become the last one.



#### Note

Movements which originate from a hospitalisation cannot be deleted unless the relative hospitalisation is also deleted.

### 9.2.6.4 FATHER/SON REFERENCE CLINIC

It is possible that multiple TSS clinics are related by a father/son relationship.

In this case, all patients active in the "son" clinic are visible also in the list of active patients at the father clinic. All of the pharmaceutical prescriptions, laboratory test scheduling, and medical orders that involve the patients of the "son" clinic are not visible from the "father" clinic. Also, it is not possible to add new elements in the aforementioned sections.

Patients active in the "father" clinic are not visible in the "son" clinic.

## 9.2.6.5 PATIENT STATUS CHANGE TAB

This tab has the same structure as the previous tab with one substantial difference in its applied logic. Differently from the Patient Status tab, the Patient Status Change tab shows the list of events, only changes in dialysis status, excluding the movements made by the Patient.

Because of this new section it is possible to more immediately concentrate exclusively on dialysis status changes without having to scroll through a list of records also including possible multiple position changes made by the patient.

Patient status					Refresh	Add Exp	port Excel	Print
Patient status Patient change	status							
F Event date	Patient star	tus type	New dialysis status	New positional status	Description of patient sta	atus Pla	anned	
12 Apr 2010 00:00	Incoming -	New patient admission	Hemodialysis	Active		N	0	
			~		sti	Dáse		
		12 4 2010 00-00	~	Neu diskuis status	Edit	: Print		00
Ever	nt date	12 Apr 2010 00:00		New dialysis status		: Print		90
Ever	nt date lospital	12 Apr 2010 00:00 Hospital One - Default Clinica		New dialysis status		: Print		00
	lospital	Same - and subscription	2	New dialysis status New positional status	i Hemodialysis	Print		00

# 9.2.7 MEDICAL PRESCRIPTION

This section enables the user to create and print medical prescriptions for a patient.

It is possible to create prescriptions for drugs, laboratory tests, specialist examinations and diagnostic tests. In this section it is also possible to print out NHS prescription forms, one or more per section depending on the rules applied for each one.

# 9.2.7.1 CREATING A MEDICAL PRESCRIPTION

A new medical prescription can be created by clicking the **New** button.

A form will appear with the date and automatic information filled-in by the system. The working diagnosis of the prescription can be specified in the related field. This field will be displayed on prescriptions for diagnostic tests and specialist examinations.

## 9.2.7.2 LABORATORY TESTS SECTION

In the laboratory tests section, it is possible to create a medical prescription for one or more laboratory tests by clicking the *button*.

+	
n	

After the button has been clicked the system shows a pop-up, called Exam Picker, where the various categories of laboratory tests are shown. The user can click the checkbox to select/deselect the related laboratory tests. The checkbox can also be used to select / deselect all the tests belonging to a specific group. After making the selection, the user clicks the OK button at the bottom of the pop-up to confirm. The + button can be used to add exemptions to the prescription for the laboratory tests.

The laboratory tests can generate one or more prescriptions, depending on how many are selected in the "Exam Picker".

Exam picker	
Show only items with medical Service	Description Search Q
By category By profile	
Electrolyte and water balance	
All	
Anion gap	Chloride
Potassium	Sodium
Haematology	
All	
Haemoglobin	Mean cell hemoglobin content (MCH)
Reticulocytes	
Virology	
All	
Anti-HBs IU/L	Hbs Ag
HCV status (RT_PCR)	HIV2 status
	OK Cancel

# 9.2.7.3 DRUG SECTION

In the drug section the system loads all drugs prescribed to the patient as part of his home pharmacological therapy. To print a drug prescription the user must specify the quantity in the relative field. Once the drug quantity is filled out the system calculates and displays the prescription text field. This is the text that will be displayed on the medical prescription. It can be modified before the medical prescription is saved and printed. It is also possible to select a maximum of two exemptions related to the patient.

After the information has been entered, a prescription is generated for each of the drugs for which a quantity other than 0 has been specified (the example prescription shown in *section 2.7.7* the print-out of a prescription for one of the drugs selected in the next screenshot).

Drug selection			
Exemption	2 Exemption		
	+		
Prescribed drugs			
Drug	Quantity	Text for prescription	
Fascox (12 mg Effervescent Tablets)	1 💌	Fascox (12 mg Effervescent Tablets) - pz. 1 / 12 - 0 - 32 - 0 mg Mo, We, Th, Sa, Su	

## 9.2.7.4 DIAGNOSTIC TESTS AND SPECIALIST EXAMINATION SECTION

The diagnostic test and specialist examination section lists all diagnostic tests/specialist examinations which are in 'pending' status on the system. Click the checkbox to select/deselect the relative specialist examination. After a specialist examination has been selected the system calculates and displays the prescription text field. This is the text that will be displayed on the medical prescription. It can be modified before it is saved and printed. It is also possible to select the exemption related to the patient.

Pending diagnostic tests Diagnostic tests		Selected	Text for prescription
-	24 hours blood pressure Holter 🗙 💀		Cardiovascular system 24 hours blood pressure Holter
	Specialist examination selection		
	Specialist examination selection	+	
		Ŧ	
	Exemption		rescription

## 9.2.7.5 TEXT PRINTOUT

In this section the user can write free text that will be replicated on the medical prescription: again, it is possible to specify one or more exemptions related to the patient as well as the quantity to be associated with the prescription.

	Prescription text			-	
	Exemption	+	Service quantity	Please select one entry	•
example text					•••
					- 1
					- 1
					- 1

## 9.2.7.6 MEDICAL PRESCRIPTION PRINTOUT

After the form has been filled out and saved, the related medical prescription can be printed by clicking the

rint button.

The current printing process is governed by country-specific regulations. TSS supports different rule sets and print layouts according to the configuration applied during TSS setup.

Example of printed version of prescription (Italian layout) comprising:

- Information recovered from the patient (1, 3, 4 and 6)
- Exemptions specified for the patient (2)
- Description of the tests prescribed (5)
- User who printed the prescription and printing date (7, 8)
- Dialysis clinic details (9)
- Family doctor (10)

Medica	I Company 1	GKK	ВКК	Andere Kostenträger	Enverbatätty Arbeitsias Santas	Pensioniz(ir)	Kriegshimer bilebane)/)	2
sie dient zur Verrechnur	<b>Überweisung</b> n Monat, vom Ausstellungsdati ng der ärztlichen Leistung.		1029/	; Überweisung an:	"herapievorsc	U Vertrags	ifacharzt hen Vertragsfa	Behandlung Scharzt
Familienname(n)	Vorname(n)	Ver	sicherungsn	Überweisung an, Diagnose	/Franestellun	a Vorhefund	a Risharina Th	eranie
Patient 3 Aitken	David	654	4321	Gastrointestinal system Cardiosurgery example text		-	, san ge m	5
Versicherter (Noraussotollien Beschäftigt bei (Dienstge Architects, engineers		7.	ig Moret Ji					
CH/VA Befürwortung	Arztstempel bei	Rezeptgebü	hrenbefreiung	Hausarzt			Love 3	85250523
demouser	7		9	Vom behandelnden /befu Diagnose	indenden Arz	zt auszufüllen	r.	10
	Test Street, 23	ault Clinic } - 16039 ault Clinic	TestTown					
23/03/	2016 Datum Unterschrift u Ste	empel des Ober	weisenden Attas	Beginn der Behandlung bzw. Befundur	g	Stemp	el und Unterschrift d	es Arztes



#### Note

This is an example of an Austrian prescription. The "medical prescription" printout is not available until the correct prescription has been installed. Please refer to the Service Manual for the relative configuration instructions.

# 9.2.8 PATIENT AGENDA

This section can be used to display a monthly agenda for the various patient activities that must be performed, or have been performed, at the clinic.

In addition to the display, like in the Clinic Scheduler, the elements displayed in the agenda can be moved or deleted (link in the treatment scheduler).

Specifically, it is possible to see as separate events:

- Hospitalisation periods
- The transfer periods are temporary/holiday
- Treatments administered and their future scheduling:
  - Pharmacological prescriptions
  - o Medical orders
  - o Laboratory tests
- Clinic Visits
- Specialist examination
- Diagnostic tests
- Vaccinations
- Patient history
- Euro-transplant data

	Septem	ber	Filter for SI	nift:		Advanced f	ilters		Diagnostic tests Outpatient clinic visit
	24/09/2019	Ħ	Filter for Ro	om:	-	Filter for Resource:	•	2	Specialist examination
Monday	Tuesday	Wed	Inesday	Thursda	y	Friday	Satu	rday	Vaccination
	27	28		29			31		Patient medical history
02	03	04		05		06	07		08
09	10	11		12		13	14		15
16	17	18		19		20	21		22
23	24	25		26		27	28		29
	Programmed visit Vy Room 1 - Bed	Programm	ned visit 🔇 ned visit 🔇 Bed 🔗 📑	Allergology Allergology Room 1 - Bed		Cardiovascula	Room 1 - Be	ed 🖌	Room 1 - Bed 🔗
		02	• •	03	• •	04	05		06
30	01	U.C.					Room 1 - Be	310	Room 1 - Bed

The image that represents the actual treatment (HD or PD) will overwrite its schedule (HD or PD) once the treatment has been created. There is a difference to be highlighted between patients with HD and PD scheduling: in the case of PD treatments, no pharmacological prescriptions, medical orders and laboratory tests will be associated with the relevant calendar day; only the laboratory tests, if they have been scheduled (only a precise date can be specified as a scheduling rule for PD patients), will be visible but independent of the treatment.

	Septer	nber Filter for S	hift:	Advanced filter	s		
	24/09/2019	Filter for Ro					
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	
	27	28	29	30	31	01	
INCR	INCR	INCR	INCR	INCR			
12	03	04	05	06	07	08	
INCR	INCR	INCR	INCR	INCR		3668	
)9	10	11	12	13	14	15	
INCR	INCR	INCR	INCR	INCR			
16	17	18	19	20	21	22	
INCR	Dermatology 3	INCR	Cardiovascul	Influenza 🔉		Anamnesis 1	
3	24	25	26	27	28	29	
INCR	INCR	INCR	INCR	INCR			
0	01	02	03	04	05	06	
INCR	INCR	Anamnesis 1 😨	INCR	Programmed visit 📎			

This is the representation the agenda of a patient who has only one type of treatment scheduling (HD or PD). In fact, it is also possible that a patient, regardless of dialysis status, has a schedule for both hemodialysis treatments and peritoneal dialysis treatments. In this case, the agenda will show both types of planning: the HD scheduling will show the reference shift and the resource to be used as a description, while the PD scheduling will show the treatment mode.

Moreover, on the same day, it is also possible to see the display of several treatments administered regardless of the type (HD or PD), one (or more) actual treatment(s) of one type and the scheduled treatment of the other. The rule for displaying laboratory tests, i.e. whether they are linked to a treatment or displayed individually, will be dictated by the type of treatment planned for that day. At this point we are faced with two types of scenarios: 1) an HD patient, who also has PD schedule plans, will always have the laboratory tests linked as per schedule to an HD treatment; 2) a PD patient, who also has HD schedule plans, will be able to schedule the tests with only the "Specific dates" rule and these will be linked to an HD treatment, if present, otherwise displayed individually in the patient's schedule.

				-1-1	]	
	Septem		Shift:	Advanced filter	5	
	24/09/2019	Filter for Ro	pom:	Filter for Resource:		
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	27	28	29	30	31	01
02	03	04	05	06	07	08
09	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
	Programmed visit V Room 1 - Bed	Programmed visit V Room 1 - Bed 🔗 📄 CAPD		Room 1 - Bed 🔗 🗎 CAPD	Room 1 - Bed 🔗	Room 1 - Bed 🔗 🧯
30		02	03	04	05	06
Room 1 - Bed 🔗 📑	Room 1 - Bed 6	Room 1 - Bed		Room 1 - Bed 🔗 📑	Room 1 - Bed	Room 1 - Bed 🖉 🧯
CAPD		CAPD		CAPD		
Treatment	Patient is hosp	italised Vacatio			ages 🕢 Drug	.1

## 9.3 HD

## 9.3.1 VASCULAR ACCESS

The user can record the patient's vascular access history in this section. To modify an existing vascular access, simply select it from the view and press the Edit button. To create a new one simply click the New button.

N A	utken Lambert , Da	/Id Born 15/08/1952 (67y)	Gender of Cod. 39807 Status Active/Hem	odialysis		
/asc	ular access					New Export Excel P
All	Active Not active	List of events				
7	Creation date	Vascular access type	Anatomical position	Status	Closure date	Date of first use
	01 Jan 1999	Fistula	Upper arm brachial medial - Left	Functioning		01 Jan 1999

This section is divided into two parts: the "Basic data" and the "Follow up". The basic data list general data about the vascular access, for example when it was created, status, date of first use, etc. The follow-up section records the events and actions related to the vascular access's history.

The most important fields are explained below.

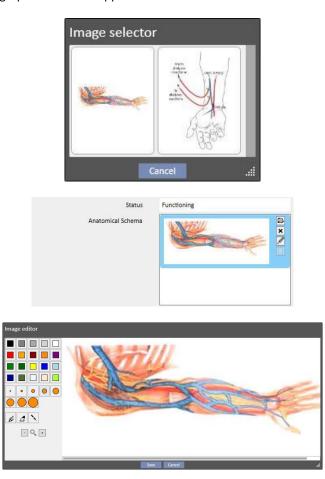
**Type and position** With this custom list it is possible to access the vascular access position editor. After selection of the Access type from a drop-down list (fistula in the example below), the system shows the list of anatomical positions

available for that kind of vascular access. Using the mouse to move the cursor over the will symbol will show an image of a human body with the selected anatomical position highlighted.

Access type     Since Deals     Other     Since Deals     Operation     Since Deals     Other     Since Deals     Other     Since Deals     Other     Since Deals        Since Deals  <	Access type Fistula Antomical position Image Antomical position Image Show Details Other Show Details Upper arm brachal medial - Left Other Show That in Upper arm brachal medial - Left Other Show That in Upper arm brachal medial - Left	
	Access type   Fizula  Anatomical position image Anatomical position image Slow Details Other Slow Details Upper arm brachal medial - Left Over Anathili Indial - Left Over	
	Antomical position Image Show Detils Other Show Detils Upper arm brachal medial - Left Owwarmanik Upper arm brachal medial - Staft	
	Show Details) Other	
	Show Details Upper arm brachial medial - Left 🔯	
	Show Details Upper arm brachigi medial - Right	
	(allow begins) obbet all it oracities means them. Incl	
	irds found	
e and position  Acces type [fstula  Acces type [fstula Acces type [fstula Acces type [fstula Acces type [fstula Acces type [fstula Acces type [fstula Acces type [fstula Acces type [fstula Acces type [fstula		
e and position  Access type Tstule  Access typ		
e and position  Access type [Fitula  Access type [Fitula Ac		
e and position  Access type Pittula  Access type Pittula  Access type Other  Access type Other  Show Details Other  Construct		
Access type Fittula		_
Acces type Fittula	and position	
Access type Fistule  Anatomical position Image Show Details Other  Show To The		
Access type Fittule		
Anatomical postbon Image Show Deals Oher Show D C Show D C C C C C C C C C C C C C C C C C C C	Access type Fistula	
Antonical position     Image       Show Details     Oner       Show D     Image       Show D		
Show Details Other II	Anatomical position Image	
	Show Details Other	
(Show D Cords four	Show D	
	(show D	
	urds four	

Anatomical schema This is a special field where images and text can be used to provide a clearer description of the

vascular access. Click the icon to open a preset selection of body images. Then double click one of them to store the image in the Anatomical Schema field. The user can now draw on the image and write notes by pressing the pencil button and working with the graphic tools that appear.



**Created by (first surgeon)** and **Created by (second surgeon)** These fields allow up to two surgeons to be chosen who have performed operations regarding this vascular access.

**Anaesthesia** This multi-value field that records the log of the anaesthesia administered on the patient relative to this vascular access, permitting the specification of the date on which it was administered, the medicine used, and the dose.

late	Medicinal product	Dosage	
24/09/2019	Adipnaf - 10pieces 120ml vials 🗙 💀	10 m	

**Recirculation/Max Flow** A multi-value field where different access recirculation and access maximum flow measurements can be recorded for a specific date.

Date	Recirculation %	Maximum flow ml/min	
09/02/2011 00:00	2	12	

**Event log** A multi-value field where actions relating to the Vascular Access (creation, incidents, or termination) can be registered. The first event is generated automatically when a vascular access is created.

Date	Туре		Status	Hospitalisation	Anatomical position (photo)	Note
14/04/2011 00:00	Event	•	Functioning	▼ Hospitalisation	•••	
	Renal function recovery	•				

Status This field is read-only. It is filled-in by actions that define the active/not active status of the Vascular Access.

**Date of first use** This field is empty initially and indicates the time at which the vascular access was used for the first time.

**Termination date** This field is read-only and cannot be seen during creation. This is filled-in automatically when an event that causes the closure of the vascular access is created.



# Тір

The user can set the status of a vascular access as "Terminated" or "Not functioning". In this case, if the vascular access is associated with a prescription, Therapy Support Suite Business Logic tries to update the "**Vascular access selection**" link automatically.

If the patient already has only one active vascular access, the prescription is updated with selection of that vascular access; otherwise it has to be completed manually by the user.

In both cases, an information message appears stating when the vascular access is changed to "Terminated" or "Not functioning" status.

Bas	sic data	(						
Creatic	on date	09/06/2010 00:00	Ħ	Type and position		Fistula Upper arm brachial mee	dial - Left	R × ••
Created by (first su	irgeon)	Created by (first surged	on) •••	Created by (second surgeon)		Created by (second surg	ieon)	[
	Status	Functioning		Date of first use		14/04/2011 00:00		III
Anatomical S	chema	A TTELL		Closure date	8			
naesthesia								
Date		Medicinal product		Dosage				
+_/								
	llow up	e						
ecirculation / Max Flow	Recirc	ulation	Maximum flow					
Date		%	mi/min					
09/02/2011 00:00	2		12					
+ vent history								
Date	Туре		Status	Hospitalisation	Ana	tomical position (photo)	Note	
14/04/2011 00:00	Event	t [	Functioning	Hospitalisation	Γ			
	Rena	I function recovery	•	-				
+ /					_			
omment								
								_
								-

### 9.3.2 TREATMENT PRESCRIPTION

HD Prescriptions related to a specific patient are recorded in this section. There is a logging system which allows the user to keep a record of every change made to the prescription throughout its lifetime. Only the last version of a prescription is editable. The older ones are read-only but can be copied into a brand new prescription. When a modification is made, if the current version of the prescription is linked to at least one treatment, a new version is created. This means that a record is kept of the prescriptions relating to all the treatments performed. There will be a male bust icon next to the HD Prescription label, clicking on it the date of the last change and who made it will be displayed.

General information	02 Nov 2017 14:38 demouser	Prescription name Test 1
eneral data Consumables Anticoagulant agent General information	demouser	
General information		
	Dialysis device settings Comments	
Les dies annesiation Ver		
Leading prescription Yes	Pres	cription enabled Enabled
Valid from 20 Jan 2016		Valid to
Prescription version 1		Unique ID 49
Basic information		
Treatment type 2 Cronic	Tre	atment category 1 HD - High Flux
Treatment duration 04:00	Trea	tment frequency
Fluid intake	Estim	nated tara weight
Dry body weight 65.2 Kg	Vascular	access selection Fistula Upper arm brachial medial - Left
		<u>R4</u>
Last available BCM measurement	Last available normol	
(date) Long term target weight	Target TAFO (Tim	(BCM)
cong term target weight	larger Hi O (Till	Overload)
Device preparation duration	Device c	leaning duration
Allergy list		
Date Allergy type	Allergy type specification	Details
2010 Active ingredier	t (Nunpan)	
2009 Food 2 records found		Milk

atment pre	scription 👗								Edit Copy to Print
Treatment i	n progress - Please	note that	t any changes/ad	ldition in this section	won't be applie	ed to treat	ment in progress		
	Creation	date	20 Jan 2016 11	:30			Prescription	n name	Test 1
	Prescribing do	ctor	pp						
G <mark>e</mark> neral data	Consumables	Anticoa	agulant agent	Dialysis device se	ettings Com	ments			
	- General inform	nation							
	Leading prescr	iption	Yes				Prescription en	abled	Enabled
	Valio	l from	20 Jan 2016				Va	lid to	
	Prescription v	ersion	1				Uniq	ue ID	49
	Basic inform	nation							
	Treatmen	t type	2 Cronic				Treatment cate	egory	1 HD - High Flux
	Treatment du	ration	04:00				Treatment frequ	ency	
	Fluid i	intake					Estimated tara w	eight	
	Dry body v	veight	65.2 Kg				Vascular access sele	ction	Fistula Upper arm brachial medial - L
Last avail	able BCM measure	ement (date)			Li	ast availab	le normohydration w (I	eight BCM)	
	Long term target v	veight				Target T	AFO (Time Averaged Over	Fluid load)	
Dev	ice preparation du	ration					Device cleaning dur	ation	
Allergy list									
F Date		A	Allergy type	Alle	ergy type specific	cation		Details	
2010		4	Active ingredient	(Nu	unpan)				

When a prescription already used for a treatment is switched to edit mode, a message appears warning that the prescriptions data linked to the treatments will not be changed.

Therapy Support Suite is able to send data to the Fresenius Medical Care software product Therapy Monitor. Therapy Monitor uses these data to provide pre-settings according to the patient's dialysis prescription to defined dialysis machines (4008, 5008 and 6008). When the main prescription reaches its "valid until" date, if the patient only has two prescriptions, the second prescription automatically becomes the leading prescription. If there are several non-leading prescriptions, the most recently created prescription becomes the new leading prescription.

When the leading prescription is cancelled, if the patient only has two prescriptions, the second prescription automatically becomes the leading prescription. If there are several non-leading prescriptions, a pop-up appears informing the user that another prescription has become the leading prescription.

	ment prescription						New Export Excel Pri
ctiv	e prescriptions Dis	abled Full list					
•	Default Prescription	(Enabled) 25					
	Prescription version	Leading prescription	Creation date	Valid to	Prescription comment	Modified by	
	24	No	14 Sep 2011 12:03			demouser	
	23	No	02 Nov 2010 07:41	14 Sep 2011			
	22	No	21 Oct 2010 11:03				
	21	No	02 Oct 2010 11:26				
	20	No	02 Oct 2010 11:25				
	19	No	02 Oct 2010 11:22				
	18	No	28 Sep 2010 08:09				
	17	No	24 Sep 2010 18:36				
	16	No	18 Sep 2010 15:15				
	15	No	06 Sep 2010 15:55				
	14	No	24 Aug 2010 09:37				
	13	No	23 Aug 2010 10:37				
	12	No	21 Aug 2010 09:41				
	11	No	17 Aug 2010 12:05				
	10	No	12 Aug 2010 12:35				
	9	No	31 Jul 2010 08:27				
	8	No	17 Jul 2010 07:32				
	7	No	06 Jul 2010 11:53				
	6	No	06 Jul 2010 08:16				
	5	No	05 Jul 2010 11:11				
	4	No	30 Jun 2010 07:52				
	3	No	22 Jun 2010 13:04				
	2	No	20 May 2010 07:58				
	1	No	06 May 2010 09:59				
	0	No	14 Apr 2010 09:51				
۲	Test 1 (Enabled)	2					
2	6008 (Enabled)	1					
3	4008 (Enabled)	1					
3	Prescription AK 200	(Enabled) 1					

The treatment prescription form window consists of five tabs.

General data Consumables Anticoagulant agent Dialysis device settings Comm	General data	ta Consumables	Anticoagulant agent	Dialysis device settings	Comment
--	--------------	----------------	---------------------	--------------------------	---------

## 9.3.2.1 GENERAL INFORMATION

The main prescription data (duration, category, and dry body weight) can be entered in this section.

**Leading prescription**: This field identifies a specific prescription as the leading one. Therefore, when a treatment is created manually, and no scheduling is planned for that day, it is based on the leading prescription. If a patient has more than one prescription, only one can be leading.

**Vascular access selection**: This custom list shows all the vascular accesses in use for the patient. The user can select the one to be used for HD treatments based on this prescription.

Allergy list: This is a read-only list that shows all allergies recorded for the patient.

nent prescription  🛔					Edit Copy to Print
Creation date 20 Jan 2016 11:30				Prescription name	Test 1
Prescribing doctor	pp				
eral data Consumables Antic	oagulant agent	Dialysis device settings	Comments		
General information					
Leading prescription	Yes			Prescription enabled	Enabled
Valid from	20 Jan 2016			Valid to	
	1			Unious ID	49
Prescription version	1			Unique ID	49
Basic information	a la constante de la constante				The same same same
Treatment type	2 Cronic			Treatment category	1 HD - High Flux
Treatment duration	04:00			Treatment frequency	
Fluid intake			E	stimated tara weight	
Dry body weight	65.2 Kg		Vasc	ular access selection	Fistula Upper arm brachial medial - Left
Last available BCM measurement (date)			Last available nor	rmohydration weight (BCM)	
Long term target weight			Target TAEO	(Time Averaged Fluid	
Long term target weight			Idiget IALO	Overload)	
Device preparation duration			Devi	ice cleaning duration	
Allergy list					
Date Date	Allergy type	Allergy type	specification	Details	
2010	Active ingredient	(Nunpan)			
2009	Food			Milk	
records found					

## 9.3.2.2 CONSUMABLES

In this tab the user can enter consumables that will be used during dialysis (filter, concentrates, saline solution, needles, etc.).

demouser Patients	Default Clinic 🔻 Reporti	rg				CARE		Search in Patient	Q,
<b>⊽</b> Open patient list	Aitken Lambert, David [39807] +								
Basic data	Aitken Lambert , David Born 15/0	8/1952 (68y) Gender	Cod. 39	807 Status Acti	ive/Hemodialysis	2			
Patient summary									000
Treatment overview	Treatment prescription						Edit	Copy to Print	
Administrative data	Creation date	06 Oct 2011 09:06				Prescription name	4008		
Medical data	Desceribie destes								
Hospitalisations	Prescribing doctor	<u>pp</u>							
Patient status	General data Consumables 🚺 Ant	icoagulant agent	Dialysis de	vice settings	Comments				
Medical prescription	Dialyser	EX 1000				Blood line	AV Can FA	1C (FA 204 C/FV 204 E) BVM	
Patient agenda	Dialyser	<u>FX 1000</u>				blood line	AV-SEL FIV	IC (FA 204 C/FV 204 E/ BVIVI	_
HD	Basic Buffer	<u>bibaq</u>				Solution			
Vascular access	Acid concentrate	AC-F 313/2							
Treatment prescription		10101012			-				
Checklist	Additional concentrates					Consumables			
Treatment schedule plan	Needles								
Pharmacological prescription	Needle		Category						
Messages	DIALYSEKANUELE ART. 17GA 1,5X15M	IM A711G 1ST STCK.	A						
Treatments	DIALYSEKANUELE VEN, 15G 1,8X15M	MVE11G	V						
HD survey	DIALISEKANDELE VEN, 150 1,8X15W	WI V5110	v						
Laboratories									
Laboratory test									
Laboratory data									
Laboratory test schedule									
Medical Data									
Clinical diary									
Allergies									
Vaccinations									
Family medical history									
Germ situation									
Transfusion list									
Comorbidity									
Specialist examination									
Diagnostic test									
Self-sufficency									
Outpatient clinic visit									
Patient medical history									
Amputations									
PD									
PD access									
PD prescription									
PD treatment scheduler									
Review									
Home visit									
PD treatments									
Peritonitis									
Tunnel exit site									
Adequacy and nutrition									
Peritoneal equilibration test									
PD labs									

# 9.3.2.3 ANTICOAGULANT AGENT

General data	consumables	Antic	oagulant agent	Dialysis device settings	Comments		
	Manual				+	Auto	
	Medicinal product	0	<u>Tizeb - 50pieces :</u> 50pieces 1mq Ta			Medicinal product	<u>Adipnaf - 10pieces 120ml vials</u> 10pieces 120ml vials
	Administration route	a	Intramuscular			Administration route	Intramuscular
	Dilution factor	r.	250 IU/ml			Dilution factor	250 IU/ml
	Bolus	;	1000 IU			Bolus	4000 IU
	Bolus in m	Í.	4.00 ml			Bolus in ml	16.0 ml
	Additional boluses					Rate	750.00 IU/h
	Use additional bolus	i				Rate in ml/h	3.0 ml/h
					Stop tir	ne before end of session	0 min
					ΔT	ot. quantity and priming	2812.5 IU
	Total manua	1	1000.00 IU			Total auto Total	6812.5 IU 7812.50 IU

This tab is divided into two sections: manual and auto anticoagulant administration.

If the anticoagulant will be administered manually by the nurse, enter the relative information in the Manual section. If the Manual anticoagulant section is filled in, the information will only be visible in Therapy Monitor and on the dXp panel of the dialysis device; the system will not influence the download of the device parameters.

The Auto section must be filled-in to set device's anticoagulant section with the prescription parameters. Therefore, as a general rule, the fields related to the automatic administration of anticoagulant agent during treatment are entered in the "Anticoagulant agent" tab: the "Anticoagulant settings" section of the "Dialysis device settings" tab is then updated automatically by the system.

However, there are some exceptions related to specific cases where the values of the anticoagulant agent can be modified directly in the "Dialysis device settings" tab:

The "Heparin pump enabled" field can only be set as "Yes" if the field "Total" in ml/h related to the "Maintenance dose" in the "Anticoagulant agent" tab (automatic section) contains a value. Conversely, the pump cannot be deactivated if a value has been entered for the maintenance dose.

Anticoagulation settings —			
Heparin pump enabled	No	Heparin bolus enabled	Yes
Anticoagulation drug	Adipnaf - 10pieces 120ml vials 10pieces 120ml vials	Bolus	16.0 ml
Heparin rate	7.0 ml/h	Stop time before end of session	30 min

The "Heparin bolus enabled" field can only be set as "Yes" if the "Total" in ml/h field related to the "Bolus" in the "Anticoagulant agent" tab (automatic section) contains a value. If the "Heparin bolus activated" field is deactivated, the "Bolus" field of the "Anticoagulant settings" section becomes editable as long as a value has not been inserted for the bolus in the "Anticoagulant agent" tab. In this manner, it is possible to specify a bolus value to be sent to the dialysis device, overriding the value specified in the "Anticoagulant agent" tab.

Anticoagulation settings –				
Heparin pump enabled	No [	Heparin bolus enabled	٨	No
Anticoagulation drug	Adipnaf - 10pieces 120ml vials	Bolus	8	16.0 ml
	10pieces 120ml vials		0	The bolus value has to be applied on demand [1
Heparin rate		Stop time before end of session		

The modifications made directly in the "Anticoagulant settings" section of the "Dialysis device settings" tab are overwritten every time the Auto section of the "Anticoagulant agent" tab is modified. When the data are saved, the user is alerted to these changes by a message specifying the fields that have been modified, and confirmation to proceed to save will be requested.

Uarning: 170012
Modifications to "Anticoagulation" tab caused automatic changes to the following prompt(s) in the "Dialysis device settings" tab: "Heparin pump enabled". Do you want to proceed with save?
Yes No

The dilution factor field is mandatory in TSS. However, if this field is removed in the TMon treatment, a warning message will be displayed.

## 9.3.2.4 DIALYSIS DEVICE SETTINGS

This tab shows all the dialysis device settings. Different settings will be shown depending on the dialysis device type (5008, 4008, 6008, AK200, ARTIS). Some fields come directly from other sections (treatment duration, consumables, anticoagulant). The rest of the fields must be filled in according to the clinical set-up of the device, applying the following rules:

- For the dialysis prescription to be saved, the mandatory parameters must be filled in because the dialysis treatment cannot be started without them
- In the "Dialysis device" section some fields accept values within a specific range; if a value is entered which is not within this range, an error message appears;
- Some parameters only accept values within a specified step: if an invalid value is inserted, the system will
  automatically round it up to the step required, and a message appears on the interface to notify the user. For
  example, if the step for a parameter is "10" and value of "109" is entered, it will be rounded up to "110".

atment prescription  🛔					Cancel Save Delete	
Creation date		30 Jun 2016 15:42	1 <u>.</u>	Prescription name	Default Prescription	
Prescribing	Prescribing doctor		•			
General data Consumable	s 🚺 An	ticoagu <mark>lant</mark> agent	Dialysis device settings	Comments		
Dialysis dev	ice type	5008	×	Available modules	BVM; OCM; BPM; BTM; Single-Needle; Mixed;	
Dialysis device Additio	nal modu	les BPM				
Genera	l settings					
Device treatment	method	HD	•	Treatment duration	240 min	
U	settings					
Max	. UF rate	109	ml/h (100 - 4000)			
	UF	Value 109 will be r	ounded to 110 [100829]	UF profile number	No profile	•
	UF time	240 min		UF spare time	0 min (0 - 144	10)
ISO-UI	settings				· · · · · · · · · · · · · · · · · · ·	
	ISO-UF	No	•	Max ISO-UF rate	ml/h (10 - 400	)0)
Dialysat	settings					
Autoflor	v On/Off	Off	•			
Dialy	ate flow	300	•	Dialysate temperature	36.5 °C (34 - 3	39)
Cor	centrate	AC-F 313/1		Prescribed Na	140 mmol/l (125 - 15	55)
Bic	rbonate	bibag 5008				
	rbonate	34	mmol/l (0 - 40)	Total buffer administration	37.00 mmol/l	
			mmoly1 (0 - 40)	iotal buller administration	37.00 mmoly1	
Acid concer		3.00 mmol/l				
Na profile	number	No profile	<b>•</b>			
	settings					
Blood	low rate	300	ml/min (0 - 600)			
	Dialyzer	FX 100 classix				
HDF/HI	settings					
Hae	matocrit	26 %	(09/11/2010)	Total protein	7.0 g/dl (22/06/2010	0)
Anticoagulation	settings		[			_
Heparin pump	enabled	Yes	•	Heparin bolus enabled	Yes	•
Anticoagulat	ion drug	Adipnof - 10piec	es 120ml vials	Bolus	16.0 ml	
		10pieces 120ml	<u>vials</u>			
Нер	arin rate	7.0 ml/h		Stop time before end of session	30 min	

Some settings will be visible or not depending on the "**Dialysis device type**" selected and consequently the modules on it.

Dialysis device type	5008	×	Available modules	BVM; OCM; BPM; BTM; Single-Needle; Mixed;

Here are the settings for each module:

BPM (Setting blood pressure monitoring)

Blood pressure monitoring settings –					
Cycle time (min)	Off	•	Pressure pre. Choose	160	mmHg (100 - 290)
Syst. upper limit	165	mmHg (95 - 250)	Syst. lower limit	90	mmHg (60 - 230)
Diast. upper limit	100	mmHg (65 - 200)	Diast. lower limit	50	mmHg (40 - 200)
Map upper limit	120	mmHg (75 - 235)	Map lower limit	70	mmHg (45 - 215)
Pulse upper limit	150	1/min (45 - 200)	Pulse lower limit	40	1/min (40 - 175)

BVM (Setting Blood Volume Monitor)

Blood volume monitor settings –			
Crit. RBV adaptation On/Off	On 💌	UF control On/Off	On 💌
Critical RBV	% (75 - 95)	Max. regulation UF rate	ml/h (50 - 2800)
Init. pos. goal vol. deviation	ml (0 - 1000)	Init. neg. goal vol. deviation	ml (0 - 1000)

 The "UF control On/Off" can be set to "On" if and only when the UF field (in the UF Settings section) is set to "Yes". Otherwise, an error will prevent the user from saving the prescription.

demouser Patients	Default Clinic 🔻 Reporti	ng	FRESENIUS MEDICAL CARE	Search in Patient
<b>▼</b> Open patient list	Brennan , Nicholas [399489] × Treat	tment places Clinic Drug catalogue	Query builder Dialys	is device types Messages and tasks +
HD	A Brennan , Nicholas Born 28/10/19	962 (56y) Gender of Cod. 399489 Status Active	/Hemodialysis 🖂 🖨	
Vascular access				
Treatment prescription	Treatment prescription			Cancel Save Delete
Checklist	There are 2 errors			
Treatment schedule plan		20 Jan 2016 11:30		
Pharmacological prescription	Creation date	20 Jan 2018 11:50	Prescription name	Default Prescription
Messages	Prescribing doctor	<u>pp</u> × •••	]	
Treatments	General data Consumables Antic	oagulant agent	Comments	
HD survey				
.aboratories	Dialysis device type	<u>≥ 5008</u> × …	Available modules	BVM; OCM; BPM; BTM; Single-Needle; Mixed;
Laboratory test	Distain device DA 151 - 1	dules BPM		WIXED,
Laboratory data	Dialysis device Additional mod			
Laboratory test schedule	Single-Needle			
Medical Data	Single-Needle	Off		
Clinical diary	Clearance monitoring	N	-	
Allergies	OCM On/Off	On	VUrea formula	Manual
Vaccinations	OCIVI ON/ON		Volea lomidia	
Family medical history	Kt/V target	(1 - 3.9	) Urea distribution volume	156 L (0 - 299)
Germ situation Transfusion list	Urea distribution volume (BCM)		BCM V urea measurement date	
Comorbidity	Measurement interval	min (25 - 120	)	
Specialist examination	Blood volume monitor settings		20	
Diagnostic test	Crit. RBV adaptation On/Off	On 💌	UF control On/Off	On 🔹
Self-sufficency Outpatient clinic visit	Critical RBV	85 % (75 - 95	Max. regulation UF rate	BVM control not possible because UF is disabled [170109]
Patient medical history	Citical Kov		wax. regulation or fate	
	Init. pos. goal vol. deviation	500 ml (0 - 1000	Init. neg. goal vol. deviation	850 mi (0 - 1000)
Amputations Clinical case	- Blood temperature monitor settings			
PD	Recirculation meas. On/Off	Off	Temp. control On/Off	Off
PD access			1	
PD prescription	Temp. change settings	0 °C/h (-0.5 - 0.5	)	
PD treatment scheduler				
Review				
Home visit				
PD treatments				
Peritonitis				
Tunnel exit site				
Adequacy and nutrition				
Peritoneal equilibration test				
POL QA tests				
POL patient systems				
PD labs				
Dialysis dose				
Fast peritoneal equilibration test				
Transplant				
Waiting list				
Transplant				
Eurotransplant data				

If the "UF control On/Off" is set to "On", it will be possible to set the "Critical RBV", "Max. regulation of UF rate", "Init. pos. goal vol. deviation" and ", "Init. neg. goal vol. deviation". In addition, the "UF profile number" field (of the UF settings section) must be set to "No profile". Otherwise, an error will prevent the user from saving the prescription.

Therapy Support Suite						_ 0
demouser Patients	Default Clinic 🔻 Report	ing		FRESENIUS MEDICAL CARE		Search in Patient
<b>₩</b> Open patient list	Brennan , Nicholas [399489] × Trea	atment places	Clinic Drug catalogue	Query builder	Dialysis device types	Messages and tasks +
HD	Brennan , Nicholas Born 28/10/1	962 (56y) Gender 7 C	od. 399489 Status Active/	Hemodialysis 🔄 호		
Vascular access						
Treatment prescription	Treatment prescription				Cancel	Save Delete
Checklist	There are 2 errors					
Treatment schedule plan		Topan concernance				100
Pharmacological prescription	Creation date	20 Jan 2016 11:30		Prescription	name Default Pre	scription
Messages	Prescribing doctor	<u>pp</u>	× •••			
Treatments						
HD survey	General data Consumables Antic	coagulant agent	Dialysis device settings	Comments		
Laboratories	Dialysis device type	5008	×	Available mod		BPM; BTM; Single-Needle;
Laboratory test			0		Mixed;	
Laboratory data	Dialysis device Additional mo	dules BPM				
Laboratory test schedule	General settings					
Medical Data	Device treatment method	HDF postdilution	•	Treatment durat	tion 300 min	
Clinical diary						
Allergies	UF settings					
Vaccinations	Max. UF rate	800	ml/h (100 - 4000)			
Family medical history	UF	Yes	•	UF profile num	ber 🖪 2	
Germ situation		100			-	
Transfusion list	UF time	300 min		Only one I	between UP Profile and	BVM UF Control could be enabled [100835
Comorbidity	ISO-UF settings					
Specialist examination	ISO-UF	No	-	Max ISO-UF	ate	ml/h (10 - 4000)
Diagnostic test						
Self-sufficency	Dialysate settings				1	
Outpatient clinic visit	Autoflow On/Off	On	•	Autoflow r	atio 1	(1 - 2)
Patient medical history				Dialysate temperat	ure 36	°C (34 - 39)
Amputations						
Clinical case	Concentrate	<u>AC-F 313/2</u>		Prescribed	Na 142	mmol/l (125 - 155)
PD	Bicarbonate	bibaq				
PD access	Na bicarbonate	32		Total buffer administrat	tion 35.00 mmol	
PD prescription	Na bicarbonate	52	mmol/l (0 - 40)	lotal buffer administra	aon 55.00 mmol	
PD treatment scheduler	Acid concentrate K+	2.00 mmol/l				
Review	Na profile number	No profile	<b>•</b>			
Home visit		Hopfonic				
PD treatments	Blood settings	-				
Peritonitis	Blood flow rate	300	ml/min (0 - 600)			
Tunnel exit site	Dialyzer	FX 100 classix				
Adequacy and nutrition		17 200 010333				
Peritoneal equilibration test	HDF/HF settings	-			-	
POL QA tests	HDF pump On/Off	On	•	Auto-Substitution On,	Off On	
POL patient systems	Bolus volume (ml)	Please select one e	ntry 💌	HDF/HF bolus rate m	ode	
PD labs					and the second s	
Dialysis dose	Haematocrit	33 %	(19/10/2010)	Total prot	ein 7.0 g/dl	(29/06/2010)
Fast peritoneal equilibration test	Anticoagulation settings					
Transplant	Heparin pump enabled	No	•	Heparin bolus enab	led No	<b>•</b>
Waiting list						
Transplant	Anticoagulation drug			Bo	blus	ml (1 - 20)
Eurotransplant data	Heparin rate			Stop time before end of sess	ion	

BTM (Setting blood temperature monitor)

ood temperature monitor settings –					
Recirculation meas. On/Off	Off		Temp. control On/Of	f Off	
Temp. change settings	0	°C/h (-0.5 - 0.5)			
		Note	2		
		Base	line, the Temperature	Control field is set to O	off.
		Base	line, the Temperature	Control field is set to O	off.
OCM (Clearance m	(opitoring)	Base	line, the Temperature	Control field is set to O	off.
<ul> <li>OCM (Clearance m</li> </ul>	ionitoring)	Base	line, the Temperature	Control field is set to O	off.
OCM (Clearance monitor		Base	line, the Temperature	Control field is set to O	off.
·	ring	Base	line, the Temperature	Control field is set to O	off.
Clearance monito OCM On/	ring /Off On		VUrea formula		
Clearance monitor OCM On/ Kt/V tar	ring /Off On		VUrea formula Urea distribution volume	Manual Please select one entry BCM	
Clearance monito OCM On/	ring /Off On		VUrea formula	Manual Please select one entry	

- There are 3 possible calculation modes for **VUrea**:
  - If "Manual" is selected, a value must be entered manually.
  - If you select "BCM" the system will load the value from BCM measurements.
  - If "Watson" is selected, the system will calculate the value using the Watson formula.
- Depending on user selection, all new treatments created will take the value of the Urea distribution volume from one of the three listed above.
- Single-needle

Single-Needle			
Single-Needle	On 🔽	Stroke volume	mi (10 - 60)
Auto Rate On/Off	•	Single-Needle relation	% (-60 - 60)
Min. PA control pressure	mmHg (20 - 400)	Max. PA control pressure	mmHg (100 - 480)

- Mixed
- This module is only available for the 5008 hemodialysis device. If enabled, you can also select "Mixed HDF" and "Mixed HF" items among the "Device Treatment Methods".
- Low volume
- This module is available for hemodialysis devices 5008 and 6008. If the "Low Volume" field is set to "Yes", the ranges for the "Max. UF rate", "Bolus", "Max. regulation of UF rate" (visible in the "Additional modules" section if the BVM module is enabled and the "UF control On/Off" field is set to "On"). Furthermore, to display the "Bolus" field, the "Device Treatment Method" must be either "HDF" or "HF" type and the "Auto-Substitution On/Off" field must be set to "Off" in the "HDF/HF Settings" section.

### SPECIAL LOGIC

The settings for the dialysis device include some logic, described below. This logic is valid for the FMC 5008, FMC 4008 and FMC 6008 dialysis devices, or (when indicated) only for the specific machine.

Correlation between "Na Profile Number" and "UF Profile Number"

The fields "UF Profile Number" and "Na Profile Number" belonging respectively to the "UF Settings" and "Dialysis Settings" sections are closely correlated, and the following rules apply:

- If either field contains the value "No Profile", the other can contain any value.
- If one of the fields contains a value other than "No profile", the other must contain the same value. For this
  reason, if the two fields contain a different value, the system will automatically align them.

Dialysis device	Additional modules	BPM				
	General settings					
Device	treatment method	HDF postdilution	•	Treatment duration	300 min	
	UF settings					
	Max. UF rate	800	ml/h (100 - 4000)			
	UF	Yes		UF profile number	2	[ <sup>1</sup> , ]•
	UF time	300 min		UF spare time	0	min (0 - 1440)
	— ISO-UF settings —					
	ISO-UF	No	•	Max ISO-UF rate		mi/h (10 - 4000)
	Dialysate settings					
	Autoflow On/Off	On	•	Autoflow ratio	1	(1 - 2)
				Dialysate temperature	36	°C (34 - 39)
	Concentrate	<u>AC-F 313/2</u>		Prescribed Na	142	mmol/l (125 - 155)
	Bicarbonate	<u>bibaq</u>				
	Na bicarbonate	32	mmol/l (0 - 40)	Total buffer administration	35.00 mmol/l	
A	cid concentrate K+	2.00 mmol/l				
	Na profile number	2	<u> </u>	Start Na	145	mmol/l (125 - 155)

Correlation between "UF", "NA Profile Number", "UF Profile Number" e "UF spare Time"

 If "UF" field is set to "No", the "Profile Number Na" and "UF Profile Number" fields can not be edited and set to "No Profile" while the "UF Free Time" field is set to 0 and rendered non-editable.

🔢 Dialysis device	Additional modules	BPM				
	General settings					
Device	treatment method	HDF postdilution	•	Treatment duration	300 min	
	UF settings					
	Max. UF rate	800	ml/h (100 - 4000)			
	UF	No	•	UF profile number	No profile	
	UF time	300 min		UF spare time	0 min	
	ISO-UF settings					
	ISO-UF	No	•	Max ISO-UF rate		ml/h (10 - 4000)
	Dialysate settings					
	Autoflow On/Off	On	•	Autoflow ratio	1	(1 - 2)
				Dialysate temperature	36	°C (34 - 39)
	Concentrate	<u>AC-F 313/2</u>		Prescribed Na	142	mmol/l (125 - 155)
	Bicarbonate	<u>bibaq</u>				
	Na bicarbonate	32	mmol/I (0 - 40)	Total buffer administration	35.00 mmol/l	
A	Acid concentrate K+	2.00 mmol/l				
-	Na profile number	No profile	· · · · · · · · · · · · · · · · · · ·			

Correlation between the fields "Na profile number", "UF profile number" and "Treatment duration" (only for FMC 4008 devices)

 If the "Na Profile Number" field or the "UF Profile Number" field is valued at a value other than "No Profile", the treatment time must be greater than 120 minutes

Aitken Lambert, David Born 15/0	8/1952 (67y) Gender d Cod	. 39807 Status Active/H	emodialysis 🔟 🕏	
atment prescription  🛔				Cancel Save Delete
There are 2 errors				
Creation date	06 Oct 2011 09:06		Prescription name	4008
Prescribing doctor	<u>pp</u>	×		
eneral data Consumables 🔋 Ant	ticoagulant agent 🛛 🖸 Dialy	sis device settings	Comments	
Dialysis device type	4008	×…	Available modules	BVM; OCM; BPM; BTM; Single-Needle;
Dialysis device Additional modul				
General settings				
Device treatment method	HDF postdilution	•	Treatment duration	90 min
UF settings	N	BIFUF or NA profile	are different from "No profile", the trea	tment duration must be greater then 120 minutes [1
Max. UF rate	800	ml/h (100 - 4000)		
UF	Yes	•	UF profile number	2
UF time	90 min		UF spare time	0 min (0 - 599)
ISO-UF settings				
ISO-UF	No	-	Max ISO-UF rate	ml/h (10 - 4000)
Dialysate settings				
Dialysate flow	300	•	Dialysate temperature	36.5 °C (35 - 39)
Concentrate	<u>AC-F 313/2</u>		Prescribed Na	142 mmol/l (125 - 155)
Bicarbonate	<u>bibaq</u>		Base Na	138 mmol/l
Na bicarbonate	32	mmol/1 (0 - 40)	Total buffer administration	35.00 mmol/l
Bic. adjustment	0	mmol (-8 - 8)		
Acid concentrate K+	2.00 mmol/l		Additional potassium	mmol/l (0.5 - 5)
Na profile number	No profile	<b>\</b>		
Blood settings				
Blood flow rate	300	ml/min (0 - 600)		
Dialyzer	<u>FX 100 classix</u>			
HDF/HF settings				
Bolus volume (ml)	Please select one entry	•	Bolus rate	
Sub rate		ml/min (20 - 350)	HDF volume	L (0 - 210)
Calculated volume	0.00 ml		Calculated HDF flow	0.00 ml/min
Haematocrit	41 %	(19/10/2010)	Total protein	6.5 g/dl (22/06/2010)
Anticoagulation settings				
Anticoagulation drug	Adipnaf - 10pieces 120ml	<u>vials</u>	Bolus	16.0 ml
	10pieces 120ml vials			

# Correlation between "Na profile number", "Start Na" and "Prescribed Na" (only for FMC 4008 devices)

• If the field "NA Profile Number" contains a value other than "No Profile", the "Start Na" field will be visible. Its value must three units greater than the value of the "Prescribed Na" field.

Aitken Lambert , David Born 15/0	<b>8/1952 (67</b> γ) Gender 🗗 Cod.	39807 Status Active/I	lemodialysis	3			
reatment prescription					Cancel 5	Delete	
There are 2 errors							
Creation date	06 Oct 2011 09:06		P	Prescription name		4008	
Prescribing doctor	DD	×					
General data Consumables 🚺 Ant	icoagulant agent	sis device settings	Comments				
Dialysis device type	4008	×	Av	ailable modules	BVM; OCM; BPN	1; BTM; Single-Needle;	
Dialysis device Additional modul	es BPM						
General settings							
Device treatment method	HDF postdilution	•	Trea	tment duration	240 min		
UF settings	1						
Max. UF rate	800	ml/h (100 - 4000)					
UF	Yes	•	UF	profile number	No profile		•
UF time	240 min			UF spare time	0	min (0 - 5	99)
ISO-UF settings							
ISO-UF	No	•	N	1ax ISO-UF rate		ml/h (10 - 40	00)
Dialysate settings							
Dialysate flow	300	•	Dialysa	te temperature	36.5	°C (35 -	39)
Concentrate	<u>AC-F 313/2</u>			Prescribed Na	3 145	mmol/l (125 - 1	.55)
Bicarbonate	<u>bibaq</u>			Base Na	138 mmol/l		
Na bicarbonate	32	mmol/l (0 - 40)	Total buffer	administration	35.00 mmol/l		
Bic. adjustment	0	mmol (-8 - 8)					
Acid concentrate K+	2.00 mmol/l		Additi	onal potassium		mmol/l (0.5	- 5)
Na profile number	1	· · ·		Start Na	3 144	mmol/l (130 - 1	.55)
Blood settings	-			Start Na value m	ust be at least higher	of 1 than Prescribed Na	value [10050
Blood flow rate	300	ml/min (0 - 600)					
Dialyzer	<u>FX 100 classix</u>						
HDF/HF settings							
Bolus volume (ml)	Please select one entry	×		Bolus rate			
Sub rate		ml/min (20 - 350)		HDF volume		L (0 - 2	10)
Calculated volume			Calcu	lated HDF flow			
Haematocrit	41 %	(19/10/2010)		Total protein	6.5 g/dl	(22/06/20	10)
Anticoagulation settings							
Anticoagulation drug	Adipnof - 10pieces 120ml	vials		Bolus	16.0 ml		
	10pieces 120ml vials						

# Correlation between the "Na profile number", "Start NA" and "Base NA" fields (only FMC 4008 devices)

 If the "Na Profile Number" field is valued at a value other than "No Profile", the difference between the "Initial" and "Sodium Base" fields can be up to 13.

Aitken Lambert, David Born 15/0	<b>3/1952</b> (67γ) Gender <sup>7</sup> Cod.	39807 Status Active/He	emodialysis 1	5		
atment prescription   🔒					Cancel Sav	Delete
There is 1 error						
Creation date	06 Oct 2011 09:06		Pre	escription name	4008	
Prescribing doctor	22	×				
eneral data Consumables 🚺 Ant	icoagulant agent	sis device settings C	omments			
Dialysis device type	4008	×	Ava	ilable modules	BVM; OCM; BPM;	BTM; Single-Needle;
Dialysis device Additional modul	es BPM					
General settings						
Device treatment method	HDF postdilution	•	Treat	ment duration	240 min	
UF settings						
Max. UF rate	800	ml/h (100 - 4000)				
UF	Yes	•	UF p	rofile number	No profile	
UF time	240 min			UF spare time	0	min (0 - 599)
ISO-UF settings						
ISO-UF	No	•	M	ax ISO-UF rate		ml/h (10 - 4000)
Dialysate settings						
Dialysate flow	300	<b>•</b>	Dialysate	e temperature	36.5	°C (35 - 39)
Concentrate	<u>AC-F 313/2</u>			Prescribed Na	125	mmol/l (125 - 155)
Bicarbonate	<u>bibaq</u>			Base Na	138 mmol/l	
Na bicarbonate	32	mmol/l (0 - 40)	Total buffer a	dministration	35.00 mmol/l	
Bic. adjustment	0	mmol (-8 - 8)				
Acid concentrate K+	2.00 mmol/l		Additio	nal potassium		mmol/l (0.5 - 5)
Na profile number	1	·		Start Na 🛚	152	mmol/l (130 - 155)
Blood settings	L			The difference bet	ween 'Start Na' and 'E	Base Na' should be less than [1
Blood flow rate	300	ml/min (0 - 600)		or equal to 13		1
Dialyzer	FX 100 classix					
HDF/HF settings						
Bolus volume (ml)	Please select one entry	•		Bolus rate		
Sub rate		ml/min (20 - 350)		HDF volume		L (0 - 210)
Calculated volume			Calcul	ated HDF flow		
Haematocrit	41 %	(19/10/2010)		Total protein	6.5 g/dl	(22/06/2010)
Anticoagulation settings						
Anticoagulation drug	Adipnaf - 10pieces 120ml	<u>vials</u>		Bolus	16.0 ml	
	10pieces 120ml vials					

# Correlation between fields "Na profile number", "Initial" and "Prescribed" (only for FMC 5008/6008 devices)

• If the "Na Profile Number" field is valued at a value other than "No Profile", the value of the "Na" field must be greater than at least 3 units above the "At start" field value.

Aitken Lambert, David Born 15/0	8/1952 (67y) Gender 🖓 Cod. 39807 Status Act	ive/Hemodialysis 🔟 🕏	
itment prescription  🛔			Cancel Save Delete
There are 2 errors			
Creation date	14 Sep 2011 12:03	Prescription name	Default Prescription
Prescribing doctor	<u>pp</u> × •••		
eneral data Consumables 月 Ant	icoagulant agent	s Comments	
Dialysis device type	<u>5008</u> × ···		BVM; OCM; BPM; BTM; Single-Needle;
		1	Mixed;
Dialysis device Additional modul	es BPM		
General settings Device treatment method	HDF postdilution	Treatment duration	240 min
UF settings	HDF postaliution	I reatment duration	240 mm
Max. UF rate	800 ml/h (100 - 4000	1	
			NoEl
UF	Yes		No profile
UF time	240 min	UF spare time	0 min (0 - 1440)
ISO-UF settings		1	
ISO-UF	No	Max ISO-UF rate	ml/h (10 - 4000)
Dialysate settings		1	
Autoflow On/Off	On		1 (1-2)
		Dialysate temperature	36.5 °C (34 - 39)
Concentrate	<u>AC-F 313/2</u>	Prescribed Na	130 mmol/l (125 - 155)
Bicarbonate	bibaq		
Na bicarbonate	32 mmol/l (0 - 40	) Total buffer administration	35.00 mmol/l
Acid concentrate K+	2.00 mmol/i		
Na profile number	1	Start Na 🕻	132 mmol/l (125 - 155)
Blood settings		Start Na value mi	ust be at least higher of 3 than Prescribed Na value [1
Blood flow rate	300 ml/min (0 - 600	)	
Dialyzer	FX 100 classix		
HDF/HF settings			
HDF pump On/Off	On 💌	Auto-Substitution On/Off	On 💌
Bolus volume (ml)	Please select one entry	HDF/HF bolus rate mode	
Haematocrit	41 % (19/10/2010)	Total protein	6.5 g/dl (22/06/2010)
Anticoagulation settings			
Heparin pump enabled	Yes	Heparin bolus enabled	Yes
Anticoagulation drug	Adipnaf - 10pieces 120ml vials	Bolus	16.0 ml
And Congression of the	10pieces 120ml vials	bolds	

Correlation between fields "UF profile number" and "Treatment duration" (only for FMC 5008/6008 devices)

If the "UF Profile Number" field is valued at "1" or "2", the duration of the treatment must be greater than 120 minutes.

ent prescription  🛔					Cancel Sav	Delete
ere are 2 errors						
Creation date	14 Sep 2011 12:03			Prescription name	Default Prescriptio	20
Prescribing doctor		×		riesenpuorname	bendare resemptio	
	<u>22</u>		-			
			Comments	A CONTRACT (CONTRACT	0144-0014-0014-	BTA & Circle Mandler
Dialysis device type	5008	×		Available modules	Mixed;	BTM; Single-Needle;
alysis device Additional module	es BPM					
General settings	-	1				
Device treatment method	HDF postdilution	•	Treatment duration 🛛 90 min			
UF settings			If UF pr	ofile is "1" or "2", the treat	ment duration must b	e greater then 120 minut
Max. UF rate	800	ml/h (100 - 4000)				
UF	Yes	•		UF profile number  🛛	1	•
UF time	90 min			UF spare time	0	min (0 - 1440)
ISO-UF settings		1			-	
ISO-UF	No	•		Max ISO-UF rate		ml/h (10 - 4000)
Dialysate settings	[	l			1	
Autoflow On/Off	On	•		Autoflow ratio	1	(1 - 2)
				Dialysate temperature	36.5	°C (34 - 39)
Concentrate	<u>AC-F 313/2</u>			Prescribed Na	142	mmol/l (125 - 155)
Bicarbonate	bibaq					
Na bicarbonate	32	mmol/l (0 - 40)	Total	buffer administration	35.00 mmol/l	
Acid concentrate K+	2.00 mmol/l					
Na profile number	No profile	T				
Blood settings		,				
Blood flow rate	300	ml/min (0 - 600)				
Dialyzer	<u>FX 100 classix</u>					
HDF/HF settings						
HDF pump On/Off	On	•	Aut	o-Substitution On/Off	On	•
Bolus volume (ml)	Please select one entry	•	HE	F/HF bolus rate mode		•
Haematocrit	41 %	(19/10/2010)		Total protein	6.5 g/dl	(22/06/2010)
Anticoagulation settings						
Heparin pump enabled	Yes	•		leparin bolus <mark>ena</mark> bled	Yes	•
Anticoagulation drug	Adipnaf - 10pieces 120r	nl vials		Bolus	16.0 ml	

tment prescription					Cancel Sa	C Delete	
There are 2 errors							
Creation date	14 Sep 2011 12:03			Prescription name	Default Prescripti	on	
Prescribing doctor	<u>00</u>	×					
neral data Consumables 🚺 Ani	ticoagulant agent	Dialysis device settings	Comments				
Dialysis device type	5008	×		Available modules		BTM; Single-Needle;	
Dialysis device Additional modul	les BPM				Mixed;		
General settings							
Device treatment method	HDF postdilution	•		Treatment duration	90 min		
UF settings			🖸 If UF prot	file is "3", the treatment	duration must be grea	ater then 210 minutes [170:	
Max. UF rate	800	ml/h (100 - 4000)					
UF	Yes			UF profile number	3	nnnn, 💌	
UF time	90 min			UF spare time	0	min (0 - 1440)	
ISO-UF settings							
ISO-UF	No	-		Max ISO-UF rate		ml/h (10 - 4000)	
Dialysate settings							
Autoflow On/Off	On	•		Autoflow ratio	1	(1 - 2)	
			Di	alysate temperature	36.5	°C (34 - 39)	
Concentrate	<u>AC-F 313/2</u>			Prescribed Na	142	mmol/l (125 - 155)	
Bicarbonate	<u>bibaq</u>						
Na bicarbonate	32	mmol/l (0 - 40)	Total b	uffer administration	35.00 mmol/l		
Acid concentrate K+	2.00 mmol/l						
Na profile number	No profile						
Blood settings							
Blood flow rate	300	ml/min (0 - 600)					
Dialyzer	<u>FX 100 classix</u>						
HDF/HF settings							
HDF pump On/Off	On	•	Auto	Substitution On/Off	On	•	
Bolus volume (ml)	Please select one e	ntry 💌	HDF,	HF bolus rate mode		•	
Haematocrit	41 %	(19/10/2010)		Total protein	6.5 g/dl	(22/06/2010)	
Anticoagulation settings							
Heparin pump enabled	Yes	•	He	parin bolus <mark>enabl</mark> ed	Yes	•	
Anticoagulation drug	Adipnaf - 10pieces	120ml vials		Bolus	16.0 ml		

• If the "UF Profile Number" field has the value "3", the treatment duration must be greater than 210 minutes.

### Correlation between "Autoflow On/Off", "Dialysate flow" and "Autoflow ratio" (only for FMC 5008/6008 devices)

- If the "Autoflow On/Off" is set to "Off", the "Dialysate Flow" field must contain a value, while the "Autoflow Ratio" field is not visible.
- If the "Autoflow On/Off" is set to "On", the "Autoflow Ratio" field must contain a value, while the "Dialysate Flow" field is not visible. The latter condition is valid for all values set in "Device Treatment Method" (General Settings) with the exception of values regarding "HF" methods, for which both the fields "Autoflow Ratio" and "Dialysate Flow" are visible and editable, but not mandatory.

ISO-UF	No	•	Max ISO-UF rate		ml/h (10 - 4000)
Dialysate settings					
Autoflow On/Off	Off	•			
Dialysate flow	Rease select one	entry 💌	Dialysate temperature	36	°C (34 - 39)
Concentrate	Dialysate flow must	not be null [100590]	Prescribed Na	142	mmol/l (125 - 155)
Bicarbonate	<u>bibaq</u>				
Na bicarbonate	32	mmol/l (0 - 40)	Total buffer administration	35.00 mmol/l	
Acid concentrate K+	2.00 mmol/l				

#### Logic regarding the "ISO-UF settings" section

ISO-UF settings					
ISO-UF	Yes	•	Max ISO-UF rate	mi/h (	(10 - 4000)
ISO-UF time	04:00		ISO-UF volume	5	ml

• If the "ISO-UF" field is set to "Yes", you can also validate the "ISO-UF time" and "ISO-UF Volume" fields.

Logic regarding the "HDF/HF settings" (only for FMC 5008/6008 devices)

- If the "HDF Pump ON/OFF" field is set to "Off", the "Auto-replacement On/Off" field cannot be set to "On".
- If the "Auto-replacement On/Off" field is set to "Off", one of the fields between "HDF Volume" and "Flow Sust." must be assigned a value. If neither have a value, of if both have a value, the prescription cannot be saved.
- The "HF/HDF Settings" is correlated with the field "Device Treatment Method" (in the general settings). For some values of this field, the behaviour of the section differs from that described above:
  - If the field "Device Treatment Method" contains the value "HD", the fields listed above are not visible.
  - If the "Device Treatment Method" contains one of the following values, "Mixed HF" or "Mixed HDF" (visible only when the "mixed" module is active) the fields listed above cannot be edited and their values are preet.

#### Logic regarding the "Reinfusion" (only for FMC 6008 devices)

Reinfusion					
Reinfusion bloodflow	100	ml/min (30 - 300)	Reinfusion type	Reinfusion online	•
Reinfusion auto-start I/O	Off				

 If the field "Reinfusion auto-start I/O" is set as "On", the field "Reinfusion type" needs to be set as "Reinfusion Online closed circuit".

prescription 👗					Cancel Save	Delete
e 2 errors						
General settings						
Device treatment method	HDF postdilution		•	Low volume	Yes	•
Treatment duration	225 min					9
UF settings						
Max. UF rate	750	ml/h (100 - 1	L500)			
UF	Yes		•	UF profile number	No profile	<b>•</b>
UF time	225 min			UF spare time	0 min (0 - 720)	
ISO-UF settings						
ISO-UF	Yes		•	Max ISO-UF rate		ml/h (10 - 4000)
ISO-UF time	04:00			ISO-UF volume	5	ml
Dialysate settings	[				1	
Autoflow On/Off	Off		•			
Dialysate flow	400		<b>T</b>	Dialysate temperature	36	°C (34 - 39)
Concentrate	AC-F 113/1			Prescribed Na	142	mmol/l (125 - 155)
Bicarbonate	<u>/////////////////////////////////////</u>			The service and	142	
Na bicarbonate	33	mmol/l (0	- 40)	Total buffer administration	36.00 mmol/l	
Acid concentrate K+	1.00 mmol/l					
Na profile number	No profile		•			
Blood settings						
Blood flow rate	350	ml/min (0 -	600)			
Dialyzer	FX CorDiax 600					
HDF/HF settings	Tran				1	
HDF pump On/Off	On		•	Auto-Substitution On/Off	On	•
Bolus volume (ml)	Please select one ent	try	•	HDF/HF bolus rate mode		•
Haematocrit	41 %	(19/10/20	010)	Total protein	6.5 g/dl	(22/06/2010)
Reinfusion	-					
Reinfusion bloodflow	100	ml/min (30 -	300)	Reinfusion type	Reinfusion online	•
Reinfusion auto-start I/O	3 On		🕄 When "Re	einfusion auto-start IO" is set to "On",	type can be only "Reinfu	usion online closed circu
- Anticoagulation settings			10			
Heparin pump enabled	Yes		•	Heparin bolus enabled	Yes	•
Anticoagulation drug	Adipnaf - 10pieces 12	20ml vials		Bolus	16.0 ml	

# 9.3.2.5 COMMENT

In this field a doctor's comment can be added to the prescription and will be read by the nurse during treatments. This field is transferred to Therapy Monitor.

	cription 🛔	um 10		- 22		1201221000	E an	*	117
	Creation d		20 Jan 2016 11			Prescription name	Test 1		 
	Prescribing do	tor	<u>pp</u>	>	:				
eneral data	Consumables	Anticoa	gulant agent	Dialysis device setting:	s Comments				
rescription c	omment								
									- 1
									- 1

# 9.3.3 CHECKLIST

In this section it is possible to define a list of checks that nursing staff have to perform during every treatment. The "Check List" contains a list of operations, which the nurse must perform, called the "mandatory list". It applies to all patients. There is also another group of operations called the "configurable list". Both lists can be configured in Master Data by enabling the "Global Manager" role. If a Therapy Monitor is connected to the Therapy Support Suite these fields are transferred to the "To Do" section of the Therapy Monitor and can be checked by the nurse. At the end of treatment these fields are transferred to Therapy Support Suite and are visible in the Patient, Treatment data, dXp and dXp item areas. It is important to note that the "Check List" is different from the Events List. The Events List documents events occurring to the patient during treatment and the corresponding actions (drugs, consumables and/or measures) adopted by the staff), while the "Check List" contains the operations which must be confirmed or that are not yet defined before the start of treatment. The order of the configurable lists can be changed at will. Simply hold the mouse button down and drag to the desired position.

ecklist			Cancel Save
Mandatory list	Check Blood Pressure	Configurable list	Check Fever
	Check Cardio failure		Check Psycological Status

**Mandatory list**. A defined set of operations valid for all patients. The mandatory list can be edited in the "Master Data" (Clinic Manager).

The **Configurable list** contains patient-specific checks which can be selected from a drop-down list. Shows all of the controls defined as not mandatory (regardless of the fact that they have been defined or not in Therapy Monitor). To add additional checks press the 🐱 button. To delete an item press the 💌 button. This list contains all possible optional patient checks specified by the clinical protocol. These checks will be shown in HD Treatment created for the patient, in the dXp tab.

# 9.3.4 TREATMENT SCHEDULE PLAN

The Treatment Schedule Plan allows the user to define the prescription, day, shift, time and place where a treatment will take place for a specific patient.

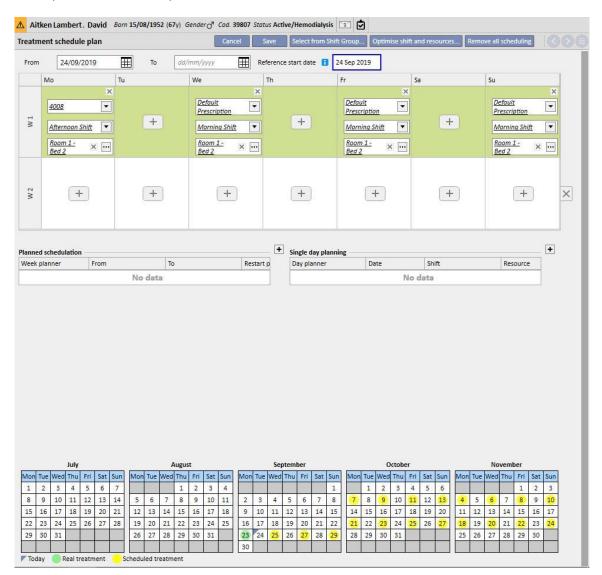
The Treatment Schedule Plan can be viewed and updated by any user with the necessary user rights. It is also possible to enter treatment schedule plans for the future or "exceptions / single days" for the future.



# 9.3.4.1 DEFINING A TREATMENT SCHEDULE PLAN

Once the treatment plan session is opened the user must specify the date from which it becomes active (it can also be a date in the past or the future). The treatment plan remains active until the end date is reached.

The user can plan treatments on a plan of one or two weeks.



A treatment schedule plan cannot be saved if there are no active treatment prescriptions for the selected patient. In this case a banner informs the user that the prescription is missing when he opens the treatment schedule plan.

## 9.3.4.2 TREATMENT PLANNING

The days when the treatment will be carried out can be specified individually or set by clicking "Select from the shift group". In the latter case, it is still possible to add schedule plans manually after selecting the shift group.

Selecting a single day

When entering or modifying it is possible to add the treatment plan by clicking on the to button in the cell of the grid for the weekday in question.

	Mo	
		×
	Prescription	•
WI	X Clinic shift	•
	Resource	]

Three mandatory pieces of information must be provided for the plan:

- **The prescription**: The prescription to be followed for the treatment can be selected. The pull-down menu offers all the active prescriptions.
- Clinic shifts: the time of day when the treatment is administered. The pull-down menu offers all the shifts
  defined for the current reference clinic.
- Resource: the place where the treatment will take place. The pop-up shows all the rooms of the ward in the reference clinic.

#### Selection from shift group

The user can indicate several days simultaneously, reading them from a shift group. By clicking on the

## Select from Shift Group...

button, the user can select a group of shifts. The Shifts and Resources are shown according to the days defined in the group. All previous schedule plans are removed, although additional manual scheduling is possible. However, the user can modify shifts and resources according to his own needs regardless of the values of the shift group.

	24/02/2017	То	dd/mm/yyyy	Reference start dat	e 10 Oct 2010			
M	10	Tu	We	Th	Fr	Sa	Su	
5	Resource select	or						
W 1	Period	One month	-	Shift group	-	Resource filte	er 🗌	
				/				
	Prescription		-	/				
anned			Overall free	M-W-F Afternoon	M-W-F Morning	T-T-S Afternoon	T-T-S Morning	
leek pl	Room 1 - Bed 1 / Roo	im 1	50%	0%	100%	0%	100%	
	Room 1 - Bed 2 / Roo	im 1	0%	0%	34%	0%	0%	
	Room 2 - Bed 1 / Roo	im 2	100%	100%	100%	100%	100%	
	Room 2 - Bed 2 / Roo	im 2	100%	100%	100%	100%	100%	
	Room 4 - Bed 1 / Roo	im4	100%	100%	100%	100%	100%	

Here again, the treatment prescription, shift and resource are mandatory fields and values must be filled-in order to save the treatment plan.

## **Optimise shifts and resources**

It is possible to optimise the use of shifts and resources via the optimise shift and resources... button. The window which is shown displays the percentage occupation of Resources and Shifts for the days of the week. To make viewing easier, filters have been inserted which reduce the number of elements displayed. Where the percentage is higher, fewer resources are occupied. The choice of one of the indicated resources applies Shifts and Resources to all the schedule plans already entered in the Treatment schedule plan. However, the user can modify the schedule at a later date.

## **Remove all scheduling**

It is possible to remove the entire treatment schedule plan by clicking the button. Future planning (the same button is provided inside future planning), single days/exceptions and the planning start date are not removed.

## Deleting a single day

The user can remove one or more schedule plans in the Treatment Schedule Plan at any time by clicking on the "x" icon next to the schedule he wishes to delete.

	Mo	Tu	We	Th	Fr	Sa	Su
W 1	+	<u>6008</u> ▼ <u>Afternoon Shift</u> ▼ <u>Room 1-</u> <u>Bed 1</u> × …	+	Default       Prescription       Afternoon Shift       Room 1- Bed 1	+	Default       Prescription       Afternoon Shift       Room 1- Bed 1	+

## Relationship with the pharmacological therapy

The treatment plan scheduling is closely linked to the pharmacological therapy. During the prescription of a pharmacological therapy during treatment, the days the drug has to be taken are those defined in the treatment schedule plan. Every time the days of the treatment schedule are modified (both the number of days, and changes of days), the pharmacological therapy must be revised.

#### **Reference start date**

The "Treatment schedule plan" contains a "Reference start date" field which indicates the date when the current plan comes into effect. This value is then used in the pharmacological prescriptions to calculate the current week.

	From 2	4 Sep 2019		То	Referen	ice start date	24 Sep 20	19		
	Mo	T	J	We	Th		Fr		Sa	Su
	<u>Default Presc</u>	ription		Default Pre	escription		<u>Defau</u>	It Prescription		
W 1	<u>Afternoon Shi</u>	ift		Afternoon	<u>Shift</u>		Aftern	oon Shift		
	<u>Room 2 - Bed</u>	2		<u>Room 2 - B</u>	<u>ed 2</u>		Room	<u>2 - Bed 2</u>		
W 2	Default Presc			<u>Default Pre</u> <u>Afternoon</u>				It Prescription		
	Room 2 - Bed	2		<u>Room 2 - B</u>	<u>ed 2</u>		Room	<u>2 - Bed 2</u>		
anned	schedulation –					Single day pla	nning			
Veek nl	anner	From		То	Restart p	Day planner		Date	Shift	Resource

This date is modified automatically only when the number of weeks covered by the treatment schedule plan is modified. For example, if there is switch from a one-week to a two-week pattern, regardless of the days selected, and it will be set at today's date.

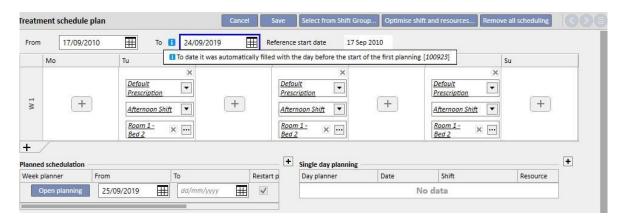
# 9.3.4.3 FUTURE TREATMENT SCHEDULE PLANS

It is possible to create treatment schedule plans for the future. This is done using the section in the bottom left-hand section of the user interface, as indicated in the screenshot below.

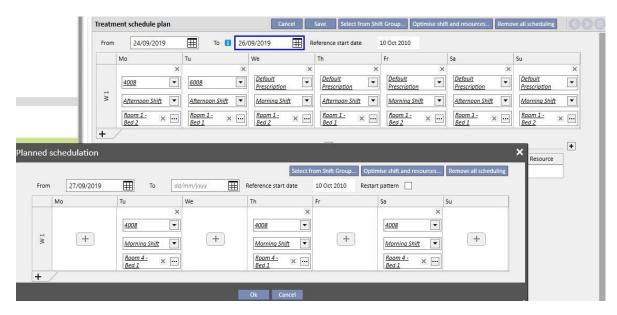
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Mo		We	Th	Fr	Sa	Su	
(+)	Default Prescription	•	<u>Default</u> <u>Prescription</u> <u>Afternoon Shift</u>	× • •	Default Prescription Afternoon Shift	× • •	
edulation							>
			Select fro	om Shift Group Optimise	shift and resources	Remove all scheduling	
25/09/2019	To dd/m	nm/yyyy 🌐 Ref	erence start date 🔋	25 Sep 2019 Restart par	tern 🗸		
o Tu	Ň	Ve Ti	n	Fr Sa		Su	1
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x <u>Default</u> <u>rescription</u> <u> fternoon Shift</u> <u> loom 4-</u> <u> scient</u>	+	X <u>Default</u> <u>Prescription</u> <u>Afternoon Shift</u> <u>Room 4-</u> Bed 1 X	+	X <u>Default</u> <u>Prescription</u> <u>Afternoon Shift</u> <u>Room 4-</u> <u>Bed 1</u> X	+	+	×
	+ edulation 25/09/2019 tu efoult escription ternoon Shift efoult escription ternoon Shift ternoon Shift oom 4- escription ternoon Shift oom 4- escription	17/09/2010       To       I         Mo       Tu       Default         +       Default       Prescription         +       Atternoon Shift       I         edulation       To       dd/n         ternoon Shift       I       I         efault       Tu       V         efault       I       I         efault <t< td=""><td>17/09/2010       To       24/09/2019         Mo       Tu       We         Perfault       Prescription       +         datemoon Shift       +       +         25/09/2019       To       dat/mm/yyyy       Ref         cfault       Prescription       +       +         cfault       Prescription       +       +         cfault       Prescription       +       +         cfault       Prescription       +       +         fearmoon Shift       +       +       &lt;</td><td>17/09/2010     To     24/09/2019     ■     Reference start date       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Construction       Construction         Edualt       Prescription       Image: Construction       Image: Construction       Image: Construction         testing       Default       Prescription       Image: Construction       Image: Construction         testing       Prescription       Image: Construction       Image: Construction       Image: Construction         testing       Image: Construction       Image: Construction       Image: Construction       Image: Construction         testing       Image: Construction       Image: Construction       Image: Construction       Image: Construction         testing       Image: Construction       Image: Construction       Image: Construction       Image: Construction       Image: Construction         testi       Image: Constinit</td><td>17/09/2010     To     24/09/2019     Reference start date     17 Sep 2010       Mo     Tu     We     Th     Fr     Sa       Default     Prescription     Atternoon Shift     Default     Default       +     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cfault       Prescription       +       +         cfault       Prescription       +       +         cfault       Prescription       +       +         fearmoon Shift       +       +       <	17/09/2010     To     24/09/2019     ■     Reference start date       Mo     Tu     We     Th       Default     Prescription        +     Atternoon Shift     +       Atternoon Shift     +     Atternoon Shift       Edult     Tu     We     Th       Select for     *     *       25/09/2019     To     dd/mm/yyyy     ■       Reference start date     1       V     We     Th       Select for     *       efoult     *     *       fermion Shift     *     +       Boom 4:     *     *       efoult     *     *       efoult     *     *       efoult     *     *       Refail     *     *       Boom 4:     *     *	17/09/2010       To       1       24/09/2019       Reference start date       17 Sep 2010         Mo       Tu       We       Th       Fr         Pefoult       Prescription       Image: Construction       Image: Construction         +       Atternoon Shift       +       Atternoon Shift       Image: Construction         25/09/2019       To       dd/mm//yyyy       Image: Construction       Construction         25/09/2019       To       dd/mm//yyy       Image: Construction       Construction         Edualt       Prescription       Image: Construction       Image: Construction       Image: Construction         testing       Default       Prescription       Image: Construction       Image: Construction         testing       Prescription       Image: Construction       Image: Construction       Image: Construction         testing       Image: Construction       Image: Construction       Image: Construction       Image: Construction         testing       Image: Construction       Image: Construction       Image: Construction       Image: Construction         testing       Image: Construction       Image: Construction       Image: Construction       Image: Construction       Image: Construction         testi       Image: Constinit	17/09/2010     To     24/09/2019     Reference start date     17 Sep 2010       Mo     Tu     We     Th     Fr     Sa       Default     Prescription     Atternoon Shift     Default     Default       +     Atternoon Shift     +     Atternoon Shift     Prescription       25/09/2019     To     dd/mm/yyyy     Iternoon Shift     Optimise shift and resources.       25/09/2019     To     dd/mm/yyyy     Reference start date     1     25 Sep 2019       Retart pattern     ✓     Fr     Sa       efault     Yescription     +     Atternoon Shift       Tu     We     Th     Fr     Sa       efault     Yescription     +     Atternoon Shift     +       Atternoon Shift     +     Atternoon Shift     +	17/09/2010       To       24/09/2019       Reference start date       17 Sep 2010         Mo       Tu       We       Th       Fr       Sa       Su         Lefcuit       Perscription       Image: Constraint of the second of the sec

#### Creating a planned schedule

By clicking on the + button it is possible to create a new schedule in the future: the rules for filling-in the relative parameters (scheduling days, shifts, resources) are the same as those described in the previous paragraph regarding the planning of the current treatment, with the exception of the validity dates for the planned schedule. The dates must include an interval after that specified for the current schedule: if the date of the end of the current schedule has not already been entered in the system, when the schedule planned for that date is entered, a date prior to the start of the planned schedule will be proposed by default. (As shown in the example screenshot)



The scheduled treatment plan contains a "Reference start date" field, which is used to calculate the weeks when the future planning will become active. If the future treatment schedule plan has the same number of weeks as the current one, or the previous future plan, this date will not be changed.



	om 17/09/2010	То 🚺	24/09/2019	Reference start date	17 Sep 2010			
	Mo	Tu	We	Th	Fr	Sa	Su	
W 1	: +	Default Prescription Afternoon Shift	× • •	<u>Default</u> <u>Prescription</u> <u>Afternoon Shift</u>	× • •	Default Prescription Afternoon Shift	× •	
ed so	chedulation							×
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rom	25/09/2019	To da	1/mm/yyyy 🏦 Re	eference start date 🔋	25 Sep 2019 Restart pat	tern 🖌		
	Mo	Tu	We	Th	Fr Sa	s	ŝu	
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Otherwise, if the number of weeks is different, this date will be changed automatically.

The planned scheduling just created can be modified at any moment, by clicking on "Open Scheduler".

When the start date for the schedule planned for the future is reached, it is deleted from the list of future plans and replaces the current schedule.

No trace of the previous schedule remains.

If there are drugs connected to the schedule plan, with "Dialysis dose by week" as rule, they are set in the "to be reviewed" status "**n**" days before the date of the start of the planned scheduling, where **n** is a parameter which can be configured from the "Configuration parameters" heading of the Master Data (Clinic Manager) (for further details see section 4.1.1 of the Service Manual), only if the days of the future schedule are different from the days of the current schedule.

Pharm					_												-																	×
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Pharma	colog	gical p	rescri	ption																												Edit		
			Drug	М	litopep															Statu	s	To be n	eviewed	t.			Next a	dministr	ation					
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																		Admi	nistratio	on route		<u>Oral</u>						Drug	type	D	ialysis			
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								147-12			Ref	erence	start d	ate: 10,	/10/20:	10				5 piece														
		to 26/0		э			1-	Week										W2	Su: 6,	Mo: 12 Mo: 10	Tu: 12	, We:	11, Th:	1, Fr. 2	2. Sa:	5 mg/r	ml							
When	-		Tu		We		Th	_	Fr		Sa		Su	_				W4	Su: 10	Mo: 12 , Mo: 1	0, <i>Tu</i> : 1	12, We	5, Th:	8, Fr	4, Sa:	10 mg	j/ml							
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8	9	10	11	12	13	14	5	6	7	8	9	10	11	2	3	4	5	6	7	8	7	8	9	10	11	12	13	4	5	6	7	8	9	10
15	16	17	18	19	20	21	12	13	14	15	16	17	18	9	10	11	12	13	14	15	14	15	16	17	18	19	20	11	12	13	14	15	16	17
22	23 30	24 31	25	26	27	28	19 26	20	21	22 29	23 30	24 31	25	16 23	17	18 25	19 26	20 27	21 28	22 29	21	22 29	23 30	24 31	25	26	27	18 25	19 26	20 27	21 28	22 29	23 30	24
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Today		Submi	tted do	ose	Plann	ned dos	e																											
							_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_	100

If the number of days (before the pharmacological prescription is to switch to "To be reviewed" status) has not yet been reached, the therapy will remain in the "Active" status, but the new pattern will be shown, and the user will simply be shown a warning message and will be able to compile the new schedule.

armad	cological p	rescripti	on																							Edit	Sus	pend	Term	inate		
		Drug	<u>Mitope</u>	<u>:p</u>														Status	; <i>1</i>	Active				1	Next a	dministr	ration	2	4 Sep 2	019 (12	mg/m	I)
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S 44	16 17 23 24	1000	.9 20 16 27		12	13 20	14 21	15 22	16 23	24	18 25	16	10	11 18	12 19	20	14 21	15 22	14	22	23	24	18 25	26	20	11	12	13 20	14 21	15 22	16 23	3
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	30 31																															

## Changing the pattern of a schedule plan

Changing the pattern of a schedule involves one of the following:

- Addition of a day
- Removal of a day
- Movement of a day
- Addition of a week
- Removal of a week

In all these cases "Dialysis dose by week" pharmacological prescriptions are switched to "To be reviewed" status, except for point 3, in which case the "Pharmacological prescription review" window will appear to allow therapies to be modified as required.

#### **Restart Pattern Option**

If the user wants to restart the treatment planning, even if the new schedule does not change the number of weeks, this can be done by clicking the "Restart pattern" flag.

Restart pattern	
-----------------	--

This flag is unchecked automatically and set to read-only in all cases where the future schedule will have a different number of weeks from the current or previous one.

## Visibility on the clinic scheduler

If the treatment plan schedule contains planned appointments, the pharmacological prescriptions of the clinic's scheduler will always be visible if the associated rule is "Dialysis single dose" or "Month rule", while therapies with the "Dialysis dose by week" rule will only be visible when the "*To be reviewed*" status has been dealt with.

## Relationship with the pharmacological therapy

As with the current treatment plan, the planned treatment also has an effect on the Pharmacological Therapy. Every time the days of the treatment schedule are modified (both the number of days, and changes of days), the pharmacological therapy with "Dialysis dose per week" rule must be reviewed.

As already mentioned previously, it is also possible to define how many days prior to the start of the scheduling the pharmacological dialysis therapy has to be reviewed. 4.1.1. of the Service Manual.

## 9.3.4.4 SINGLE DAY TREATMENT PLANNING

From the Treatment Schedule Plan menu it is also possible to create schedules for a single day, also known as exceptions. In this case, the rules to be followed are that the start date must not be in the past and a treatment schedule must have already been saved. If there is an overlap with the current schedule, the single day/exception has greater priority and will therefore be used within the treatment. Once the date of the exception has passed, the data will no longer be visible anywhere.

Day planner	Date	Shift	Resource
-------------	------	-------	----------

To create a new schedule for a single day, click the + button shown in the screenshot above.

day pla	anning								
	Date 13/	0/2019	<b></b>			Shift	Afterno	oon Shift	
		14 - Bed 1	×			Prescription	Alterno	ative Prescription	
	ological therapy Drug/active ingredient	Dosage ar	d frequency		Dose	Measurem	ent unit	Status	Start
✓ (	Fepili - Fascox	2 ml All 1	reatment		12	ml		Active	11 Feb 2015
$\checkmark$	Drug/active ingredient           Nunpan         ×	5	Measurement unit	A02BC01	demo	user	Last char		
₹ +	Nunpan ×		Measurement unit	A02BC01	demo	user			
	_	_	Ok	Cancel	_	_	_	_	

The related pop-up (see screenshot above) will then open, where it is possible to specify:

- The date when the schedule will be applied
- The information regarding the schedule, i.e. shift, prescription and resource

The drugs to be administered to the patient: all drugs in "Active", "Planned" and "To be reviewed" are proposed automatically. If the user wants to administer the drug for the date selected in point 1, he must select the "Enabled" flag (not selected by default) and change the dose, setting it above zero (the drugs proposed automatically cannot be deleted from the table; in order not to administer them it is necessary to set the dose to 0 or to disable them via the "Enabled" checkbox).

Using the + button in the "Single day planning" table it is also possible to add additional drugs other than those previously proposed by the system. Unlike the drugs proposed by the system, the additional ones added can also be removed.

Once all the information has been entered, the user can save the Schedule by clicking "OK". At this point, the schedule is entered in the relative table and it can be modified at any time by clicking the "Open single day" button.

	From	24 Sep 2019		То	23 Oct 2019	Ret	ference start date	10 Oct 20	010		
	Мо	Tu	Ē		We		Th	Fr		Sa	Su
W 1	<u>4008</u> <u>Afternoon S</u> <u>Room 1 - Be</u>	<u>hift</u>	<u>6008</u> Afternoon Shif Room 1 - Bed :		<u>Default Prescrip</u> <u>Morning Shift</u> <u>Room 1 - Bed 2</u>	<u>tion</u>	<u>Default Prescriptio</u> <u>Afternoon Shift</u> <u>Room 1 - Bed 1</u>	Morn	ult Prescription ing Shift 1 - Bed 2	<u>Default Prescription</u> <u>Afternoon Shift</u> <u>Room 1 - Bed 1</u>	Default Prescription Morning Shift Room 1 - Bed 2
anne	d schedulation						Single day p	anning			
/eek	planner	From		То		Restart	p Day planner		Date	Shift	Resource
1	Open planning	24 Oct 20	119			~	0pen	single day	13 Oct 2019	Afternoon Shift	Room 4 - B

Relationship with the pharmacological therapy

- Deleting a therapy
- When a pharmacological therapy is prescribed in the schedule for a single day (by changing the dose from 0 to a valid value) a link is created between the therapy and the schedule. The therapy cannot be deleted from the "Pharmacological prescription" menu as long as it appears as scheduled in the planning. In this case, a message will advise the user that he must remove the therapy from the schedule before deleting it.
- Displaying the next administration date
- When a pharmacological therapy added on a single day basis impacts the patient's existing pharmacological therapy, an alert is displayed.

	Show current	drug	only 🗹		Sh	ow single day drug			
Status	From	То	Drug / Active ingredient	Package(s)	ATC code	Dosage this week	Dosage and frequency	Next administration	Docto
Active	06 Oct 2011		Mitopep - Nunpan	25 pieces 100mg/ml Capsule	A02BC01	57.00 mg/ml	W 1 Th: 12 Sa: 12 mg/ml W 2 Th: 1 mg/ml See more	21 Nov 2017 (33 mg/ ml)	Doct
Active	04 Jul 2013		Fepili - Fascox	5pieces 50ml vials	B03XA01	48.00 ml	12ml All Treatment	21 Nov 2017 (12 ml)	Doct

Displaying "Single day therapies"

 When a new pharmacological therapy is added as a single day therapy and the drug is not already prescribed for the patient (in the "Pharmacological Therapy" menu), the drug can be viewed by clicking the check button (see screenshot below).

<b>7</b>		Status	From	То	Drug / Active ingredient			Package(s)	L'anne anno anna anna anna anna anna anna	Dosage
	<i>•</i>	Active	11 Feb 201	15	Fepili - Fascox			5pieces 50ml vials	B03XA01	6.00
record	found									
	ay therapy					[	71			
ngle da	ay therapy	Status Planned	Date 13 Oct 2019	Drug / Active ing Adipnaf - Alinuv		ATC code B01AB01	Transmitter	octor's name		

## 9.3.4.5 INVALIDATION

The treatment prescription has an expiry date after which it cannot be used. If the Treatment schedule plan contains planning which references expired prescriptions, the scheduled treatments are <u>rendered invalid</u> and must be replaced by an active prescription.

lo enable iere is 1		scriptions found f	or this patient				
Fror		019	То	Reference start o	date 08 Sep 2011		
Mo		Tu	We	Th	Fr	Sa	Su
-	uult Prescription rnoon Shift	]	-	t Prescription	Default Prescription		

#### 9.3.5 PHARMACOLOGICAL PRESCRIPTION

**Pharmacological prescription**: is a view where drugs can be prescribed for the patient to take at home or during the dialysis therapy. It is divided into three tabs: "List", "Drug evolution history" and "Timeline". In order for this section to work correctly, the drug data must be filled in correctly. For details, refer to the Service Manual.

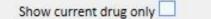
	Pharm	acological prescriptio	n		
	List	Drug evolution history	Timeline		
1	Note				
D					
	Do not use	this section for prese	cribing drugs a	already manag	ed in othei

## 9.3.5.1 LIST

This is the main overview, and lists the patient's pharmacological therapies. For easy viewing, it is subdivided into two sections: "Home therapy" and "Dialysis related therapy". This list includes all the pharmacological therapies linked to the patient.

st Drug ev egular thera	volution history    Timelin py Show current drug only	2000 			
7	Show current drug only			Print prescription A	Add new
·	Status		To Drug / Active ingredient	Package(s)	ATC cod
	Active	11 Feb 2015	Fascox	12 mg Effervescent Tablets	
			^		
ialysis relate					Add nev
ialysis relate	e <b>d therapy</b> Show current drug only	, <b>T</b>	Show single day of		Add new
			Show single day of To Drug / Active ingredient		
ialysis relate	Show current drug only			rug	ATC co

By default, the drugs with a current status other than "Terminated" are displayed. The drugs with "Terminated" status can also be viewed by removing the flag from the "Show current drugs only" checkbox.



This view is not meant as a registry that highlights all the activities carried out on the drug prescription; rather, it only shows the new versions of drug administration. To create a new version, precise rules must be followed as listed below:

- Home administered drug: at least 24 hours must have passed since the last therapy change and one of the following fields must be changed: scheduling days changed, dosage change, change of doctor who changed the therapy or change of comment.
- Drug taken during dialysis treatment: there must be at least one treatment where this drug was administered, and at least one of the following fields must be modified: *schedule days, dosage, box type or drug name* (referring to the same active ingredient), doctor who changed the therapy or Comment.

If a new version of a drug prescription is being created after a change in dosage, and the "Ask reason for change in dosage" flag has been set as true in the clinic parameters, when the new version is saved a pop-up will appear allowing the user to enter the reason for the change in dosage.

Please insert the reason for dose chang	e (optional)	
Reason for dose change	Reason for change: previous dosage not correct	
	ОК	

# This information will then appear on the timeline, in correspondence with the change in dosage.

	Drug type				Show current	drugs only		
2011	2012	2013	2014	2015	2016	2017	2018	2019
Drug nam	ie		2012 2013	2014	2015		017 2018	2019
Eriramuf	Regular							
Fascox	Regular				8			
Fascox	Dialysis			2				
Fepili	ŀ		-					
• Nunpan	Dialysis	H			Reason for	change: Reason for cha	nge: previous dosage not	t correct (04/06

As this section is very important, the meanings of the various columns are explained below.

- Status icon: identifies if the drug is in a "suspended" or "to be reviewed" status by icon
- Drug type: identifies drug type by icon. This can have the following values:
  - Home: home administered drug
  - As needed: drug to be administered as needed
  - Relative to dialysis: drug to be administered during dialysis
- Status: this is the status of the drug. It can have the following values:
  - Active: the patient is taking the drug according to the established rules;
  - Suspended: the patient is not currently taking the drug;
  - **Planned**: the patient is not yet taking the drug, and will start in the future; if the user now decides to end the drug, it will be removed from the archives and no trace of it will remain anywhere in the system.
  - The prescription automatically becomes *Active* on the pharmacological therapy start date.
  - **Terminated**: the patient is not taking the drug; when a drug in this status is displayed the button "Copy to" appears, and if clicked, it creates a new pharmacological therapy identical to the Terminated one, the only difference being the start date, end date and doctor fields. It is then the responsibility of the user to modify the new pharmacological therapy as required, and save it.
  - It is possible to terminate a drug prescription by clicking the "Terminate" button, which appears when the drug is displayed, and selecting the date the drug is to be terminated in the pop-up that appears after the button is clicked. If the date chosen corresponds to today's date, the termination will be immediate. This means that for drugs to be taken during treatment, if a treatment is scheduled for that day, the therapy will not appear among those to be administered.

Pharmacologi	cal prescriptio	n termination	×
Termination date	24/09/2019	Ħ	
Termination comme	ent		
		OK Cancel	

- To be reviewed: this is a condition which occurs for drugs taken during the dialysis treatment and for which the administration rule is connected to the "Treatment planning" of the patient. The "To be reviewed" status indicates that the scheduling of the related treatment has been changed after the creation or modification of the pharmacological therapy. It is possible that the days of the week when the patient must take the drug no longer coincide with the treatment planning. This also occurs for existing drugs that are dialysis therapy and regular therapy, when an allergy is entered after an active ingredient has already been prescribed to the patient.
- From: the start date of this administration. It is not the date of the creation of the drug prescription, given that the therapy may have been changed over time.

To: the end date of this administration. This information may be absent. Following the termination of a therapy by clicking on the "Terminate" button (and only for the immediate termination of the therapy) the time of the termination will appear, only for the day in question.

	Sho	ow current drug only			Show single day drug		
P		Status	From	То	Drug / Active ingredient	Package(s)	ATC code
	•	Terminated	05 Oct 2010	09 Oct 2010	Fepili - Fascox	5pieces 50ml vials	B03XA01
	•	Terminated	10 Oct 2010	03 Jul 2013	Fepili - Fascox	5pieces 50ml vials	BO3XA01
	é	Active	06 Oct 2011		Mitopep - Nunpan	25 pieces 100mg/ml Capsule	A02BC01
		Active	04 Jul 2013		Fepili - Fascox	Spieces 50ml vials	B03XA01

Drug / Active ingredient: if a generic drug is prescribed only the active ingredient will be shown, otherwise the
name of the drug and its active ingredient are shown. If the drug has multiple active ingredients, only the first
two are shown, followed by "...".

Zaminreum - Alinuv/Eriramuf/Fascox/Hephobase/Iraderac/Nunpan...

- ATC code: this is the ATC classification of the drug.
- **Dosage per week**: this is the dose taken by the patient in the course of a week. In the case of administration over several weeks, the average of the various weeks is calculated.
- Dosage and frequency: this shows the dose and frequency of the dose in detail. In the case of administration
  over a number of weeks only the first two weeks are shown. The "View in detail" field is then shown: here the
  other weeks can be displayed by positioning the mouse on them.

Dosage and frequency	Dosage and frequency					
	We: 10 Th: 12 Fr: 8 So: 12 mg/ml We: 11 Th: 1 Fr: 2 So: 5 mg/ml	30 May 2019 (1 mg/ml)				
12ml All treatment	W 1 Su: 8 Mo: 12 Tu: 12 We W 2 Su: 6 Mo: 10 Tu: 12 We W 3 Su: 6 Mo: 12 Tu: 8 We: 1 W 4 Su: 10 Mo: 10 Tu: 12 W W 5 Su: 2 Mo: 9 Tu: 9 We: 1 W 6 Su: 5 Mo: 12 Tu: 4 We: 1	8 Th: 12 Fr: 10 Sa: 8 mg/ml e: 5 Th: 8 Fr: 4 Sa: 10 mg/ml 1 Th: 12 Fr: 8 Sa: 8 mg/ml				

- The screenshot above is just an example, given that the content of this field depends on the type of rule of the selected dosage.
- Next administration date: This field is calculated automatically based on the administration rules set. For drugs in Suspended or Terminated status, this field shows the value "-". As soon as a new drug therapy has been saved, this field contains the value "Calculating..." which will be replaced a few seconds later by the next date of administration. The text will read "No treatment schedule defined" when the information cannot be calculated because there is no treatment plan available.
- Name of doctor: the name of the doctor responsible for the pharmacological prescription.
- **Comment**: a comment can be inserted when creating the pharmacological prescription.
- Action: contains a button which varies according to the drug's status. The possible values are explained below:

• **Suspend**: appears in the case of active drugs; clicking it opens a new window where the user can suspend the drug. The default start date for the suspension is set at today's date, but can be changed to a later date. It is also possible to add a comment to specify the reason for the suspension.

Pharm	nacological pr	escription sus	pension			×
Start	24/09/2019	Ħ				
Suspen	sion comment					
				OK	Cancel	

Suspended: appears in the case of active drugs for which a suspension at a later date has already been inserted. After clicking it, the user can view the suspension and modify both the start date and the comment. The future suspension can also be suspended by clicking the "Delete suspension" button. In this case, the drug becomes active again, and no trace of this operation will remain, given that the suspension had not yet begun and the status of the drug remains unchanged.

Pharn	nacological pr	escription suspe	nsion					×
Start	24/10/2019							
Suspen	sion comment							
			C	JK De	elete suspension	Cancel		

• **Reactivation**: appears in the case of drugs which are currently Suspended. After clicking this field the user can view the suspension entered and the comment entered when it was suspended. The reactivation date can be entered. If the date entered is today's date, the drug becomes active immediately. If the date entered is in the future, the drug will remain Suspended, and will be activated automatically when the date is reached.

Pharmacolo	gical prescrip	tion suspen	sion				×
Reactivation	24/09/2019	Ħ					
Suspension com	ment						_
Reactivation cor	nment						
							-
	-2003.00			OK	Cancel		.d

Add new...: this is used to insert a new pharmacological prescription, both for administration at home and for use during dialysis treatment. Clicking here opens a window to search for the drug, with the cursor already in the right position to start the search. If the user types at least three characters of the drug's name, all those drugs which satisfy the search criteria appear. Please note that the search does not include or visualise the various pack sizes available.

New drug				×
Search in: O House catalogue	O Commercial drugs	Generic drugs	O All used drugs	Advanced search
		Fill a	least three characters to start search	
			OK Cancel	l

There are four different search modes:

- Clinic catalogue: Searches among all the drugs in the clinic drug catalogue.
- **Commercial drugs**: Searches among all the drugs in the drug database that are defined as commercial;
- **Generic drugs**: Searches among all the drugs in the drug database which are defined as generic or only as active ingredient;
- All drugs used: Displays the entire list of drugs already prescribed in the therapies of all patients.

Once the search criteria have been entered, a list of drugs is automatically generated, which may also include warning icons to the left of the drug name.

New drug				×
Search in: O House catalogue	Ocmmercial drugs	O Generic drugs	All used drugs	Advanced search
ado				
Adolaf				
			OK. Cancel	il.

Messages of this kind do not block the search process for the drug, but just give warnings. The following are the warnings which may appear if a drug with an icon is selected:

• The drug interacts with other drugs which have already been prescribed for the patient.

# 🚧 Eriramuf



• A drug with the same active ingredient has already been prescribed or is among the regular drugs or the treatment drugs prescribed.

		🛄 Fepili
!	Warning:	160213
Ac	drug with th	e same active ingredients has been already prescribed. Do you want to continue?

In this case, after clicking on the Yes button, a warning message will appear in the active ingredient field, which tells the user to pay attention because the same active ingredient is already prescribed, but it will allow the drug to be prescribed regardless. In the No button is clicked, the user returns to the drug search view.

▲ Aitken Lambert, David Born 15/08/1952 (67r) Gender C Cod. 39807 Status Active/Hemodialysis :       Cancel Sone Bodt         Pharmacological prescription       Cancel Sone Bodt         Drug       Status Active       Next administration -         Active ingredients list ID       Faccox       Doctor         The selected drug causes interactions with       Doctor       Reason         Dose       Mess. U       [10052]       The selected drug causes interactions with	00
Drug     The selected drug causes interactions with     Status     Active     Next administration       Dose     Mess on     Dector     Reason	
Active ingredients list a Fascox Doctor           Open         The selected drug causes interactions with generations wi	
The selected drug causes interactions with Reason Reason	
Dose Meas. U Eriramuf [100652]	
Last change 24 Sep 2019 User demouser	_
+ / Start 24/09/2019 III Stop dd/mm/yyyy	Ħ
Administration route 🔝 💽 Drug type Regular	•
Meal relation No relation	•
Rule dose Single dose every     Measurement unit:     Measurement unit:     Fascox, 0	5
Dose Every Days  Every Days  No relation with meal	
Comment Send comment to TMOD	
	•••
	Ш

• Take care because the patient is allergic to the active ingredient selected for administration.



If the drug shows several warning icons, once the drug has been selected all the warning messages will be shown in sequence.

There is also an advanced search, where clicking a button opens a window listing all the drugs, both generic and commercial, in the drug catalogue.

New drug				×
Search in: O House catalogue O Com	mercial drugs 💿 Generic drugs 🔷 All	used drugs		Advanced search
Search				
Drug		-	×	
Diug				
		and a long of		
	ingredient Search	ATC classification ATC class	sification	
Drug active	ingredient Drug active ingredient			
₹	Drug / Active ingredient	ATC description	Medicinal details	
Show Details	Notivital Contraction	Heparin One	Adipnaf	
Show Details	Adolaf	Paracetamol	Adolaf	
Show Details	Alinuv	Paracetamol		
Show Details	Baxada	Furosemide	Baxada	
Show Details	Corsoral - Clinic Drug	Furosemide		· · · · · ·
Show Details	Eriramuf	Iron		
Show Details Show Details	Eriramuf/Pentac Fascox	Pantoprazole Eritoproetin		
Show Details	Fascox/Pentac	Hepatitis Vaccine		
Show Details	Fepili	Eritoproetin	Fepili	
Show Details	Geracox	Iron	Geracox	
Show Details	Iraderac	Iron		
Show Details	Mitopep	Omeprazole	Mitopep	
Show Details	Nunpan	Omeprazole		
Show Details	Opantig	Pantoprazole	Opantig	
Show Details	Paletal	Antihypertensive		
20 records found				
			li.	
		Cancel		

This list can be filtered in three different ways:

 Drug / Active ingredient: by typing at least one character; the search only shows the drugs which satisfy the search criteria

Drug			Ne	ew Export Excel P
Drug / Active ingredie	nt ad 🔀	Generic/Active ingredient		•
Commercial gener	ic	Show disabled No		
Drug / Active ingredient	ATC description	Generic/Active ingredient	Commercial generic	Disabled
Adipnaf	Heparin One	No	No	No
Adolaf	Paracetamol	No	No	No
Baxada	Furosemide	No	No	No
Iraderac	Iron	Yes	No	No

• ATC Classification: by typing at least three characters of the ATC description (the search only shows the drugs which meet the search criteria) or clicking on the button to show a default list of all the ATC classifications.

ug / Active ingredient	Search	ATC classification	ATC classification
TC classificatio	n		>
By description By	code		
ATC descr	iption Search	0	
7	ATC code	ATC description	
Show Details	A02BC01	Omeprazole	
Show Details	A02BC02	Pantoprazole	
Show Details	B01AB	Heparin	
Show Details	B01AB01	Heparin One	
Show Details	B03A	Iron	
Show Details	B03XA01	Eritoproetin	
Show Details	C02AB	Antihypertensive	
Show Details	C03CA01	Furosemide	
Show Details	J07BC	Hepatitis Vaccine	
Show Details	N02BE01	Paracetamol	
10 records found			

 Active ingredient: by typing at least three characters of the name of the generic drug (the search only shows the drugs which meet the search criteria), or clicking on the button to show a default list of all the generic drugs.

rug / Active ingred		ATC classification ATC classificatio	on 😶
Drug active ingred	dient Drug active ingredient		
g active ingr	odiant		
g active ingre	ealent		
Il list Search			
₽	Local active ingredient code	Active ingredient name	Complex Active Ingredient
Show Details	001	Alinuv	NA NA
Show Details	010	Alinuv/Eriramuf	Yes
Show Details	1210	Alinuv/Eriramuf/Fascox/Hephobase/Iraderac/Nunpan/Pa	Yes
Show Details	002	Eriramuf	
Show Details	003	Fascox	
Show Details	©110	Hephobase	No
Show Details	004	Iraderac	
Show Details	005	Nunpan	
Show Details	007	Paletal	No
Show Details	006	Pentac	
Show Details	12	Reetinerumin	No
records found			

Once the search has found the drug to administer, click on the drug or on the OK button to open the window for the pharmacological prescription.

Pharm	nacol	logica	al pre	escrip	otion	le:																												×
🔺 Ait	ken La	mber	t, Dav	vid Ba	orn 15,	/08/195	2 (67y)	Gende	rd c	od. 398	07 Sta	tus Act	ive/He	modialy	sis 🗀	1																		
Pharm	acolog	gical p	rescri	ption																								Cancel			l	ack		30
			Drug	Ac	<u>iolaf</u>											×	·			Status		Active					Next ac	dministr	ation	N	o sched	ulation	define	d
Ac	tive ing	gredien	ts list	A	linuv															Doctor	[	Doctor												•••
1																	-1			Reason	[	Reason	(											•••
	ict pack												•				-		Last	t change		24 Sep	2019						User	de	emouse	c		
+	oieces .	1ml via	<u>15</u>																	Start	[	24/09/	2019		Ŧ				Stop	d	d/mm/y	/yyy		Ħ
LT.																		Admii	nistrati	on route	•				-			Drug	type	Di	alysis			-
																										_	Admini	stration	time	PI	ease se	lect one	entry	-
El Ru	le dose	Dialys	is dose	hv we	ek 🔻	1							ment u			•	]	Instruc	tions												Show o	dose as	pieces	
						Weeł	e (1		•		Ref	erence	start di	ate: 10/	10/201	10		Adol	af, 20p	pieces 1	ml via	ls												
14/1			Tu		We		Th		Fr		Sa		Su																					
When W1	Mo	£	1		we	1	In	- 1	rr		58		50	_																				
												Comm	ent											Sen	d comn	nent to '	TMON							
																																	[	]
																																	1	
																		-																-
			July							August						Se	ptemb	er					0	ctober						No	ovembe	r		
Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue		Thu	Fri	Sat	Sun	Mon	Tue	Wed		Fri	Sat	Sun	Mon	Tue		Thu	Fri	Sat	Sun	Mon	Tue	Wed		<u></u>	Sat	Sun
1	2	3	4	5	6	7				1	2	3	4							1		1	2	3	4	5	6					1	2	3
8	9 16	10 17	11 18	12 19	13 20	14 21	5	6 13	7	8 15	9 16	10	11 18	2	3 10	4	5	6 13	7	8	7	8 15	9 16	10 17	11 18	12 19	13 20	4	5 12	6 13	7	8	9 16	10
22	23	24	25	26	27	28	19	20	21	22	23	24	25	16	17	18	19	20	21	22	21	22	23	24	25	26	27	18	19	20	21		23	24
29	30	31				2	26	27	28	29	30	31		23	24	25	26	27	28	29	28	29	30	31				25	26	27	28	29	30	
														30																				
Toda	v 🔵	Submit	tted do	ose	Plann	ned dos	e							_						_							_							

The main difference between a "Home therapy" and a "Dialysis related therapy" is in the definition of the doses, the rules and the packaging of the drug. A detailed description of the single fields/areas is provided below.

**Drug definition area**: the screen varies depending on whether the search was for a commercial drug or a generic drug/active ingredient:

- Commercial drug:
  - Drug: contains the name of the drug; if the drug is not a generic and the corresponding generic is in the drug catalogue (active ingredient, but not *pure generic*), the field will appear as editable and the

user can change the drug, switching from commercial to generic, (by clicking on the  $\stackrel{\text{M}}{=}$  icon) and vice versa (selecting the drug from the list via the "...").

rug <u>Mitopep</u> X ···
--------------------------

• Active ingredients: read only, it contains the name or names of the active ingredients which make up the drug. (A maximum of two active ingredients are shown). If the drug interacts with other drugs already taken by the patient, or if the patient is allergic, this field shows a warning message indicating this;

- Product packages: if only one format is defined in the drug database, this one is offered by default; if there are different types the field is left empty, marked as mandatory, with the possibility to choose up to a maximum of three packages. Depending on how the drug catalogue is put together, and specifically the "Weight/capacity of single unit" and "Measurement unit" fields, one or another view will appear:
  - The "Weight/capacity of single unit" and "Measurement unit" fields already contain correct values in the drug catalogue (*See section 4.2.8 of the Service Manual*):

Drug	Valome						
Active ingredients list 📒	Alinuv/Eriramuf						
oduct packages		Single unit capacity	Meas. Unit				
Product packages	•	]					
-							

 The "Weight/capacity of single unit" and "Measurement unit" do not contain values in the drug catalogue (See section 4.2.8 of the Service Manual). The user is responsible for compiling these fields

Drug	Valome			•••			
Active ingredients list I Alinuv/Eriramuf							
Product packages		Single unit capacity	Meas. Unit				
25 pieces 100mq Capsule	•						
+/				1			

If the user adds another package, and this has also been defined in the drug catalogue without weight and units
of measure, the user cannot type in the units of measure related to the second package, which will be copied
directly from the first package.

				Reason	Reason
Product packages	Single unit capacity	Meas. Unit		1	24 Sep 2019
25 pieces 100mg Capsule	•	mg		Last change	-
25 pieces 250mg Capsule	•	1 mg	×	Start	24/09/2019
+ /		This measurement	t unit will be copied fi	om the first valid or	inserted. [140018]

- If two or more product packages exist for the same drug, and the weight and units of measure is not defined for all the packages in the Drug Catalogue, the following situation occurs:
  - Selection of the packaging with weight and units of measure already defined in the drug catalogue:

Product packages		
25 pieces 100mg Capsule	•	
+_/		

• A package without defined weight and units of measure is added to the drug catalogue:

<u> </u>				Reason	Reason
Product packages	Single unit capacity	Meas. Unit			24.0
25 pieces 100mg Capsule	•	mg		Last change	24 Sep 2019
25 pieces 250mg Capsule	<b>T</b>	1 mg	×	Start	24/09/2019
+		This measurement	t unit will be copied fro	om the first valid or	inserted. [140018]

The weight and units of measure must be entered with great care and attention, because when the therapy is saved an info message is shown, which advises the user that the information just entered will update the drug catalogue.

Warning: 340006
TSS is going to update drug DB information with provided dosages and measurement units
OK Cancel

- Clicking the "OK" button saves the pharmacological prescription and amends the drug catalogue; if the user clicks "Cancel" the pharmacological prescription is not saved, and no changes will be made to the drug catalogue.
- Generic drug / active ingredient:
  - Active ingredient: read-only, and contains the name or names of the active ingredients which make up the drug. (A maximum of two active ingredients are shown). If the drug interacts with other drugs already taken by the patient, or if the patient is allergic, this field shows an warning message with the relative information;
  - Dose, units of measure and pharmaceutical form: obligatory fields which are filled in by the user.
  - If the generic drug consists of only one active ingredient, or of three or more active ingredients, the following screen will appear (if the dosage, units of measure and the pharmaceutical form are the same, in the case of 3 or more active ingredients):

ose	Meas. Unit	Pharmaceutical form	
	8	Pharmaceutical form	•

• If the generic drug consists of two active ingredients the following table will appear; where different units of measures can be selected on the same line, but with only one pharmaceutical form.

Active ingredients list		Eriramuf/Pentac									
Dose	MU	Dose	MU	Pharmaceutical form							
83	83	▼ 8	83	▼ 🛿 Pharmaceutical form							

 In both cases, it is possible to specify a maximum of three packages, taking care that the units of measure and pharmaceutical form are the same for each package.

)ose	Meas. Unit		Pharmaceutical form	
10	ml	•	Injection	-
200	<b>E</b>	-	Effervescent Tablets	•
100	Measureme	nt units must	be the same for each package [100860]	•

Pl	narmacolo	gical prescripti	on						
2	There is 1	L error							
		Drug							•••
	Active in	gredients list 🚦	Erir	amuf/Penta	ic				
3				1					
	Dose	MU	Dose		MU			Pharmaceutical form	
	5	mg	•	5		mg	•	Effervescent Tablets	
	20	mg	•	50	E	g	-	Effervescent Tablets	
	10	mg	-	10		🛛 Meas	uremen	t units must be the same for each package	e [100860]

**Status**: A non-editable field, with contents which change depending on the start and end dates specified. The default status is "Active". If the start date is in the future the field will become "Planned". If the end date is before today, the field will become "Terminated".

**Next administration date**: this label shows the next date of administration for the drug as calculated automatically by the system based on the start date, the planning rule, and in the case of the dialysis therapy, the date of the start of the treatment plan schedule when the therapy is "Active" or "Planned".

When the therapy is in "to be reviewed", "suspended" or "terminated" status, the "-" symbol appears as no information can be calculated. The text will read "No treatment schedule defined" when the information cannot be calculated because there is no treatment plan available.

**Doctor**: A non-mandatory field; it can be filled with the doctors defined in the "Clinic staff" section of the "Master data" menu who have "Yes" in the "Doctor responsible for the drug prescription" field. If the user's profile corresponds to these criteria, this field is filled-in by default during issue of a new pharmacological prescription.

**Last change**: Non-editable field. When a new pharmacological prescription is being entered this field is given today's date; when a pharmacological prescription is being modified this field shows the last modification date, and if the prescription is modified it is updated with the current date.

**User**: Non-editable field. When a new pharmacological prescription is being entered, this field shows the user who is issuing the pharmacological prescription. When a pharmacological prescription is being modified this field shows the last user to modify the prescription, and it is updated with the current user if the prescription is modified.

**Start**: Mandatory field. When a new pharmacological prescription is being entered, this field shows today's date by default, but this can be modified and dates in the past or future (in which case the status becomes "Planned") can be entered. When a pharmacological prescription is being modified, no changes can be made to this field. However, the date will be modified automatically when the rule, dose, or the doctor responsible for the pharmacological prescription changes (for drugs for the dialysis therapy there must be at least one treatment which has used this drug, whereas for drugs for home therapy at least one day must have passed since the last administration).

**End**: Optional field. It is empty while the prescription is entered and can be set with a date later than or equal to the one entered as *start*. If an active pharmacological prescription is undergoing a modification, it is possible to enter an *end* date which is after or equal to today's date in the event of regular drugs. For dialysis therapy, it is only possible to define an *end* date for an active therapy which is later than the date of the treatment when the drug was last administered.

**Administration route**: This field can be mandatory or optional, depending on the setting made in the configuration parameters of the clinic configuration function. Another option set in the clinic configuration is the family of administration routes to be displayed:

- Always use complete list: the value of the field can be selected from the complete list of administration routes.
- Use complete list if drug list is empty: the value for the field can be selected from the set of administration routes defined for the family of drugs containing the same active ingredient. If nothing has been set the complete list is provided.

Furthermore, if the drug being prescribed has only one possible administration route set for all the packages in the drug catalogue, the field becomes a read-only field and contains that value by default.



**Drug type**: Mandatory, pre-filled in field which can only be modified during creation of a new pharmacological therapy. The value of this field changes depending on whether the "Add new..." button was activated from the home therapy section, or from the related dialysis therapy section.

Drug type	Regular	•
Meal relation	Dialysis	
	Regular	

**Meal relation**: Pre-filled in field only visible for the regular pharmacological prescription. The value of this field is written in the instructions.

Meal relation	No relation 🔹
	After meal
	Before meal
n 5 ml, Dinner 10 ml	During meal
n 5 ml, Dinner 10 ml	Far from meal
	No relation

Administration time: This field is only visible for the related dialysis therapy prescription.

Administration time	Post-dialysis
	Please select one entry
	1 hour to end of dialysis
	At end of dialysis
	At start of dialyisis
	During dialysis
	On demand
	S Post-dialysis
	Pre-dialysis

**Reason**: Optional editable field. It can contain the reason for issue of the pharmacological prescription. The reason can be taken from the disease catalogue. Once it has been selected and the drug has been described, this reason is added to the patient's "Comorbidities". If the reason is already listed under the patient's "Comorbidities", it is not added again.

			Reason	Reason		
eason						
Search	by disease catalog	ue Search	Search on renal diseases	Search by code		
	Cata	ogue <u>ICD10</u>	×	···] N	ame Search	1
7	Us	er code	Name		Is it a renal disease?	]
-	Use Show Details	er code	Name No ICD Code		ls it a renal disease? No	
S	Show Details	er code 10-A09)		ases		

**Measurement unit**: Optional field which is filled in automatically or manually depending on how the drug is defined in the drug catalogue, and whether any customised units of measures are present (*See section 4.2.8 of the Service Manual*):

- No customised units of measure: the field cannot be edited, and by default it shows the value associated with the product package or the value set for the active ingredient. In the case of product packages for which no unit of measure is set in the drug catalogue, this field will show the value added by the user.
- One or more customised units of measure are present:
  - Generic drugs: the field is left empty by default.

Contraction of the local distance	Altken Lambert. David Born 15/08/1952 (67y) Gender d' Cod 39807 Stotus Active/Hemodialysis 1																																	
Pharma	armacological prescription																	Cancel			E	Back		30										
			Drug						··			Statu	s	Active					Next a	dministi	ration	N	o sched	iulatior	n define	d								
Act	Active ingredients list 🚺 Nunpan							Docto	r [	Doctor												•••												
		10							1.400000044						-		Ξ.			Reasor	n [	Reason												
Dose 12			neas. U	nit		-	Pharma Inject		al form						-		-		Las	t change	2	24 Sep	2019						User	<u>d</u>	emouse	<u>r</u>		
+	/				-	-	meet													Star	t [	24/09/	2019		Ħ	]			Stop	a	d/mm/	уууу		Ħ
· · · ·								-	-	_								Admin	nistrati	on route	: 🛛				-	]		Drug	g type	D	ialysis			-
												-	-	-													Admin	istratior	time	P	ease se	elect on	e entry	•
🖸 Rul	e dose	Dialys	is dose	by we	ek 🔻	1								nit: m ate: 10,		•		Instruc	tions												Show	dose as	s pieces	
						Week	s 1		•		Ren	erence	start da	ste: 10,	/10/20	10			pan, 1 ubmis	2 ml, In sion	ijection													
When	Mo		Tu		We		   Th		Fr		Sa		Su					140 3	dipititi a	51011														
W1		~				-					-																							
-											L							Comm	ent											Ser	d comn	nent to	TMON	
																																		•••
																																		_
			July							August						_	ptemb							ctober							ovembe			
Mon 1	Tue 2	Wed 3	Thu 4	Fri 5	Sat 6	Sun 7	Mon	Tue	Wed	Thu 1	Fri 2	Sat 3	Sun 4	Mon	Tue	Wed	Thu	Fri	Sat	Sun 1	Mon	Tue 1	Wed 2	Thu 3	Fri 4	Sat 5	Sun 6	Mon	Tue	Wed	Thu	Fri 1	Sat 2	Sun 3
8	9	10	4	12	13	14	5	6	7	8	9	10	11	2	3	4	5	6	7	8	7	8	9	10	4	12	13	4	5	6	7	8	9	10
15	16	17	18	19	20	21	12	13	14	15	16	17	18	9	10	11	12	13	14	15	14	15	16	17	18	19	20	11	12	13	14	15	16	17
22	23	24	25	26	27	28	19	20	21	22	23	24	25	16	17	18	19	20	21	22	21	22	23	24	25	26	27	18	19	20	21	22	23	24
29	30	31					26	27	28	29	30	31		23	24	25	26	27	28	29	28	29	30	31	8	2		25	26	27	28	29	30	
Toda		Submit	tted do	çe	Plann	ned dose								L 30			_	_								_								-1
- TOUD								-			-	-					-						-	-	-	-			-	-	-			

• As soon as the user sets the units of measure related to the package, this field is set automatically.

• However, the user can still select a customised unit of measure.

🕄 Rule dose 🕄	Single dose every 💌		Measurement unit:	mg/ml 💌
Dose	Every	Days 💌		mg/ml Spoon
L				Drops
				1.5500.5576

• Commercial drugs: if the selected packaging already has a value in the units of measure field in the drug catalogue, this value is set by default, while the user can still select a customised unit of measure.

Pharmacological pre	scription						×
🛕 Aitken Lambert , Davi	id Born 15/08/1952 (67y) Gender 👌 Cod. 398	07 Status Active/Hemodialysis 🔟 🕏					
Pharmacological prescrip	otion				Cancel	Back	
Drug	Adolaf	×	Status	Active	Next administration		)]
Active ingredients list	Alinuv		Doctor	Doctor			
1-			Reason	Reason			
Product packages		•	Last change	24 Sep 2019	User	demouser	
+	~		Start	24/09/2019	Stop	dd/mm/yyyy	Ħ
			Administration route	•	Drug type	Regular	•
					Meal relation	No relation	•
🖾 Rule dose Single dose en	very 💌	Measurement unit: ml	Instructions			Show dose as	pieces 🗌
Dose Every	/ Days		Adolaf, 20pieces 1ml vi ml Every Days No relation with meal	als			
			Comment			Send comment to '	

• If the selected package does not have a value in the units of measure field in the drug catalogue, the value entered by the user is set by default, while the user can still select a customised unit of measure.

Pharmacological prescription					×
🛆 Aitken Lambert, David Born 15/08/1952 (67y) Gender 🖓 Cod. 39807 Status Active/Hemodialysis 🗊 😧					
Pharmacological prescription			Cancel	ave Back	00
Drug Valome ····	Status	Active	Next administration		
Active ingredients list 🔋 Alinuv/Eriramuf	Doctor	Doctor			•••
	Reason	Reason			•••
Product packages Single unit capacity Meas. Unit 25 pieces 100mg Copsule	Last change	24 Sep 2019	User	<u>demouser</u>	
22 preces 100mil Collsure	Start	24/09/2019	Stop	dd/mm/yyyy	Ħ
	Administration route 🔢	-	Drug type	Regular	•
			Meal relation	No relation	•
Rule dose Single dose every      Measurement unit: mg	Instructions			Show dose as	oieces 🗌
Dose Every Days V	Valome, 25 pieces 100 mg Every Days No relation with meal	Img Capsule			
	Comment			Send comment to 1	

• The user can also leave the units of measure fields empty. He can therefore modify them later and enter the respective values.

Pharmacological prescription					×		
🛆 Aitken Lambert, David 8om 15/08/1952 (67/) Gender 👌 Cod. 39807 Status Active/Hemodialysis 🗈 🖻							
Pharmacological prescription			Cancel	Save Back	00		
Drug <u>Valome</u> …	Status	Active	Next administration				
Active ingredients list  Alinuv/Eriramuf	Doctor	Doctor					
	Reason	Reason			•••		
Product packages Single unit capacity Meas. Unit 25 pieces 100mg Capsule	Last change	24 Sep 2019	User	demouser			
	Start	24/09/2019		dd/mm/yyyy	Ħ		
	Administration route 🚦	-	Drug type	Regular	•		
$\lambda$			Meal relation	No relation	•		
🖪 Rule dose Single dose every 💌 Measurement unit:	Instructions			Show dose as	pieces		
Dose Every Days V	Valome, 25 pieces 100 Every Days No relation with meal	mg Capsule					
	Comment			Send comment to			

**Instructions**: Optional, non-editable field which is automatically filled-in according to the rules and dosages specified for the pharmacological prescription.

Instructions	Show dose as pieces
Fepili, 5pieces 50ml vials - Oral 2 ml All treatments Post-dialysis	

If the user selects a customised units of measure, it is not possible to show dosage by pieces, and the "Show dose as pieces" field is hidden automatically. If a units of measure belonging to a drug catalogue is selected, the

# Show dose as pieces 🗸

the basis of the pack size. If not all fields required for calculation of the number of pieces have been filled in, an information message will be shown. The necessary data are "Weight/capacity of single unit" and the units of measure.

Show dose as pieces 🗸

If the drug is composed of two active ingredients and the user has selected only one package, the word "unit" will appear instead of the weight of the single unit in the instructions.

Instructions	Show dose as pieces 🗸
Fepili, 5pieces 50ml vials - Oral 1/25 of 50 ml All treatments Post-dialysis	

**Comment**: Optional editable field. It can be used to enter a comment on the pharmacological prescription. If the

Send comment to TMON rield is flagged, this comment will be sent to the Therapy Monitor as part of the name of the drug. This "send Comment to TMON" field can be set to always be flagged, configuring the Clinic Manager

		,,	0 0
nd comments of phar prescription to TM	ma with th	e Clinic manager.	
	Comment		Send comment to TMON

✓

**Dose rule**: this section is used to define the rules, doses and frequencies related to the administration mode. It is therefore necessary to distinguish between home therapy and the related dialysis therapy.

- "Home therapy": there are four different administration routes:
  - Multi dose by week: it is possible to set from a minimum of one week (default) up to a maximum of
    eight weeks. The dose can be chosen from Morning, Lunch, Afternoon and Dinner; at least one of
    these values must be inserted. The days of the week for administration of the drug can be selected on
    the right. The number of weeks which appears can vary from one to eight, depending on how many
    have been chosen.

	Morning	Lunch	After		nner		
Dose	5	10	5	10	)		
When	Mo	Tu	We	Th	Fr	Sa	Su
W 1		<b>v</b>		-		~	
W 2		~				~	

• If only one week is chosen, the All days button can be clicked to select all days at once. Once they have selected using this method, they can be deselected all together by clicking the same button again, or individually.

-						ternoon	Dinner				
5	5		1	0	5		10				
Mo	þ	1	Tu		We	Th	Fr		Sa	Su	1
	1		Ŀ	<b>v</b>	~	1 5	/	~	~	~	All da
Mo Tu		ninev.	er and a second						and the second s	[	

• Dose by week: from a minimum of one week (default) up to a maximum of eight weeks can be set. The dose is written directly in the days of the week; at least one dose must be entered.

W1 1 1 2 2	
W 2 2 2 2 2 2	

• Single dose every: the user can set the dose and the "every" field (numerical value) and then one of the time intervals available. "Dose" and "every" are mandatory fields, whereas the time interval is set as "Hours" by default.

Rul	e dose S	ingle dose eve	ry 💌		Measurement unit:	mg	•
Dose	10	Every	3	Days 💌			
				Hours			
				Days			
				Weeks Months			

• Dose free: this is a highly customisable function allowing selection of the number of weeks from a minimum of one to a maximum of eight. A maximum of up to six lines can be set for every week selected. The dose is written directly inside the day fields, and at least once must be entered. The "When" field can be used to enter free text stating when the doses specified in the relative fields must be administered.

Time	Devi		1			Measurem	ent unit: ml	
W	hen Mo	/s 3 ▼	We	Th	Fr	Sa	Su	
W1 [		4						

• Flagging the Time field increases the number of selectable intervals to a maximum of twenty-four, and the field "When" is formatted by default as *HH:mm*.

	When	Mo	Tu	We	Th	Fr	Sa	Su
W 1	00 : 00		4					
	00 : 00							
	00 : 00							

• As needed: a "Minimum dose" and a "Maximum dose" can be specified, for administration in specific conditions that can be entered in the "Condition" free text field

🖸 Rule dose On demand 💌	Measurement unit: ml 💌
Min dose Max dose	
Condition	

• "All dialysis days": this rule indicates that the prescribed doses must be administered on the days when dialysis is performed. The Morning, Lunch, Afternoon and Dinner doses can be entered.

	Morning	Lunch	Afternoon	Dinner	
Dose					ř.
buse	<u></u>				8

• "All non-dialysis days": this rule indicates that the prescribed doses must be administered on the days when dialysis is not done. The Morning, Lunch, Afternoon and Dinner doses can be entered.

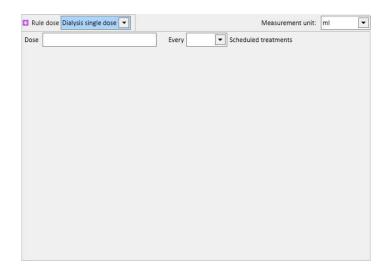
	Morning	Lunch	Afternoon	Dinner	-
Dose					

• "Free text": this rule does not define an administration routine but allows the user to write anything he likes in a free text field.

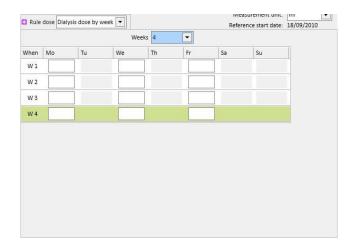
- "Dialysis related therapy": Therapy Support Suite offers a choice of two administration rules:
  - Dialysis dose per week: this type of administration is closely related to the settings made in the "Treatment schedule plan" section. The only days for which it is possible to insert a dose are those for which a treatment has been set in the "Treatment schedule plan" section.
  - In the case of a single-week treatment plan, the drug planning function allows up to eight weeks of planning.

						Week	s 6		•						
Vhen	Mo		Tu		We		Th		Fr		Sa		Su		
W 1	12	×	12	×	10	×	12	×	8	×	12	×	8	×	
W 2	10	×	12	×	11	×	1	×	2	×	5	×	6	×	
W 3	12	×	8	×	8	×	12	×	10	x	8	×	6	×	
W 4	10	x	12	×	5	x	8	×	4	×	10	X	10	X	
W 5	9	×	9	×	11	×	12	×	8	×	8	x	2	x	
W 6	12	×	4	×	4	×	2	×	10	×	12	×	5	×	
W 6	12	x	4	X	4	×	2	×	10	×	12	×	5	X	

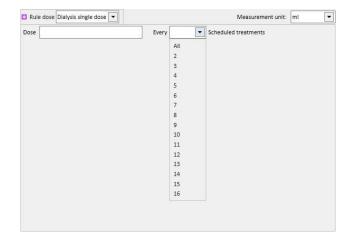
• In the case of a two-week treatment plan, the drug planning permits up to eight weeks of planning, but the user is requested to set a number of weeks which is a multiple of two.



• A green background identifies the current week (based on the treatment schedule plan start date) to help the user manage administrations in case of multi-week rules.



• Dialysis single dose: this administration rule is closely related to the settings made in the "Treatment schedule plan" section. The administration depends on the number of treatments planned and not specific treatment days.



• Month rule: under this rule, the user can set the dose which can be administered once a month if specific conditions are met. Once the "Dose" value has been entered, the user can select at which dialysis treatment (first, second, third or fourth) of which week (first, second, third, fourth or fifth) of the selected months the drug is to be administered. If the selected dialysis treatment number or week number does not occur, the dose will not be administered. The first week of the month is the first full week of 7 days.

The bottom of the therapy screen contains a calendar where the past and future dates for administration of the current medicinal product will be shown, with a five-month time window.

This calendar will display the doses already administered at past treatments (shown in green) and those scheduled for the future (in yellow). Passing the mouse over one of the highlighted days displays the dose administered / scheduled.

Pharmacological press	cription																										×
Hartley, Sarah Born 21/05	/1957 (62y) Ger	ider⊋ Cod. 9	9 <b>3710</b> Sta	tus Acti	ve/Hem	odialysis	26	2																			
Pharmacological prescripti	on																				Edit	Susp	end	Termi	nate	<	
Drug	<u>Geracox</u>												Status	A	Active					Next ad	Iministri	ation	11	Feb 20	)20 (4 mj	g)	
Active ingredients list 🔋	Iraderac												Doctor														
-													Reason														
Product packages										-		Las	t change	2	4 Feb 2	2017						User	De	emo Usa	<u>er</u>		
10pieces 40mg Injection													Start	2	4 Feb	2017						Stop	N	ot defin	ed		
											Admi	nistrati	on route	h	ntramu	iscular					Drug	type	Di	alysis			
																				Adminis	stration	time					
Rule Month rule						leasureme	ot unit:	ma			Instruc	ctions												Show c	dose as p	ieces	
Dose 4 Every Jan Feb Mar Apr		dialysis of the	e second Sep Oc		week						4 m		10pieces / first dia lun														
											Comm	ient											Sen	d comm	nent to T	MON	
July				August					Se	ptemb	ber					00	ctober						No	vembe	r		
	ri Sat Sun 5 6 7	Mon Tu	wed Wed			Sat Sur	Mo	n Tue	Wed	Thu	Fri	Sat	Sun	Mon		Wed 2		Fri 4	Sat 5	Sun 6	Mon	Tue	Wed	Thu		_	Sun
	2 13 14	5 6	5 7	1 8	2 9	3 4 10 11	2	3	4	5	6	7	1 8	7	1 8		22.9	4	5	13	4	5	6	7	12		3 10
	9 20 21	12 13		15	_	17 18	9	_	11	12	13	14	15	14	15			18	19	20	11	12	13	14	_	_	17
	6 27 28	19 20	-	22	-	24 25	16	-	18	19	20	21	22	21	22			25	26	27	18	19	20	21		_	24
29 30 31		26 27	7 28	29	30	31	23	-	25	26	27	28	29	28	29	30	31	_	-		25	26	27	28	29	30	
Today Submitted days	Planned do						30																				
Today Submitted dose	Planned do	se .	_	_	_	_	_	_	_	_	_	_	_	_	_	_	_		_	_	_	_	_	_	_	_	

Displaying the drugs scheduled for a single day

By default only the "normal" dialysis therapies are displayed. It is also possible to see the drugs belonging to the pharmacological therapies prescribed via "Single day scheduling", by deactivating the flag "Show single day drugs" flag.

	Show	single da	y drug	~						
--	------	-----------	--------	---	--	--	--	--	--	--

This will show the list of all drugs scheduled for a single day which are not part of the list of dialysis therapies.

7		Status	From	То	Drug / Active ingredient		Package(s)	ATC code
	P	Active	06 Oct 2011	1	Mitopep - Nunpan		25 pieces 100mg/ml Capsule	A02BC0
		Active	04 Jul 2013		Fepili - Fascox		5pieces 50ml vials	B03XA0
	found		017012013	9				BUSARD
records f ngle day				Drug / Active ing		ATC code	Dose Doctor's name	00000

Clicking on an item in this list will show the scheduled single day for which the prescription was issued.

Therapy Support Sui						V.	RESENIUS						
demouser	Patients	Default Clinic	Reporti	ng		÷.	EDICAL CAR	E			Search i	n Patient	
<b>▼</b> Open patient I	st	<ul> <li>Brennan , Nick</li> </ul>	holas [399489] -	H									
data	1	🛕 Brennan , N	icholas Born 28	/10/1962 (56y) Gen	der 👌 Cod. 39948	Status Active/Hemo	odialysis 🖂						
Patient summary		Pharmacologica	Intescription										Pr
Treatment overview													
Administrative data		List Drug evol	lution history Tin	neline									
Medical data		Regular therapy									Prin	t prescription	Add ne
Hospitalisations											Column 1		
Patient status			Show current drug	only 🗹									
Medical prescription											1		
Patient agenda		<b>F</b>	Status	From	То	Drug / Active in	gredient				Package(s)	ATC co	ode Do
	_		Active	13 Feb	2017	Adolaf - Alinuv					20pieces 1	mI vials NO2B	E01 90
/ascular access													
Treatment prescription		in the second	<b>.</b>								×	le NO2B	E01 21
	gle day planni	ng									^	ml vials BO3X	A01 4.
Freatment schedule plan		Date	13 Oct 2019				Shift	Morning Shift					401 4
harmacological prescript											_	le A02B	CO1 5
lessages		Resource	Room 4 - Bed 1	L		Pres	cription	Alternative Pres	cription			1. BOSY	A01 3
Treatments	Pharmacologica	al therapy										ile DUSA	HUI 3
HD survey	Enabled Drug	/active ingredient		Dosage and frequer	icy		Dose	Measuremer	nt unit	Status			
atories	🗸 👩 Fep	ili - Fascox		2ml All treatment			12	mi		Active			
aboratory test	total and			-					-		_		
aboratory data	Single day there	2011											
aboratory test schedule		/active ingredient		Dose Me	asurement unit	ATC code	Doctor	c name	Last change				
cal Data				1	0						_		
Clinical diary		pnaf - 10pieces 120ml	vials <u>mi</u> × …	5 m		B01AB01	demo	user	26 Sep 201	19			
Allergies	+												
Vaccinations													
Family medical history													Add ne
Germ situation													
Transfusion list													
Comorbidity					Ok Cance								
Specialist examination				-	OK Cance	-							ode Do
Diagnostic test			Active	11160	2015	repiir-rascox					opreces po	nl vials BO3X	A01 6.
Self-sufficency													
Dutpatient clinic visit		1 record found											
Patient medical history													
Amputations													
Clinical case	_												
nlant													
		Single day there	apy .										
Vaiting list		and a day men	Status	Date	Drug / Active i	gredient			ATC o	ode Dose	Doctor's nam	e	
Vaiting list ransplant		<b>G</b>				2239-02240.VV			1000000	0000 (00000000)	demouser	-	
Vaiting list ransplant		F		12 Oct 2010	Adianaf - Alian								
Vaiting list ransplant urotransplant data	_	<b>F</b>	Planned	13 Oct 2019	Adipnaf - Alini	IV			DOIA	5.00			
Waiting list Transplant Eurotransplant data PD access	-	1 record found		13 Oct 2019	Adipnaf - Alini	IV			0014	5.00			
splant Waiting list Transplant Eurotransplant data PD access PD prescription				13 Oct 2019	Adipnaf - Alini	N			BUIA	5.00			
Vaiting list Transplant Eurotransplant data PD access PD prescription PD treatment scheduler				13 Oct 2019	Adipnaf - Alini				BUIA	5.00			
Waiting list Transplant Eurotransplant data PD access				13 Oct 2019	Adipnaf - Alini				DUIA	5.00			

# 9.3.5.2 DRUG EVOLUTION HISTORY

The drug evolution history shows all the drugs administered to the patient in the "Active" or "Terminated" status, grouping them by active ingredient, but always maintaining the distinction between administration at home and administration in dialysis. Unlike the *List* section, this section does not contain the "Add new..." button or the "action" button. However, once the drug has been selected, it is possible to proceed as described in the List section.

List	Drug evolution histo	ory Timeline						
Dru	gevolution history —							
•	Eriramuf (Regular)	1						
	Status	Start	Stop	Drug / Active ingredient	Package(s)	Dosage this week	Dosage and frequency	Nex
	Terminated	10 Oct 2010	05 Oct 2011	Tizeb	50pieces 1mg Tablets	2-4	Morning//0,5mg Afternoon//0,5mg Week 1 Tu Th Sa	1.43
•	Fascox (Regular)	2						
	Status	Start	Stop	Drug / Active ingredient	Package(s)	Dosage this week	Dosage and frequency	Nex
	Active	11 Feb 2015		Fascox	12 mg Effervescent Tablets	220.00 mg	12 - 0 - 32 - 0 mg Mo We Th Sa Su	25 - 0
	Terminated	01 Jun 2012	10 Feb 2015	Fascox	12 g Effervescent Tablets	121	12 - 0 - 32 - 0 g Mo We Th Sa Su	23
~	Fascox (Dialysis)	3						
	Status	Start	Stop	Drug / Active ingredient	Package(s)	Dosage this week	Dosage and frequency	Nex
	Active	04 Jul 2013		Fepili	Spieces 50ml vials	84.00 ml	12 ml All treatment	24
	Terminated	10 Oct 2010	03 Jul 2013	Fepili	Spieces 50ml vials	5-8	2ml Every 1 treatment	1040
	Terminated	05 Oct 2010	09 Oct 2010	Fepili	Spieces 50ml vials			
$\odot$	Nunpan (Dialysis)	1						
	Status	Start	Stop	Drug / Active ingredient	Package(s)	Dosage this week	Dosage and frequency	Nex
	Active	06 Oct 2011		Mitopep	25 pieces 100mg/ml Capsule	74.00 mg/ml	W 1 Mo: 12 Tu: 12 We: 10 Th: 12 Fr: 8 Sa: 12 Su: 8 mg/ml W 2 Mo: 10 Tu: 12 We: 11 Th: 1 Fr: 2 Sa: 5 Su: 6 mg/ml See more.	24

7 records found

# 9.3.5.3 TIMELINE

This section contains a graphic overview of the pharmacological therapies administered to the patient. By simply reducing or increasing the width using the mouse on the blue border, it is possible to resize the time window in order to examine a smaller (or longer) period of time in detail.

ist	Drug evolution history	Timeline							
		Drug type			•	Show cur	rrent drugs only 🗌		
	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Drug name			012 201		2015	2016	2017 2018	2019
¥	Eriramuf	Regular	<b>⊢</b>						
	Tizeb								
¥	Fascox	Regular				_			
	Fascox			-		_			
¥	Fascox	Dialysis							
	Fepili								
¥	Nunpan	Dialysis	-						
	Mitopep		-						

The blue bar can be moved to the left or right to inspect all available dates.

It is possible to filter the drug type by administration route, home or dialysis.

	Drug evolution history	Timeline									
		Drug type		6		•	Show cur	rent drugs only	]		
Į.	2011	2012	Dialysis Regular			5	2016	2017		2018	2019
-			2011	2012	2013	2014	2015	2016	2017	2018	2019

It is also possible to exclude those drugs whose last status is "Terminated" from the overview.

.ist	Drug evolution history	Timeline									
		Drug type					Show cur	rent drugs only 🗹		ß	
6	2011	2012	2013	2014		2015	2016	2017		2018	2019
			2011	2012	2013	2014	2015	2016	2017	2018	2019

Drugs are grouped by active ingredient, with the active ingredient shown; the selection must be expanded to see the commercial name of the drug.

ist	Drug evolution history	Timeline							
		Drug type			•	Show current	drugs only		
1	2011	2012	2013	2014	2015	2016	2017	2018	2019
	Drug name		2011	2012	2013 2014	2015	2016	2017 2018	2019
	Drug name		uuluuuu	uluuuuu	duuuuuuluuu	minhimm	mhiiniinii	duuuuuuuuuu	uuuluu
¥	Eriramuf	Regular	uuluuuu 		diminidimi			1	mmhm

For generic drugs, the active ingredient will always be displayed.

A continuous line indicates that the patient is currently taking the drug.

Empty parallel lines indicate that the drug is currently "Suspended".

No line indicates that the drug has not been and or is not currently being administered.

Moving the mouse above the line displays the name of the drug and the active ingredient, the dose, the units of measure and the package type (vial, capsule, etc.).

harm	acological prescription	on									Prin
List	Drug evolution history	Timeline									
		Drug type				•	Show curr	ent drugs only			
6	2011	2012	2013	2014	4	2015	2016	2017	20	18	2019
	Drug name		2011	2012	2013	2014	2015	2016	2017	2018	2019
•	Eriramuf	Regular	<u> </u>								
V	Fascox	Regular		-			-				
	Fascox			<u> </u>			-				

st	Drug evolution history	Timeline								
		Drug type			•	Show cur	rrent drugs only	]		
1	2011	2012	2013	2014	2015	2016	2017	2018		2019
	Drug name		2011	2012 2013		2015	2016	2017	2018 1.1.1.1.1.1	2019
	Alinuv	Regular								
	Adolaf							-		
	Alinuv									
×	Fascox	Regular						<b>—</b>		
•	Fascox	Dialysis				-				
•	Nunpan	Regular								

If the same active ingredient is prescribed two or more time, it will be displayed in the following manner.

# 9.3.5.4 RELATIONSHIP BETWEEN PHARMACOLOGICAL PRESCRIPTION AND TREATMENT PLANNING

As mentioned in *section 9.3.4.3*, there is a strong correlation between the pharmacological prescription for dialysis treatment and the treatment schedule plan. Below, we will see in detail what happens if the treatment schedule plan is modified.

**Removal of one or more days from the treatment schedule plan**: When a new treatment schedule plan is saved the following message appears which informs us that the drug prescription must be reviewed.

-	Warning:	100885
Phi	armacologic	al prescription has to be reviewed
		- OK

If a "Group of doctors" was specified during the clinic configuration, every member of this group will receive a message in their Inbox advising them that the pharmacological therapy must be reviewed.

If any field in the pharmacological prescription menu is clicked, a red error message will appear as the first line in the window. The status of dialysis therapies in "Active" status for which "Dialysis dose by week" administration rules were selected will be changed to "To be reviewed", and below the "Dosage and frequency" column the days which are no longer planned (after the change to the treatment schedule plan) will appear with a bar through them. For dialysis therapies with "single dialysis dose" rule, changing the number (or detail) of the scheduling days has no impact.

	Sho	ow current drug only 🔽	]		Show single day drug	
3		Status	From	То	Drug / Active ingredient Package(s)	ATC code
0	•	To be reviewed	06 Oct 2011	1	Mitopep - Nunpan 25 pieces 100	mg/ml Capsule A02BC0
	0	Active	04 Jul 2013		Fepili - Fascox Spieces 50ml	vials B03XA0

2 records found

If a drug is in "Suspended" status, it retains this status as it is currently not being administered to the patient. Only when it is reactivated does it change to "To be reviewed" status (unless the user has adapted the pharmacological prescription to the treatment plan schedule while it was suspended).

Once the drug to be reviewed has been selected and edited, the field corresponding to the day removed is highlighted in red, and the only operation possible in that field is removal of its contents.

1       2       3       1       2       3       4       5       6       7       8       9       10       11       12       13       14       5       6       7       8       9       10       11       12       13       14       15       16       17       18       19       20       21       22       23       24       25       26       7       8       9       10       11       12       13       14       15       16       17       18       19       20       21       23       24       25       26       7       8       9       10       11       12       13       14       15       16       17       18       19       20       21       23       24       25       26       27       28       9       10       11       12       13       14       15       16       17       18       19       20       11       12       13       14       15       16       17       18       19       20       11       12       13       14       15       16       17       18       19       20       11       12       13 <th></th> <th>ological</th> <th>prescriptio</th> <th>n</th> <th></th> <th>_</th> <th>Edit</th> <th>1.14</th> <th></th>		ological	prescriptio	n																								_	Edit	1.14	
Note depending and dependent of packages:       Implicit packages:       Series 100mu/mi (appuke)       Barging and dependent of packages:       Series 100mu/mi (appuke)       Colspan="2">Colspan="2"       Series 100mu/mi (appuke)       Colspan="2"       Series 100mu/mi (appuke)       Colspan="2"       Series 100mu/mi (appuke)       Coll Series 100mu/mi (appuke)       Series 100mu/mi (appuke)       Coll Series 100mu/mi (appuke)       Coll Series 100mu/mi (appuke)       Series 100			Drug	<u>Mitopep</u>													Statu	s	To be re	viewed			N	lext adr	ninistra	ation	3:	1 May	2019 (2	mg/m	ıl)
Induication color series       Induication color series       Induication color series       State change       Administration color series       Administration color series       State change       Administration color series       Administration cols series         Administration cols series       State change       Administration cols series       Administration cols series         Administration cols series       State change       Administration cols colspan="4"       Administration	Activ	e ingredie	nts list 🔢	Nunpan	1									_			Docto	r	<u>Doctor</u>												
Z BERCER JOOMALINI Consults     Statu     06 OC 2011     Sop     Not defined       Rule dove     Dialy15 dove by week     Messurement unit: mg/m     Rule dove     Dialy10 dove by week     Sov     Dialy2     Dialy2     Dialy2       Week     0     0     0     0     0     0     Sov     Sov     Bioly10 dove by week     Sov     Sov     Dialy12     Sov     Dialy2     Dialy2 <t< td=""><td>roduct</td><td>packages</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td>T</td><td></td><td></td><td></td><td>Ĩ</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></t<>	roduct	packages									T				Ĩ																
I cale     Control     Cale     Dury res     Dalyis       1 cale     0 cale	<u>25 pi</u>	ces 100m	q/ml Capsu	e							1.00					La												1.000.0077			
Additional control of the second of the sec																	Star	t	06 Oct 2	011						Stop			ned		
Instructions       Measurement unit. mg/ml Reference start date: 10/10/2010       Instructions       Start date: 10/10/2010         Instructions       Start date: 10/10/2010         Measurement unit. mg/ml m1       Instructions       Instructions       Start date: 10/10/2010         Measurement unit. mg/ml m2       Ne for 10       Ne for 10       Start date: 10/10/2010         Measurement unit. mg/ml m2       Ne for 10       Ne for 10       Start date: 10/10/2010         Measurement unit. mg/ml m2       Ne for 10       Ne for 10       Ne for 10       Start date: 10/10/2010         Measurement unit. mg/ml m2       Measurement unit. mg/ml m2 <td></td> <td>Ac</td> <td>Iministra</td> <td>tion route</td> <td>e</td> <td><u>Oral</u></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Drug</td> <td>type</td> <td>Di</td> <td>ialysis</td> <td></td> <td></td> <td></td>															Ac	Iministra	tion route	e	<u>Oral</u>						Drug	type	Di	ialysis			
Number dose         Dialyzis dose by weik         Reference start date:         10/10/2010         Minoleceles         Min																							A	dminist	ration	time					
Mitope, 25 jaces journg/mit Lapsule - Ural         Mitope, 25 jaces journg/mit Lapsule - Ural       Mitope, 25 jaces journg/mit Lapsule - Ural       Mitope, 25 jaces journg/mit Lapsule - Ural         W1       12       10       12       8       3u       3u       8u       3u         W1       12       10       12       8       12       8       3u       3u       8u       3u       12       8u       12       10       12       8u       12       8u       12       10       12       8u       12       8u       6u       10       10u       10u       8u       6u       10u       10u       10u       10u       10u       10u       8u       6u       10u       10u       10u       10u       10u       10u       8u       6u       10u	Rule	lose Dial	/sis dose by	week																								Show	dose a	s piece	.15
When         No         Tu         Wee         Th         Fr         Sa         Su           W1         12         0         10         12         8         12         8           W2         10         10         11         1         2         5         6           W3         12         8         12         10         8         6           W4         10         10         5         8         4         10         10         9         9         9         9         11         12         8         6         7         8         8         2         6         7         8         7         8         6         7         8         6         7         8         7         8         6         7         8         7         8         7         8         7         8         7         8         7         8         7         8         7         8         <					Weeks	6									V	/1 Su: 8	Mo: 12	, Tu: 12	, We: 1	0, Th: '	12, Fr.	8, Sa:									
W1       12       10       12       8       12       8         W2       10       12       1       1       2       5       6         W3       12       1       1       2       5       6         W4       10       12       5       8       10       10       5       8       6         W4       10       12       5       8       4       10       10       5       5       8       6       7       8       8       2       10       12       5       5       8       6       7       8       8       12       10       12       5       5       8       6       7       8       8       10       1	/hen	Mo	Tu	We		Th	Fr		Sa		Su				V	/3 Su: 6	, Mo: 12	, Tu. 8,	We: 8,	Th: 12,	Fr. 10	, Sa:	3 mg/m	l l							
W2       10       12       11       1       2       5       6         W3       12       2       8       12       10       8       6         W4       10       22       5       8       4       10       10       9       9       9       9       9       9       9       11       12       8       8       2       9       9       9       9       12       1       12       10       12       5       8       4       10       12       5       8       12       10       12       5       10       12       5	W 1	12	12	10	8	12	8		12		8				V	15 Su: 2	, Mo: 9,	Tu: 9, V	Ve: 11,	Th: 12,	Fr. 8,	Sa: 8	mg/ml								
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W5       9       11       12       8       8       2         W6       12       4       2       10       12       5         M6       12       8       8       2       12       13       14       15       16       7       8       2       16       7       8       9       10       11       12       13       14       15       16       17       18       9       10       11       12       13       14       15       15       16       16       12       13       14       15       15       16       16       16       12       12       13       13       14       15       16       16       16       17       18       9       10       11       12       13       14       15       16       7       88       9	W 3	12	3	8		12	10		8		6				CO	milene											Jen	iu com	incire te	- TIMO	
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4       5       6       7       8       9       10       11       12       13       14       15       16       17       18       9       10       11       12       13       14       15       16       17       18       19       20       21       22       23       24       25       26       27       28       9       10       11       12       13       14       15       16       17       18       19       10       11       12       13       14       15       16       17       18       19       10       11       12       13       14       15       16       17       18       19       10       11       12       13       14       15       16       17       18       19       10       11       12       13       14       15       16       17       18       19       10       11       12       13       14       15       16       17       18       19       10       11       12       13       14       15       16       17       18       19       10       11       12       13       14       15       16			March					April						N	Лау					1	une							July			
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			Thu Fr	2	3	1	2 3	d Thu 4	5	6	7			Wed 1	Thu Fi 2 3	4	5			Wed	Thu		1	2	1	2	3	Thu 4	5	6	(
15 26 27 28 29 30 31 29 30 21 29 30 21 27 28 29 30 31 24 25 26 27 28 29 30 31	4	5 6	Thu         Fr           1         1           7         8	2 9	3 10	1 8	2 3 9 10	d Thu 4 11	5 12	6 13	7 14	6	7	Wed 1 1 8	T <mark>hu Fi</mark> 2 3 9 1	4 0 11	5 12	3	4	Wed 5	Thu 6	7	1 8	2 9	1	2 9	3 10	Thu 4 11	5 12	6 13	S

The drug does not become active again until the user removes the day and saves.

Addition of one or more days to the treatment plan schedule: when the new treatment plan schedule is been saved the following message appears informing the user that it is necessary to review the drug prescription.



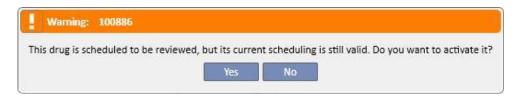
If a "Group of doctors" was specified during the clinic setup, every member of this group will receive a message advising them that the pharmacological prescription must be reviewed.

If the user then clicks on the pharmacological prescription menu item, a red error message appears on the bar above the three tabs. For the drugs in Active status and for those for which administration days have been specified, the drug status changes to "To be reviewed". For drugs with the every number of treatments rule, modifying the number of days of scheduling has no impact.

Some prescriptions have to be reviewed  List Drug evolution history Timeline  Regular therapy  Show current drug only  Show current drug only  From To Drug / Active ingredient Package(s)  Active 11 Feb 2015 Fascox 12 mg Effervescent Tab  I record found	
Print prescription         Print prescription         Show current drug only I       Image: Colspan="2">Print prescription         Status       From       To       Drug / Active ingredient       Package(s)         Active       11 Feb 2015       Fascox       12 mg Effervescent Tab         1 record found       11 record found       12 mg Effervescent Tab	
Show current drug only Status From To Drug / Active ingredient Package(s) Active 11 Feb 2015 Fascox 12 mg Effervescent Tab 1 record found	
Status     From     To     Drug / Active ingredient     Package(s)       Active     11 Feb 2015     Fascox     12 mg Effervescent Tab	n Add new
Active 11 Feb 2015 Fascox 12 mg Effervescent Tab	
1 record found	ATC code
	lets B03XA01
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Dialysis related therapy	Add new
Show current drug only 🗹 Show single day drug 🗆	
Status         From         To         Drug / Active ingredient         Package(s)	ATC code
I to be reviewed 06 Oct 2011 Mitopep - Nunpan 25 pieces 100mg/ml Ca	psule A02BC0
Active 04 Jul 2013 Fepili - Fascox Spieces 50ml vials	B03XA0
2 records found	

If a drug is in "Suspended" status, it remains in that status as it is currently not being administered to the patient. Only when it is reactivated does it change to "To be reviewed" status (unless the user has adapted the pharmacological prescription to the treatment plan schedule while it was suspended).

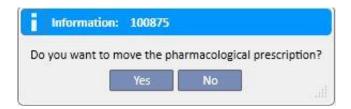
Once the drug to be reviewed has been selected and edited, a new pop-up will appear warning that the drug is in to be reviewed status, but its current pharmacological prescription is still valid because a day has been added, and therefore the user will be asked if he wants to render it active.



If the user clicks on "Yes" the drug automatically becomes active, but the field corresponding to the added day is left empty. It is then the responsibility of the user to enter the correct dose.

Pharn	nacol	ogica	al pre	escrip	otion	le:																												×
🛆 Ait	ken La	mbert	, Dav	id Bo	orn 15/	08/195	2 (65y)	Gende	rd <sup>a</sup> c	od. 398	07 Sta	tus Act	ive/Her	nodialy	sis 📴																			
Pharm	acolog	gical p	rescrij	ption																								Edit	Susp	end	Termi	inate		
			Drug	М	itopep															Statu	5	Active					Next ac	dministr	ation	1	B Nov 2	017 (12	2 mg/m	0
A	tive ing	redient	ts list		unpan	01											٦			Docto	r	Doctor												
				3																Reason	1													
	uct pack																_		Las	t change		16 Nov	2017						User	p	emouse	r		
2	5 pieces	s 100m	a∕mi C	<u>apsule</u>																Star		06 Oct	2011						Stop	N	ot defin	ed		- 1
																		Admi	nistrati	on route		Oral						Drug			ialysis			-1
																											Admini	stration			all			- 1
-											M	easure	ment ur	nit: mg	/mi			Instruc	tions								Admin	Struction	unite		show do	ose as r	leces	
Ru	ile dose	Dialy:	sis dose	e by we	eek						Refe	erence	start da	te: 10/	10/201	10				5 piece:	s 100m	g/ml C	apsule	- Ora	I									-
						Weeks	5 6											W17		Sa: 12		1												
Whe	n Mo		Tu		We		Th		Fr		Sa		Su					W3 7	Th: 12	mg/ml mission														
w	1						12				12							W5 7	Th: 12	mg/ml														
w	2						1											W0 3	58:12	mg/ml														
w	3						12											Comm	ent											Send	comme	ent to T	MON	
w	4																																	
w	38						12							-																				
							12				192			_																				
W	ь										12																							
	- 1		ptemb	<u></u>				-		October			-				ovemb					-		cembe			_		-		anuary			
Mon	Tue	Wed	Thu	Fri 1	Sat 2	Sun 3	Mon	Tue	Wed	Thu	Fri	Sat	Sun 1	Mon	Tue	Wed	Thu 2	Fri 3	Sat 4	Sun 5	Mon	Tue	Wed	Thu	Fri 1	Sat 2	Sun 3	Mon 1	Tue 2	Wed 3	Thu 4	Fri 5	Sat 6	Sun 7
4	5	6	7	8	9	10	2	3	4	5	6	7	8	6	7	8	9	10	11	12	4	5	6	7	8	9	10	8	9	10	11	12	13	14
11	12	13	14	15	16	17	9	10	11	12	13	14	15	13	14	15	16	17	18	19	11	12	13	14	15	16	17	15	16	17	18	19	20	21
18	19	20	21	22	23	24	16	17	18	19	20	21	22	20	21	22	23	24	25	26	18	19	20	21	22	23	24	22	23	24	25	26	27	28
25	26	27	28	29	30		23	24 31	25	26	27	28	29	27	28	29	30				25	26	27	28	29	30	31	29	30	31			-	_
Toda	av 🕐	Submit	ted do	se	Plann	ed dose	L	31																										
1.500	. 🗸			650 -	, with								_	_													_							

**Movement of days within the treatment plan schedule, but without changing the number of days**: when the new treatment planning is saved the following message appears, asking the user if he wants to change the pharmacological prescription.



If the user clicks "No", the pharmacological therapies affected by the modification are put in "To be reviewed" status and it will be the responsibility of the user to organise the therapies manually using the Pharmacological prescription menu item. If the user clicks "Yes", Therapy Support Suite opens a new window offering an arrangement of the new pharmacological prescription; it is the responsibility of the user to accept it as it is, or to modify it as required. Finally, if the user clicks "OK" the drug will switch to "Active" status. If he clicks "Cancel", the drug will remain in "To be reviewed" status.

										Drug	Mitopep	
											Measurement unit: mg/	'mi
Rule	dose Dia	alysis dose by wee	ek 🛛								Reference start date: 10/2	
			Wee	ks 6								
hen	Mo	Tu	We	Th	Fr	Sa	Su					
N 1		12		12		12						
N 2		12		1								
N 3		12		12								
W 4		12		1								
N 5		12		12				1				
ME		15		12		12		-				
W 6		12		12		12		-				
elow tatus	'to be revi						oosal before con	iming and save	the new rule. If yo	u click on the	cancel button the related prescription v Measurement unit: mg Reference start date: 10/	/ml 💌
ielow tatus	'to be revi	iewed'.	k		scheduling.		oosal before con	iming and save	the new rule. If yo	u click on the	Measurement unit: mg	/ml 💌
elow tatus Rule	'to be revi	iewed'.	k	n of the drug			sosal before con	fiming and save	the new rule. If yo	u click on the	Measurement unit: mg	/ml 💌
elow tatus Rule hen	'to be revi	iewed'. lysis dose by wee	k We	n of the drug	▼ Fr	Review the prop	Su	iming and save	the new rule. If yo	u dick on the	Measurement unit: mg	/ml 💌
ielow tatus Rule	'to be revi	iewed'. lysis dose by wee	k We	n of the drug eks 6	Fr	Review the prop	Su	iming and save	the new rule. If yo	u dick on the	Measurement unit: mg	/ml 💌

The system opens one window for each of the drugs affected by the modification to the treatment plan schedule.

### 9.3.5.5 RELATION BETWEEN PHARMACOLOGICAL PRESCRIPTION AND TREATMENT SCHEDULE PLAN

Whenever a Treatment schedule plan for the future is created, the pharmacological therapies with "Dialysis dose per week" rule are switched to the "To be reviewed" status only if the new planning changes the current pattern and only if the number of days set in the "configuration parameters" of the master data have been reached.

When the pharmacological therapies in "To be reviewed" status are opened, it can be seen that the administration rule in the "Dose Rule" section is different for the current treatment plan schedule and each of the planned schedule plans created in the treatment schedule plan menu.

Pharmacolog	ical pres	criptior	1																										×
🛆 Metcalfe , Jo	onathan	Born 04/1	1/1940	[ <b>78</b> γ) Ge	ender C	3 <sup>7</sup> Cod.	16821	Status I	ctive/He	modialy	is 🖂	٢																	
Pharmacologica	l prescripti	ion																					Cancel		Delete				
	Drug												•••			Statu	s ·	To be re	viewed			Next a	administ	ration					
Active ingred	ients list	Fascox														Docto	r [	Doctor											•••
-													-			Reason	n [	Reason											
Dose	Meas. Unit	t		Pharma		al form							_		Last	t change		28 Feb :	2017					User	D	emo Us	<u>er</u>		
4	mg		•	Inject	tion						•					Star	t [	01/06/	2012		Ħ			Stop	0	ld/mm/	vvvv		Ħ
+														Admii	nistratio	on route	. [	ntramu	scular		•		Druj	type	D	ialysis			
																						Admin	nistration	ı time	P	lease se	lect one	entry	•
🚦 Rule dose Dia	lucis doso hu	uwaak 👻	1						isuremer	L		•		Instruc	tions											Show	dose as	pieces	
		y week						Refer	ence star	t date: 1	7/09/20	10							nuscular										
From today to 3					Weeks		- And							TU: 4	45, <i>Th</i> :	45, Sa	: 45 mg	1											
When Mo	Tu	We		Th		Fr		Sa .	Su																				
W1	45	×		45	×	-		45 3	<					Comm	ent										Ser	id comr	nent to	TMON	
					F																								
From 01/06/201					/eeks 1		•																						
When Mo	Tu	We		Th		Fr	S	ia -	Su																				
W1														L															-
	March						April						May						Ju	ine						July			
Mon Tue We	d Thu F	Fri Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat Su	n Mo	n Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed T	hu Fi	ri Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun
		1 2	3	1	2	3	4		6 7		1	1	2	3	4	5				11	1	2	1	2	3	4	5		7
4 5 6		8 9	10	8	9	10		_	13 14		7	8	9	10	11	12	3	4		6 7		9	8	9	10	11			14
11 12 13 18 19 20		15 16 22 23	17 24	15 22	16 23	17 24			20 21 27 28	-	14	15 22	16 23	17 24	18 25	19 26	10	11 18	10000	13 1 20 2		16 23	15	16 23	17 24	18 25	19 26		21 28
25 26 27		29 30	31	29	30	-4				27	28	29	30	31		2.5	24	25	0.000	27 2	10 CTC 20	30	29	30	31		2.0		
🚩 Today 🔵 Sub	mitted dose	Plan	ned dose	-																									



#### Note

A message informs the doctor whenever:

A prescribed drug causes interactions with a drug which has already been administered;

The patient is allergic to one or more active ingredients in the drug;

An active ingredient which the patient is already taking is being prescribed.

The drug catalogue is being modified.

# 9.3.5.6 DOSE CHANGE PLANNING

An administration rule for the future can be planned for active therapies using the "Plan a dose change" button, as shown in the screenshot below.

Shov	v current drug only 🗹	She	ow single day drug			
osage this week	Dosage and frequency	Next administration	Doctor's name	Comment	Action	
62.00 mg/ml	W 1 Su: 8 Mo: 12 Tu: 12 We: 10 Th: 12 Fr: 8 So: 12 mg/ml W 2 Su: 6 Mo: 10 Tu: 12 We: 11 Th: 1 Fr: 2 So: 5 mg/ml See more	24 Sep 2019 (12 mg/ml)	Doctor		Suspend Plan a dose change	
72.00 ml	12 ml All treatment	24 Sep 2019 (12 ml)	Doctor		Suspend Plan a dose change	

Then a pop-up window opens where it is possible to specify the new administration rule, the date on which the dose change will take effect for the drug in question and add a comment; this last field will take the value present in the latest active version of the prescription.

Dosa	ge change	planning									×
			Drug						Active ingredients list	Fascox	
			Start	01/10/201	9		E		Next administration	01 Oct 2019 (45 mg)	
Rule	e dose Dialysis	dose by week	. •				nent unit: start date:	mg 💌 17/09/2010	Comment		
	1	1	Weeks								
When W 1		Tu 45 🗙	We	Th	Fr	Sa 45 🗙	Su				
							ОК	Cancel			

Once all the information has been inserted, if the user clicks "OK" the change in dose is created and the pharmacological therapy is modified as follows:

The active therapy for which the dose change has been planned is given a termination date, which is the same as the date for the start of the change of dose created previously less one day

A new pharmacological therapy for the same drug is created with "Planned" status, with the data entered previously.

	Sho	ow current drug only	$\checkmark$		Show single day drug		
7		Status	From	То	Drug / Active ingredient	Package(s)	ATC code
	P	Active	06 Oct 2011		Mitopep - Nunpan	25 pieces 100mg/ml Capsule	A02BC0
	•	Active	04 Jul 2013	06 Jun 2019	Fepili - Fascox	Spieces 50ml vials	B03XA0:
	0	Planned	07 Jun 2019		Fepili - Fascox	Spieces 50ml vials	B03XA0

#### 9.3.5.7 SENDING PHARMACOLOGICAL THERAPY TO THERAPY MONITOR

If the Therapy Support Suite is connected to the Therapy Monitor and a new session is started on the Therapy Monitor, as a general rule the following pharmacological therapy is sent to the Therapy Monitor:

- Dialysis therapy: all dialysis prescriptions in "active" or "to be reviewed" status required for the given date are sent and may be accepted by Therapy Monitor, except those marked as "as needed" (having the "Delivery Time" field filled in with the value "as needed").
- Home therapy: all active home prescriptions are sent but cannot be accepted by Therapy Monitor, except for those marked as "as needed" (having the "Dosage rule" field filled in with the value "As needed"), which can be passed if specified in the "Configuration parameters" of the "Master data" section (see Service Manual section 4.1.1).
- Therapy as needed: both therapies described in the previous points are sent in this "As needed" category, precisely when marked "as needed".

Example of home drug therapy marked as "as needed":

Pharmacolog	gical preso	ription							×
🛕 Aitken Laml	bert, David	Born 15/08/19	52 (67y) Gender 🗗 Cod. 3980	7 Status Active/Hemodialysis	<b>İ</b>				
Pharmacologica	al prescripti	on					Cancel	elete Save	
	Drug				Status	Active	Next administration		
Active ingred	dients list 🔢	Fascox			Doctor	Doctor			
	-		Tanan ang ang ang ang ang ang ang ang ang		Reason	Reason			•••
Dose	Meas. Unit		Pharmaceutical form		Last change	24 Sep 2019	User	nurse1	
+	mg	<b>▼</b>	Effervescent Tablets	•	Start	11/02/2015	Stop	dd/mm/yyyy	Ħ
					Administration route		<ul> <li>Drug type</li> </ul>	Regular	
							Meal relation	No relation	•
Rule dose Or	n demand 💌			Measurement unit: mg	▼ Instructions			Show dose as	
Min dose 22 Condition		Max dose 25		mg	Fascox, 12 mg, Effe Min dose: 22 mg - N No relation with me				
					Comment			Send comment to	
		_	_	_	_	_	_	_	

Example of intradialytic drug therapy marked as "as needed":

Pharmacological preso	ription																								×
🛕 Aitken Lambert , David	Born 15/08/19	52 (67y) Ger	nder 👌 🤇	od. 398	07 Statu	s Active	/Hemo	dialysis	T	3													_		
Pharmacological prescription	on																		ĺ	Cancel	D	elete	Save		
Drug	<u>Fepili</u>								×	•••			Statu	5	Active				Next a	dministr	ation	24 Se	p 2019 (12	! ml)	
Active ingredients list 🚦	Fascox												Docto	r [	Doctor									×	•••
-							1						Reaso	ו ר	Reasor	1								[	•••
Product packages <u>5pieces 50ml vials</u>							-			-		Las	t chang		24 Sep	2019					User	demo	user		
+													Star	t [	04/07	/2013		Ħ			Stop	dd/n	nm/yyyy	E	Ш
L											Admi	inistrati	on rout	: [	<u>Oral</u>			•		Drug	type	Dialys	sis		
																			Admin	istration	time	On de	emand	[	•
Rule dose Dialysis single de	ose 🔻				N	easurer	ment un	it: ml	-	•	Instru	ctions										Sh	ow dose as	s pieces 🗌	]
Dose 12		Every A	JI [•	• Sche	duled tr	eatmen'	ts				12 r		eces 50 eatmer d		s - Ora	al									
											Comm	nent										Send co	omment to		
July				August						Septem	ber				_	Oc	tober					Nove	nber		
Mon         Tue         Wed         Thu         Fi           1         2         3         4         5		Mon Tu	ve Wed	Thu 1	_		un M	/lon Tu	e Wea	d Thu	Fri	Sat	Sun 1	Mon	Tue 1		Thu Fi	_	Sun 6	Mon	Tue	Wed Th	u Fri	Sat Su	un 3
8 9 10 11 1		5 6	5 7	8				2 3	4	5	6	7	8	7	8		3 4 10 1	-	13	4	5	6 7	-		3 10
15 16 17 18 1	9 20 21	12 13	3 14	15	16	17 1	.8	9 1	0 11	12	13	14	15	14	15	16	17 1	8 19	20	11	12	13 1.	4 15	16 1	17
22 23 24 25 2	5 27 28	19 20	-	22				16 1	_		20	21	22	21	22		24 2	5 26	27	18	19	20 2		-	24
29 30 31	- 24 	26 2	7 28	29	30	31		23 2. 30	4 25	26	27	28	29	28	29	30	31			25	26	27 2	8 29	30	
Today Submitted dose	Planned dos		_							_		-												_	_

For more information, refer to paragraph 3.7.

Some notes about sending the prescription drug to the Therapy Monitor:

 By ticking the "Send comment to TMON" checkbox in the details of the therapy itself, that comment will be concatenated with the description of the prescription pharmacologically sent to Therapy Monitor.

If the description of the pharmacological therapy exceeds the maximum number of characters provided for by Therapy Monitor, the special character [\*] will be placed at the beginning of the description to alert the user about possible loss of information.

#### 9.3.6 MESSAGES

"Messages" is a list of instructions which can be sent to Therapy Monitor to allow procedures to be performed on the patient during dialysis treatments. These operations are not included in the dialysis prescription.

#### 9.3.6.1 DISPLAYING PATIENT MESSAGES

Clicking "Messages" on the patient menu displays all the medical orders associated with the patient.

Message	25				N	ew See delete	d entities Export Excel	Print
Sh	ow current med	ical orders only 🔽						
	Status	Message	From	То	Schedule		Next schedule date	D
F	Status Active	Message Check blood pressure at dialysis end"	From 13 Feb 2017	То	Schedule Every week on first	Dialysis	Next schedule date 29 Sep 2019	D

The view permits users by using the "Show current medical orders only" filter, the user can display all the medical orders or only the active ones.

Messages are active if their start date is in the past and the end date is missing or in the future.

Active medical orders can be suspended by specifying the suspension start date. When a medical order is suspended, the message will not be sent to Therapy Monitor even if the rule is valid.

The user can remove suspensions if the suspension start date is in the future. Suspended medical orders can be reactivated. The reactivation date may be in the future.

Messages with start date in the future are in "Planned" status. When the start date is reached they will be activated automatically.

When the end of validity date is reached, the message will be automatically terminated and it will no longer be possible to send the message to Therapy Monitor.

Suspensions can be applied directly from the message list using the buttons in the "Action" column, or by opening the individual message.

A new message can be created by clicking the "New..." button.

The messages that have the "Valid for unscheduled treatments" field selected, will be linked to all treatments received by the patient, even those not scheduled according to the patient's weekly plan. The display of the list of all valid patient messages will differ from the others because an image of a double arrow positioned by default at the beginning of the line.

# 9.3.6.2 CREATING A NEW MESSAGE

	ssages			Suspend Edit	Open entity log Print	
Start     13 Feb 2017     End       Doctor     Image: Check blood pressure at dialysis end"       id for unscheduled treatments     Image: Check blood pressure at dialysis end"	Last change	24 Feb 2017		User	Demo User	
Doctor Message Check blood pressure at dialysis end" id for unscheduled treatments le Week rule	Status	Active		Next schedule date	29 Sep 2019	
Message Check blood pressure at dialysis end" id for unscheduled treatments le Week rule	Start	13 Feb 2017		End		
id for unscheduled treatments	Doctor					
le Week rule	Message	Check blood pressure at dial	ysis end"			
	lid for unscheduled treatments					
ery week from the beginning of the year on first dialysis of the week	ule Week rule					
	erv week from the h	eginning of the year on first	dialysis of the week			

When a message is saved, the **User** and the **Last change** fields are filled in with the name of the user who performed the operation and the date of the change, respectively:

The **Start date** and the **End date** indicate the message's validity period. The **Status** depends on the values of these two dates and any suspensions present.

The **Next date** only appears if the message is in **Active** or **Planned** status. A value will also appear in this field for messages that are suspended but for which a future reactivation has already been entered. This field indicates the next time the medical order will be forwarded.

The **Message** is the contents which will be sent to Therapy Monitor and contains the instructions to be carried out on the patient.

The **Rule** establishes the dialysis sessions at which medical orders are to be sent.

Note



To help the user fill in the fields correctly, Therapy Support Suite provides step by step prompts in this section.

The user has to complete editable fields to activate the read-only ones.

#### Rules

A Message is sent to Therapy Monitor when it is active and its rule is met, meaning that when the calculated recurrence corresponds to the performance of a treatment (the valid messages for unscheduled treatments will always be sent).

As mentioned, the "Valid for unscheduled treatments" field replaces any type of rule and hides the possibility to select one.

When a Message is defined, if the field has not been checked, one of the five rules available should be selected and configured:

- Every treatment rule: The message is sent to Therapy Monitor by counting the patient's planned dialysis sessions. The message may be sent at every treatment, every two treatments, every three treatments and so on, up to six treatments. As a convention, during creation of the message, the first planned treatment after activation of the message meets the rule.
- Specific dates rule: The message is sent to Therapy Monitor when the treatment is administered on the listed dates. If no treatment is administered on one of the dates, the message will be sent during the first treatment available after the date.
- Days of the week rule: A rule based on a pattern of from one to eight weeks. The user can specify which days
  of each week the message will be sent. If no treatment is administered on one of the days specified by the rule,
  the message will be sent during the first treatment available after the recurrence.
- Month rule: The month rule specifies the months in which the message will be sent. The combined boxes allow
  the user to select the specific week of the month and, even more precisely, the treatment. Exceptions to the
  week's dialysis sessions are included in the count for deciding whether or not the message is to be sent to
  Therapy Monitor.
- Week rule: the week rule specifies after how many weeks the message is sent to Therapy Monitor. Since a patient normally has more than one treatment a week, the user can specify during which of the week's treatments the message will be sent. The first week of the current year is taken as reference for the start of scheduling. This week will be the first one considered valid for sending of the order. The first week varies depending on the regional calendar. If there are exceptions to the dialysis sessions, these will be considered for the purposes of calculation of the weekly session when the message is sent.

#### 9.3.6.3 RELATIONS WITH THERAPY MONITOR

If Therapy Monitor is connected to TSS, these fields are transferred to the "Messages" section of "Therapy Monitor" and can be checked by the nurse(s).

Therapy Monitor will show only all those messages where the scheduling corresponds to the interval set by the rule. For definitions of the rules, refer to the "Rules" section.

At the end of the treatment these fields are transferred to TSS and are visible in the Patient area, treatment data, dXp, and dXp messages. These messages are not mandatory, so the treatment can be closed even if the messages have not been checked. They can also be sent from "Therapy Monitor" to TSS.

# 9.3.7 TREATMENTS

This section contains full information about the treatment procedures for the selected patient.

When this section is accessed, the user is shown all the treatments the patient has received in the last month and a chart showing the progression over time of the pre-dialysis and post-dialysis weight. The time span of the dates can be modified.

The user can view the patient's medical history by clicking a single treatment. These data are filled in automatically if the connection with Therapy Monitor is active.

<b>Freatments</b>					New	Export Excel	Prin
Fro	om Date 24/	/08/2019	Ħ	To Date 24/09/2019			
Prescription name	7						
Prescription version							
Name							
Status							
Shift name							
Dry body weight	Kg		100				
Pre-dialysis weight	Kg			und with current parameter values : 24 Aug 2019			
Post-dialysis weight	Kg		To Date = 24				
Weight gain percent	%			2			
UF volume	ml						
Pre-systolic/Diastolic pressure							
Post-systolic/Diastolic pressure							
Pre-dialysis heart rate	bpm						
Post-dialysis heart rate	bpm						
Good session?		2					
			<u> </u>				
Treatment Weight							
						Treatment We	ight
		N	data in this intermed	_			
	-	NO	data in this interval				
						2011 A	
						Ð	

To create a manual HD Treatment simply click the **New** button in the **Treatment** section.

Depending on the status of the patient's Drug Therapy, the treatments already administered for the patient, and the Treatment Planning specified for the patient, the user may be shown a window where he can select the Drug Therapy to associate with the treatment currently being created.

Pha	rmacological prescri	ption rev	iew	×
Phari	macological prescription			
	Adolaf 20pieces 1ml vials			
	Eriramuf 50 mg Tablets			
		ОК	Cancel	

Cases where the pharmacological therapy selection pop-up appears during creation of a new treatment:

A treatment for the same day already exists for the patient: in this case the pop-up shows all the drugs administered in the previous treatment plus the dialysis pharmacological therapies in "Active" and "To be reviewed" status which were not in the first list.

There is no treatment planned for the day for which the user is creating the treatment: in this case the system proposes all the dialysis pharmacological therapies in "Active" and "To be reviewed" status for the patient in question.

A treatment plan (standard) is present for the day for which the user is creating the treatment: the system proposes all the dialysis pharmacological therapies in "To be reviewed" status whose administration rule does not specify the dose for that day.

A "Single day treatment plan" is present: the system proposes all the dialysis pharmacological therapies in "To be reviewed" status which have not been associated with the plan.

A treatment plan is present for the day for which the user is creating the treatment, but it is the result of dragging and dropping a plan via "Clinic Scheduler". In this case all the dialysis therapies in "Active" and "To be reviewed" status are displayed.

Any of these therapies selected are added to the "Patient assistance\Prescribed pharmaceuticals" table with dose "[?]", which indicates that the system cannot calculate the dose to administer for the treatment in the creation phase, and therefore the user must specify it himself.

If the treatment has been created by Therapy Monitor, obviously the pop-up cannot be shown to the user, so all the pharmacological therapies which are proposed by the pop-up according to the rules listed above are automatically entered in the "Patient assistance\Prescribed pharmaceuticals" table with dose "[?]", and are sent directly to Therapy Monitor. It is the task of the user who is using Therapy Monitor to specify the dose.

When a treatment is in "Completed" status, clicking the <sup>Close</sup> button closes the treatment. Treatment can reach this state in two cases, i.e. when the value of "post-dialysis weight" is present or when the value of "End time session" is present. To decide which of the two fields to be considered is the user (with a Clinic Manager role) who can choose

the logic to follow when closing a treatment in the "Configuration Parameters" section of the "Master Data" section (see "Service Manual" section 4.1.1).

Automatic generation of reports in PDF format can be associated with the closure. Specifically, the expressions (see "Service Manual" section 4.2.8) set in the "Configure PDF Export" section (see "Service Manual" section 4.2.6), which are enabled and valid for the current clinic, will be assessed.

If the treatment meets the expression criteria, the report associated to the expression which is met will be generated automatically. Depending on the setup, the report may be exported via Filesystem and/or sent via cDL.

The PDF reports created can be viewed in the "PDF export" section (see "Service Manual" section 4.2.7).

When a treatment status is "Closed", its data can no longer be edited. Press the Reopen button to "Reopen" the treatment; its data become editable again.

If the automatic generation of reports in PDF format have been configured and, in Power Tool, the option "Filesystem Undo" has been enabled, when "Re-opening" the treatment, the PDF file connected to the treatment reopened will be deleted/renamed (based on the action configured in Power Tool).

If the last treatment in date order for the patient, administered in the last 2 days, is in the "New" or "In Progress" status, a the following warning message is displayed.

[ Treatment in progress - Please note that any changes/addition in this section won't be applied to treatment in progress

In sections:

- Vascular access
- Treatment prescription
- Checklist
- Pharmacological Prescription
- Medical orders
- Laboratory test
- Below are explanations of all **Treatment** sub-sections.

# 9.3.7.1 GENERAL DATA

This section contains all the information taken from the Doctor's prescription with the exception of the following fields:

General data	Consumables used	Anticoagulant agent	Treatment information	dXp	Dialysis device settings	Assistance	Detailed information	Medical service
	General information	n						
	Status	s Complete			Device		FMC5008 FMC5008001	
	Modified by nurse				Device c	hanges		
	- Session information							
	Clinic shift	t Morning Shift 07	:15 12:00		Scheduler re	source	Room 2 - Bed 1	
	Session responsible				Session confirmation	on time		
	Treatment responsible	e 1			Treatment confirmation	on time		
	Session closed by	·			Accepted by pl	ni <mark>sician</mark>		
	Detailed information	n						
	Treatment type	2 Cronic			Treatment ca	ategory	B HDF - Online	
Treatment duration		04:00		Treatment frequency		quency	B Days/Week	
	Fluid intake	en (			Estimated tara	weight		
	Dry body weight	t 58.7 Kg						
	Vascular acces	5						
v	ascular access selection	<u>Fistula</u> <u>Upper am</u>	n brachial medial - Left	1	/ascular access modified ir	1 TMon		
	Allergy overviev	v						
Allergy list -		•••						
Date		Allergy type	Allergy type sp	ecificatio	n	Details		
06 Mar	2015	Food						
Feb 200	7	Active ingredient	(Eriramuf)					

- Status: Read-only field that shows the treatment status (new, in progress, or completed)
- Modified by nurse: Read-only field that shows the last user who changed the treatment and the time of modification.
- **Clinic shift**: This field shows the shift referred to in the treatment schedule. The user can change these values.
- Scheduler resource: shows the resource referred to in the treatment schedule. The user can change these values.
- Prescription name: This field shows the name of the prescription upon which the treatment is based. The user can change this value.
- Device: This custom list allows the user to select the device on which the patient is treated.

#### 9.3.7.2 CONSUMABLES USED

This section contains information related to the usage of consumables during the treatment. Is possible to add new consumables by clicking the + button or edit information like:

- **Product name**: This field allows a product to be selected by displaying its name.
- Category: For products that may have more than one category, it shows the category of product belonging to it. The field is read-only and is automatically populated as a result of selecting a product through the field described in the previous paragraph.
- Batch code: contains the code of the batch to which the product belongs.
- Article number: contains the serial number of the product.

- **Expiration date**: It contains the expiry date of the product.
- **Status**: contains information about the use of the product during treatment, that is, whether it was refused, whether it was used as a prescription, or whether it was added manually by selecting it from the catalogue.
- **Responsible and confirmation time**: these two fields contain information about who has changed the release information to the product and when that change has been made.

Dialyser	Batch code	Article number	Expiry date	Status	Responsible	Confirmation time
FX 1000 × ···	33244	33244	06/11/2022	Administered as prescribed 💌	demouser	01/10/2020 14:02

# 9.3.7.3 ANTICOAGULANT AGENT

This section is a copy of the Anticoagulant Agent tab defined in the patient's HD prescription. The user can modify/add values.

General data	Consumables used	Anticoagulant agent	Treatment information	dXp	Dialysis device settings	Assistance	Detailed information	Medical services	
	Anticoagulant agen	it							
	Manual					Auto			
	Medicinal product	Tizeb - 50pieces 1rr 50pieces 1mg Tabl			Medicinal product		Adipnaf - 10pieces 120ml vials 10pieces 120ml vials		
	Administration route	<u>Intramuscular</u>			Administratio	n route <u>I</u>	ntramuscular		
	Dilution factor	250 IU/ml			Dilution	factor 2	50 IU/ml		
	Bolus	1000 IU				Bolus 1	500 IU		
	Bolus in ml				Bolus in ml		6.0 ml		
	Additional boluses					Rate 7	50.00 IU/h		
	Use additional bolus				Rate in ml/h		3.0 ml/h		
					Stop time before end of	session 0	min		
					$\Delta$ Tot. quantity and p	oriming 3	000.0 IU		
	Total manua	1000.00 IU			Tot	al auto 4	500.0 IU		
						Total 5	500.00 IU		

### 9.3.7.4 TREATMENT INFORMATION

This tab contains various data acquired during the treatment, from the patient's vital signs to the information collected during the initial disinfection of the device.

The treatment information is categorised and displayed in various groups, depending on when it was collected. The first group contains all the measurements taken before the treatment started, while information stored at the bottom of the tab is related to those taken after completion of treatment.

The treatment session contains information collected strictly during the performance of the treatment, such as the patient's vital sign values and all the measurements taken minute by minute by the dialysis device (see "treatment cycle details", next paragraph).

eneral data	Consumables used II Anticoag	guiant agent Trea	tment information dXp	Dialysis device settings	Assistan	ce Detaile	d information	Medical servi	ces			
	Pre dialysis da	ita										
	Pre-dialysis heart ra	te 70 bpm				Pre	e-dialysis blood g	glucose				
	Pre-dialysis systolic/diasto	lic 146 / 79 m	mmHg									
	Pre and post weigh	nts										
	Pre-dialysis weig	ht 65.00 Kg					Post-dialysis	weight 6	2.00 Kg			
	Target weig	ht 63.00 Kg					Real	Real intake 1.00 Kg				
	Weight to lo	se 1.00 Kg			Weight gain			ht gain -:	19.10 Kg			
	Weight gain perce	nt -29.38 %										
	Treatment sessi	on										
	Treatment session deta	ils Click to se	e session details				Related la	ab tests (	lick to see lab tests			
	sion measurements											
Time		Intra-dialytic diast	olic BP Mean arterial pressu	Intra-dialytic heart rate	A subs about to	Desilities	Marking		Body temperature change	Venous pressure	Arterial pre	
nme	mmHg	mmHg	mmHg	intra-dialytic heart rate	Arrnythma	Position	Marking		۰C	mmHg	mmHg	
24 Sep 201	9 13:27 146	79	107	70	No	Lying	Pre-treat	ment				
24 Sep 201	9 13:33 139	79	100	65	No	Lying	During tr	eatment				
24 Sep 201	9 14:33 127	76	93	63	No	Lying	During tr	eatment	-0.48			
24 Sep 201	9 15:33 124	68	92	63	No	Lying	During tr	eatment	-0.47			
24 Sep 201	9 16:34 138	74	99	61	No	Lying	During tr	eatment	-0.29			
24 Sep 201	9 17:36 137	74	102	62	No	Lying	During tr	eatment	-0.35			
24 Sep 201	9 17:46 131	68	101	62	No	Lying	During tr	eatment	-0.03			
24 Sep 201	9 18:46 130	72	101	65	No	Lying	During tr	eatment	-0.20			
24 Sep 201		72	102	62	No	Lying	During tr	eatment	-0.15			
24 Sep 201	9 19:01 135	12										

If Therapy Monitor 2.x and the relative plug-ins are installed, a button called **Treatment session details** appears under the "Treatment session weights" table. Clicking on that button will open the pop-up that contains **Treatment cycle** information.

#### Note



The Kt/V formulas in the post-dialysis information group contain Kt/V values depending on the treatment-related laboratory tests. They are filled in automatically when at least one laboratory test that is more recent than the treatment date and that has urea values inserted is imported into the Laboratory data section.

#### **Treatment session details**

This section is particularly important since it contains all the measurements collected by the dialysis device throughout the treatment session. In order to consult these values, the user has to create specific queries using the Therapy Support Suite **Manage HD treatments**. This enables the user to create a list of customised queries in order to decide which dialysis measurements to show in the Treatment session details and whether to show them as charts or tables.

demouser Patient	s Default Clinic 🔻	Reportin	E		FRESENIUS MEDICAL C	RE		Sec	arch in Patier	it
<b>▼</b> Open patient list	<ul> <li>Aitken Lambert, David</li> </ul>	[39807] × Mes	sages and tasks +							
c data	📕 🛕 Aitken Lambert , Da	avid Born 15/08,	(1952 (67y) Gender Cod. 3	9807 Status Activ	e/Hemodialysis	1				
Patient summary			*****					Close Edit	Print	- 10
Treatment overview	Treatments							Close Edit	Print	
Administrative data	Tr	eatment date	20 Nov 2010 14:58			Treatmen	t doctor	<u>pp</u>		
Medical data	Rec	oonsible user				Second res	onsible			
Hospitalisations										
Patient status	Preso	ription name	Test 1 0			U	nique ID	367		
Medical prescription	General data Consur	nables used Ar	ticoagulant agent Treatme	nt information	dXp Dialysis c	evice settings	Assistance	e Detailed inforn	nation M	edical services
Patient agenda	Pr	e dialysis data								
	Pre-dial	sis heart rate	74 bpm		Pre-	dialysis blood	ducose			
Vascular access							,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Treatment prescription	Pre-dialysis sy		142 / 74 mmHg							
Checklist	Pre and	post weights								
Treatment schedule plan	Pre-c	lialysis weight				Post-dialysis	weight	84.10 Kg		
Pharmacological prescription		Target weight				Rea	l intake			
Messages										
Treatments	<b>- 1</b>	Veight to lose				Weig	ht gain			
HD survey	Weigh	t gain percent								
oratories Laboratory test	Trea	tment session —	Treatment cossie	a dataila						
Laboratory data	Trantmont	session details	Treatment sessio	nuetans						1
Laboratory test schedule	reautient	session details	Select a query: Session	details demo			1			
lical Data	Treatment session mea									
Clinical diary	Time	Intra-dialytic syst mmHg	olie Session details demo —						arking	В
Allergies			鈩 Time		Venous pressure	TMP pressure	Dialisate flo	w		100
Vaccinations	20 Nov 2010 15:23	132	-	mmHg	mmHg	mmHg	ml/min	" 🖬		
Family medical history	20 Nov 2010 15:24	125	20 Nov 2010 17:27	-35.0	-5.0	55.00	100.0			
Germ situation	20 Nov 2010 15:29	135	20 Nov 2010 19:00		-5.0	55.00	500.0			
Transfusion list			20 Nov 2010 20:17		-15.0	25.00	500.0		-	
Comorbidity	20 Nov 2010 16:02	147	20 Nov 2010 16:27		-5.0	55.00	100.0			
Specialist examination	20 Nov 2010 17:45	155	20 Nov 2010 19:46 21 records found	-35.0	-5.0	55.00	500.0			
Diagnostic test	20 Nov 2010 18:11	131	21 records tound							
Self-sufficency	20 Nov 2010 18:12	1.41	-	Close	Export Excel	Print				
Outpatient clinic visit	20 NOV 2010 18:12	141	_							
Patient medical history	20 Nov 2010 18:13	130	81	100	81					
Amputations	20 Nov 2010 18:25	111	64	69	64					
Clinical case	20 Nov 2010 18:26	134	76	107	76	_			1	_
PD access	20 Nov 2010 18:46	125	79	95	79					
PD prescription	20 Nov 2010 18:48	125	78	87	78					
PD treatment scheduler	20 Nov 2010 19:48	133	48	81	48	_				
Review						-	_			_
Home visit	20 Nov 2010 20:12	131	61	80	61					
PD treatments										
Peritonitis	Glycemic check list									
Tunnel exit site Adequacy and nutrition	Glycemic check time	Glycemic check								
Adequacy and nutrition		mg/dl								

#### **Treatment session measurements**

The contents of this table vary depending on whether the TSS installation includes Therapy Monitor:

- If Therapy Monitor is not available, the table contains all the vital measurements made by the nurse during the dialysis session;
- If Therapy Monitor is available, the table contains all the values taken from the "vital values" section of the Therapy Monitor export file. Measurements that do not refer to vital values are completed using values from the "treatment information" section, taken immediately before the timestamp of the current table row.

#### **Treatment-related laboratory tests**

The contents of this section depend on whether the TSS installation includes Therapy Monitor:

 If Therapy Monitor is not available, the "Laboratory tests" section of the "Treatment session information" section will remain empty, and will simply show the message "no laboratory tests received during treatment session".

If Therapy Monitor is available, the table will contain all the laboratory tests included in the Therapy Monitor export file, for which mapping has been specified in Therapy Support Suite. If no mapping has been specified, the "Laboratory tests" section of the "Treatment session information" section will remain empty, and will simply show the message "no laboratory tests received during treatment session".

#### **Patient weight**

This table contains information related to the patient weight during the dialysis treatment:

- Pre Weight
- Post Weight
- Target weight
- Taken weight
- Weight to loose, calculated as: Pre Weight + Taken weight Target weight
- Weight gain (compared with previous treatment)

#### Note



The "Weight to lose" field shows the weight that the patient should lose before the treatment starts. This field is calculated and also takes into account the "Taken weight" from the prescription. If the amount of "Taken weight" is changed in Therapy Monitor, the "Weight to lose" will not be changed.

#### **Patient temperature**

This table contains patient temperature information during the dialysis session.

ïme	Value	Responsible	
24 Sep 2019 13:55	36.5 °C	demouser - demouser	
24 Sep 2019 15:15	37.0 °C	demouser - demouser	
24 Sep 2019 16:05	37.5 °C	demouser - demouser	

#### Device disinfection

This section contains information about the procedure for disinfection of the dialysis device.

Machine disinfection			
Check for disinfection residue	Performed manually on TMON or dXp	Responsible	demouser - demouser
Date	24 Sep 2019 13:15	End of last treatment	21 Sep 2019 12:15
Last disinfection	22 Sep 2019 13:15		

## 9.3.7.5 DXP (DATA EXCHANGE PANEL)

This section contains a number of information useful for dialysis treatment and can be edited directly on the dialysis device via the Data Exchange Panel (dXp), including:

- dXp Items: in this section, the patient checklists are automatically added to the system.
- dXp Messages: this section automatically adds the prescribed medical orders to the dialysis session system.
- Laboratory Tests: This section automatically adds the prescribed laboratory examinations for the dialysis session from the system.
- User actions on dXp
- Events: The events that occurred during the treatment are recorded in this section. Events and their actions can be added manually or generated after a dialysis session is exported from Therapy Monitor. If events and their actions are added manually, the sections of the treatment to which the actions refer to are also automatically updated. For example, adding an information related to the use of a consumable for an event will also update the relevant table in the Consumables tab.

			dXp							
dXp items Description	Charles I.				-	Confirmation time				
	Status		esponsible							
Check Blood Pressure	e Confirm	ned	demouser	user - demouser		24 Sep 2019 15:36				
Check Cardio failure			demouser	- demouser		24 Sep 2019 15:51				
Check Fever	er Confirmed demouser - demou		- demouser		24 Sep 2019 13:36					
IXp messages										
Message	issage Answer Se		er Sender Se		Send tir	Send time		le Confirmation	time	
Need Potassium at di	ialysis end	Yes	demous	er	24 Sep	2019 13:34	demouser	r 24 Sep 2019	14:09	
ab exams										
Exams Answer Sende	r Send time	•		Responsibl	le Confi	rmation time				
Empty Grid										
Xp user actions										
Description	Responsib	le	Cont	irmation time	2	Comment				
Description Legs up	Responsib	1000		irmation time Sep 2019 13:3		Comment				
		r - demou	ser 24		14	Comment Comment				
	demouse	r - demou r - demou	ser 24	Sep 2019 13:3	14 14					
Legs up Treatment stopped	demouse demouse	r - demou r - demou r	ier 24 ier 24 24	Sep 2019 13:3 Sep 2019 17:3	14 14 17					
Legs up Treatment stopped Action 1	demouse demouse demouse	r - demou r - demou r	ier 24 ier 24 24	Sep 2019 13:3 Sep 2019 17:3 Sep 2019 13:3	14 14 17					
Legs up Treatment stopped Action 1 Action 3	demouse demouse demouse	r - demou r - demou r	ier 24 ier 24 24	Sep 2019 13:3 Sep 2019 17:3 Sep 2019 13:3 Sep 2019 13:3	14 14 17					
Legs up Treatment stopped Action 1 Action 3	demouse demouse demouse demouse	r - demou r - demou r r	ser 24	Sep 2019 13:3 Sep 2019 17:3 Sep 2019 13:3 Sep 2019 13:3	14 14 17	Comment				
Legs up Treatment stopped Action 1 Action 3 events Event	demouse demouse demouse demouse Responsib	r - demou r - demou r r le r - demou	24 : 24 : 24 : 24 : 24 : 24 : 24 :	Sep 2019 13:3 Sep 2019 17:3 Sep 2019 13:3 Sep 2019 13:3	14 14 17 17	Comment				

For all the information in this section, the manager and the time when the data was changed or entered can be specified.

eral data	Consu	imables use	d 🚦 Anticoagulant ager	t Treatme	nt information	dXp	Dialysis device settings	Assistance	Detailed information	Medical service
			dXp							
Xp items										
Description	n Status	Responsibl	e Confirmation time							
Empty	Grid									
Xp messag	zes									
Message /	Answer S	Sender Sen	d time	Responsib	le Confirmation	time				
Empty	Grid				in .		lin.			
ab exams										
Exams An:	swer Ser	nder Send t	ime	Responsible	Confirmation ti	me				
Empty	Grid									
Xp user ac	tions									
Description	n Respon	sible Confi	rmation time	Comment						
Empty	Grid									
vents										
event Res	ponsible	Time	Rel	ated actions						
Empty	Grid		511	11						
Empty ( vents Event Resp	Grid ponsible									

As for the "Events" section, these can be received from TMon or managed by the graphic interface.

Event	Responsible	Time	Related actions	
Event One	demouser	24/09/2019 13:22	FX CorDiax 50	+
Event Two	demouser	24/09/2019 13:23	Action 1 ····	+

The system allows the following "Related actions" to be added:

	Drug Common	M	edicinal Product	User actions	Consumables/Ancillary	Solutions
Dialyzers		Ac	id concentrates	Blood lines		
7		Dialyzer name	Dialyzer official code			
	Show Details	FX paed	5008221			
	Show Details	FX CorDiax 800	F00001594			
	Show Details	FX CorDiax 80	F00001591			
	Show Details	FX CorDiax 600	F00001593			
	Show Details	FX CorDiax 60	F00001590			
	Show Details	FX CorDiax 50	F00001589			
	Show Details	FX CorDiax 40	F00001588			
	Show Details	FX CorDiax 120	F00002384			
	Show Details	FX CorDiax 1000	F00001595			
	Show Details	FX CorDiax 100	F00001592			
	Show Details	FX 800	5008141			
	Show Details	FX 80 classix	F00002387			
	Show Details	FX 80	5008881			
	Show Details	FX 8	5004731			
	Show Details	FX 600	5008131			
	Show Details	FX 60 classix	F00002386			
	Show Details	FX 60	5008861			

In the case of "Medication" or "Medication Package" the system asks for the following information:

Related action detail	s	
Related actions	<u>Adolaf</u>	×
Quantity		
Has drug been administered?	Please select one entry	•
Batch code		
Expiry date	dd/mm/yyyy	Ħ
Responsible	demouser	
Confirmation time	dd/mm/yyyy hh:mm	Ħ
Comment		
Туре	Please select one entry	•
OK	Cancel	!

In the case of "User Actions", the following information is required:

Related action details	s	
Related actions	Action 1 × ···	
Responsible	demouser	
Time	24/09/2019 13:23	
Comment		]
ОК	Cancel .	

In the remaining cases the following information is required:

Related actions	<u>bibaq 5008</u> ×
Responsible	demouser
Time	24/09/2019 13:22
Batch code	
Article number	
Expiry date	dd/mm/yyyy
Status	Please select one entry

The Related Actions associated with the events are also added in the respective sections of the treatment:

Description	Responsible	Confirmation time		Comment	
Action 1	demouser	24/09/2019 13:23	Ħ	Comment 1	
Action Dxp	demouser	24/09/2019 13:23	Ħ	Action Dxp	

Dialyser	Batch code	Article number	Expiry date		Status	Responsible	Confirmation time
FX 1000 × ···			dd/mm/yyyy	Ħ	Please select one entry 💌	125 - 12	dd/mm/yyyy hh:mm 🏢
FX CorDiax 50			dd/mm/yyyy	#	Please select one entry 💌	demouser	01/10/2020 12:39

If one or more "Related Actions" is changed or removed from its section, the related event is also updated.

The behaviour of much of the data in this section and its connection with TMon depends on the value of the "Enabled continuous import with TMon (from version 2.2)" configuration parameter. (see section 4.1.1 of the Service Manual).

All details on the operation and the different cases that may arise are explained in the "Continuous Import with TMon" section.

# 9.3.7.6 DIALYSIS DEVICE SETTINGS

This section is simply a copy of the **Dialysis device settings** section of the prescription.

eatments				Cancel Save
Treatment	date 24/09/2019 09:20	I	Treatment doctor	<u>pp</u> × …
Responsible	user Responsible user		Second responsible	Second responsible
Prescription n	ame Default Prescription 24	×	Unique ID	793
General data Consumables us	ed I Anticoagulant agent Trea	atment information d	Xp Dialysis device settings	ance Detailed information Medical services
Dialysis device set	tings			1
Dialysis device	type 5008	×	Available modules	BVM; OCM; BPM; BTM; Single-Needle; Mixed;
Dialysis device Additional m	odules BPM			WIXED,
General se	Us at			
Device treatment me		•	Treatment duration	240 min
UF se	ttings			
Max. U	rate 800	ml/h (100 - 4000)		
	UF Yes	•	UF profile number	No profile 🛛 🚽
UF	time 240 min		UF spare time	0 min (0 - 1440)
ISO-UF se	ttings			
IS	D-UF No	•	Max ISO-UF rate	ml/h (10 - 4000)
Dialysate se	ttings			
Autoflow O	n/Off On	•	Autoflow ratio	1 (1 - 2)
			Dialysate temperature	36.5 °C (34 - 39)
Concer	trate <u>AC-F 313/2</u>		Prescribed Na	142 mmol/l (125 - 155)
Bicarbo	nate <u>bibag</u>			
Na bicarbo	onate 32	mmol/l (0 - 40)	Total buffer administration	35.00 mmol/l
Acid concentra	te K+ 2.00 mmol/l			
Na profile nu				
Blood se				
Blood flov		ml/min (0 - 600)		
Dia	lyzer <u>FX 100 classix</u>			
HDF/HF se				
HDF pump O	No. Contraction of the second s	•	Auto-Substitution On/Off	On 💌
Bolus volume	(ml) Please select one entry	•	HDF/HF bolus rate mode	
Haema		(19/10/2010)	Total protein	6.5 g/dl (22/06/2010)
Anticoagulation se				
Heparin pump en		•	Heparin bolus enabled	Yes
Anticoagulation	drug Adipnaf - 10pieces 120n	nl vials	Bolus	16.0 ml
	10-inter 120-studets			

## 9.3.7.7 PATIENT ASSISTANCE

This section allows the user to enter information about the treatment quality and any symptoms arising during the treatment. It is also possible to confirm or modify the administration of drugs and enter comments about the treatment.

Pharmacological prescription	Exact quantity	Has drug been administ	red? Quantity modifie	d Batch code	e Expiry date	Responsible	Confirmatio	n time	Comment	On Demand	
Fepili Spieces 50ml vials Fepili	12 ml	Yes				demouser	24 Sep 201	9 13:35		No	
Mitopep 25 pieces 100mg/ml Capsule Mitopep	12 mg/ml	Yes				demouser	24 Sep 201	9 13:35		No	
ther drugs											
Drug common		Medicinal	product	Quantity H	las drug been	administered?	Batch code	Expiry date	Responsible	Confirmation time	Comment
Adipnaf		Adipnaf -	10pieces 120ml vials	100.00	Yes				demouser	24 Sep 2019 13:37	
dical treatment note											
Tells if the comment has been confirmed											

The prescribed drugs to be taken during dialysis are shown in the "Prescribed drugs" list. For each one, the following information is displayed:

- name;
- exact prescribed quantity;
- indication whether the drug was really administered;
- quantity administered if different from the prescribed quantity;
- batch code;
- name of responsible user;
- time the drug was administered;
- comment;

The name of the drug has a message next to it if the patient is allergic to the prescribed drug. Clicking the name of the drug displays the relative pharmacological prescription.

The exact quantity is derived from the pharmacological prescription and cannot be modified if the treatment took place during a scheduled session. If the treatment takes place outside the treatment plan schedule, the exact quantity becomes mandatory and the value is not derived from the prescription. The "[?]" symbol appears in the exact quantity field to indicate to the user that he must specify the value.

The indication as to whether the drug was administered has four possible values: "Yes", "No", "Yes, but the quantity has been modified", "Refused". This information is mandatory. If the user makes no selection or if selects "Yes", the exact quantity also becomes mandatory. If the user selects "Yes, but the quantity has been modified" only the modified quantity becomes mandatory.

The comment field and the batch code can only be modified by the user if the treatment has been entered manually, while all the remaining fields are populated by Therapy Monitor.

In the "Other drugs" part of the Medications section, a distinction has been made between the drugs administered regularly (at home), and the drugs administered as needed.

### 9.3.7.8 DETAILED INFORMATION

This section shows detailed information obtained from the dialysis device at the end of the treatment. If Therapy Monitor 2.x and related plug-ins are installed, all information coming from Therapy Monitor will be visible; otherwise, some of these information fields will be empty.

General data	Consumables used	I Anticoagula	nt agent	Treatment information	n dXp	Dialysis device s	ettings 📙 Assistar	Detailed information	Medica	I services
		UF								
		Total UF time	4 ho	ours 0 minute					UF goal	900 ml
		UF volume	900	ml				Avera	ge UF rate	225 ml/h
		UF profile	0							
		ISO								
		ISO time	0 m	in				IS	O volume	0 ml
		ISO rate	0 m	l/h						
		Anticoagulant								
	Average	anticoag. rate						Cumulated anticoa	g. volume	
	Cumulated anticoag.									
		OCM								
		Effective Kt	53.5	L				Effe	ctive Kt/V	1.59
	Ave	rage clearance	206	0 ml/min				Urea distributio	n volume	33.7 L
	Aver	age plasma Na	134	0 mmol/l						
		SNCC								
	SN c	click clack time								
		Online								
		HD time	0 m	in				HD	F pretime	0 min
		HDF post time	259	min				н	F pretime	0 min
		HF post time	0 m	in				Current	treatment	HDF postdilution
	Total substi	itution volume	25.9	L.				Substit	ution rate	105 ml/min
	Cumulated	d bolus volume	n 0	1				Post-su	ıb volume	
	Post-s	sub proportion								
		Single-needle								
	SN	stroke volume								
		BTM								
		Recirculation								
		BVM								
		Min RBV						C	ritical RBV	



## Note

If a treatment is exported from Therapy Monitor, it might be necessary to check whether one or more fields are outside the permitted ranges. Out of range values are marked with a yellow or a red flag. depending on the gravity of the error.



#### Warning

In case of a malfunction of Therapy Monitor or a network failure, treatment data may not be available.

## 9.3.7.9 MEDICAL SERVICES

This section shows the services related to the treatment. One or more services can be present for a single treatment.

Every service is characterised by the following information:

General data	Consumables u	ised 🚦 Anticoagulant agent	Treatment information	dXp	Dialysis devic	e settings	C Assistance	Detailed information	Medical service
Medical servio	ce list			0					
Date		Medical service	Quantity	Perform	ned	Status	Auto creation	Version	Service unique ID
24/09/20	19 11:38 🏢	10.0 Dialysis treatment 🗙 💽	• 1	Yes	•	Ready	~	1	35
+ /			ple hie	-0-1					

- Date: contains the date when the service was provided;
- Services: contains the Principle Code and the Principle Description of the service;
- Quantity: indicates the number of times a service has been carried out for the treatment in question;
- Performed: the following values can be added:
  - "Yes": the service was carried out;
  - "No": the service was not carried out;
  - "Cancelled": the service was cancelled;

Services can be added in two ways:

Manually by the user. In this case the user can add a new service by pressing the + button. The user must enter the values in the Date, Services and Quantity fields, while the Performed field is "Yes" by default.

Date	Medical service	Quantity	Performed
dd/mm/yyyy hh	:mm 🌐 👪 Medical service 💀	• 83	Yes

Automatically by the system: In this case a service is automatically added (if not already present) when a treatment is created or modified. "Automatic" services are added when the treatment meets certain criteria as defined in the Expressions (see Service Manual section 4.2.6). For "automatic" services, the Data field is given a default value of the treatment date; the Services field is filled in with the code and description of the service related to the expression which was met, and the Quantity field is given the value 1. Once again, the Performed field is set by default as "Yes".

Date	Medical service	Quantity	Performed	Status	Auto creation	Version	Service unique ID
30/05/2019 17:10	<u>10.0 Dialysis treatment</u> × ····	1	Yes	Ready	~	1	33

The services entered can be removed by the user by clicking the button. A service entered manually can be deleted by the user; whereas, a service added automatically by the system cannot be deleted. It can be cancelled by entering "Cancelled" in the Performed field.

Warning:	100947
Auto created n	ows cannot be deleted. Would you like to set "cancelled" status?
	Yes No

If the treatment fields used as criteria in the Expressions are modified, the system recalculates the "automatic" services, while the services entered manually are not modified.

Additionally, if the user has modified the default data related to "automatic" services, the system asks him if he wants to lose the changes he has made to the "automatic services".

## 9.3.7.10 CONTINUOUS IMPORT WITH TMON

As already mentioned, some session data involved in the exchange of information with TMon, could be linked to the continuous import.

Following the instructions in the dedicated sections of the Service Manual is essential to take full advantage of all the continuous import functions. To enable this function in TSS environment tick the "Enabled continuous import with TMon (from version 2.2)" field in the configuration parameters (Service Manual section 4.1.1), to enable TMon side functions, tick the "Enabled" field of the "import" line in the FIS "Plug-in Configuration" tab, in the "Periodic commands" table (see section "FIS - Configuration" of section 3.2.3 of the Service Manual).

Still from FIS, the time interval that passes from one automatic import to another can be set along with which of the four possible packages that TSS can send ("To Do list", "Instructions", "Patient risks" and "External laboratory").



#### Warning

Risk for the patient as a result of an incorrect prescription being shown

It is essential to know that:

- Continuous import must be enabled on both TMon and TSS sides, it is highly discouraged to keep only one of the two parameters enabled to avoid wrong behaviour of the sections involved;
- use of TMon version 2.2 or higher is required. Previous versions are not supported;
- continuous data exchange ends when TMon sends TSS the data message "End session time".

The data, divided into their respective packets, that the TSS will send to TMon, if requested, are below:

- "To do list" contains the list of "Checklists" selected for a patient, visible in the corresponding menu item and divided into mandatory and configurable;
- "Instructions" contains a list of messages comprising the combined active and scheduled "Medical Orders" for a patient, any planned "Laboratory Tests" visible from the "Scheduling of Laboratory Tests" menu and the medicine used as an additional manual bolus (if present, it is visible in the patient's "HD prescription" in the "Anticoagulant Agent" section);
- "Patient risks" contains the patient's allergies saved in the "Allergies" section and the "Comorbidities" that pose a risk for the patient. All the data sent will always be shown in the patient summary bar, located at the top, by clicking on the image relating to the patient's risks.
- "External laboratory" contains the list of all the patient's "Laboratory data". The latest laboratory test values, making up the "Laboratory data" section, will be sent to TMon.

All this information is sent to TMon during a session and updated at regular intervals, as configured in FIS settings. Any changes made to the system that provides for a TMon update, whether of values or scheduling, do not take immediate effect. They will be effective only after the update period interval set in FIS.

The continuous import procedure ends when the session is closed by TMon. From this moment on, TSS no longer supports continuous import and the data are no longer exchanged. Notwithstanding the closing of the session by TMon, if the treatment is still "in progress" in TSS, the user will apply a logic other than the "Session end time" value for the treatment "Complete" status (see section 4.1.1 of the Service Manual).

The only way to still exchange data between TSS and TMON after sending the "Session end time" value is to launch a manual session data import from TMON by clicking on the "Import session data" command. Manually importing data this way is always possible during a treatment. If a session is created on a day when a treatment is not scheduled, of all the information that can be scheduled, only the patient's "Checklist" and "Medical Orders", which are valid for unscheduled treatments, will be linked to the session. Only any changes to this type of data will be reflected in the session as a result of continuous import. Any change made to all the other scheduled sections (e.g. medical order scheduled for the next scheduled dialysis) will have no impact on the treatment in progress because, in fact, it is an unscheduled treatment.



# Note

A checklist added manually by TMON, with a name equal to one already existing on TSS will not be duplicated. However, the corresponding entry in the "Master data" section will be updated.



## Note

If continuous import is enabled during a treatment in progress, alerts displayed during the creation of a medical order, a checklist, or a laboratory test schedule item will not be shown.

Finally, it is not possible to change the details of the description of checklist or medical order information for an item that is used in an ongoing treatment.

# 9.3.7.11 SECOND APPROVAL FOR HD TREATMENT

The functionality for second approval of HD treatments must be activated through the configuration parameters of each clinic. It also allows a second user to approve some elements of a treatment. The second user cited, must be different from the user that entered the confirmation of application of the treatment detail in question and must have the active rights to approve.

The sections involved in the HD treatment are listed below:

- All elements in the dXp section
  - Items, messages, lab tests, user actions, events
- Drugs (prescribed drugs, other drugs, drugs in a textual form) and anticoagulant agent manual
- Consumables used (except those for which TMon does not handle confirmation management).

For each section an option allows the second approval to be applied. When elements are grouped in a table, special columns will appear with their approval flags and details (user and date/time). For single sections, the selection option and the second approval details will be found in additional fields of the section.

dXp iten	ıs					
	Status	Responsible	Confirmation time	Second confirmation user	Second confirmation time	Confirm all
essure	Confirmed	demouser - demouser	27 Apr 2020 15:16			Confirm
nilure	Confirmed	demouser - demouser	27 Apr 2020 15:16			Confirm
	Confirmed	demouser - demouser	27 Apr 2020 15:16			Confirm

The "Confirm all" option is in the column header (in the table elements) and allows all the selectable table elements to be selected/deselected.

By definition, when the second approval is active, a treatment cannot be moved to the "Closed" status until all the second approvals have been applied. An exception (applicable with a particular configuration) will allow the possibility to close a treatment without a second approval if the elements do not include any first application/rejection details during the treatment. (See Section 4.1.1 of the Service Manual for configuration details and TMon version compatibility and limitations).

A "Second applications..." button is available in the list of treatment buttons. By clicking on the button, a pop up will show the list of all possible second applications not yet applied for the user logged in.

~	Description	First confirmation user	First confirmation date
~	Need Potassium at dialysis end	demouser2	10/1/2020 2:11:35 PM
dXp ite	ms		
	Description	First confirmation user	First confirmation date
	Check Blood Pressure	demouser2	10/1/2020 2:11:01 PM
	Check Cardio failure	demouser2	10/1/2020 2:11:06 PM
	Check Fever	demouser2	10/1/2020 2:11:10 PM
Dialyse	r list		
	Description	First confirmation user	First confirmation date
~	FX 1000	demouser2	
Blood I	ine list		
	Description	First confirmation user	First confirmation date
	AV-Set FMC (FA 204 C/FV 204 E) BVM	demouser2	
Needle	s list		
	Description	First confirmation user	First confirmation date
	SINGLE-NEEDLE KAN.15G 1,8X20MM SN500RG	demouser2	

## 9.3.8 HD SURVEY

The HD survey enables the user to analyse specific values from the "session details" (sent by the Fresenius 5008 or 6008 during every treatment) starting with a subset of treatments. The procedure for generation of the subset of treatments and the list of values of the "session details" are defined using the functions provided by the query builder.

## **9.4 LABORATORIES**

### 9.4.1 LABORATORY TEST

This section contains a list of all laboratory tests performed on the patient as received from the laboratory, before they are processed and imported by the Therapy Support Suite mapping engine. This view shows three different types of information about each laboratory test:

- Test Date : the date when the laboratory performed the test;
- Request number: the lab's ID number for the test;
- Laboratory test categories: a list of all the laboratory test categories covered by the specific request;

aboratory test				See lab test cancelled	New	Export Excel	Print
🗭 Date exam	Request number	Lab test Status	Status Date	Lab Test Categories			
16 Nov 2010 10:02	20100243225						
19 Oct 2010 11:36	20100212443			Plasma			
19 Oct 2010 00:00	20100212450						
21 Sep 2010 11:44	20100181647			Plasma			
21 Sep 2010 00:00	20100181653						
07 Sep 2010 08:38	20100189296			Plasma			
24 Aug 2010 12:41	20100172980			Plasma, Serum			
24 Aug 2010 00:00	20100172983						
27 Jul 2010 10:46	20100149750			Plasma			
27 Jul 2010 00:00	20100154425						
13 Jul 2010 12:42	20100150835			Plasma			
29 Jun 2010 12:50	20100135305			Plasma			
29 Jun 2010 00:00	20100136816						
29 May 2010 15:24	20100116722						
15 May 2010 09:26	20100104603			Plasma			

The detail for each laboratory test consists of two different tabs:

• The first shows the general information about the lab test requested selected and the associated results:

ral information									Edit Print	
	Mapping details									
	Request number	20100172980				Date exa	m 24	Aug 2010 12	2:41	
	Request date	24 Aug 2010 12:41			0	reation metho	od Ma	inual		
		Laboratory One								
		cuboratory one								
	Lab test Status					Status Da	te			
b comment										
quest comment										
	20 C									
Mapped lab result	5									
1D	Туре	Name	Parameter comm	Value	Measure	Minualue	Maxualue	Spacima	Value comment	Device m
	Type		rarameter commu		%	0	10.0.000 Storo 0.000	specifie	value comment	Device II
1	EMOCROMOCITOM	96845		03						
1.390@SINT	EMOCROMOCITOM	%BAS		0.3	70	0	1,5			-
1.390@SINT	2		2					Constant		Desteran
1.390@SINT	2 Type	Name	Parameter comm	Value	Measure	Min value	Max value	Specime	Value comment	Device m
1.390@SINT Plasma ID 46.46@Plasma	2 Type a CALCIO TOTALE	Name CALCIO TOTALE	Parameter comm	Value 8.86	Measure mg/dL	Min value 8,8	Max value 10,6	Specime	Value comment	Device m
1.390@SINT Plasma ID 46.46@Plasma 87S.87S@Pla	2 Type a CALCIO TOTALE . % TRF	Name	Parameter comm	Value	Measure	Min value	Max value	Specime	Value comment	Device m
1.390@SINT Plasma ID 46.46@Plasma 875.875@Pla Serum 2	2 Type a CALCIO TOTALE % TRF	Name CALCIO TOTALE % TRF		Value 8.86 31	Measure mg/dL %	Min value 8,8 20	Max value 10,6 30			
1.390@SINT Plasma ID 46.46@Plasma 875.875@Pla. Serum 2 ID	2 Type a CALCIO TOTALE . % TRF ? Type	Name CALCIO TOTALE % TRF Name	Parameter comm	Value 8.86 31 Value	Measure mg/dL	Min value 8,8 20	Max value 10,6 30		Value comment	Device m
1.390@SINT Plasma ID 46.46@Plasma 875.875@Pla Serum 2	2 Type a CALCIO TOTALE 5 % TRF 2 Type HCV	Name CALCIO TOTALE % TRF		Value 8.86 31	Measure mg/dL %	Min value 8,8 20	Max value 10,6 30			

oratory	test										Edit	Print 🔇
eneral in	formation	🚺 Mapp	ing details									
Lab resul	lts	+										
ID	Туре	Name	Parameter comment	Value	Measurement unit	Min value	Max value	Specimen source	Status	Status Date	Value comment	Device meas
1.39 6@S INT	EMOC ROMO CITOM ETRIC O	#BAS		0.03	x10.e3/uL	0	0,1					
1.39 5@S INT	EMOC ROMO CITOM ETRIC O	#EOS		0.37	x10.e3/uL	0,05	0,65					
1.39 7@S INT	EMOC ROMO CITOM ETRIC O	#LUC		0.09	x10.e3/uL	0	0,4					
1.39 3@S INT	EMOC ROMO CITOM ETRIC O	#LYM		1.75	x10.e3/uL	1,1	4					
1.39 4@S INT	EMOC ROMO CITOM ETRIC O	#MON		0.32	x10.e3/uL	0,2	0,8					
1.39 2@S INT	EMOC ROMO CITOM ETRIC O	#NEU		6.01	x10.e3/uL	2	8					
87S. 87S @PI asm a	% TRF	% TRF		31	96	20	30					
1.39 0@S INT	EMOC ROMO CITOM ETRIC O	%BAS		0.3	%	0	1,5					
1.38 9@S INT	EMOC ROMO CITOM ETRIC O	%EOS		4.3	%	0	7					
1.39 1@S INT	EMOC ROMO CITOM ETRIC O	%LUC		1.1	96	0	4					
1.38 7@S INT	EMOC ROMO CITOM	%LYM		20.4	%	19	48					

• The second shows the mapping of the recorded results, highlighting every potential problem detected.

New laboratory tests can be automatically imported into Therapy Support Suite from different sources, which can depend on the hospital information system configuration.

The user can add new laboratory tests manually by clicking the New button in the Laboratory test view and filling-in
the following form.

Request number Date exam dd/mm/yyyy hh:mm   Request date dd/mm/yyyy hh:mm   Laboratory Laboratory   Lab test Status Status Date	atory test neral information Mapping deta	le.		Cancel Sav	
Request date dd/mm/yyyy hh:mm   Laboratory Laboratory   Lab test Status Status Date     omment   est comment					
Laboratory  Laboratory				dd/mm/yyyy hh:mm	
Lab test Status Status Date					
omment  est comment  set commen	Laboratory 😫	Laboratory			
est comment  ped lab results	Lab test Status		Status Date		
est comment   ped lab results	comment				
nped lab results					
nped lab results					
nped lab results					
aped lab results	uest comment				
pped lab results					
No data	pped lab results				+
No data					
			No data		

If Therapy Monitor is connected and laboratory tests are exported for which mapping has been specified in Therapy Support Suite, a new entity is created in this section for every single laboratory test performed. If there is more than one measurement for the same type of test, an entity will be created for each measurement performed.

Furthermore, the data from the laboratory tests performed during a Therapy Monitor session, are also visible in the respective treatment by clicking on "..." in the "Relative Laboratory Tests" field, in the "Treatment Information" tab.

	Weigh	t gain pe	rcent								
	Trea	tment se	ssion —								
	Treatment	session d	etails	Click to see se	ession det <mark>a</mark> ils		Rela	ated lab te	ests	Click to see lab tests	
Treatm	nent session mea	suremen	ts								
Time	Intra-dialytic sys mmHg			lytic diastolic BP mmHg	Mean arterial pressure mmHg	Intra-dialytic heart rate	Arrhythmia	Position	Marking	Body temperature change °C	Venous pressure mmHg
+	/====									·	
Glycen	nic check list										
		Glycemic mg/									
+	/										
Treatm	nent session weig	ghts									
Time	Weight Kg										
+	/										
Patien	t temperature										
	Value Responsi	ible									
+	7										

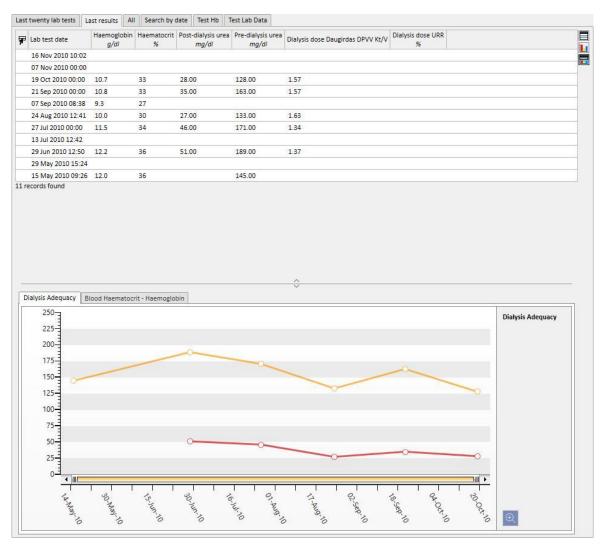
## 9.4.2 LABORATORY DATA

In this section the user can access the list of all laboratory tests done by the patient. There are three sub-views that show results in different ways:

- Last results: Shows all lab tests from the most recent to the oldest;
- All: Shows all lab tests grouped by year;
- Search by date: The user can choose the time range for the view. By default, it is set as the previous month;

In the "Latest Results" and "All" views, the user can set-up the view as:

- Table view;
- Chart view;
- Mixed view (image below);



Usually during the start-up of a clinic an automatic import is configured between Therapy Support Suite and the Clinic's Laboratory. However, the laboratory data can be entered manually. New laboratory tests can be entered by clicking the New button.

It is normal practice to add custom fields in the Laboratory Test Data Section.

In the Laboratory Test Data section Therapy Support Suite automatically calculates:

- Dialysis Dose of Daugirdas SPVV Kt/V,
- Dialysis Dose of Daugirdas DPVV Kt/V,
- Dialysis Dose equil. Kt/V.

Once the **Pre-dialysis urea** and **Post-dialysis urea** fields of the **Dialysis adequacy** section have been filled in, the above fields are calculated automatically.

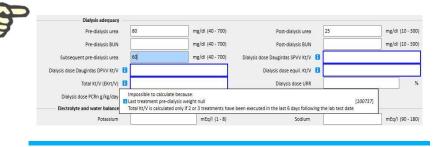
ooratory data				Cancel	Save	
Lab test date						
ab comment						
Text results						
Iriculture						
Aicroplasma						
Dialysis adequacy						
Pre-dialysis urea	mg/dl (40 - 700)	Post-dialysis urea	1		mg/dl (1	.0 - 300)
Pre-dialysis BUN	mg/dl (40 - 700)	Post-dialysis BUN			mg/dl (1	
			-			,
Subsequent pre-dialysis urea	mg/dl (40 - 700)	Dialysis dose Daugirdas SPVV Kt/V				
Dialysis dose Daugirdas DPVV Kt/V		Dialysis dose equil. Kt/V				
Total Kt/V (EKrt/V)		Dialysis dose URR				%
Dialysis dose PCRn g/kg/day						
Electrolyte and water balance					_	
Potassium	mEq/l (1 - 8)	Sodium			mEq/I (9	0 - 180)
Chloride	mmol/l (60 - 200)	Anion gap			mmol/l	(8 - 22)
Post-dialysis potassium	mEq/l (1 - 8)	Post-dialysis sodium			mEq/I (9	<mark>0</mark> - 180)
Post-dialysis chloride	mmol/l (60 - 200)				_	
Acid-base balance and blood gases						
PCO2 mmHg	mmHg (25 - 60)	рН				
PO2 mmHg	mmHg (18 - 200)	Bicarbonate			mEa/I	(5 - 40)
Estimated bicarbonate	mmol/l		- L			8 A
Bone and mineral metabolism						
lon. calcium	mmol/l (0.5 - 2)	Ca-P product	8			mg/dl)²
-	mg/dl (1 - 12)					(1 - 12)
Phosphate	mg/dl (1 - 12)	Post-dialysis phosphate			mg/di	(1 - 12)
	// /1 2000)		8			

If laboratory tests have been entered during a Therapy Monitor session, which are mapped inside Therapy Support Suite, these values will be copied to this section.

aboratory data		s	ee lab test Edit Print 🔻	
Lab test date	19 Oct 2010 00:00			
ab comment				
Dialysis adequacy				
Pre-dialysis urea	128.00 mg/dl	Post-dialysis urea	28.00 mg/dl	
Pre-dialysis BUN		Post-dialysis BUN		
Subsequent pre-dialysis urea		Dialysis dose Daugirdas SPVV Kt/V	1.79	
Dialysis dose Daugirdas DPVV Kt/V	1.57	Dialysis dose equil. Kt/V	1.56	
Total Kt/V (EKrt/V)		Dialysis dose URR		
Dialysis dose PCRn g/kg/day				
Electrolyte and water balance				
Potassium	4.56 mEq/l	Sodium	139.00 mEq/l	
Chloride		Anion gap		
Post-dialysis potassium	2.91 mEq/l	Post-dialysis sodium	139.00 mEq/l	
Post-dialysis chloride				
Bone and mineral metabolism				
Ion. calcium		Ca-P product		
Phosphate	5.8 mg/dl	Post-dialysis phosphate		
PTHi	513 ng/l	Total calcium 📒	61.0 mg/dl	
Osteocalcin		Magnesium	3	
Haematology				
Reticulocytes	3.48 %	Haematocrit	33 %	
Haemoglobin	10.7 g/dl	Mean cell volume (MCV)	95.7 fl	
Vlean cell haemoglobin content (MCH)	31.30 pg	Mean cell haemoglobin conc. (MCHC)	327.00 g/l	
Red blood cell count	3.40 x 10'²/L	Platelet	257 10E3/µL	
Mean platelets volume	8.00 fl	Leucocytes	8.34 10E3/µL	
Neutrophils	67.10 %	Basophils	0.80 %	
Monocytes	5.30 %	Lymphocytes	20.00 %	
Eosynophils	5.10 %	Red-cell Distribution Width (RDW)	14.80 %	
cosynophils	server markets	nea cen bistrication (now)	an average deb.	

#### Note

The Kt/V calculation does not start if the patient has not had any HD treatments because the **Post-dialysis weight** value is required. In this case an information message appears near the relative fields.



A table can be displayed with all of the "Laboratory Test" values that generated the relative "Laboratory Data", by opening one and clicking on the "View Laboratory Test" button.

Open patient list	<ul> <li>Aitken Lambert, David [39807] × C</li> </ul>	linic Home Page +			
Basic data	Aitken Lambert , David Born 15/	08/1952 (67y) Gender 7 Cod. 39807 5	Status Active/Hemodialysis 🔟 🖨		
Patient summary Treatment overview	Laboratory data			iee lab test Edit Print 🔻	
Administrative data	Lab test date	19 Oct 2010 00:00			
Medical data	Lab comment				
Hospitalisations					
Patient status					
Medical prescription					
Patient agenda					
1D	Dialysis adequacy				
Vascular access		174.00 mg/dl		12.00 (4)	
Treatment prescription	Pre-dialysis urea	174.00 mg/di	Post-dialysis urea	43.00 mg/dl	
Checklist	Pre-dialysis BUN		Post-dialysis BUN		
Treatment schedule plan	Subsequent pre-dialysis urea		Dialysis dose Daugirdas SPVV Kt/V	1.69	
Pharmacological prescription			biaipis dose budgitus of the key		
Messages	Dialysis dose Daugirdas DPVV Kt/V	1.47	Dialysis dose equil. Kt/V	1.47	
Treatments	Total Kt/V (EKrt/V)	1	Dialysis dose URR		
HD survey					
.aboratories	Dialysis dose PCRn g/kg/day				
Laboratory test	Electrolyte and water balance				
Laboratory data	Potassium	7.20 mEa/I	Sodium	140.00 mEa/l	
Laboratory test schedule					

At this point, a new window opens that contains a table with all of the values for the corresponding laboratory test. The "Laboratory datum" can also be generated if multiple "Laboratory tests" have been performed at different times. In this case, the table displays as many columns as there are laboratory tests.

	Ŧ	19 Oct 2010 00:00 (Laboratory One)	19 Oct 2010 11:24 (Laboratory One)	
BAS			0.05	
:OS			0.30	
.UC			0.19	
YM			1.00	
NON			0.52	
NEU			4.69	
BAS			0.7	
EOS			4.5	
LUC			2.8	
LYM			14.8	
MON			7.7	
NEU			69.6	
RETICOLOCITI			2.20	
ALCIO TOTALE			9.75	
łr			36.8	
REATININA			8.96	
GFR			non effett.	
DSFATI			6.51	
LICEMIA			90	
ст			41.0	
DW			2.32	Ĵ
GB			13.2	
D BIL		Normal	Normal	

If the "Laboratory datum" has no associated "Laboratory test", the "View laboratory test" button will not be displayed.

# 9.4.3 LABORATORY TEST SCHEDULE

The laboratory test schedule allows the user to define a set of tests which a dialysis patient must have carried out regularly.

## 9.4.3.1 DISPLAYING THE PATIENT'S LABORATORY TEST SCHEDULE

All the tests scheduled for the patient are displayed in the "Laboratory test schedule" section. The "Show current schedule plans only" filter allows the user to decide whether schedule plans which are no longer active should also be shown.

aboratory te	st schedule					lew Export Excel	Print
	w current schedul	es only 🗹	1245				
Status	Profile	From	To	Exams	Schedule	Next exam date	Docto
F Status	Provide states						
Active		06 Feb 2017		- Electrolyte and water balance: Anion gap, Chloride, Potassium, Sodium	Every week on first Dialysis	29 Sep 2019	Docto

Schedules are active if their start date is in the past and the end date is missing or in the future. Active schedule plans can be suspended by specifying the suspension date. During the suspension, laboratory tests are not scheduled.

The user can remove suspensions if the validity period start date is in the future. Suspended schedule plans can be reactivated by specifying the date when they are to become active.

Suspensions can be applied directly from the schedule plans list using the buttons in the "Action" column, or by opening the individual schedule.

Schedules with start date in the future are in "Planned" status. When the end of validity date is reached, the schedule is automatically terminated.

The "New..." button allows a new schedule to be created.

### 9.4.3.2 CREATING A SCHEDULE PLAN

The days and the tests to be performed can be decided freely or by choosing a preset profile. If there are special requirements concerning a patient, a profile can be selected and then customised.

The schedule shows the date of the Last change and the User who changed it last.

The Schedule type indicates whether the test list and rule will be imported from a preset profile or are to be specified manually.

The Status indicates whether the schedule can generate appointments. Refer to the previous section for the possible statuses and how changes of status take place.

The schedule has a mandatory validity start date and an optional validity end date.

The Urgent and Not billable options refer to fields in the Italian NHS prescription form; anyone not using this can ignore them.

The Doctor field indicates the doctor in whose name the schedule was created. This field is automatically filled in if the user is also a "Treatment doctor" or a "Pharmacological therapy prescriber".

Since the tests are associated with dialysis sessions, they will be displayed in the "Laboratory tests" section of the treatment session's dXp panel.

### 9.4.3.3 SCHEDULING WITHOUT A PROFILE

To schedule laboratory tests without a profile, select Test list as the Schedule type. In this case, first the user has to specify the list of tests to be performed and then the rule that sets their frequency.

Laboratory test schedule				×
Aitken Lambert , David Born 15	5 <b>/08/1952</b> (67y) Gender ♂ Cod. 39807 Status A	ctive/Hemodialysis 🔟 💆		
Laboratory test schedule		Open e	ntity log Cancel Sive	
Last change	24 Sep 2019	User	<u>demouser</u>	
Schedule type	◯ Laboratory exam profile ● Exam list	Status	Active	
Start 🔛	dd/mm/yyyy	End	dd/mm/yyyy	I
Urgent		Not billable		
Doctor	Doctor	Next exam date	•	
E Exams  Rule Specific dates rule				

When the Tests field pop-up is open, the user can find the required options by test category or profile.

The rule sets the frequency at which the tests are to be performed. The user has to choose one of the three available and configure it as required.

Specific dates rule: The days on which the patient has to have the tests performed are set by means of a list of dates.

Rule Specific date	s rule 💌		
24/09/2019	Ħ		
24/10/2019	Ħ		
24/11/2019	Ħ		
24/12/2019	Ħ		
+			

If there is no treatment scheduled on one of the specified dates, the tests will be scheduled for the first treatment planned, provided it is after that date.

Week rule: The week rule specifies every how many weeks the patient has to repeat the tests. Since a patient normally undergoes more than one treatment a week, the user can specify during which of the week's treatments the tests will be performed.

Rule Week rule 💌
Every week 💌 from the beginning of the year on first 💌 dialysis of the week

The image shows a rule where the patient has to repeat the tests every three weeks. The first week of the current year is taken as reference for the start of scheduling. This week will be the first one considered valid for performance of the tests. The first week varies depending on the regional calendar.

The tests will therefore be performed on the patient in the second dialysis session in the week and repeated every three weeks. If there are exceptions to the dialysis sessions, these will be considered for the purposes of calculation of the session during the week when the laboratory tests are performed.

Month rule: The month rule specifies the months in which the laboratory tests are to be performed. The combined boxes allow the user to select the specific week of the month and, even more precisely, the treatment. As for the week rule, here again exceptions to the dialysis sessions are included in the count for deciding whether or not the laboratory tests are to be performed.

Rule	Month	rule									
Every	first	[	▼ di	alysis of	the f	ïrst	•	week	of:		
Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec

### 9.4.3.4 SCHEDULING WITH A PROFILE

Profiles are used to group together tests and a rule for association with patients with the same characteristics. Please refer to the Therapy Support Suite Service Manual for instructions for the creation of laboratory test profiles. Once the required profile has been selected for a patient, it will no longer be necessary to set the tests and rule since they will be imported from the profile.

_aboratory test schedule				×
🛕 Aitken Lambert , David Born 1	15/08/1952 (67y) Gender 🖓 Cod. 39807 Status Acti	ive/Hemodialysis 🔟 😧		
Laboratory test schedule			Cancel Delete S	
Last change	24 Feb 2017	User	<u>Demo User</u>	
Schedule type	Laboratory exam profile     Exam list	Status	Suspended	
Start	13/02/2017	End	dd/mm/yyyy	I
Urgent		Not billable		
Doctor	Nurse × …	Next exam date	2) 2)	
Profile	test name x ···			
- Electrolyte and water balance: Anior Rule Month rule  Every first  Jan Feb Mar Apr May Ju				

The rule can be further modified for a specific patient. In this case, the information provided in section "9.4.3.1 - Scheduling without a profile" continues to apply.

However, to modify the list of tests a new profile must be set.

## 9.4.3.5 DISPLAYING THE CLINIC'S LABORATORY TEST SCHEDULE

The scheduled tests can be displayed and if necessary printed from the clinic menu.

demouser Patients Internal patient's admission	Default Clinic 🔻	Reporting			FRESENIUS	C	
					FRESENIUS MEDICAL CARE	Sea	rch in Dialysis Unit
	<ul> <li>Aitken Lambert, David</li> </ul>	[39807] Config	uration parameter	rs Clinic Ho	me Page × +		
New patient admission	Default Clinic				Letter Letter		
Patient merge	Default Clinic						
sic data	Scheduled exams					Print P	Print prescriptions
General information					[		
Home page	A	ccuracy	Weel	< 40	Patient selector		
neduler and transfers	Week		01/10/2019	Ħ	Active patients	Select one or more patients	
Clinic scheduler			01,10,2013		<u></u>	1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 - 1995 -	
Clinic resource scheduler					Include hospitalised patients		
Patient transfers							
Daily walk-in clinic visits	Aitken Lamber	David - 06/10/2019	×				
HD clinic treatments closing	Patient code: 3980		1				
PD Treatment scheduler	Patient code: 5980		12				
PD clinic treatments closing	[004] Anion gap						
ery & patient groups	[002] Sodium						
Manage query	[003] Chloride						
Manage patient groups	[001] Potassium						
survey							
Manage HD survey all treatments query	4 exa	ns, 1 prescription					
Manage HD survey single treatment query							
insplant management							
Donor data							
Clinic waiting list							
edical prescription							
Scheduled exams							

The "Weekly laboratory tests" section of the clinic menu displays the scheduling for all patients, week by week. The week displayed can be changed by modifying the date in the filter provided or pressing the navigation buttons.

The "Include hospitalised patients" filter allows the user to display the scheduling of tests that should be performed during a patient's hospitalisation, even if this takes place at the same clinic.

If the TSS service is configured to allow the printing of NHS prescriptions, a button for their creation and display will appear.

## 9.5 MEDICAL DATA

## 9.5.1 CLINICAL DIARY

The Clinical Diary tab contains information about the patient's medical history. The information to be recorded here is at the discretion of the clinic's staff and depends on the clinical protocol to be followed.

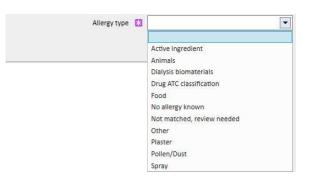
Ado	d Export All Ex	port category Print	Clinical diary			
AII				Date	13 Nov 2010 00:00	
N	urse HD comment	47		User	Nurse	
~	2010 47		Category	Nurse HD comment		
	Date	Diary	Comment coming	from treatment	13 Nov 2010 00:00	
	18 Nov 2010 00:00	Nurse Comment for the treatment Made on	Diary			
	16 Nov 2010 00:00	Nurse Comment for the treatment Made on		the treatment Made	e on Nov 13 2010 12:00AM.	
	13 Nov 2010 00:00	Nurse Comment for the treatment Made on				
	11 Nov 2010 00:00	Nurse Comment for the treatment Made on				
	09 Nov 2010 00:00	Nurse Comment for the treatment Made on				
	05 Nov 2010 00:00	Nurse Comment for the treatment Made on				
	04 Nov 2010 00:00	Nurse Comment for the treatment Made on				
	02 Nov 2010 00:00	Nurse Comment for the treatment Made on				
	30 Oct 2010 00:00	Nurse Comment for the treatment Made on				
	28 Oct 2010 00:00	Nurse Comment for the treatment Made on				
	26 Oct 2010 00:00	Nurse Comment for the treatment Made on				
	23 Oct 2010 00:00	Nurse Comment for the treatment Made on				
	21 Oct 2010 00:00	Nurse Comment for the treatment Made on				
	19 Oct 2010 00:00	Nurse Comment for the treatment Made on				
	16 Oct 2010 00:00	Nurse Comment for the treatment Made on				
	14 Oct 2010 00:00	Nurse Comment for the treatment Made on				
	12 Oct 2010 00:00	Nurse Comment for the treatment Made on				
	09 Oct 2010 00:00	Nurse Comment for the treatment Made on				
	07 Oct 2010 00:00	Nurse Comment for the treatment Made on				
	05 Oct 2010 00:00	Nurse Comment for the treatment Made on				
	02 Oct 2010 00:00	Nurse Comment for the treatment Made on				
	06 Jul 2010 00:00	Nurse Comment for the treatment Made on				
	03 Jul 2010 00:00	Nurse Comment for the treatment Made on				
	01 Jul 2010 00:00	Nurse Comment for the treatment Made on				
	29 Jun 2010 00:00	Nurse Comment for the treatment Made on				
	26 Jun 2010 00:00	Nurse Comment for the treatment Made on				
	24 Jun 2010 00:00	Nurse Comment for the treatment Made on				
	22 Jun 2010 00:00	Nurse Comment for the treatment Made on				
	19 Jun 2010 00:00	Nurse Comment for the treatment Made on				
	17 Jun 2010 00:00	Nurse Comment for the treatment Made on				
	15 Jun 2010 00:00	Nurse Comment for the treatment Made on				
	12 Jun 2010 00:00	Nurse Comment for the treatment Made on				
	10 Jun 2010 00:00	Nurse Comment for the treatment Made on				
	08 Jun 2010 00:00	Nurse Comment for the treatment Made on				
	of lue 2010 00-00 rds found	Nurse Commant for the treatment Made on				

Click the **Add** button to insert a new item. In the commend field (Diary), information to be recorded can be entered. Once this form has been saved, is stored in the patient's diary. The user shown is the full name as recorded in the User Management section. Selecting the category will assign the comment field the last comment entered for this category. This function can be enabled or disabled using the "Configuration Parameters" in the "Master data" section.

## 9.5.2 ALLERGIES

The patient's allergies can be recorded in this section. Most of the fields are described below:

 Allergy type: Mandatory field; this drop-down fixed list allows the user to select the type of allergy the patient suffers from.



 Drug active ingredient: If the allergy is to the drug's active ingredient, this field becomes mandatory, and a customised list will be displayed.

	Local active ingredient code	Active ingredient name	Complex Active Ingredient
Show Details	001	Alinuv	
Show Details	010	Alinuv/Eriramuf	Yes
Show Details	1210	Alinuv/Eriramuf/Fascox/Hephobase/Iraderac/Nunpan/Pa	Yes
Show Details	002	Eriramuf	
Show Details	003	Fascox	
Show Details	11	Hephobase	No
Show Details	004	Iraderac	
Show Details	005	Nunpan	
Show Details	007	Paletal	No
Show Details	006	Pentac	
Show Details	12	Reetinerumin	No
ecords found			

• **Drug ATC code**: if the allergy is identified by the drug's ATC code, a customised list appears. A drug can be located within the ATC Code field starting from its description or the code.

If the selected allergy is to an active ingredient or an ATC code which the patient is already taking as a pharmacological therapy, when the user clicks on save the following message will appear:

Warning: 100935
iome pharmacological prescriptions or single day therapy are in conflict with this allergy. Saving the allergy they will be set to status 'to be reviewed'. Do you want to proceed?
Yes No

If the user clicks "Yes", the allergy is saved and the relative drugs are set as "To be reviewed", while if "No" is clicked the allergy is not saved.



#### Warning

Risk for the patient as a result of indications of allergy being shown

If the patient is allergic to an ATC Code, he will also be allergic to all drugs which derive from it.



#### Warning

#### Risk for the patient as a result of indications of allergy being shown

It is very important to record allergies accurately because they are critical for patient safety. The recorded allergies are displayed in several sections, including prescriptions and treatment. This ensures that doctors can always have them under control. Moreover if the patient has an allergy to a specific active ingredient and a doctor tries to prescribe a drug which contains it, the system informs the user accordingly by displaying the following dialogue box:



#### 9.5.3 VACCINATIONS

Vaccinations can be recorded in this section. The most important fields are described below:

Vaccination date: The date in which the vaccine was performed.

Performed by: The personnel who administered the vaccination.

Batch: Vaccine batch.

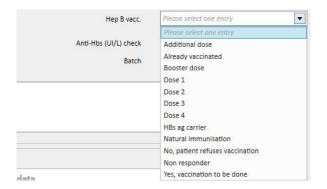
Comment: Free text for additional information.

Vaccination type: This drop-down list allows the user to select the type of vaccination the patient has received.

Based on the value selected, additional fields can be displayed:

Vaccination Type	Please select one entry	
	Please select one entry	
	Hepatitis B	
	Influenza	
	Other	
	Pneumococcus	
	Tetanus-diphteria	

- Influenza and Pneumococcal: do not add any field.
- Other: Add the vaccine field, which allows the drug administered to be selected.
- Tetanus-diphtheria: Add the fields Vaccine dose and Date next dose.
- Hepatitis B: If the Hepatitis B vaccination is selected, more detailed information will appear:
  - Hepatitis B vaccine: Details of the drug administered as a vaccine.
  - Has the patient received any Hepatitis B vaccination? This prompt asks the user if the patient has already received hepatitis B vaccine in the past.
  - Date of next dose and Vaccine dose: These fields must be filled in to indicate when the next vaccine must be performed.
  - Vaccination recommended: Yes, if the vaccination is recommended; No, if it is not.
  - Hepatitis B vaccination: Date of first dose: Date of first hepatitis B vaccination administered in the clinic. Filled-in automatically by the system.
  - Hepatitis B vaccination: This field asks the user to explain why a new vaccination event has been created, e.g. to record a vaccination (dose2, dose3, etc.) or to record other vaccination-related events.



- Vaccination cycle: More information about the vaccination cycle.
- Anti-HBs Check: This field is calculated automatically by the system. The value is *GREEN* if the last laboratory value for anti-Hbs is lower than 10; *YELLOW* if it is between 10 and 100; and *RED if it is greater than 100*.
- Vaccination in double dose: Yes, if the vaccination is in double dose; No, if it is not.
- At the bottom of the window, a list of the most important values of the last 20 laboratory tests is shown.

### 9.5.4 FAMILY MEDICAL HISTORY

In this section information about the clinical disease history of a patient's family members can be recorded. Most of the fields are described below:

 Family medical history for relatives: This drop-down fixed list allows the user to select the patient's family member(s) who are affected by a specific clinical disease.

Family medical history relative	Please select one entry
	Please select one entry
	Aunt
	Brother
	Cousin
	Father
	Grandfather
	Grandmother
	Mother
	Sister
	Uncle

• Family medical history disease: A specific disease can be selected from the disease catalogue. It is possible to filter the catalogue in order to search only among the renal diseases in the chosen disease classification, such as the ICD code. Please refer to the Service Manual for instructions on customisation of the *disease catalogue*.

Search by disease catalogue Search		Search on renal diseases	Search by code				
	Catalogu	ie <u>ICD10</u>	×	Nam	e Search	0,	
7	User co	ode	Name			Is it a renal disease?	
Show Deta	Is		No ICD Code			No	
Show Deta	ls (A00-A	(09)	Intestinal infectious disea	ses		No	
Show Deta	Is (A00-B	99)	Certain infectious and pa	rasitic diseases		No	
Show Deta	ls (A15-A	(19)	Tuberculosis			No	
Show Deta	Is (A20-A	428)	Certain zoonotic bacteria	l diseases		No	
Show Deta	Is (A30-A	49)	Other bacterial diseases			No	
Show Deta	ls (A50-A	464)	Infections with a predom	inantly sexual mode of transmis	sion	No	
Show Deta	ls (A65-A	469)	Other spirochaetal diseas	es		No	
Show Deta	ls (A70-A	(74)	Other diseases caused by	chlamydiae		No	
Show Deta	ls (A75-A	(79)	Rickettsioses			No	
Show Deta	Is (A80-A	(89)	Viral infections of the cer	tral nervous system		No	
Show Deta	ls (A90-A	(99)	Arthropod-borne viral fev	vers and viral haemorrhagic feve	rs	No	
Show Deta	ls (BOO-B	109)	Viral infections characteri	ized by skin and mucous membr	ane lesions	No	
Show Deta	ls (B15-B	19)	Viral hepatitis			No	
Show Deta	ls (B20-B	(24)	Human immunodeficienc	y virus [HIV] disease		No	
Show Deta	ls (B25-B	134)	Other viral diseases			No	

## 9.5.5 TRANSFUSION LIST

Any transfusions given to the patient can be recorded in this section.

IIdi	nsfusion list						Refresh	Add	Export Excel	Print
Ŧ	Date of transfusion	Туре	Quantity bags	Prescribed by	Done <mark>b</mark> y	Blood transfusion comment				
	26 Sep 2019 00:00	Erythrocytes	11.00	demouser	demouser					
	24 Sep 2019 00:00	Plasma	22.00	demouser	demouser					

Click on the button to add a new transfusion. The fields present are:

- **Date of transfusion**: This is the date and time the transfusion is performed.
- **Prescribed by**: This is the person who has prescribed the transfusion.
- **Type**: This is the type of transfusion to be performed.
- **Quantity**: This is the amount of bags used for the transfusion.
- **Clinic**: Location where the transfusion will be performed.
- Done by: The person who will perform the transfusion.
- Date of cytotoxicity: the date on which the cytotoxicity test was performed.
- Bag code: The codes of the bags used during the transfusion can be entered.
- Blood transfusion comment: This is a field where comments regarding the transfusion can be entered.

Allergies	Transfusion list			Edit Print	
/accinations Family medical history	'Transfusion list' has been saved successfully				
Serm situation	Date of transfusion	02 Oct 2020 00:00	Source centre		
ransfusion list				1200 52	
omorbidity	Prescribed by	DemoUser	Done by	DemoUser	
pecialist examination	Type	Erythrocytes	Date of citotox	19 Aug 2020	
agnostic test		16/20/20			
elf-sufficency	Quantity	11.00 bags	Bag code		
utpatient clinic visit	Blood transfusion comment				
itient medical history					
mputations					
access					

## 9.5.6 COMORBIDITY

Information about the patient's secondary clinical diseases can be recorded in this section. The most important fields are described below:

- Disease: A specific disease can be selected from the Disease Catalogue. The catalogue can be filtered to search only among:
  - Disease catalogues and description;
  - Disease classification description;
  - Renal disease catalogue;
  - Disease classification code.

earch by disea	se catalogue	Search	Search on renal diseases Search by code		
	Catalogu	ue <u>ICD10</u>	X . Name Search	0	
<b>F</b>	User c	ode	Name	Is it a renal disease?	
Show De	ails		No ICD Code	No	
Show De	ails (A00-	409)	Intestinal infectious diseases	No	
Show De	ails (A00-I	399)	Certain infectious and parasitic diseases	No No	
Show De	ails (A15-/	<b>\19</b> )	Tuberculosis		
Show De	ails (A20-/	428)	Certain zoonotic bacterial diseases		
Show De	ails (A30-/	49)	Other bacterial diseases	No	
Show De	ails (A50-	464)	Infections with a predominantly sexual mode of transmission	No	
Show De	ails (A65-	469)	Other spirochaetal diseases	No	
Show De	ails (A70-	474)	Other diseases caused by chlamydiae	No	
Show De	ails (A75-	479)	Rickettsioses	No	
Show De	ails (A80-	489)	Viral infections of the central nervous system	No	
Show De	ails (A90-	499)	Arthropod-borne viral fevers and viral haemorrhagic fevers	No	
Show De	ails (B00-E	309)	Viral infections characterized by skin and mucous membrane lesions	No	
Show De	ails (B15-E	319)	Viral hepatitis	No	
Show De	ails (B20-E	324)	Human immunodeficiency virus [HIV] disease	No	
Show De	ails (B25-E	(34)	Other viral diseases	No	

### 9.5.7 SPECIALIST EXAMINATION

This section contains all the specialist examinations the patient has undergone. Specific specialist examinations not directly correlated to the dialysis session, such as a cardiology examination, can be entered.

These specialist tests can be entered in "Prescribed" status meaning, for example, that they have been prescribed for the patient but not yet carried out, or in "Performed" status, meaning that they have already been performed on the patient and thus already recorded.

Thanks to the filters, specific views can be recreated based on the Status or by Specialist examination type and also for a specific time interval.

	From date	dd/mm/yyyy		To date	dd/mm/yyyy	
	Status	0	▼ Speciali	st examination type		•
Status	Examination date	Exam. request date	Specialist examination type	Specialist examinat	tion comment	
Done	30 Sep 2010 00:00		Vascular Surgery	Special Comment	for this examination.	
Done	28 Sep 2010 00:00		Cardiology	Special Comment	for this examination.	
Done	23 Sep 2010 00:00		Neurology	Special Comment	for this examination.	
Done			Cardiology			

The user can click the **New** button to create a new specialist examination. The examination request date, the actual date of the specialist examination and its status (prescribed, performed or cancelled) can all be entered. *The specialist examination type can be used to select the specialist examination required.* If the result is Abnormal, the disease code can be entered. The Location field is used to describe where the visit will take place. Furthermore, there are two fields for attachments, (images and standard attachments) and a specialist examination comment field for text information.

		/1952 (67y) Gender 7 Cod. 39807	,			
alist examination					Cancel	
Exam. request date				Examination date	dd/mm/yyyy hh:mm	Ħ
Status		Prescribed	-	Location		
Specialist examination type	83	Specialist examination type	···		10	
				Image		
					Drop here a picture or click or below to select/copy an imag	e buttons
Attachment		Drop a file here or click on the but	ton helow			
		to open file selector	auti uctury			
ialist examination comment						
						- 1

### 9.5.8 DIAGNOSTIC TESTS

This section contains all the patient's diagnostic tests. Here the user can enter specific diagnostic tests such as an ECG for the cardiovascular system, or for the muscular-skeleton system that are not directly linked to the dialysis sessions, but are necessary for a better assessment of the patient's clinical condition.

Thanks to the filters, specific tests can be searched for based on a specific time interval, status or by diagnostic test type.

				odialysis 1		
iagnostic t	est					New Export Excel P
	102000			-		
	From d	ate dd/mm/yyyy		To date dd/	тт/уууу	<b>#</b>
	Sta	itus	· · · · · · · · · · · · · · · · · · ·	Diagnostic test type Diag	inostic test i	type 😶
Status	Diagnostic test date	Request date	Diagnostic test type		Result	Diagnostic test medical report
Done	02 Sep 2010 00:00	Request date	Cardiovascular system Color-coded Dopple	r sonogranhy - Pelvic-leg arteries	Normal	Example of Medical Report for this Intr
Done	01 Sep 2010 00:00		Cardiovascular system ECG	r sonography i civic ieg arteries	Normal	Example of Medical Report for this Intr
Done	21 Jul 2010 00:00		Cardiovascular system Echocardiography		Normal	Example of Medical Report for this Intr
Done	Construction of the second second second	04 Dec 2009	Cardiovascular system Color Coded Dopple	r conography - Leg veins	Normal	Example of Medical Report for this Intr
Done	The second state of the se	09 Nov 2009	Cardiovascular system COIOI Colled Dopple	i sonograpny - ceg venis	Normal	www.endline.com.englige.com.englige.com.englige.com.englige.com.englige.com.englige.com.englige.com.englige.com
Done		1.12.246.022.01.0	Service Andrew State Constraints and the State		Normal	Example of Medical Report for this Intr
		05 Aug 2009	Gastrointestinal system Opaque clisma x-ra	iy	10133100000	Example of Medical Report for this Intr
Done	19 May 2009 00:	19 May 2009	Muscular-skeletal system Other		Normal	Example of Medical Report for this Intr
Done	03 Mar 2009 00:00	Carrier Carvon Charles	Cardiovascular system Echocardiography		Normal	Example of Medical Report for this Intr
Done	03 Mar 2009 00:00		Cardiovascular system ECG		Normal	Example of Medical Report for this Intr
Done	an international and a second second second	15 Dec 2008	Cardiovascular system ECG		Normal	Example of Medical Report for this Intr
Done	To de l'Anthroset la antal estador e	15 Dec 2008	Cardiovascular system Echocardiography		Normal	Example of Medical Report for this Intr
Done	14 Aug 2008 00:00	14 Aug 2008	Nervous system Computed tomography		Normal	Example of Medical Report for this Intr
Done	04 Aug 2008 00:00	04 Aug 2008	Cardiovascular system Color-coded Dopple	r sonography - Supra-aortic arterie:	s Normal	Example of Medical Report for this Intr
Done	01 Aug 2008 00:00	01 Aug 2008	Cardiovascular system ECG		Normal	Example of Medical Report for this Intr
Done	25 Jun 2008 00:00	25 Jun 2008	Cardiovascular system Echocardiography		Normal	Example of Medical Report for this Intr
Done	09 May 2008 00:	09 May 2008	Cardiovascular system Other		Normal	Example of Medical Report for this Intr
Done	02 May 2008 00:	02 May 2008	Respiratory system Other		Normal	Example of Medical Report for this Intr
Done	12 Mar 2008 00:00	12 Mar 2008	Nervous system Other		Normal	Example of Medical Report for this Intr
Done	18 Feb 2008 00:00	18 Feb 2008	Nervous system Other		Normal	Example of Medical Report for this Intr
Done	28 Dec 2007 00:00	28 Dec 2007	Cardiovascular system Color Coded Dopple	r sonography - Leg veins	Normal	Example of Medical Report for this Intr
Done	10 Dec 2007 00:00	10 Dec 2007	Cardiovascular system ECG		Normal	Example of Medical Report for this Intr
Done	29 Oct 2007 00:00	29 Oct 2007	Nervous system Other		Normal	Example of Medical Report for this Intr
Done	11 Oct 2007 00:00	11 Oct 2007	Respiratory system Other		Normal	Example of Medical Report for this Intr
Done	21 Jun 2007 00:00	21 Jun 2007	Muscular-skeletal system Other		Normal	Example of Medical Report for this Intr
Done	14 Jun 2007 00:00	14 Jun 2007	Muscular-skeletal system Skeleton X-ray		Normal	Example of Medical Report for this Intr
Done	06 Jun 2007 00:00	06 Jun 2007	Cardiovascular system Echocardiography		Normal	Example of Medical Report for this Intr
Done	06 Apr 2007 00:00	06 Apr 2007	Cardiovascular system ECG		Normal	Example of Medical Report for this Intr
Done	26 Jul 2006 00:00	26 Jul 2006	Cardiovascular system ECG		Normal	Example of Medical Report for this Intr
Done	08 Jun 2006 00:00	08 Jun 2006	Cardiovascular system Echocardiography		Normal	Example of Medical Report for this Intr
Done	29 Sep 2005 00:00	29 Sep 2005	Cardiovascular system ECG		Normal	Example of Medical Report for this Intr
Done	20 Apr 2005 00:00	29 Sep 2005	Cardiovascular system Echocardiography		Normal	Example of Medical Report for this Intr
Done	17 Sep 2004 00:00	17 Sep 2004	Muscular-skeletal system Lumbosacral spir	No V-row	Normal	Example of Medical Report for this Intr
1112200-020	17 Sep 2004 00:00	17 Sep 2004		and a series of the second	10.000.000	
Done	And the second s		Cardiovascular system Color Coded Dopple	r sonograpny - Leg veins	Normal	Example of Medical Report for this Intr
Done		03 Sep 2004	Cardiovascular system ECG		Normal	Example of Medical Report for this Intr
Done	14 Jan 2004 00:00	14 Jan 2004	Cardiovascular system ECG		Normal	Example of Medical Report for this Intr
Done	TRACT TO LODGE TO LODGE TO AND	03 Jan 2004	Muscular-skeletal system Skeleton X-ray		Normal	Example of Medical Report for this Intr
Done	03 Jan 2004 00:00	03 Jan 2004	Muscular-skeletal system Lumbosacral spir	ie X-rey	Normal	Example of Medical Report for this Intr

These diagnostic tests can be entered in "Prescribed" field meaning, for example, that they have been prescribed for the patient but not yet carried out, or in a "Performed" status, meaning that they have already been performed on the patient and thus have already been recorded. The Location field is used to describe where the test will take place. The result of the test (Normal or Abnormal), and also details of the illness for an "Abnormal" result, can be entered.

Request date         Diagnostic test date         Morrial           Other type of diagnostic test         Result type         Result type         Normal         Image         Image <t< th=""><th>Status       Done       Location         Diagnostic test type       Cardiovascular system Color-coded Doppler sonoaraphy - Pelvic-lea arteries       Requested by         Other type of diagnostic test       Image       Normal         Disease detail       Image       Image         Attachment       Image       Image</th><th>gnostic test</th><th></th><th></th><th>Edit Print</th><th></th></t<>	Status       Done       Location         Diagnostic test type       Cardiovascular system Color-coded Doppler sonoaraphy - Pelvic-lea arteries       Requested by         Other type of diagnostic test       Image       Normal         Disease detail       Image       Image         Attachment       Image       Image	gnostic test			Edit Print	
Status       Done       Location         Diagnostic test type       Cardiovascular system Color-coded Doppler sonoaraphy - Pelvic-lea arteries       Requested by         Other type of diagnostic test       Image       Normal         Disease detail       Image       Image         Attachment       Image       Image	Status     Done     Location       Diagnostic test type     Cardiovascular system color-coded Doppler sonoarophy - Pelvic-lea arteries     Requested by       Other type of diagnostic test	Request date		Diagnostic test date	02 Sep 2010 00:00	
Color-coded Doppler sonoaraphy - Pelvic-lea       Normal         Other type of diagnostic test       Result type       Normal         Disease detail       Checked by       Image         Attachment       Image       Image	Color-coded Doppler sonoarophy - Pelvic-lea arteries       Result type       Normal         Other type of diagnostic test       Result type       Checked by         Disease detail       Checked by       Image	Status	Done	Location		
Color-coded Doppler sonoaraphy - Pelvic-lea       Normal         Other type of diagnostic test       Result type       Normal         Disease detail       Checked by       Image         Attachment       Image       Image	Color-coded Doppler sonoarophy - Pelvic-lea arteries       Result type       Normal         Other type of diagnostic test       Result type       Checked by         Disease detail       Checked by       Image	Diagnostic test type	Cardiovascular system	Requested by		
Disease detail Checked by Attachment Image	Disease detail Checked by Attachment Image		Color-coded Doppler sonography - Pelvic-leg	,,, ,		
Attachment Image	Attachment Image	Other type of diagnostic test		Result type	Normal	
		Disease detail		Checked by		
agnostic test medical report Example of Medical Report for this Intrumental Test.	agnositic test medical report Example of Medical Report for this Infrumental Test.	Attachment		Image		
agnostic test medical report Example of Medical Report for this Intrumental Test.	agnostic test medical report Example of Medical Report for this Infrumental Test.					
agnostic test medical report Example of Medical Report for this intrumental Test.	agnostic test medical report Example of Medical Report for this Infrumental Test.					
agnostic test medical Report for this Intrumental Test.	agnostic test medical Report for this Intrumental Test.					
group of Medical Report for this Intrumental Test.	group of Medical Report for this Intrumental Test.					
		ignostic test medical report Example of Medical Report for this Ir	trumental Test			

🛕 Aitken Lambert , David Born 15/	08/1952 (67γ) Gender on Cod. 39807 Status Active/Hemod	lialysis 🔟 🕏	
Diagnostic test			Cancel Save
Request date	I	Diagnostic test date	dd/mm/yyyy hh:mm
Status	Prescribed	Location	
Diagnostic test type	Cardiovascular system Arteriography × …	Requested by	Requested by
Other type of diagnostic test			
Attachment	Drop a file here or click on the button below to open file selector	Image	Drap here a picture or click on the bu
			below to select/copy an image
Diagnostic test medical report			

### 9.5.9 SELF-SUFFICIENCY

This section is used to record information about the self-sufficiency level of a specific patient. This level is determined by evaluating the following parameters:

- Walking aids: such as wheelchairs, crutches, hearing aids, etc.
- Dependency level: level of dependency, from "independent" up to "totally dependent".
- Therapy education: knowledge acquired about the patient on various themes like access care, hemodialysis, diet, etc.

Aitken Lambert , David Born 15/0	08/1952 (67y) Gender 👌 Cod. 39807 Status Acti	ve/Hemodialysis 🔟 호	
Self-sufficency			Refresh Add Export Excel Print
F Test date			
24 Feb 2017 1 record found			
Self-sufficency		^	Edit Print
Test date	24 Feb 2017	Dependency level	21-30: Severe dependence
Walking aids	Blindness	Therapy education	Diet osteodystrophy

#### 9.5.10 OUTPATIENT CLINIC VISIT

The follow-up visit section can be used to save the data relating to outpatient clinic visits for each patient. The user can specify whether a new visit should be scheduled or performed for each patient.

#### 9.5.10.1 SCHEDULING A NEW VISIT

To schedule a new visit for a patient, the user must select "Schedule a new visit" from the two options supplied by the

pop-up that appears when the **New** button is clicked.

Outpatient clinic visit typ	pe
Select the new visit type	
	Schedule a new visit
OK	Perform a visit

- Visit date: Date when visit will be performed.
- Doctor: The doctor who prescribed the visit.
- Method of creation: If created manually or if it arrived by interface.
- Created by: The user who created the visit.
- Last change: the user and date of the last change
- **Outpatient clinic**: The hospital unit where the patient will go for the visit. This list can be defined freely.
- **Reason for visit**: This list can be defined freely.
- Medical services list: If there are any medical services associated with the outpatient clinic visit, if valid, they
  will be shown. The user can also add additional services.

Aitken Lambert , I	David Born 15/0	8/1952	(67γ) Gender 🦪	Cod. 39807 Status Activ	e/Hemodialysis	2 호					
utpatient clinic visit						F	erform	No show	Edit	Print	
Outpatient clinic vi	sit-Programmed vi	sit, 24 Se	p 2019 07:52' has	s been saved successfully							
	Vis <mark>it d</mark> ate	24 Se	p 2019 07:52			[	octor	<u>Demo User</u>			
Cr	eation method	Manu	al		Created by demouser 24 Sep 2019 07:				9 07:52		
	Last modified	demo	ouser 24 Sep 20	19 07:52		Clinic	al unit	<u>Hemodialy</u>	<u>515</u>		
	Visit type	Progr	ammed visit			Reason fo	or visit 🚦				
Medical service list											
Date	Medical service		Quantity	Performed	Status	Auto creation	Version	Se	rvice unique	ID	
24 Sep 2019 07:52	<u>12.0</u> <u>Consultat</u>	ion visit	1	Yes	Ready	~	1	2	6		

A patient may fail to attend a scheduled visit. In this case the user can click the **user** button to switch the visit to cancelled status.

itpatient clinic visit						P	erform 1	No show	Edit P	rint 🔇
Visit date 24 Fe		24 Fe	b 2017 09:45			C	octor	Demo User Next Cor		
Creation method Ma			leu			Creat	ed by	demouser .	24 Feb 2017 09	:45
Last modified demouser 24 Feb 2017 09:45					Clinical unit			Hemodialysis		
	Visit type	Progr	ammed visit			Reason fo	r visit 🚺			
Medical service list										
Date	Medical service		Quantity	Performed	Status	Auto creation	Version	Se	rvice unique ID	
24 Feb 2017 00:00	12.0 Consultati	on visit	1	Yes	Ready	~	1	4		

### 9.5.10.2 PERFORMING A VISIT

There are two possible ways of performing a visit. The user can open an existing "scheduled visit" by selecting it from the follow-up visit list and then clicking the button. It is also possible to select "Perform a visit" from the two options

provided by the pop-up which appears after the **New** button is clicked.

utpatient clinic visit typ	be	
Select the new visit type	Perform a visit	•
ОК	Cancel	

If the outpatient clinic visit has been performed, it can be closed by clicking the **Cose** button.

Automatic generation of reports in PDF format can be associated with the closure of the outpatient clinic visit. Specifically, the expressions (see "Service Manual" section 4.2.9) set in the "Configure PDF Export" section (see "Service Manual" section 4.2.7), which are enabled and valid for the current clinic, will be assessed.

If the outpatient clinic visit meets the defined expression criteria, the report associated to the valid expression will be generated automatically. Depending on the setup, the report may be exported via Filesystem and/or sent via cDL.

PDF reports created can be viewed in the "PDF export" section (see "Service Manual" section 4.2.8).

When the outpatient clinic visit is in "Closed" status, its data can no longer be edited. Press the Re-open button to "Reopen" the visit; its data become editable again.

If the automatic generation of reports in PDF format have been configured and, in Power Tool, the option "Filesystem Undo" has been enabled, when "Re-opening" the outpatient clinic Visit, the PDF file connected to the outpatient clinic Visit reopened will be deleted/renamed (based on the action configured in Power Tool).

Aitken Lambert, David Born 15/08/1952 (67y) Gender 7 Cod. 39807 Status Active,					Active/Hemodiahe	is 🔽 🕻	a		
Aitken Lampert, D	avia born 15/0	08/1952 (07V)	Gender Q. Cod. 39	607 Status I	Active/ nemodiarys		3		
patient clinic visit								Cancel Sa	ive 🤇
	Visit date	24/09/20	9 07:53		Ħ		Outgoing hour	hh:mm	
Cre	ation method	Manual					Doctor	demouser	× •••
			24 6 2010 07 6						
	Created by	demouser	24 Sep 2019 07:53	2			Last modified		
nical comment					Comment f	or patient			
					•••				
	Unique ID					Related	d cDL messages		
Diagnostic	Tests		Nutrition and ot	her		Next app	pintment	Medical serv	rices
🔢 General da	ta	Lal	oratory tests		Pharmaco	logical trea	atment	Specialist examin	ation
Gener	al information								
	Clinical unit	Hemodial	sis	×	•••		Visit type	First visit (new clinical episode	)
	eason for visit	Reason for visit					s visit urgent ?		
							a trais or Berre -		
	visit justified ? tal parameters								
	alisation mode	Simple			-	Sustolic /Dia	stolic pressure	121 / 81	mmHg
Pulse visua	alisation mode	Simple			•		Pulse	_	ppm
	Pulse pressure	40		mm	۱Hg	Temperature		-	°C
Previous ten results fo	or vitals								
Visit date	Arterial systoli mmH		erial diastolic press mmHq	ure Pulse I ppm	Pulse pressure Ten mmHq	nperature °C			
24 Sep 2019 07:5		2		PP					
27 Feb 2017 16:3	3								
24 Feb 2017 09:4									
24 Feb 2017 09:4				2.27					
25 Oct 2010 17:00 records found	0 120	80	9);	25	40 36				
	pometric data								
Anthro		OF		-	¥-		Description		
	Weight 85 Kg		NB		Dry weight		Kg		
	With fluid				Height	185	cm		
Boo	ly surface area	2.10 m²				Bo	dy mass index	24.84 Kg/m²	
	Waist size				cm		Hip size		cm
Hin/Wa	ist proportion						Wrist size		cm
	sidual diuresis			ml (0 - 60	000				

#### Each visit consists of several tabs.

## 9.5.10.3 GENERAL DATA

The following can be saved in the "General Data":

- General information about the visit (Clinic, Reason for visit, etc.).
- Vital signs: e.g. arterial pressure, pulse and temperature. For arterial pressure and pulse, the preferred measurement procedure can also be specified.
- Simple: The relative numeric fields provided for systolic/diastolic pressure (or pulse) have to be filled-in.
- Advanced: To fill in the pressure measurement field, the related pop-up must be opened and the rows of the table filled-in with the requested data. Then specify the calculation method to be used.
- Average of all selected measurements: The pressure values are calculated as the average of all selected measurements. To set a measurement as "selected", the user must check the "Used" flag.

- Value of the last selected measurement: The last measurement entered (and flagged as used) is used to fill the pressure measurement field.
- The same options are available for pulse measurements.
- Anthropometric data: list of all the data relating to the patient.
- **Clinical notes**: this section allows the user to enter data relating to the patient's physical health and dialysis fluid status.

Clinical note	Patient physical exam	
Nurse observation		
Abdomen		
Other exploration		
Cardiac auscultation		
Pulmonary auscultation		
Extremities		
Skeletal		
Urogenital		
Body constitution		
Nutrition		
Decubitus		
Oedemas		
Dialysis fluid status	Please select one entry	
omments		

### 9.5.10.4 LABORATORY TESTS

This tab contains an overview of the patient's last ten laboratory tests, grouped by specific categories. A laboratory test can be displayed by selecting it from the specific list.

Aitken Lambert, David [39807] >>	Mana	ge patient groups	HD survey - Single treat	ment query External	reports	Configuration parameters	+
Aitken Lambert, David Born	15/08/1	952 (67y) Gender	Cod. 39807 Status Active	/Hemodialysis 🔟 🗭			
tpatient clinic visit						Cancel Save	
Visit da	te [	24/09/2019 07:53	Ŧ	0	utgoing hour	hh:mm	
Creation metho		Vanual		-	Doctor		× •••
						demouser	×
Created I	by c	demouser 24 Sep 201	19 07:53		Last modified		
linical comment				Comment for patient			
Unique	ID			Related o	DL messages		
Diagnostic Tests		Nutrition	and other	Next appoir	ntme <mark>n</mark> t	Medical services	5
🚺 General data		Laboratory tes	ts	Pharmacological treat	ment	Specialist examination	on
Prescribed laboratory exams for ne	xt visit						
Labtest							
Evam da	ate 24/0	9/2019 07:53		Specific lab te	est Specific lab tes	t	
Exam us		Ľ		opecine iab ti		- <u> </u>	
	7	19 Oct 2010 00:00	21 Sep 2010 00:00	17 Aug 2010 00:00	20 Jul 2010 11	:12 22 Jun 2010 09:47	
Haematology							
Basophils	%	0.70	0.30	1.60	0.40	0.30	
Eosynophils	%	4.50	5.20	3.90	3.80	3.60	_
Lymphocytes	%	14.80	21.70	20.10	14.40	23.20	
Monocytes	%	7.70	8.70	7.40	6.20	9.90	
Leucocytes	10E3/µL	6.74	5.88	4.59	5.57	4.06	
Reticulocytes	%	2.20	1.68	1.41	0.95	1.57	
Neutrophils	%	69.60	61.90	65.00	73.80	60.20	
Mean cell volume (MCV)	fl	103.3	103.6	101.3	105.0	107.2	
Mean cell haemoglobin content (	pg	33.10	33.20	33.00	33.60	34.00	
Mean cell haemoglobin conc. (M	g/I	321.00	320.00	326.00	320.00	317.00	
W Biochemistry							
Blood glucose	mg/dl	90.00	74.00	89.00	81.00	82.00	
Urea	mg/dl						
Pre-dialysis creatinine	mg/dl						
				-	2	33	-
HDL cholesterol	mg/dl					35	
HDL cholesterol	mg/dl mg/dl					81	

Laboratory tests for the next visit can be prescribed in this screen. The user simply selects the tests required from those offered in the "*exam picker*" screen.

Exam picker		
Show only items with medical Service	Description Search	0
By category By profile		
Electrolyte and water balance		
All		
Anion gap	Chloride	
Potassium	Sodium	
Haematology		
All		
🗌 Haemoglobin	Mean cell hemoglobin content (MCH)	
Reticulocytes	Spread? On 5,4 GP	
Virology		
All		
Anti-HBs IU/L	Hbs Ag	
HCV status (RT_PCR)	HIV2 status	
	OK Cancel	

Groups and tests are freely definable in the master data (Global Manager) section.

### 9.5.10.5 PHARMACOLOGICAL TREATMENT

This tab contains an overview of all pharmacological therapies that have been active since the last follow-up visit performed.

itpatient clini	ic visit						Cancel	Save	
	Visit date	24/09/2	019 07:53	#		Outgoing hour	hh:mm		
	Creation method	Manual				Doctor	demouser		×
	Created by	demouse	er 24 Sep 2019	07:53		Last modified			
linical commen	t				Comme	ent for patient			
	Unique ID					Related cDL messages			
Diag	gnostic Tests		Nutrition a	nd other		Next appointment	Medi	cal services	
🚺 Ger	neral data	L	aboratory tests		Pharm	nacological treatment	Specialist	examination	
Pharmacologica	al therapy								-
	Status	Active		•		Type All		•	
	From date	dd/mm/yyyy				To date 24/09/2019	07:53	I	
Status	Drug type	Start	Stop	Drug / Active ingr	edient	Dosage and frequency			
Active	Dialysis	06 Oct 2011		Mitopep		W1 Mo: 12, Tu: 12, We: 10, T W2 Mo: 10, Tu: 12, We: 11, T See more			
Active	Dialysis	04 Jul 2013		Fepili		12 ml All treatments			
Active	Regular	11 Feb 2015		Fascox		12 - 0 - 32 - 0 mg Mo, We, Th	, Sa, Su		
records found									

### 9.5.10.6 SPECIALIST EXAMINATION

This tab contains an overview of all specialist examinations divided between those already performed and those scheduled for the future.

Creation Cr	Inique ID	Lab	9 07:53 24 Sep 2019 07:53 Nutrition and other oratory tests		Outgoing hour Doctor Last modified Comment for patient Related cDL messages Next appointment	hh:mm demoused		× .
Creation Cr Clinical comment U Diagnostic Tests General data Patient related specialist exa	Inique ID	lanual emouser Lab	24 Sep 2019 07:53 Nutrition and other		Doctor Last modified Comment for patient Related cDL messages			
Cr Clinical comment U Diagnostic Tests General data Patient related specialist exa	Inique ID	emouser Lab	Nutrition and other		Last modified Comment for patient Related cDL messages			
Clinical comment U Diagnostic Tests General data Patient related specialist exa	Inique ID	Lab	Nutrition and other		Comment for patient Related cDL messages			
U Diagnostic Tests General data Patient related specialist exa	aminations (presc				Related cDL messages			
Diagnostic Tests   General data  Patient related specialist exa	aminations (presc							
Diagnostic Tests   General data  Patient related specialist exa	aminations (presc							_
General data Patient related specialist exa	aminations (presc				Next appointment			
Patient related specialist exa			oratory tests				Medical services	
		ribed and			Pharmacological treatment		Specialist examination	
			current)					
	114 8 97 46 91 98		Specialist examina	ation type				<u>[</u>
		0.0.7.83		No da	-			
Patient related specialist e	xaminations							
F	rom date dd/mn	n/yyyy		Ŧ	To date 24/09/2019	)	Ħ	
穿 Exam. request date Ex	amination date	<u>Status</u>	Specialist exam	nination ty				
30	0 Sep 2010 00:00	Done	Vascular Surge	ery				
	8 Sep 2010 00:00	Done	Cardiology					
4.50%	3 Sep 2010 00:00	Done	Neurology					
3 records found								

## 9.5.10.7 DIAGNOSTIC TESTS

This tab contains an overview of all diagnostic tests divided between those already performed and those scheduled for the future.

Aitken Lambert, D	David [39807] × N	Manage pa	tient groups	HD survey - Single tre	atment query	External reports	Configuration parameters	+
				Cod. 39807 Status Acti				
		08/1932	(014) Gender Q.	Cou. 59807 Status Acti	ve/nemoularysis			
itpatient clinic vi	isit						Cancel Sa	ve
	Visit date	24/0	9/2019 07:55	=		Outgoing hour	hh:mm	
	Creation method	Manu	al .	9	1	Doctor	demouser	×
							( <del>,</del>	
	Created by	demo	ouser 24 Sep 2	019 07:55		Last modified		
Clinical comment					Comment for	patient		
				·				
ē.		- 16						
	Unique ID					Related cDL messages		
📒 Genera			Laboratory te			gical treatment	Specialist examin	
Diagnos	stic Tests		Nutritio	n and other	1	Vext appointment	Medical serv	rices
Patient related diag	nostic tests (prescri	bed and c	urrent)					
Request date	Diagnostic test date	Status Ty	/pe					
11.				No	data			
Morris St. Hors. Anna	and strategy parts							-
Patient related dia	agnostic test							
	From date	dd/mm/y	vy	Ŧ		To date 24/09/2019	(IIII)	
_						L		-
Request date	Diagnostic test date							
	02 Sep 2010 00:00			system Color-coded Dop	pler sonography -	Pelvic-leg arteries		
	01 Sep 2010 00:00 21 Jul 2010 00:00	100000000	Cardiovascular		2			
04 Dec 2009	04 Dec 2009 00:00	Done Done		system Echocardiography system Color Coded Dop		Les veins		
09 Nov 2009	09 Nov 2009 00:00		Cardiovascular	The second s	biel soliography -	Leg venis		
05 Aug 2009	05 Aug 2009 00:00			I system Opaque clisma )	(-ray			
19 May 2009	19 May 2009 00:00		Constant Control Sectors, 2010	tal system Other				
03 Mar 2009	03 Mar 2009 00:00			system Echocardiograph	/			
03 Mar 2009	03 Mar 2009 00:00	Done	Cardiovascular	The Second Statistics				
15 Dec 2008	15 Dec 2008 00:00	Done	Cardiovascular	system ECG				
15 Dec 2008	15 Dec 2008 00:00	Done	Cardiovascular	system Echocardiograph	/			
14 Aug 2008	14 Aug 2008 00:00	) Done	Nervous system	n Computed tomography				
04 Aug 2008	04 Aug 2008 00:00	) Done	Cardiovascular	system Color-coded Dop	pler sonography -	Supra-aortic arteries		
01 Aug 2008	01 Aug 2008 00:00	) Done	Cardiovascular	system ECG				
25 Jun 2008	25 Jun 2008 00:00	Done	Cardiovascular	system Echocardiography	/			
09 May 2008	09 May 2008 00:00	Done	Cardiovascular	system Other				
02 May 2008	the sections in the subscription of the section of		Respiratory sys	201100-0000000				
12 Mar 2008	12 Mar 2008 00:00	2 VARANDAR	Nervous system					
18 Feb 2008	18 Feb 2008 00:00	10 10 10 10 10 10 10 10 10 10 10 10 10 1	Nervous system					
28 Dec 2007	28 Dec 2007 00:00		110201000000000000000000000000000000000	system Color Coded Dop	pler sonography -	Leg veins		
10 Dec 2007	10 Dec 2007 00:00		Cardiovascular	o and aocritosole				
29 Oct 2007	29 Oct 2007 00:00	Done	Nervous system	n Other				100

### 9.5.10.8 NUTRITION AND OTHER

This tab allows the user to prescribe the quantities for specific nutritional parameters such as water, proteins and so on. In this section the system also displays the last two anthropometric measurements and the biochemical and renal function parameters.

	Mana	ge patient groups	HD survey - Sin	gle treatment query	External report	S	Configuration parameters	+
Aitken Lambert, David Born	15/08/1	952 (67y) Gender	Cod. 39807 State	s Active/Hemodialys	is 🖸 🕏			
tpatient clinic visit							Cancel	Save
Visit dat	e	24/09/2019 07:55		Ħ	Outgoir	ng hour	hh:mm	
Creation metho	d I	Manual				Doctor	demouser	×
Created b	v o	demouser 24 Sep 20	019 07:55		Last m	odified	12	
linical comment				Comment f				
Unique I	D				Related cDL me	escapes		
General data		Laboratory te	ete	Pharmaco	logical treatment		Specialist exam	ination
Diagnostic Tests			n and other	ritarindee	Next appointmer	nt	Medical se	
	et			U				
Wat	er			ml	Pr	roteins		g
Calories per di	av [			Kcal	Pota	assium	Please select one entry	•
Calories per di						L		
	-	Please select one entr	ni/	<b>•</b>				
Sa	-	Please select one entr	у У					
Sa	ilt [	Please select one entr	y 	•				
Sa Comments Anthropometric da	ilt [	Please select one entr	y					
Sa	ta	Please select one entr		Biochemis	try	Ţ	19 Oct 2010	
Sa Comments Anthropometric data	ta	T	γγ 			F mg/dl	19 Oct 2010 90.00	
Sa Comments Anthropometric data Weight	ta <b>F</b>	24 Sep 2019 07:52	yy	Biochemis				
Sa Comments Anthropometric data Weight Height	ita Kg	24 Sep 2019 07:52 85.00	yy	Biochemis	se	mg/dl		
Sa Comments Anthropometric data Weight Height Body mass index	ilt fragmenter for the second se	24 Sep 2019 07:52 85.00 185	y	Biochemis Blood glucc Albumin	ise	mg/dl g/dl		
Sa Comments Anthropometric da	ta Kg cm Kg/m <sup>2</sup>	24 Sep 2019 07:52 85.00 185	y	Biochemis Biood glucc Albumin Prealbumir Lymphocyt	ise	mg/dl g/dl g/dl	90.00	
Se Comments Anthropometric data Meight Height Body mass index Walst size	ta Kg cm Kg/m <sup>2</sup>	24 Sep 2019 07:52 85.00 185	y	Biochemis Biood glucc Albumin Prealbumir Lymphocyt	es ding protein	mg/dl g/dl g/dl %	90.00	
Se Comments Anthropometric data Meight Height Body mass index Walst size Hip/Walst proportion	ita Kg cm Kg/m² cm	24 Sep 2019 07:52 85.00 185 24.84	γγ 	Biochemis Biood glucc Albumin Prealbumir Lymphocyt Retinol bin	es ding protein	mg/dl g/dl g/dl %	90.00	
Se Comments Anthropometric data Meight Height Body mass index Waist size Hip/Waist proportion 2 records found Renal function	it Kg Cm Kg/m² Cm	24 Sep 2019 07:52 85.00 185 24.84 19 Oct 2010	γγ 	Biochemis Biood glucc Albumin Prealbumir Lymphocyt Retinol bin	es ding protein	mg/dl g/dl g/dl %	90.00	
Se Comments Anthropometric data Anthropometric data Weight Height Body mass index Waist size Hip/Waist proportion 2 records found Renal function Creatinine	ta Kg cm Kg/m <sup>2</sup> cm g/dl	24 Sep 2019 07:52 85.00 185 24.84		Biochemis Biood glucc Albumin Prealbumir Lymphocyt Retinol bin	es ding protein	mg/dl g/dl g/dl %	90.00	
Se Comments Anthropometric data Anthropometric data Weight Height Body mass index Waist size Hip/Waist proportion 2 records found Renal function Creatinine Creatinine clearance	It Kg Kg cm Kg/m <sup>2</sup> cm mg/dl ml/min	24 Sep 2019 07:52 85.00 185 24.84 19 Oct 2010		Biochemis Biood glucc Albumin Prealbumir Lymphocyt Retinol bin	es ding protein	mg/dl g/dl g/dl %	90.00	
Se Comments Anthropometric data Anthropometric data Weight Height Body mass index Waist size Hip/Waist proportion 2 records found Renal function Creatinine	It Kg Kg cm Kg/m <sup>2</sup> cm mg/dl ml/min	24 Sep 2019 07:52 85.00 185 24.84 19 Oct 2010		Biochemis Biood glucc Albumin Prealbumir Lymphocyt Retinol bin	es ding protein	mg/dl g/dl g/dl %	90.00	

## 9.5.10.9 NEXT APPOINTMENT

at and all all a shale				Contract of Contract	
atient clinic visit				Cancel	Save
Visit date	24/09/2019 07:53		Outgoing hour	hh:mm	
Creation method	Manual		Doctor	<u>demouser</u>	×
Created by	demouser 24 Sep 2019 07:53		Last modified		
cal comment		Comment	for patient		49
		···			•••
					- 1
Unique ID			Related cDL messages		
🚺 General data	Laboratory tests	Pharmaco	ological treatment	Specialist exami	ination
Diagnostic Tests	Nutrition and other		Next appointment	Medical ser	
Visit date	тт/уууу	Ħ	Doctor	Doctor	•••
Clinical unit	Clinical unit				
narks for next appointment	22 2				

This tab displays the next appointments related to the outpatient clinic visit.

### 9.5.10.10 MEDICAL SERVICES

This tab displays the medical services related to the outpatient clinic visit. One or more services may be linked to a single visit.

Every service is characterised by the following information:

itken Lambert, David [3980			Carl 20007 Cast	. Active /Hamadiabusis		orts				
itken Lambert , David	60rn 15/08	(11925 (01A) Genger Q.	cod. 39807 Stati	/s Acuve/nemodialysis	2 🖸			cel Save		
atient clinic visit							Cano	cel Save	10	
Vi	sit date	24/09/2019 07:55		Ħ	Out	toing hour	hh:mm			
Creation r	nethod	Manual			Doctor				×	
Crei	ated by	demouser 24 Sep 2	019 07:55		Las	t modified				
ical comment				Comment for	patient					
									•••	
									- 1	
									_	
Un	ique ID				Related cDl	messages				
🚺 General data	Laboratory te	Pharmacolo	gical treatme	nt	Specia	alist examination				
Diagnostic Tests		Nutritio	n and other	N	lext appointr	nent	N	Aedical services		
edical service list	Modical co	andra.	Quantity	Performed	Status	Auto creation	Vertien	Service uniq		
24/09/2019 07:55			Medical service Quantity			Ready		1	28	uein

A report can be printed once the visit has been saved, by clicking the

button.

The user can display and print a medical prescription by clicking the Create prescription... button in a visit already performed.

### 9.5.11 PATIENT MEDICAL HISTORY

The "Patient medical history" section allows answers to be recorded to several lists of questions defined by the user, called patient medical histories. First, a new medical history is created for the patient and, once the Medical History configuration has been chosen, the list of questions to be answered, set in the chosen configuration, appears.

### 9.5.11.1 FILLING IN THE MEDICAL HISTORIES

After enabling the "Global Manager" function, the user can configure new medical histories, or modify medical history configurations using the "Master Data (Global Manager)"  $\rightarrow$  Medical History

If a descriptive medical history is selected, the system will provide a multi-line free text field where this can be entered.

ical histories			Edit	Print
Medical history name	Anamnesis 2			
Is the medical history descriptive?	Yes			
Created on	24 Feb 2017 10:12	Created by	Demo User	
Last change	24 Feb 2017 10:12	Modified by	Demo User	

Configuration of Medical History 2 from Master Data:

Filling in Medical History 2 for the patient:

tient medical history			Cancel S	iave
Medical history type	Anamnesis 2	Medical history date	24/09/2019	Ħ
Created on	24 Sep 2019 14:23	Created by	demouser	
Last change		Modified by		
Revalidation date	24/09/2019	End date	25/09/2019	Ħ
omment				
List of questions				
escriptive comment				
comment				
				- 11

If a NON descriptive medical history is selected, the user can configure a number of questions, the answers to which may be of different kinds:

- Attachment: the question requires a file to be loaded in the form as an attachment
- Date/time: the answer is in a date field
- Whole: the answer is in a whole numeric field
- List or checkbox: a list of yes/no answers displayed as a drop-down list or horizontal or vertical checkbox can be configured. If Checkbox display is chosen there is no need to configure the answers because they will be to Yes/No questions
- Multiple line text: the answer is a multiple line descriptive text field
- Multiple choice: a set of multiple choice answers can also be configured
- Numeric: the answer is a numeric field with the option of setting Min, Max, Measurement unit and format
- Image: the answer is a field in which an image can be loaded or drawing using the system's drawing tools
- Text: the answer is a single-line text field

These questions can then be catalogued in groups, setting a group name and the relative set of questions

## **Creating a Medical History**

histories			Edit Print
Medical history name	Anamnesis 1		
the medical history descriptive?	No		
Created on	24 Feb 2017 10:14	Created by	Demo User
Last change	24 Feb 2017 10:16	Modified by	<u>Demo User</u>
Jngrouped medical history questio	n list		
Question type	Multiline text	Question	Multiline question
Question type	Text	Question	Text question
Group name Group question list			
Question type	Date/time	Question D	atetime question
Question type	Integer	Question Ir	nteger question

# Filling in Patient Medical History 1

nt medical history				Cancel	Save 🔇
Medical history type	Anamnesis 1	•	Medical history date	24/09/2019	Ħ
Created on	24 Sep 2019 14:25		Created by	demouser	
Last change			Modified by		
Revalidation date	24/09/2019		End date	25/09/2019	III
ment					
					••
					- 1
List of questions					
iline question					
iltiline answer					
Text question	Text answer				
group 1					
Datetime question	24/09/2019 00:00	Ħ	Integer question	5	

### 9.5.11.2 COPYING MEDICAL HISTORIES

So users can copy an existing medical history and its fields without having to re-enter the same values, there is a "Copy from" function. Select and open a completed medical history. Click the "Copied from" button in the upper right part of the window to create a new medical history, identical to the one selected. This also permits the values to be modified, if different.

tient medical history			Copy to Edit Print	
Medical history type	Anamnesis 1	Medical history date	17 Sep 2019	
Created on	24 Sep 2019 13:42	Created by	<u>demouser</u>	
Last change	24 Sep 2019 13:42	Modified by	<u>demouser</u>	
Revalidation date		End date		
omment				
List of questions – ultiline question Multiline				
Text question	Text			
group 1				
Datetime question	24 Sep 2019 00:00	Integer question	10	

### 9.5.12 AMPUTATIONS

Amputations can be recorded in this section.

Ampu	itations								New	Export Exce	l Print
<b>F</b> D	ate of amputation	Is traumatic injury ?	Left arm position	Right arm position	Left leg position	Right leg position	Weight Kg	Weight after amputation Kg	Height after		Body mass in Kg/m²
2	4 Sep 2019 13:41	Yes	Arm below elbow	Hand	Leg below knee	Foot	82.00		194		24.82

Clicking on <u>New</u>, a new amputation can be entered. The most important fields are described below:

Date of amputation: The date the amputation was performed.

Was it a traumatic accident? Indicate if the amputation was due to an accident or not.

Amputation reason: Allows the reason for the amputation to be added.

Other reasons: Free text to add other reasons.

**Amputation position**: in this section, indicate which limbs were amputated and to what extent the limb was amputated. The limbs for which amputation can be recorded are the following:

- Left arm position: If this limb is selected, more detailed information will appear:
  - Nothing: No Amputation.
  - Hand: Amputation of the hand.
  - Forearm: Amputation of the forearm.
  - Arm: Amputation of the arm.
  - Arm to the shoulder: Amputation of the arm up to the shoulder.
- Left arm correction factor: If a position is selected, it will automatically put the configured value in the reference section (if configured), otherwise it will be possible to enter a value manually.
- **Right arm position**: If this limb is selected, more detailed information will appear:
  - Nothing: No Amputation.
  - Hand: Amputation of the hand.
  - Forearm: Amputation of the forearm.
  - Arm: Amputation of the arm.
  - Arm to the shoulder: Amputation of the arm up to the shoulder.
- Right arm correction factor: If a position is selected, it will automatically put the configured value in the reference section (if configured), otherwise it will be possible to enter a value manually.
- Left leg position: If this limb is selected, more detailed information will appear:
  - None: No Amputation.
  - Foot: Amputation of the foot.
  - Leg below the knee: Amputation of the leg below the knee.
  - **Thigh:** Amputation up to the thigh.
  - Leg to the hip: Amputation of the leg up to the hip.
- Left leg correction factor: If a position is selected, it will automatically put the configured value in the reference section (if configured), otherwise it will be possible to enter a value manually.

- **Right leg position**: If this limb is selected, more detailed information will appear:
  - None: No Amputation.
  - **Foot:** Amputation of the foot.
  - Leg below the knee: Amputation of the leg below the knee.
  - Thigh: Amputation up to the thigh.
  - Leg to the hip: Amputation of the leg up to the hip.
- **Right leg correction factor:** If a position is selected, it will automatically put the configured value in the reference section (if configured), otherwise it will be possible to enter a value manually.

**Weight:** the weight recorded in the Medical Data is entered automatically. However, the weight can also be entered manually.

Weight after amputation: Post-amputation weight.

Body mass index: this field is calculated using the body mass index.

Body surface area: this field is calculated using the body surface area.

Amputations				Cancel Save	
Date of amputation	24/09/2019 13:41	Ħ	Is traumatic injury ?	Please select one entry	
Amputation reason	Amputation reason	•••	Other reason		
Amputation position					
Left arm position	Arm below elbow	•	Left arm correction factor	0.031	
Right arm position	Please select one entry	•	Right arm correction factor		
Left leg position	Leg below knee	•	Left leg correction factor	0.065	
Right leg position	Please select one entry	•	Right leg correction factor		

### **10 PATIENT TRANSFER OFFLINE**

"Patient Transfer Offline" is used to import and export a patient between clinics in two separate, non-communicating "Therapy Support Suite" installations.

The clinic from which the patient is exported is the "source clinic" and the one to which he will be imported is the "destination clinic".

The patient exported from the source clinic is known as the "source patient" and will be imported "on top of" another patient in the destination clinic. This patient is known as the "destination patient".

Patient data are encrypted in a password protected compressed file with a .zip extension. The password must be entered during both export and import of the data.

This section describes this function and its constituent phases, which are:

- Export;
- Loading the import file;
- Data check;
- Performance of the import;
- Checking of the patient's data and final validation of the import.



### Warning

Risk for the patient as a result of incorrect patient data being shown

The user is responsible for checking what information will be imported into the destination clinic and how.

### **10.1 SOURCE CLINIC - EXPORT**

Export of a patient starts from the "Patient status" section. In order to be exported, the source patient must be deactivated by means of an outgoing transfer to a non-TSS clinic.

nt status		Readonly patient	Export Edit Print
Event date	26 Sep 2019 00:00	New dialysis status	Hemodialysis
Hospital	Hospital Two		
Patient status type	Outgoing - Transfer to a non-TSS unit	New positional status	Not active
Transfer type	Definitive		

When this movement is saved, the patient becomes "Not active" and the **Export**... button appears to indicate that the patient is ready for export.

When this button is clicked, the patient export screen appears.

itient export			
You must select at least one en	itity		
From reference date	26/03/2019	Ħ	(*) The reference date you select will be used to filter the type of dat selected below. For each set of data marked with (*) only the record: with a date after the selected one will be exported.
Password 🔀 Confirm password 🔀			All the exported data will be enclosed in a zip file, protected with an AES encryption (256 key bits) and a password. Please fill in the fields on the left with the password you want to use to zip the data.
Select entities to export:	L		
All Allergies Charlson Comorbidity Ind Clinical diary (*) - (Date) Diagnostic test (*) - (Diag Dialysis dose Family medical history (* Fast peritoneal equilibrat Home visit (*) - (Creation Laboratory data (*) - (Late Medical data Messages Outpatient clinic visit (*) PD access PD prescription PD treatments (*) - (Date Pharmacological prescript Review (*) - (Review date Specialist examination (* Treatment prescription (' Treatments (*) - (Treatment Session details Vaccinations (*) - (Vaccin Vascular access	nostic test date) ) - (Date) tion test date) o test date) - (Visit date) (Visit date) (Visit date) (Visit date) - (Visit date) - (Visit date) (Visit date) (Visit date) (Visit date)		

This screen allows the user to enter:

 The reference date from which the patient's data must be exported. All information created at or found to belong to the period prior to this date will not be exported.

- The **password** to be applied to the .zip compressed file must:
  - Consist of at least 8 characters
  - Contain at least one numeric character
  - Contain at least one lower case character
  - Contain at least one upper case character
  - Contain at least one non-alphanumeric character.
- The patient **sections** to be extracted to the zip file. Initially, only the data in the list shown will be exported. After this, all the information linked to the data initially extracted will also be exported. This will prevent inconsistency between the data during importation.



### Note

The data in the *Master Data* – *Clinic Configuration* section will not be extracted, and all fields that refer to them will only contain a description of the data not exported.



### Note

Information linked to the data extracted but not specified by the user will not be exported in turn.



#### Warning

Risk for the patient as a result of patient data not being shown

The patient's administrative data are always extracted and there is no need to specify them when setting the export.

Once the date and password have been entered and the sections chosen, the actual export can be performed by clicking the *Export* button.

After a short wait (depending on the quantity of data for export), a dialogue window will appear enabling you to save the compressed file containing the patient's data.

Once the file has been saved, the export procedure is closed.

### **10.2 DESTINATION CLINIC - LOADING IMPORT FILES**

Once the user has reached the destination clinic, he can proceed with the first stage of importing the source patient. In this first phase, the destination patient and the transfer will be created, allowing the zip file to be loaded into Therapy Support Suite.

First the user has to access the "Dialysis clinic – Clinic name" – "New patient creation" section. In this section, a new patient must be admitted with the initial positional status "Not Active".

Therapy Support Suite				
demouser Patients	Default Clinic Reporting		FRESENIUS MEDICAL CARE	Search
Open patient list	Aitken Lambert, David [39807]     P	atient X External reports	+	
data	test , test1 Born 26/09/2001 (18y) Ge	nder 👌 Cod. [4] Status / 🔄 🛃		
itient summary	Administrative data			Cancel Save
reatment overview	Administrative data			
dministrative data	Title	Title	First name	test1
/ledical data	Last name	test	Second last name	
Hospitalisations				
Patient status	Birth name		Date of birth	26/09/2001
Medical prescription	Nationality	Nationality	Gender	Male
Patient agenda				
/ascular access	Patient number		Patient regional autonomic number	
Freatment prescription	Patient code	[4]	Patient monitor ID (key code)	
Checklist	Admission dialysis status	Hemodialysis 🔹	Admission positional status	Not active
Treatment schedule plan	Admission dialysis status		Admission positional status	
Pharmacological prescription	Admission date	26/09/2019 08:13	Reason for patient admission	New ESRD patient
Messages	Patient RRT initiation date	dd/mm/yyyy	First dialysis in centre	dd/mm/yyyy
Treatments				5
HD survey	Dialytic age		First contact with clinic	dd/mm/yyyy
ratories	Current hospital		Patient exoneration codes	
Laboratory test				
Laboratory data	Residence address			l mm
Laboratory test schedule	Street		City	City •••
lical Data	Postcode	Postcode	Country	Great Britain and Northern Ireland X
Clinical diary	O Domicile address			
Allergies				
Vaccinations	Street (home address)		City (home address)	City (home address)
Family medical history	Postcode (home address)	Postcode (home address)	Country (home address)	Great Britain and Northern Ireland × ···
Germ situation	Contacts details			
Transfusion list				1
Comorbidity	Patient Tel: Home		Patient Tel: Home (2)	
Specialist examination	Patient Tel: Mobile		Patient Tel: Work	
Diagnostic test Self-sufficency				
Outpatient clinic visit	Patient fax		Patient email	
Patient medical history	Identity document			
Amputations	Document type		Document number	
Clinical case				
splant	Expiration date	dd/mm/yyyy	Issuing country	Issuing country
Waiting list	Health insurance			
Transplant	Nat. Insurance number		Insurance company name	
Eurotransplant data				
	Local health authority	Local health authority	Responsible healthcare authority	Responsible healthcare authority
PD access	European health insurance			
PD prescription	European health insurance code		Valid from (TEAM)	dd/mm/yyyy
PD treatment scheduler	(TEAM)	L]		
Review	Valid to (TEAM)	dd/mm/yyyy		
Home visit				
PD treatments	Temporary foreigner insurance			[
eritonitis	Foreigner temporary code (STP)		Valid from (STP)	dd/mm/yyyy
funnel exit site	Valid to (STP)	dd/mm/yyyy		

Note

The standard procedure involves the admission of a new patient, but a patient can also be imported on any "not active" patient.

After creating the destination patient, the user must create a new transfer starting from the "Dialysis clinic- Clinic

name" – "Patient transfer" section, using the Add button.

The destination patient can now be selected using the search field.

Aitken Lambert, Dav	rid [39807] te	est , test1 [4]	Ext	ernal repor	ts f	Patient tra	nsfers	× +			
fault Clinic											
ient transfers										Refresh Expor	t Excel P
raft transfers Comp	lete transfers										
Patient name	Transfer reason	Status Stat	rt date	End date	Hospital name		TSS clinic	TSS clinic name	Transfer directio	n	
Middleton , Mary	Temporary trans	fer Draft 24	Feb 2017 09:36		Ospital Five - Sat	tellite Clini	c Yes	Satellite Clinic	Outgoing		
<b>tient transfers</b> Pat	tient to transfer	* Patient to tri	ansfer		~ 		Transfe	r reason	Canc mport patient dat		0
	Start date	26 Sep 2019	08:13								
							Destinat	ion clinic	Default Clinic		
	Start clinic				1		Transfer	direction	ncoming		
	Status	Draft						nport file			
	Status	Diat.							Drop a file here a to open file selec	or click on the butto tor	n below
Patient to tra	nnsfer Search <i>Sea</i>	rch	c	2						×	
					· · · ·			1		-	
	- I and a second		o necostrantes control occ		inverse inversion excellent for			S		-	
		LamOert									
	iiis test		iesti 4		20 Sep 2001 N	viale Ne	or active				
Show Deta Show Deta 2 records found	Last name S		First name Pa	ntient code 9807	Date of birth G 15 Aug 1952 M 26 Sep 2001 M	Vale No	isitional statu ot active ot active	s			

Once the destination patient has been chosen, the zip file needs to be attached to the transfer via the Import file field.

After the file has been chosen, the password can be entered.

Patient transfers				Cancel Save
Patient to transfer	<u>r2 r1</u>	×	Transfer reason	Import patient data
Start date	21 Nov 2017 11:40			
			Destination clinic	Default Clinic
Start clinic			Transfer direction	Incoming
Status	Draft		Import file	
				PatientData_Hartley_Sarah_93710
Insert password		×		
Insert password	Password	î		
	Passworu			
	Confirm Cancel			
	CONCE			
sword has been entere	ed and the trai	nsfer has heer	saved the	mport data button w
sword has been entere				Sutton W

The first patient import phase is now complete.

### **10.3 DESTINATION CLINIC - DATA CHECK**

Once the zip file has been loaded into the system and the destination patient has been selected, the user can proceed with the **data check** procedure.

In this phase, the program will actually <u>load</u> the information in the zip file and will compare it with what is in the destination clinic database. It will also attempt to <u>match</u> the source information with that present at the destination. Once this has been done, the outcome of the <u>data processing</u> operation will be displayed.

The **logic applied for comparing and matching** the data varies from section to section. Although designed to prevent problems and conflicts during matching, these processing tools will not always be able to create strong matches between the data. Conflicts may therefore occur and they must be viewed and then resolved by the user.



#### Warning

During this phase, the outcome of the import, meaning what is to be entered as new, what is not to be imported and what is to be overwritten and/or maintained in the destination, will be decided. The user is responsible for viewing and checking the data before performing the import procedure. Failure to check the data correctly may lead not only to poor import of the source patient's data into the destination clinic but also to the loss or incorrect modification of data shared by all sections of Therapy Support Suite.

### **10.3.1 LAUNCHING THE CHECK PROCEDURE**

Click the **Import data** button to launch the procedure that checks and matches the source patient's data with the data in the destination clinic. On completion, the following screen will appear.

Patient import						×
Please search and check a	ill problems to prepare	e patient imported data ready to exec	ute import procedur	:		
TSS source server version	1.7.2	Source user	demouser - der	nouser	Source export date	10 Nov 2017 14:57
		from the Patient Data involved in the imp on. If a proposed match is wrong mark th				
Master data					Sho	ow all the referred master data
Source		Destination	Action	Overwrite	Value after import	
Bicarbonates						
bibag		Doesn't exist	Import	•		
Checklist						
Checklist		Doesn't exist	Import	•		
Checklist		Doesn't exist	Import	•		
HD treatment cat	egories					
HF		Doesn't exist	Import	•		
HD treatment typ	bes					
Cronic		Doesn't exist	Import	•		
Hospitals						
Ospital Four		Doesn't exist	Import	•		
Clinical units						
Hemodialysis		Doesn't exist	Import	•		
Consumables/An	cillary					
Fisiologique 500 r	nl	Doesn't exist	Import	•		
Dialysis device ty	pes					
AK200		Doesn't exist	Import	•		
		Previous Next	Confirm review	Close		

#### Note



The screen shown above only appears when problems occur with regard to the "Master Data" section. Otherwise, the section relating to the strictly patient-related data will be displayed at once. However, in this case the section shown above can still be accessed using the navigation buttons at the bottom of the screen.

### **10.3.2 DESCRIPTION OF THE GRAPHIC INTERFACE**

The heading information extracted from the file appears at the top.

- Source Therapy Support Suite version.
- A brief description of the user who performed the source clinic side extract.
- Date when the export was performed.

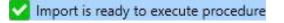
Still at the top of the screen, there is a banner that shows the user the current validation status of the import. The confirmation button will not be enabled until all the "matching conflicts" are resolved.

If a **matching conflict** occurs when the program matches a source parameter with one found in the destination clinic, which however is unable to choose the import action. In this case, the action for the element is not populated and <u>the</u> <u>user has to decide how the function is to respond during performance of the import</u>.

The image below shows the message displayed if there are problems to be resolved.

Please search and check all problems to prepare patient imported data ready to execute import procedure

Once all the conflicts have been resolved, the above message will change to the following.



The navigation, start and import confirmation buttons appear at the bottom.

Previous	Next	Confirm review	Close
Previous	Import	Confirm review	Close

The central part of the screen consists of the tables containing the result of the matching procedure, which will be described in detail in the following points.

### **10.3.2.1 MASTER DATA**



#### Note

This table contains the details of all the clinics in Therapy Support Suite.

Data are grouped by patient details record type by Therapy Support Suite. Each row of this table contains an item from the patient details record that has been exported and then processed.

#### Outpatient clinic visit reason

Renal Atrophy

Renal Atrophy	-	Renal Atr
---------------	---	-----------

rophy

The table comprises the following columns:

- Source: description of the source clinic information
- Destination: result of the matching and search. This field may contain two different types of value:
  - If the logics applied for matching have found a match, they will show the description of the • information matched with the source concerned.
  - Otherwise, the message "does not exist" will be displayed, indicating that there is no match for the ٠ source information in the destination clinic.
- Action: the type of action to be carried out during the import. A detailed description of what will happen to the function, on the basis of the action chosen, will then be provided.



Note

This field is **mandatory**. The import will not be ready for execution until all the action fields have been filled in.

- **Overwrite**: if a match is found, it will allow the user to specify whether or not the destination data are to be overwritten.
- Value after import: a calculated field that describes the value of the parameter after the import operation.



Tip

There is a filter in the top right-hand corner.

Show all the referred master data

When the filter is set as false, it only allows display of the patient details records for which the action field is empty, or is populated with the "Import" action. This will make it easier for the user to view the conflicts and the information that will be added.

Clicking the source description, or double clicking the entire line, opens the screen showing the details of the item.

bonates		-				442
Source	bibag	Destination		Value	after import	bibag
Entity existing state	Doesn't exist	Import action	Import			
rred data Parent-child	data					
Description	Source value	Existing	value State	Import action		
Manufacturer	10 FMC	10 FM	C Exists in both	Confirmed match		

At the top, the patient details record header data are shown. This information also appears in the main screen; the parameter's **existence state** is also displayed.

Two tables appear below the heading.

Linked data:

This is the list of references to a parameter present in the source, and is structured as a table.

- **Description**: shows the tab that describes the field.
- Source: field description originating from the source clinic.
- Destination: result of the matching and search. This field may contain two different types of value:
  - If the **matching methods applied** have found a match for the reference data, they will show the descriptive value of the matched destination parameter.
  - Otherwise, the message "does not exist" will be displayed, indicating that there is no match for the referenced data in the destination clinic.
- Action: the type of action to be carried out during the import. A detailed description of what will happen during the import, on the basis of the action chosen, will then be provided.

### Note

This field is **mandatory**. The import will not be ready for execution until all the action fields have been filled in. In addition, the element that contains links to the unpopulated action will be indicated by warning messages.

<b>I</b> P	

Outpatient clinic visit reason				
Renal Atrophy	Renal Atrophy	54	•	Renal Atrophy
₹ <b>0</b>				
This second asfeet by ask as data seconds. Di-				
C This record refers to other data records. Ple	ease search and fix all elements referred by t	this to make it v	alid for import	

The image below shows the case when a patient details record contains links to the action that has not been filled in.

Source	Renal Atrophy	Destination	Renal At	rophy	Valu	ue after import	Renal Atrophy
Entity existing state	Exists	Import action	83				
ferred data Parent-child	data						
Description	Source value	Exis	ting value	State	Import action		
Parent category	Other Reasons	Ot	ther Reasons	Exists in both	•		

• **Status**: This shows the existing state of the information to which the referred data refer. Further explanations concerning a parameter's existing state will be provided later.

#### Parent-child data:

This second tab will show all the imported patient details record data that are the children of the item displayed, and an exact replica of the main "Master Data" tab.

#### **10.3.3 MAIN PATIENT DATA**

Once any conflicts in the "Master Data" patient details record section have been resolved, the user can click the

<sup>tt</sup> button to move on to the section where the strictly patient-related data are checked.

The first section, containing the main patient data, will now appear.

tient import						
Import is ready to execute pr	ocedure					
TSS source server version 1	.7.2	Source user	demouser - c	demouser	Source export date	10 Nov 2017 14:57
	which will be imported and how th installation. If a proposed match is					
ain patient data Patient record	ls					Show only conflicts
Field	Source value	Destination	<u>Overwrite</u>	Value after import	t	
atient Patient						
Photo	[Photo]		~	[Photo]		
First name	Katherine	test destination		test destination		
Last name	Morton	test destination		test destination		
Date of birth	06 Aug 1925	02 Mar 2017		02 Mar 2017		
Gender	Female	Male		Male		
Nat. Insurance number	654321			654321		
Patient number	12		$\checkmark$	12		
Patient code	47829	1		1		
Patient monitor ID (key co	de) 49	1		1		
Admission dialysis status	Ambulatory	Hemodialysis		Hemodialysis		
Admission positional state	is Active	Not active		Not active		
Admission date	09 Apr 2010 00:00	02 Mar 2017 11:14		02 Mar 2017 11:14		
First dialysis in centre	25 May 2010		$\checkmark$	25 May 2010		
Current hospital	Ospital Four Ospital Four					
Addresses						
Street	30 Dover Road			30 Dover Road		
Postcode	IP19 1NF		$\checkmark$	IP19 1NF		
C14.	MECTIALI			W/ESTHALL		

This part shows all the fields (if present in the compressed file with the patient's source data) of the following sections:

- "Patient administrative data"
- "Medical data"
- "Charlson Comorbidity Index"

Here again, the information is grouped into sections and displayed in the form of tables. However, each row represents a single field of the section for import.



#### Warning

Risk for the patient as a result of incorrect patient data being shown

Import and overwrite choices are made on individual fields; the main patient detail record item will always be matched with the one in the destination.

The table comprises the following columns:

- Field: shows the tab that describes the field.
- **Source value**: the value of the field, in alphanumeric format, from the source patient.
- Destination value: the value of the field, in alphanumeric format, in the destination.
- Overwrite: allows the user to specify whether or not the destination data are to be overwritten.
- Value after import: a calculated field that describes the value of the parameter after the import operation.



#### Тір

Tip

There is a filter in the top right-hand corner.

Show only conflicts

When the filter is set as true, it only allows display of the patient details records for which the destination field is empty, or is different from the source value. This will make it easier for the user to identify the data that require supervision.



All the fields in all the sections can be overwritten by simply clicking on the name of the "**Overwrite**" column.

### **10.3.4 PATIENT DATA**

This section shows all the patient's data for import that are not displayed in the section described previously.

Every row contains a patient data item from the source, such as prescription, dialysis treatments, etc. It has the same columns and functions in the same way as the "Master Data" record display screen.



#### Warning

Risk for the patient as a result of incorrect patient data being shown

The "overwrite" field of the data relating to treatments will be set to true by default.

### **10.3.5 ACTIONS AND EXISTING STATES**

The way in which the function operates during import depends on two factors:

- The existing state of the data item;
- The matched action.

The possible values for the **existing state** are as follows:

- "Exists in import": the source element has been matched to a data item that exists in the destination.
- "Exists in destination": the source element has been matched to a data item that exists in the destination.
- "Does not exist": the source item has not been matched to an item in the destination.
- "Exists in both": this status indicates that the element and all of its links are already in the destination clinic.



### Note

Performance of the import <u>is not blocked</u> when this situation occurs. The user is responsible for deciding whether or not to proceed with the import process. A user who continues with an import when the patient data in the source belong to a patient other than the destination patient, must be aware of the fact that an anomaly may be generated. In other words, this may lead to the creation of two patients representing the same actual person, both of them with incomplete data, apart from the fact that it will not be possible to reimport any of the patient data imported by the user.

The table below shows the list of the actions available in relation to the data item's existing state and their effect on the import procedure.

Existing state	Action	Result
"Exists in Import"	"Skip"	The element will not be imported. All source fields linked to the element concerned will have the reference "broken" and only a description of the element will be displayed. There will be no change to the matched element.
"Exists in Import"	"Confirmed match"	The element will be imported: there will be no change to the matched destination data item. All source fields linked to the element concerned will be directed towards the relative matched destination element. All those fields linked to the matched destination patient details record element will not be changed.

Exists in Destination	"Skip"	The element will not be imported. All source fields linked to the element concerned will have the reference "broken" and only a description of the element will be displayed. There will be no change to the matched element.
Exists in Destination	"Confirmed match"	The element will not be imported: there will be no change to the matched destination data item. All fields originating from the source and linked to the element concerned will be directed towards the relative matched destination element. All these fields that refer to the matched patient details record element will show the information relating to the imported element.
"Exists in both"	"Skip"	The element will not be imported. All source fields linked to the element concerned will have the reference "broken" and only a description of the element will be displayed. There will be no change to the matched element.
"Exists in both"	"Confirmed match"	The element will be imported: the linked destination data item will be overwritten. All fields originating from the source and linked to the element concerned will be directed towards the relative matched destination element. All fields that refer to the matched patient details record element will show the information relating to the imported element.
"Does not exist"	The only action that is or can be linked is "Skip"	The element will not be imported. All source fields linked to the element concerned will have the reference "broken" and only a description of the element will be displayed.



## Note

The data from the source record can never overwrite the destination if it forms part of the list of drug database sections. There is a special tool for importing information of this type.



## Тір

In the event that a link is "broken" by setting an action as "Skip", the red message "Tab only" is displayed on the right-hand side of the field line.

# **10.3.6 TABLES OF INTERFACE RESPONSES TO CHANGES IN ACTIONS**



# Note

If one action is replaced by another one, the latter is also applied automatically to all the links that refer to the information concerned.

The table below illustrates the response of the "Patient Transfer Offline" to the change in the action of one of the data displayed in the "Master Data" and "Patient Data" sections tables.

## Note



In some cases, when the selected action is changed the following alert message appears:

Uwarning: 160037	
This record is referred from other data records. All the fields which are refering to this record will be disconnected from it and on to it: [Diagnost: test subcategories] Other - Parent :	ly the description will be kept. Below is the full list of the fields referring
OK Cancel	

Value of action	Current action is changed to:	Alert message shown?	Button clicked when alert message appears	Expected response
Empty	"Confirmed match"	No	NA	The action of all the links referring to the value just modified will be set as a "Confirmed match". The overwrite field appears (if it belongs to the list of importable sections).
Empty	"Skip"	Yes	"ОК"	The action of all the links referring to the value just modified will be set as "Skip".
Empty	"Skip"	No	"Cancel"	Nothing is changed.

"Confirmed match"	"Skip"	Yes	"ОК"	The action of all the links referring to the value just modified will be set as "Skip".
"Confirmed match"	"Skip"	No	"Cancel"	Nothing is changed.
"Import"	"Skip"	Yes	"ОК"	The action of all the links referring to the value just modified will be set as "Skip".
"Import as new"	"Skip"	No	"Cancel"	Nothing is changed.
"Skip"	"Confirmed match"	No	NA	The action of all the links referring to the value just modified will be set as a "Confirmed match". The overwrite field appears (if it belongs to the list of importable sections).
"Skip"	"Import"	No	NA	The action of all the links referring to the data item just modified will be set as "Import".

The table below shows the way the function responds to the various changes in the actions in the links. Here again, an alert message will be shown:

### Note

In some cases, when the selected action is changed the following alert message appears:





Value of action	Current action is changed to:	Alert message shown?	Button clicked when alert message appears	Expected response
Empty	"Confirmed match"	Yes	"Yes"	All the links of the same type will assume the same action is to be taken. The value matched with the link will assume the same action is to be taken.
Empty	"Confirmed match"	Yes	"No"	Nothing else is changed.
Empty	"Skip"	Yes	"Yes"	All the links of the same type will assume the same action is to be taken. The value matched with the link will assume the same action is to be taken.
Empty	"Skip"	Yes	"No"	Nothing else is changed.
"Confirmed match"	"Skip"	No	NA	All the links of the same type will assume the same action is to be taken. The value matched with the link will assume the same action is to be taken.
"Import"	"Skip"	No	Na	All the links of the same type will assume the same action is to be taken. The value matched with the link will assume the same action is to be taken.
"Skip"	"Confirmed match"	No	Na	All the links of the same type will assume the same action is to be taken.

				The value matched with the link will assume the same action is to be taken.
"Skip"	"Import"	No	Na	All the links of the same type will assume the same action is to be taken. The value matched with the link will assume the same action is to be taken.

#### **10.3.108 SAVING AND LOADING PROGRESS**

The information and the data check phase status can be saved, allowing the operation to be restarted at a later time. This can be done by clicking the "X" in the top left-hand corner or the "Close" button at the bottom of the screen. At this point the following alert message will appear:

Warning	100547			
Do you want	to save the	changes you	made to 'Pa	tient import'

Click "Yes" to close the data check screen and save the progress made.

Click "No" to close the screen without saving the progress made. Click "Cancel" and the screen will not be closed. Whenever the user clicks the **Import data** button, the calculation of the links will be carried out again, to combine the implemented status/progress of the data control with the latest changes made to the information managed by "Therapy Support Suite".

## **10.4 DESTINATION CLINIC - IMPORTING DATA**

Once all the conflicts have been resolved and all the problems have been checked and analysed, the actual importation of the data can be started by clicking the **Import** button.

### **10.5 DESTINATION CLINIC - PATIENT DATA REVIEW AND IMPORT CONFIRMATION PHASE**

After a short wait, which depends on the amount of information to be imported, the user will be informed that the patient's data has been imported. However, some of the links/fields that were "broken" by setting the corresponding action on "Skip" may have to be fixed before the import can be confirmed. In other words, these fields must be checked and re-referenced to an existing parameter.

Prescribing doctor		
General data Consumables A	Linked entity doesn't exist, you are viewing only its	previous description. This field will be you used by TMON during treatment, please correct it. [160064]

Until all the links referred to have been checked and fixed, the relative transfer and destination patient will be in "Review" status.

Once all the links listed in the above screen have been fixed, the user can confirm completion of importation of the patient.



## Note

As long as the patient is in this transitional status, he or she will not be displayed in the "Dialysis Clinic - Clinic Name" – "Activity Planning" and "Dialysis Clinic - Clinic Name" – "Resource Planning" sections.

The image below shows how the transfer appears when it is in "Review" status.

	efault Clinic												
Patient name Transfer reason Status Start date End date Hospital name TSS clinic TSS clinic name Transfer direction   test destination Import patient data Review 02 Mar 2017 11:15 Yes Default Clinic Incoming   tient transfers   tient transfers Import data Print Import data Print   There is 1 error   Patient name test destination test destination test destination Transfer reason Import data   Start date 02 Mar 2017 11:15 End date Import data Print   Start date 02 Mar 2017 11:15 End date Import data   Start date 02 Mar 2017 11:15 End date Import data   Start date 02 Mar 2017 11:15 End date Import data   Start clinic Start clinic Transfer direction Incoming   Start clinic Start clinic Print Print	atient transfers							[	Refrech	Add	Export Exc	el I	Prin
test destination, test destination import patient data Review 02 Mar 2017 11:15 Yes Default Clinic Incoming record found tient transfers Import data Print There is 1 error Patient name test destination, test destination Transfer reason Start date 02 Mar 2017 11:15 End date Start date Start clinic Start serve Import file Patient Clinic Transfer direction Incoming Patient Data_test source_test PatientData_test source_test	Praft transfers Complete transfers												
test destination, test destination import patient data Review 02 Mar 2017 11:15 Yes Default Clinic Incoming record found tient transfers Import data Print There is 1 error Patient name test destination, test destination Transfer reason Start date 02 Mar 2017 11:15 End date Start date Start clinic Start serve Import file Patient Clinic Transfer direction Incoming Patient Data_test source_test PatientData_test source_test	Patient name	Transfer rea	ison Status	Start date	End date	Hospital name	TSS clinic	TSS clinic name	Transfer di	rection			
There is 1 error       Import data       Print         Patient name       test destination, test destination       Transfer reason       Import patient data         Start date       02 Mar 2017 11:15       End date       Import patient data         Centre type       TSS Centre       Destination clinic       Destination clinic         Start clinic       Transfer direction       Incoming         Start start clinic       Review       Import file         Please fix the link in these entities before proceeding with the confirmation:       PatientData_test source_test	•	n Import pati	ient data Review	02 Mar 2017 11:15			Yes	Default Clinic	Incoming				
Patient name       test destination, test destination       Transfer reason       Import patient data         Start date       02 Mar 2017 11:15       End date         Centre type       TSS Centre       Destination clinic       Default Clinic         Start clinic       Transfer direction       Incoming         Status       Review       Import file         Please fix the link in these entities before proceeding with the confirmation:       PatientData_test source_test													
Patient name       test destination , test destination       Transfer reason       Import patient data         Start date       02 Mar 2017 11:15       End date         Centre type       TSS Centre       Destination clinic       Default Clinic         Start clinic       Transfer direction       Incoming         Status       Review       Import file         Please fix the link in these entities before proceeding with the confirmation:       PatientData_test source_test					^				Import d	ata	Print	0	
Start date       End date         Centre type       TSS Centre       Destination clinic       Default Clinic         Start clinic       Transfer direction       Incoming         Status       Review       Import file         Please fix the link in these entities before proceeding with the confirmation:       PatientData_test source_test		e test de	estination , test de	stination	1		Transfer rea	ison Impo	rt patient da	ata		-	
Start clinic Transfer direction Incoming Status Review Import file Please fix the link in these entities before proceeding with the confirmation:													
Status 🖸 Review Import file Please fix the link in these entities before proceeding with the confirmation:	Centre typ	e TSS Ce	ntre			De	estination c	linic <u>Defa</u>	<mark>ılt Clinic</mark>				
Please fix the link in these entities before proceeding with the confirmation:	Start clin	c				Tra	ansfer direc	tion Incon	ning				
riedse nx die link in diese enddes before proceeding war die comminisation.	Statu	s 🛚 Reviev	v				Import	t file					
		Please n Pharmad Pharmad	x the link in these cological prescripti cological prescripti	entites before procee on : Dialysis, Baxada, ( on : Dialysis, Baxada, (	oing with tr ) - [Drug: Ba ) - [Product	ie confirmation: ixada] packages: Spiec	es 20mg ta	blets ] [ <i>160063</i> ]					

Configurations for this clinic are not properly setted. This can cause several issues. Please contact a user with clinic manager role.         Exit destination           Title         First name         test destination           Birth name         Configurations for this clinic are not properly setted. This can cause several issues. Please contact a user with clinic manager role.         Configurations for this clinic are not properly setted. This can cause several issues. Please contact a user with clinic manager role.           Birth name         test destination         Date of birth         Q 2Mar 2017           Nationality         Gender         Male         Male           Patient number         12345         Patient regional autonomic number         Image: contact with clinic           Admission dataysis status         Hemodialysis         Admission positional status         Not active           Admission date         Q2 Mar 2017 11:14         Reason for patient admission         New SBD patient           Bratient RRT initiation date         Q2 Mar 2017 11:14         Reason for patient admission         New SBD patient           Current hospital         Q2 Mar 2017 11:14         Reason for patient admission         New SBD patient           Residence address         VLV 271         Country         Country         Country           Postcode (home address)         VLV271         Country (home address)         Cr	inistrative data			Edit Print 🔻 🔇 🛇
Last nameest destinationSecond last nameBirch nameQ Mar 2017NationalityContext of birchPatient number12345Patient regional autonomic numberPatient regional autonomic numberPatient code1Patient codeMaleAdmission dalayistatusHemodialayistAdmission dalayistatusHemodialayistAdmission dalayistatusHemodialayistAdmission dalayistatusHemodialayistAdmission dalayistatusHemodialayistAdmission dalayistatusHemodialayistDialyric ageQ Mar 2017 11:14Patient RRT initiation dateFirst const.t with clinicDialyric ageGradeStreetGradeDialyric ageCouncertPostcodePatient exoneration codesStreet (home address)Clity (home address)Postcode (home address)Qraet Briterin Tel: Mone (2)Postcode (home address)Patient Tel: Home (2)Postcode (home address)Patient Tel: Home (2)Patient Tel: MobileQraet AddressPatient Tel: MobileQraet AddressPatient Tel: MobilePatient Tel: WorkPatient Tel: MobilePatient Tel: WorkPotient tel: MobilePatient Tel: WorkPatient Tel: MobileQraet AddressPatient Tel: MobileDocument numberLidentity documentLidentity documentExpiration dateDocument numberLidentity documentLidentity documentPatient Tel: MobileLidentity	Configurations for this clinic are not pr	operly setted. This can cause several iss	sues. Please contact a user with clininc manager role.	
Birth nameColumn (Column)Out 2017NationalityIdenceMalePatient number12345Patient regional autonomic numberIdencePatient number1Patient monitori ID (ley code)1Admission dialysis statusHemodialysisAdmission positional statusNot activeAdmission dialysis statusHemodialysisReason for patient admissionNew ESRD patientDialytic age02 Mar 2017 11:14Reason for patient admissionNew ESRD patientDialytic ageIdenceFirst dialysis in centreIdenceDialytic ageIdenceFirst dialysis in centreIdenceDialytic ageIdenceFirst contact with clinicIdenceStreetIdenceCountryIdenceIdencePostcodeVID27XCountry (home address)IdenceIdencePostcode (home address)VID27XCountry (home address)IdenceIdencePostcode (home address)IdenceIdenceIdenceIdencePostcode (home address)IdenceIdenceIdenceIdencePostcode (home address)IdenceIdenceIdenceIdencePatient Te: HomeIdenceIdenceIdenceIdencePatient Te: HomeIdenceIdenceIdenceIdencePatient Te: HomeIdenceIdenceIdenceIdencePatient Te: HomeIdenceIdenceIdenceIdencePatient Te: HomeIdenceIdenceIdenceIdence <th>Title</th> <th></th> <th>First name</th> <th>test destination</th>	Title		First name	test destination
NationalityCenderAdmissionPatient number12345Patient regional autonomic number1Patient number1Patient regional autonomic number1Admission dialysis statusHemodialysisAdmission positional statusNot activeAdmission dialysis status20 Mar 2017 11:14Reason for patient admissionNew ESRD patientPatient RRT initiation dateControlFirst dialysis in centreImage: ControlImage: ControlDialytic ageCurrent hospitalControlPatient centreImage: ControlImage: ControlPostcodeCurrent hospitalImage: ControlImage: ControlImage: ControlImage: ControlPostcodeVIO 271CountryCountryImage: ControlImage: ControlImage: ControlPostcodeVIO 271CountryCountry (home address)Image: ControlImage: ControlImage: ControlPostcodeVIO 271Country (home address)Image: ControlImage: ControlImage: ControlImage: ControlPostcodeVIO 271Country (home address)Image: ControlImage: ControlImage: ControlImage: ControlImage: ControlPatient Tei: MonileImage: ControlImage: ControlImage: ControlImage: ControlImage: ControlImage: ControlPostcodeImage: ControlImage: ControlImage: ControlImage: ControlImage: ControlImage: ControlPostcodeImage: ControlImage: ControlImage: ControlImage: ControlI	Last name	test destination	Second last name	
Patient number       12345       Patient regional autonomic number         Patient code       1       Patient monitor ID (key code)       1         Admission dialysis status       Hemodialysis       Admission positional status       Not active         Admission dialysis status       02 Mar 2017 11:14       Reason for patient admission       New ESRD patient         Patient RRT initiation date       02 Mar 2017 11:14       Reason for patient admission       New ESRD patient         Dialytic age       02 Mar 2017 11:14       Reason for patient admission       New ESRD patient         Current hospital       Current hospital       First contact with clinic       Current         Current hospital       First contact with clinic       Country	Birth name		Date of birth	02 Mar 2017
Patient code1Admission dialysis statusHemodialysisAdmission positional statusNot activeAdmission date02 Mar 2017 11:14Reason for patient admissionNew ESRD patientPatient RRT initiation date1First dialysis in centreImage: StatusNew ESRD patientDialytic ageImage: StatusFirst contact with clinicImage: StatusNew ESRD patientCurrent hospitalImage: StatusPatient exoneration codesImage: StatusNew ESRD patientStreetImage: StatusImage: StatusImage: StatusImage: StatusImage: StatusStreetImage: StatusImage: StatusImage: StatusImage: StatusImage: StatusPostcodeImage: StatusImage: StatusImage: StatusImage: StatusImage: StatusPostcode (home address)Image: StatusImage: StatusImage: StatusImage: StatusImage: StatusPostcode (home address)Image: StatusImage: Stat	Nationality		Gender	Male
Admission dialysis status       Hemodialysis       Admission positional status       Not active         Admission date       02 Mar 2017 11:14       Reason for patient admission       New ESRD patient         Patient RRT initiation date       Impose of the status       New ESRD patient       New ESRD patient         Dialytic age       Impose of the status       First contact with clinic       Impose of the status       Impose of the status         Current hospital       Impose of the status       Impose of the	Patient number	12345	Patient regional autonomic number	
Admission date02 Mar 2017 11:14Reason for patient admissionNew ESRD patient:Patient RRT initiation dateFirst dialysis in centreDialytic ageFirst contact with clinicCurrent hospitalPatient exoneration codesStreetCountryPostcodeCountryPostcode (home address)City (home address)Great Britain and Northern IrelanPostcode (home address)Patient Tel: Home (2)Patient Tel: MobilePatient Tel: WorkPatient Tel: MobileDocument numberDorument typeDocument numberNat. Insurance numberInsurance company name	Patient code	1	Patient monitor ID (key code)	ĩ
Patient RRT initiation date       Initiation date       Initiation date       Initiation date         Dialytic age       First dialysis in centre       Initiation date	Admission dialysis status	Hemodialysis	Admission positional status	Not active.
Patient RRT initiation date       Initiation date       Initiation date       Initiation date         Dialytic age       First dialysis in centre       Initiation date	Admission date	02 Mar 2017 11:14	Reason for patient admission	New ESRD patient
Dialytic age       Inst contact with clinic         Current hospital       Patient exoneration codes         Residence address	Patient RRT initiation date			
Current hospital       Patient exoneration codes       Insurance company name         Residence address       Insurance company name       Insurance company name				
Residence address       Image: constraint of the sect of the s			Patient exoneration codes	
Postcode     Country       Domicile address     Country       Street (home address)     City (home address)       Postcode (home address)     I/10 7/L       Contacts details     Country (home address)       Contacts details     Great Britain and Northern Ireland       Patient Tel: Home     Patient Tel: Home (2)       Patient Tel: Mobile     Patient Tel: Work       Patient Tel: Mobile     Patient Tel: Work       Patient Tel: Mobile     Patient Tel: Work       Document type     Insurance number       Health insurance     Insurance company name				
Domicile address     Image: Control of City (home address)       Street (home address)     Image: Control of City (home address)       Postcode (home address)     Image: Control of City (home address)       Postcode (home address)     Image: Control of City (home address)       Contacts details     Image: Control of City (home address)       Patient Tel: Home     Image: Control of City (home address)       Patient Tel: Home     Image: Control of City (home address)       Patient Tel: Home     Image: Control of City (home address)       Patient Tel: Home     Image: Control of City (home address)       Patient Tel: Home     Image: Control of City (home address)       Patient Tel: Home     Image: Control of City (home address)       Patient Tel: Home     Image: Control of City (home address)       Patient Tel: Home     Image: Control of City (home address)       Patient Tel: Mobile     Image: Control of City (home address)       Patient Tel: Mobile     Image: Control of City (home address)       Patient Tel: Mobile     Image: Control of City (home address)       Patient type     Image: Control of City (home address)       Patient type     Image: Control of City (home address)       Patient type     Image: Control of City (home address)       Health Insurance number     Image: Control of City (home address)       Nat. Insurance number     Image: Control of City (home address)	Street		City	
Street (home address)       V10 7/L       Country (home address)       Great Britain and Northern Ireland         Contacts details	Postcode		Country	
Postcode (home address)     V10 7VL     Country (home address)     Great Britain and Northern Ireland       Contacts details	Domicile address			
Contacts details       Patient Tel: Home       Patient Tel: Mobile       Patient Tel: Mobile       Patient Tel: Mobile       Patient Tel: Mobile       Patient fax       Patient fax       Document type       Document type       Expiration date       Health insurance       Nat. Insurance number	Street (home address)		City (home address)	
Patient Tel: Home     Patient Tel: Home (2)       Patient Tel: Mobile     Patient Tel: Work       Patient Tel: Mobile     Patient Tel: Work       Patient fax     Patient Tel: Work       Patient fax     Patient Tel: Work       Document type     Document number       Expiration date     Issuing country       Health insurance     Insurance company name	Postcode (home address)	<u>IV10 7YL</u>	Country (home address)	Great Britain and Northern Ireland
Patient Tel: Mobile     Patient Tel: Work       Patient fax     Patient Tel: Work       Patient fax     Patient email       Identity document     Patient number       Document type     Document number       Expiration date     Issuing country       Health insurance     Insurance company name	Contacts details			
Patient fax     Patient email       Identity document     Patient email       Document type     Document number       Expiration date     Issuing country       Health insurance     Insurance company name	Patient Tel: Home		Patient Tel: Home (2)	
Identity document       Document type       Document type       Expiration date       Health insurance       Nat. Insurance number	Patient Tel: Mobile		Patient Tel: Work	
Document type     Document number       Expiration date     Issuing country       Health insurance     Insurance company name	Patient fax		Patient email	
Expiration date Issuing country Health insurance Nat. Insurance number Insurance company name	Identity document			
Health insurance     Insurance company name	Document type		Document number	
Nat. Insurance number Insurance company name			Issuing country	
			•	
Local health authority Responsible healthcare authority				
			Responsible healthcare authority	
European health insurance European health insurance code Valid from (TEAM)				
(TEAM)	Valid to (TEAM)			

The image below illustrates a patient in "Review" status.

A banner appears at the top of the screen indicating that the patient is in this transitional status. Click "See details" to access the screen shown at the start of this point.

## 10.5.1 "BROKEN" LINKS

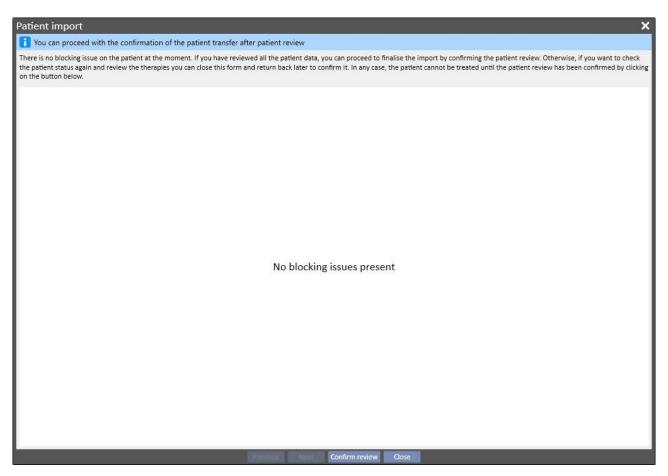
During the control phase, the actions of some elements and the relative links have been set as "Skip". In other words, the value to which the link refers has not been imported by the "Patient Transfer Offline" and therefore it will not be possible to access the parameter to which the connections referred. However, it will still be possible to select another element and thus create a new link. A link in this status is said to be "**broken**".

To avoid the total loss of information content, links referring to data not imported will be provided with a representative description of what the related information was. In other words, they will become little more than a descriptive field.

"Therapy Support Suite" highlights the fact that the information can no longer be accessed by colouring it grey; in some cases, it will be further indicated by an alert or even an error message.

## **10.5.2 CONFIRMATION OF THE IMPORT**

Once all the links indicated have been fixed, the screen will be as follows:



It is now sufficient to click the "Confirm review" button.

After this the patient will become active, the transfer will be complete and the patient offline transfer procedure has been concluded.

### **11 DIALYSIS CLINIC – CLINIC NAME**

### **11.1 CREATING A NEW PATIENT**

A new patient can be created in this section. The system automatically assigns a patient code that identifies the patient in Therapy Support Suite. This code cannot be changed. All the patient's administrative data can be entered. To save the new patient's details, at least, fill in all the fields in purple. Once this information has been saved, the patient will automatically appear in the patient list.

Born (y) Gender Cod. [4] Status /							
ninistrative data						Cancel Save	
Title		Title	•••	First name	83		
Last name	83			Second last name			
Birth name				Date of birth	E3	dd/mm/yyyy	Ħ
Nationality		Nationality	••	Gender			•
Patient number				Patient regional autonomic number	_		
Patient code		[4]		Patient monitor ID (key code)			
	-	[4]			-		
Admission dialysis status	×		•	Admission positional status	E3		•
Admission date		24/09/2019 11:41		Reason for patient admission		New ESRD patient	•
Patient RRT initiation date		dd/mm/yyyy		First dialysis in centre		dd/mm/yyyy	Ħ
Dialytic age				First contact with clinic		dd/mm/yyyy	Ħ
Current hospital				Patient exoneration codes			
Residence address							
Street				City		City	
Postcode		Postcode	•••	Country		Great Britain and Northern Ireland	×
Domicile address							
Street (home address)				City (home address)		City (home address)	•••
Postcode (home address)		Postcode (home address)	•••	Country (home address)		Great Britain and Northern Ireland	× •••
Contacts details							
Patient Tel: Home				Patient Tel: Home (2)			
Patient Tel: Mobile				Patient Tel: Work			
Patient fax				Patient email			
Identity document						1	
Document type				Document number			
Expiration date		dd/mm/yyyy	Ħ	Issuing country		Issuing country	•••
Health insurance							
Nat. Insurance number				Insurance company name			
Local health authority		Local health authority	•••	Responsible healthcare authority		Responsible healthcare authority	
European health insurance							
European health insurance code (TEAM)				Valid from (TEAM)		.dd/mm/yyyy	Ħ
Valid to (TEAM)		dd/mm/yyyy	Ħ				
Temporary foreigner insurance							
Foreigner temporary code (STP)				Valid from (STP)		dd/mm/yyyy	Ŧ
Valid to (STP)		dd/mm/yyyy	Ŧ				

The patient is considered a duplicate if the **First name**, **Last name**, **Date of birth** and **Gender** are the same as those of an existing patient. In this case, admission is only possible if the specific flag in **Configuration parameters** is enabled. When this flag is enabled, the duplicate check can be extended to another text field, in addition to those listed above. (*See section 4.1.1 of the Service Manual*).

If a duplicate patient is created, both patients (the already existing one and the new one) will be in a blocked status until the merge of both patients is completed. The same blocked status can be triggered by creating a new merge of two patients even if not duplicates. In this blocked situation the patients' data cannot be edited.

Please proceed to Patient merge with duplicated patient/s before use this one	
Administrative data	Readonly patient Print
Title	First name 🚺 David

# **11.2 GENERAL INFORMATION**

This section contains:

In the first tab, general Information on the dialysis clinic (name, code, clinic description, address, staff, etc.).

lysis unit							
							Edit Print 🔻
eneral information	and a second second						
	Clinic information —						
	Clinic name	Default Clinic				Clinic code	99999
	Clinic description	Default Clinic				City	Test Town
	Postcode	16039				Address	Test Street, 23
	Country	Great Britain and N	orthern Irelan	<u>id</u>		Fax	
	Telephone	02356-125422				Photo	
							Therapy Support Suite
	Medical Director	Dr. Tester				Acquisition/Opening date	01 Dec 2009
	Contact person	T			1		
		Tester					
Staff	Employed full-time	Employed part-time	Employed	Consultant	Consultant		
Staff type	units	units	Hours/week		Hours/week		
Nephrologists	4.00	2.00	2.00	1.00	4.00		
A	vailable modalities	HDF					
		APD					
lote Centre module							
Test							
Test Centre opening tin		Opening to Centre	s shifts				
Test	te Is open Opening from ✓ 07:00	Depening to Centre 21:00 2.00	s shifts				
Test Centre opening tin Opening day Monday	Is open Opening from	21:00 2.00	s shifts				
Test Centre opening tin Opening day Monday Tuesday	Is open Opening from 07:00 07:00	21:00 2.00 21:00 2.00	s shifts				
Centre opening tin Opening day Monday Tuesday Wednesday	Is open         Opening from           Image: Opening from         07:00           Image: Opening from         07:00           Image: Opening from         07:00	21:00         2.00           21:00         2.00           21:00         2.00           21:00         2.00	s shifts				
Test Centre opening tin Opening day Monday Tuesday	Is open Opening from 07:00 07:00	21:00 2.00 21:00 2.00	s shifts				

In the second tab, information about the organisation of the clinic's dialysis stations and the emergency equipment installed.

Dialysis unit					Edit Print 🔻	000
General informa	tion Dialysis	s <mark>uni</mark> t				
Dialy	sis unit main fe	atures				
	Centre st	tations	22.00 units	For infected patients	5.00 units	
Isolation level						
Infection type	Isolation level	No. cent	re stations tot. dedicated units			
Empty Grid	l <del></del> .					
E	mergency equi	pment				
	Electrical gen	erator	Yes	Oxygen distribution plant	Yes	
Second elec	trical power pr	ovider	Yes			

### **11.3 HOME PAGE**

This section contains a quick overview of the patient's key dialysis parameters. It is divided into two main screens:

The first screen contains all active prescriptions.

- Click each line to access the Patient HD prescription;
- Click the <sup>(A)</sup> button for direct access to the Patient dashboard;
- Click the <sup>le</sup> button for direct access to the Vascular access for the prescription;
- Click the <sup>(O)</sup> button for direct access to the Treatment schedule;

ctive H	D prescr	iptions							
<b>F</b>			Patient	Prescription name	Dry body weight Kg	Treatment duration	Dialyzer name	Basic buffer name	Concentrate name
6	r k	0	Thompson, Josie	Default Prescription	51.0	03:00	FX 100	bibag	smartbag 111.5
6	r E	0	Morton, Katherine	Default Prescription	73.0	03:30	FX 10	bibag	AC-F 219/1
6	1 6	0	Middleton, Mary	Default Prescription	78.7	04:00	FX 100	bibag 5008	AC-F 313/1
6	1 6	0	Metcalfe, Jonathan	Default Prescription	85.8	04:00	FX 100	bibag	AC-F 219/1
4	r k	0	Hartley, Sarah	Default Prescription	80.0	03:30	FX 100	bibag	AC-F 219/1
6	r k	0	Brennan, Nicholas	Default Prescription	60.0	05:00	FX 100 classix	bibag	AC-F 313/2
6	r k	3	Aitken Lambert, David	Default Prescription	65.2	04:00	FX 1000	bibag	AC-F 313/2

The second screen contains the last 20 treatments performed in the clinic. Click a row for direct access to the selected treatment.

P		Patient	Treatment date	Pre-dialysis weight Kg	Post-dialysis weight Kg	UF volume ml	Pre-dialysis systolic mmHg	Post-dialysis systolic BP mmHg	Pre-dialysis diastolic mmHg	Post-dialysis o
	1	Middleton, Mary	20 Nov 2010 16:50		79.10	2480	142	136	74	66
	1	Thompson, Josie	20 Nov 2010 16:34		49.10	2480	142	136	74	66
	1	Newman, Noah	20 Nov 2010 15:46		92.10	2480	142	136	74	66
	1	TRTEST_137560, TRTEST_2	20 Nov 2010 15:46		92.10	2480	142	136	74	66
	8	Morton, Katherine	20 Nov 2010 15:41		72.10	2480	142	136	74	66
	1	Moore, Eleanor	20 Nov 2010 15:34		49.10	2480	142	136	74	66
	1	TRTEST_39841, TRTEST_1	20 Nov 2010 15:34		49.10	2480	142	136	74	66
	1	Metcalfe, Jonathan	20 Nov 2010 15:28		84.10	2480	142	136	74	66
	1	Hartley, Sarah	20 Nov 2010 15:22		79.10	2480	142	136	74	66
	1	Brennan, Nicholas	20 Nov 2010 15:16		59.10	2480	142	136	74	66
	1	Aitken Lambert, David	20 Nov 2010 14:58		84.10	2480	142	136	74	66
	1	Aitken Lambert, David	18 Nov 2010 00:00	66.80	65.20	1900	167	140	76	73
	B	Hartley, Sarah	18 Nov 2010 00:00	82.60	79.90	3240	156	136	87	68
	1	Middleton, Mary	18 Nov 2010 00:00	81.00	78.60		130	120	80	80
	1	Moore, Eleanor	18 Nov 2010 00:00	48.50	47.00	905	99	92	64	59

## **11.4 CLINIC SCHEDULER**

This section provides a complete weekly or monthly overview of the clinic's scheduling and treatments. The navigation buttons next to the time bar display the weeks or months before or after the current date, depending on the precision set in the **Accuracy** filter.

## 11.4.1 SCHEDULING

Scheduling covers planned recurrent treatments, where no dialysis session has yet occurred. If two or more treatments are scheduled at the same time and using the same bed, they will be displayed with a red border and yellow diagonal bands.



Passing the mouse over a recurring treatment, the following specifications will appear:

- Resource, Shift, Prescription name: taken from "Treatment schedule";
- Therapy, Administration, Dosage: taken from "Pharmacological therapy";
- Medical orders: read from "Medical orders" (see section 9.3.7);
- Laboratory tests: read from "Laboratory test scheduling" (see section 9.4.3);

<	Patient	23/09/2019 Monday	24/09/2 Tuesda		25/09/2019 Wednesday	26/09/2019 Thursday	27/09/2019 Friday	28/09/ Saturo		29/09/2019 Sunday
Ait	ken Lambert, David		Room 1 - Be Afternoon S	shift	Room 1 - Bed 2 Morning Shift	Room 1 - Bed 1 Afternoon Shift	Room 1 - Bed 2 Morning Shift	Room 1 - I Afternoon	Shift	Room 1 - Bed 2 Morning Shift
E	rennan, Nicholas			1	Resource: Room 1 - Shift: Afternool			î		
	Hartley, Sarah		Room 1 - E Afternoon	-	scription: Default P				1	
			Room 1 - B	Active ing	redients (Drug nam	e) (Fepili)	Administration Or	2103899-00	Dosage	12 ml
N	letcalfe, Jonathan		Afternoon			(Tephi) (Mitopep)	Or	5R		12 mg/ml
			Room 1 - E	Message:	;					
	Middleton, Mary		Morning S	Need Pot	assium at dialysis er	d				
N	Norton, Katherine				Room 2 - Bed 1 Afternoon Shift		Room 2 - Bed 1 Afternoon Shift			
1 0	Thompson, Josie		Room 1 - Be Morning Sh			Room 1 - Bed 2 Morning Shift		Room 1 - I Morning S	ihift	

After clicking on a treatment schedule, more scheduling data information is viewed and changes can be made where necessary:

Open schedule plan Save Delete
atment prescription
atment prescription
Resource: Room 1 - Bed 1
Shift: Afternoon Shift
scription: Default Prescription
Re

The images show the Treatment Schedule, the Pharmacological Therapy, the Medical Orders and the Laboratory Tests.

## **11.4.2 CHANGING THE TREATMENT SCHEDULE**

The treatment schedule can be changed by suitably populating the desired fields. Once the date, resource and shift have been changed, the schedule will appear as follows.

Brennan, Nicholas 🔁 🔗				
			Open schedule plan Save	Delete
Scheduled date		riginal date	Treatment prescription	
01/10/2019	I 🔁 30	) Sep 2019		
Resource	Or Or	riginal resource	Resource: Room 1 - Bed 1	
Room 1 - Bed 2	× 🕑 <u>r</u> o	oom 1 - Bed 1	Shift: Afternoon Shift	
Shift	Or Or	riginal shift		
Morning Shift	× … 🕑 Af	ternoon Shift	Prescription: Default Prescription	

Several operations can now be performed, including:

- Click the V button to return to the original data;
- Click the
   Open schedule plan
   button to view the original schedule in a pop-up window;
- Click the Delete button to close the pop-up window and delete all pending changes;
- Click the Save button to close the pop-up window and save pending changes;

# Example: Schedule change

	Ac	curacy	Week 40	Filter for Sh	ift:	▼ Advar	nced filters	Next
	Week	•	01/10/2019	Filter for Roo	om:	Filter for Resou	rce:	2
Patient		30/09/2019 Monday	01/10/2019 Tuesday	02/10/2019 Wednesday	03/10/2019 Thursday	04/10/2019 Friday	05/10/2019 Saturday	06/10/2019 Sunday
Aitken Lamber	t, David	Room 1 - Bed 2 Afternoon Shift	Room 1 - Bed 1 Afternoon Shift	Room 1 - Bed 2 Morning Shift	Room 1 - Bed 1 Afternoon Shift	Room 1 - Bed 2 Morning Shift	Room 1 - Bed 1 Afternoon Shift	Room 1 - Bed 2 Morning Shift
Brennan, Nic	holas:	Room 1 - Bed 1 Afternoon Shift		Room 1 - Bed 1 Afternoon Shift		Room 1 - Bed 1 Afternoon Shift		
Hartley, Sa	arah		Room 1 - Bed 2 Afternoon Shift		Room 1 - Bed 2 Afternoon Shift		Room 1 - Bed 2 Afternoon Shift	
Metcalfe, Jon	athan		Room 1 - Bed 2 Afternoon Shift		Room 1 - Bed 2 Afternoon Shift		Room 1 - Bed 2 Afternoon Shift	
Middleton,	Mary		Room 1 - Bed 2 Morning Shift		Room 1 - Bed 2 Morning Shift		Room 1 - Bed 2 Morning Shift	
Morton, Katl	nerine	Room 2 - Bed 1 Afternoon Shift		Room 2 - Bed 1 Afternoon Shift		Room 2 - Bed 1 Afternoon Shift		
Thompson,	Josie		Room 1 - Bed 2 Morning Shift		Room 1 - Bed 2 Morning Shift		Room 1 - Bed 2 Marning Shift	

Step 1 - Select schedule to be changed

Scheduled date 01/10/2019 Original date 30 Sep 2019 Treatment prescription	Save Delete
	ion
Original resource     Resource: Room 1 - Bed 1	
Room 1 - Bed 2 Shift: Afternoon Shift	
Shift Original shift	
Morring Shift Rescription: Default Prescription: Default Prescription	

Step 2 - Correct scheduling information
---

	Ac	curacy	Week 4	10	Filter for Shift:		•	Advan	ced filters		
	Week	•	01/10/2019		Filter for Room:		<b>•</b> Fi	ilter for Resour	ce:	•	¢
Patien	t	30/09/2019 Monday	01/10/2019 Tuesday	(	02/10/2019 Wednesday	03/10/2019 Thursday	04	/10/2019 Friday	05/10/2019 Saturday		06/10/2019 Sunday
<mark>itken La</mark> mbe	ert, David	Room 1 - Bed 2 Afternoon Shift	Room 1 - Bed 1 Afternoon Shift		bom 1 - Bed 2 lorning Shift	Room 1 - Bed 1 Afternoon Shift	Mor	m 1 - Bed 2 ning Shift	Room 1 - Bed 1 Afternoon Shift		Room 1 - Bed 2 Morning Shift
Brennan, N	icholas		Room 1 - Bed 1	Ro	oom 1 - Bed 1 fternoon Shift		Roo Afte	m 1 - Bed 1 rnoon Shift			
Hartley, S	arah		Room 1 - Bed 2 Afternoon Shift			Room 1 - Bed 2 Afternoon Shift			Room 1 - Bed 2 Afternoon Shift		
Metcalfe, Jo	nathan		Room 1 - Bed 2 Afternoon Shift			Room 1 - Bed 2 Afternoon Shift			Room 1 - Bed 2 Afternoon Shift		
Middleton	, Mary		Room 1 - Bed 2 Morning Shift			Room 1 - Bed 2 Morning Shift			Room 1 - Bed 2 Morning Shift		
Morton, Ka	ther <mark>i</mark> ne	Room 2 - Bed 1 Afternoon Shift			oom 2 - Bed 1 fternoon Shift			m 2 - Bed 1 moon Shift			
Thompson	, Josie		Room 1 - Bed 2 Morning Shift		Resource: Room 2 Shift: Afterno escription: Default	on Shift					
					gredients (Drug nar			Administra	ation route	Dosage	
						/ (Adolaf)		Int	ramuscular		15 ml
					Eriramu	f (Eriramuf)			Oral		78 mg

Step 3 - Scheduler updates its status with new scheduling information

## 11.4.2.1 DRAGGING

The treatment date can be changed by dragging it to the day desired. Scheduled treatments cannot be dragged into the past or into the same position as an existing scheduled treatment.

If there are drug therapies associated with the treatment, they will be managed as administrations with no specified dosage. A message will notify the user of the change.

Warning:	100872
The drug list is	s removed for this treatment, and all active and to be review drugs will be passed to the treatment with [?] and without dosage
	οκ

# 11.4.2.2 IMPACT ON THE DRUG THERAPY AFTER SHIFTING A SCHEDULED TREATMENT

Every time the scheduled treatment date is changed, the drug therapy dosage for that treatment is reset. When a treatment is to be performed on the newly scheduled date, the user will be asked to manually confirm the related drug therapy, as described in detail in *Section 9.3.8* 

## **11.4.3 TREATMENTS**

The scheduler allows the user to display patients' past recurring treatments. A recurring treatment differs from a scheduled treatment in that the former is marked with a dialysis devce icon.

Room 1 - Bed 2
Morning Shift
A

Past recurring treatments where no treatment was administered are not displayed.

If the treatment icon has a red border, problems occurred during the dialysis session and some messages may appear in the preview.

Week       24/09/2019       Filter for Resource:       Image: Construction of the second of the se		Acc	curacy	W	eek 39	Filter for Shift:		•	Advanc	ed filters		
Patient       23/09/2019 Mondoy       24/09/2019 Tuesday       25/09/2019 Wednesday       26/09/2019 Tuesday       28/09/2019 Friday       28/09/2019 Saturday       29/09/2019 Saturday       29		Week	•	24/09/20	19 🌐	Filter for Room:		•	Filter for Resourc	e:	•	æ
Atternoon shift     Morning shift     Atternoon shift     Morning shift       Greennan, Nicholas     Resource: Room 1 - Bed 1     Image: Shift	Patient							1			)	29/09/2019
Hartley, Sarah     Shift: Afternoon Shift     Image: Constraint of the second o	itken Lamber	t, David		After	rnoon Shift	Morning Shift	Afternoon Shift		lorning Shift	Afternoon Shift		Morning Shift
Hartley, Sarah Art Hartley, Sarah Art Hartley, Sarah Art Active ingredients (Drug name) Administration route Dosage Fascox (Feplil) Oral 12 ml Messages Need Potassium at dialysis end Norton, Katherine	Brennan, Nic	holas					_	8				
Atterner     Administration route     Dosage       Administration route     Dosage       Fascox (Fepili)     Oral     12 ml       Niddleton, Mary     Mor     Messages       Morton, Katherine     Need Potassium at dialysis end	Hartley, Sa	rah					n		8			
Middleton, Mary Morton, Katherine Morton, Kather	Aetcalfe Ion	athan			Active ingredient	s (Drug name)		Adn	ninistration route	Dosage		
Middleton, Mary Mor Messages Need Potassium at dialysis end Norton, Katherine	netcane, Jon	auriari				Fascox (Fepili)			Oral	10	12 m	1
Middleton, Mary Messages Need Potassium at dialysis end Morton, Katherine						Nunpan (Mitopep	)		Oral		12 mg	/ml
Morton, Katherine	Middleton, I	Mary		Mor	Messages							
Thompson Losie Room 1-Bel 2 Marring Shift Marring Shift Marring Shift Marring Shift					Need Potassium	at dialysis end						
Thompson Iosia Rodmi'seid 2 Morning shit Morning shit Morning shit	Morton, Kath	nerine		l		0		1	0			
	Thompson	losie		Roor	ning Shift	•	Room 1 - Bed 2 Morning Shift		•	Room 1 - Bed 2 Morning Shift	7	
	mompson, s	iosie			2							
								1	11			

Click the desired recurring treatment and the associated treatment administered will be opened so that all the data can be viewed.

Recurring treatments cannot be moved.

## **11.5 PD TREATMENT SCHEDULER**

The **PD scheduler** displays all dialysis treatments scheduled and completed for patients during the selected month. Different time intervals can be selected using the filters and navigation arrows.

PD treatment schedule	r															Di	oleten	realtr	eatin	ants	Crea	ite trea	atmei	nts fro	om sch	eduling	
						Se	pte	em	ber	r			Ad	Vance	ed <mark>f</mark> ilte	rs											
					24	4/09/2				Ħ									2	1							
< Patient	01 02 Sun Mo		04 Wed		06 Fri	07 Sat	08 Sun	09 Mon	10 Tue	11 Wed	12 Thu	13 Fri	14 Sat	15 Sun	16 Mon	17 Tue	18 Wed	19 Thu	20 Fri	21 Sat	22 Sun		24 Tue			27 28 Fri Sa	
Saunders, Benjamin					•			۵	۵							ø			ø								
Patient is hospita	alised 🗗	Real t	reatme	ent <b>(</b>	Z s	chedu	uled tr	eatm	ent																		

The scheduler includes scheduled PD treatments and completed treatments. The dates indicated with an orange stripe refer to the patient's admission status.

Moving the mouse over the recurrences, a bubble appears that summarizes the prescription to be used for that date or for that treatment.

	-		
Clicking on a scheduled appointment		the details are disp	played as follows:

		Open PD treatment scheduler Save
eduled date /09/2019	Ħ	PD treatment schedule plan Prescription: CAPD prescription - CAPD - INCR
		PD Modality: CAPD - INCR

Click on a recurring treatment with the details of the treatment administered.

# **11.5.1 CHANGING THE TREATMENT SCHEDULE**

8

A scheduled recurrence can be moved to a different date provided that there is no other appointment there already. There are two ways to change a recurrence.

The first method requires clicking on the recurrence to be moved and waiting for the details to appear at the bottom of the window. The **Scheduled date** field permits a new date to be selected and the update to be saved. If there is already a scheduled appointment on the date indicated, the message below appears, and the date cannot be saved.

eady a recu	rrence or	n the sel	ected date
	OK		
	eady a recu	eady a recurrence or OK	eady a recurrence on the sel

An appointment date can also be changed by dragging the recurring appointment to be updated to a date where there are no appointments. In this case, there is no need to save because dragging has an immediate effect.

ĺ		
	Ø	
	2	

Regardless of the technique used to update a schedule, it will be displayed with the symbol <u>schedule</u>, which acknowledges the schedule exception.

Updated schedules can be returned to their initial status using the button located next to the **Scheduled date** field of the details, and then saving. Alternatively, the appointment can be dragged back to its original date. In this case, the change is effective immediately.

### **11.5.2 CREATING PD TREATMENTS**

Patient treatments can be created individually in the patient tab or in the **PD treatment scheduler**. To create treatments in the patient tab, refer to the Optional PD Form.

The PD treatment scheduler allows recurring PD treatment appointments to be created to replaced schedules in the

selected time interval. Creating treatments is performed by pressing the menu asks the user if the treatment should be created for all patients displayed or for only one.

create treatments from scheduling
For all patients
Select patient

After selecting, creation will start.

At the end of the operation, a message informs the user of the number of treatments created.

i	Informati	on: 170055	
Cre	eation com	pleted. Created 21 t	reatment/s
		ОК	

## **11.5.3 DELETING PD TREATMENTS**

PD treatments can be deleted in the **PD treatment scheduler** using the Delete real treatments button. The system asks the user it the operation should be performed for all patients or only for one as described in the previous paragraph. At the end of the operation, a message informs the user of the number of treatments deleted.





## Note

Only treatments not yet closed can be deleted.

## **11.6 CLINIC RESOURCE SCHEDULER**

	Accu	iracy	Tuesda	ay	Filter for Shift:		Advanced filters	
	Day	•	24/09/2019	Ħ	Filter for Room:	Fi	Iter for Resource:	• 2
Re	sources	05:00 06			0:00 11:00 12:00	13:00 14:00 15:00	16:00 17:00 18:00	) 19:00 20:00 21:00 22:0
Room	1 - Bed 1					Aitk	en Lambert, David [3	
Room	1 - Bed 2		6 Middlet	on , Mary [63416	0	🖉 Hartley , Sa	rak [93710]	
			Thomps	on Josie [16.		🖌 Metcalfe , J	onathan (16821)	
Room	1 2 - Bed 1							
Room	1 2 - Bed 2							
Room	14 - Bed 1							

This section provides a complete overview of resource scheduling.

The difference compared to the "Clinic Scheduler" is that planning is resource-led (based on rooms and beds).

In the background, with the configured colours, the various shifts are displayed for the current day, and in grey, the times the clinic is closed. In the weekly view, a full view of the resource planning for the entire week is displayed. This makes it easy to identify any empty schedule slots.

	Accur	acy	W	leek 3	9	Filter fo	or Shift:		•	]	Advanced f	filters		
	Week	•	24/09/2	019	Ħ	Filter for	Room:		-	Filter for	Resource:		•	•
	Resources	23/09 Mor		1.	9/2019 sday		)/2019 nesday	100,000	9/2019 rsday	1 1 1 2 2 2 3 3 3 3	/2019 day		9/2019 urday	29/09/201 Sunday
Ro	oom 1 - Bed 1				8								V	
Ro	oom 1 - Bed 2					۷		<ul> <li>Image: Constraint of the second /li></ul>					<ul> <li>Image: Construction</li> <li>Image: Construction&lt;</li></ul>	
Ro	oom 2 - Bed 1													
Ro	pom 2 - Bed 2													
Ro	pom 4 - Bed 1						-							

Clicking on a specific resource displays details of the treatment scheduled for that resource in that specific time-frame (the same procedure is explained in the "Clinic Scheduler".

reatment prescription
Resource: Room 1 - Bed 1
Shift: Afternoon Shift
Prescription: Default Prescription

272

### **11.7 PATIENT TRANSFERS**

A patient may sometimes be transferred to another Clinic/Hospital. This is documented in Therapy Support Suite by creating the movement of a patient.

Transfers are divided into the following steps:

- "Draft": the receiving clinic has not yet accepted the transfer or has accepted a temporary, holiday or hospitalisation transfer;
- "Completed": the receiving clinic has accepted a definitive transfer, or has sent the patient back to the clinic of origin using the "Return to clinic of origin" button.

Draft transfers	Complete transfers
-----------------	--------------------

The transfer will start "automatically" once the event date is reached at the "destination" clinic.

								*****		
atient transfers							Refres	Add	Export Excel	Prin
Draft transfers Complet	e transfers									
Patient name	Transfer reason	Start date	End date	Status	Hospital name	TSS clinic	TSS clinic name	Transfer direction		
Freeman , Mason	Hospitalisation transfer	23 Feb 2017 11:10		Cancelled	Ospital Five - Satellite Clinic	Yes	Satellite Clinic	Incoming		
Metcalfe , Jonathan	Hospitalisation transfer	22 Eab 2017 11:00		Cancelled	Ospital Five - Satellite Clinic	Vor	Satellite Clinic	Incoming		

If the transfer is temporary, for holidays or hospitalisation, both clinics have the option to return the patient to the original clinic. Once the transfer has been accepted by the destination clinic, this button can still be clicked.



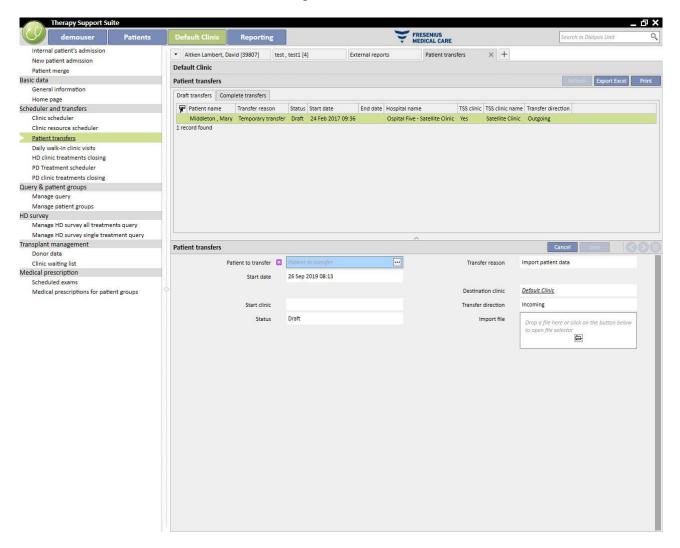


#### Note

If the movement that ends the transfer has not been defined, it will be created automatically when the "Return to start clinic" button is clicked. Conversely, if the transfer end date has been set, clicking this button will change the date of the return (and/or the date of the end of hospitalisation if the transfer originated from one of these).

# **11.7.1 CREATING A NEW TRANSFER**

A new transfer can be created from this section using the "Add" button.



Creation of a new transfer from this section forms part of the importation process described in the "Patient Transfer Offline" section.

## **11.8 DAILY WALK-IN CLINIC VISITS**

In this section, the user can view all the walk-in clinic visits (Completed, Planned or Cancelled) scheduled for the current day for patients belonging to the clinic.

Dail	y walk-in clinic vi	sits								Export Excel P
Ŧ	Visit date	Visit type	Status	Patient code	First name	Last name	Reason name	Doctor	Patient clinic	
	25 Sep 2019 10:43	First visit (new clinical episode)	Open	16821	Jonathan	Metcalfe		Demo User	Default Clinic	
	25 Sep 2019 10:43	Programmed visit	Open	16821	Jonathan	Metcalfe		Demo User	Default Clinic	
	25 Sep 2019 10:43	Cancelled visit (No-show)	Open	16821	Jonathan	Metcalfe		Demo User	Default Clinic	

Clicking the individual visit opens a window where its details are displayed.

🗣 Visit d		Visit type		Status Pati	ant code	First anna	Instance.	Reason name	Doctor	Patient clinic		
								Reason name				
25 Sej	p 2019 10:43	First visit (nev	w clinical episode)	Open 168	321	Jonathan	Metcalfe		Demo User	Default Clinic		
25 Se	p 2019 10:43	Programmed	visit	Open 168	321	Jonathan	Metcalfe		Demo User	Default Clinic		
25 Sej	p 2019 10:43	Cancelled visi	it (No-show)	Open 168	321	Jonathan	Metcalfe		Demo User	Default Clinic		
3 records fo	ound											
	201442	_		_	_	_	_	_	_	_		_
atient clinic v	visit											
				10031 Care a Arti		datusta 🖂						
etcalfe , Jonath	an Born 04	/11/1940 (78)	y) Gender O' Cod.	10821 Status Activ	/e/Hemod						<u></u>	
		/11/1940 (78)	y) Genaer O' Coa.	16821 Status Activ	/e/nemoa						Print	
			ep 2019 10:43	10821 <i>Status</i> Activ	/e/ nemoa			Doctor	r <u>Demo</u>	<u>User</u>	Print	00
tient clinic visit	t Visit da	nte 25 Se	ep 2019 10:43	10821 <i>Status</i> Activ	ver nemoa							00
tient clinic visit	t	ite 25 Se od Man	ep 2019 10:43 ual		ver nemoa			Doctor Created by	demo	user 25 Sep 2		00
tient clinic visit	t Visit da	ite 25 Se od Man	ep 2019 10:43		ve/ nemoa				demo			00
tient clinic visit	t Visit da Creation meth	nte 25 Se od Mani ed demo	ep 2019 10:43 ual	9 10:43	/// nemod			Created by	r demo t <u>Perito</u>	user 25 Sep 2		
tient clinic visit	t Visit da Creation meth Last modifi	nte 25 Se od Mani ed demo	ep 2019 10:43 ual ouser 25 Sep 201	9 10:43	/// nemod			Created by Clinical unit	r demo t <u>Perito</u>	user 25 Sep 2		
etcalfe , Jonath tient clinic visit ( ical service list e	t Visit da Creation meth Last modifi	ate 25 Se od Mani ed demo pe Canc	ep 2019 10:43 ual ouser 25 Sep 201	9 10:43		Status		Created by Clinical unit	y demo t <u>Perito</u> t <b>🛛</b>	user 25 Sep 2	019 10:43	00

The visit cannot be edited or closed unless it was created inside the clinic. Visits created at other clinics can only be printed.

#### **11.9 CLOSING TREATMENTS**

Treatments, whether hemodialysis or peritoneal dialysis, can be closed individually from the patient menu or in bulk from the clinic menu. This paragraph illustrates how to close multiple treatments from the clinic menu.

While there may be slight variations, treatment closure works the same way whether selected from the **Close HD Treatments** or from the **Close PD Treatments** section.

Opening one of the two sections, TSS shows a list of treatments that can be closed, i.e., with a "Completed" status for hemodialysis and an "Open" for peritoneal dialysis. Treatments have a predefined order but it can be changed using the custom view tool. In the image of the example below, see the screen for closing of hemodialysis.

linio	treatments cl	osing							Export Excel
		From 1	5/11/2010		Ħ		то 03/06/2019		
		-	5/11/2010						
		Clinic shift				R	oom Room		<u> </u>
	Patient name	e or last name	earch		0				
		Last name	First name	Date of birth	Patient number	Treatment date	Shift name	Room name	Clinical case ID
	Show Details	Aitken	David	15 Aug 1952	11	16 Nov 2010 00:00	Morning Shift	Room 1	
	Show Details	Aitken	David	15 Aug 1952	11	18 Nov 2010 00:00	Morning Shift	Room 1	
	Show Details	Aitken	David	15 Aug 1952	11	20 Nov 2010 14:58	Afternoon Shift		
	Show Details	Brennan	Nicholas	28 Oct 1962	1	16 Nov 2010 00:00	Morning Shift	Room 2	
	Show Details	Brennan	Nicholas	28 Oct 1962	1	20 Nov 2010 15:16	Afternoon Shift	Room 1	
	Show Details	Hartley	Sarah	21 May 1957	8	16 Nov 2010 00:00	Morning Shift	Room 2	
	Show Details	Hartley	Sarah	21 May 1957	8	18 Nov 2010 00:00	Morning Shift	Room 2	
	Show Details	Hartley	Sarah	21 May 1957	8	20 Nov 2010 15:22	Afternoon Shift		
	Show Details	Metcalfe	Jonathan	04 Nov 1940	9	15 Nov 2010 00:00	Morning Shift	Room 1	
	Show Details	Metcalfe	Jonathan	04 Nov 1940	9	17 Nov 2010 00:00	Morning Shift	Room 1	
	Show Details	Metcalfe	Jonathan	04 Nov 1940	9	20 Nov 2010 15:28	Afternoon Shift		
	Show Details	Middleton	Mary	09 Jan 1935	6	16 Nov 2010 00:00	Morning Shift	Room 2	
	Show Details	Middleton	Mary	09 Jan 1935	6	18 Nov 2010 00:00	Morning Shift	Room 2	
	Show Details	Middleton	Mary	09 Jan 1935	6	20 Nov 2010 16:50	Afternoon Shift		
	Show Details	Moore	Eleanor	03 Apr 1938	4	16 Nov 2010 00:00	Afternoon Shift	Room 2	
	Show Details	Moore	Eleanor	03 Apr 1938	4	18 Nov 2010 00:00	Afternoon Shift	Room 2	
	Show Details	Moore	Eleanor	03 Apr 1938	4	20 Nov 2010 15:34	Afternoon Shift	(	
	Show Details	Morton	Katherine	06 Aug 1925	12	16 Nov 2010 00:00	Afternoon Shift	Room 2	
	Show Details	Morton	Katherine	06 Aug 1925	12	18 Nov 2010 00:00	Afternoon Shift	Room 2	
	Show Details	Morton	Katherine	06 Aug 1925	12	20 Nov 2010 15:41	Morning Shift	Room 2	
	Show Details	Newman	Noah	06 May 1950	3	15 Nov 2010 00:00	Morning Shift	Room 2	
	Show Details	Newman	Noah	06 May 1950	3	17 Nov 2010 00:00	Morning Shift	Room 2	
	Show Details	Newman	Noah	06 May 1950	3	20 Nov 2010 15:46	Afternoon Shift	Room4	
	Show Details	Thompson	Josie	23 Oct 1950	2	16 Nov 2010 00:00	Morning Shift	Room 1	
	Show Details	Thompson	Josie	23 Oct 1950	2	18 Nov 2010 00:00	Morning Shift	Room 1	
_	Show Details	Thompson	Josie	23 Oct 1950	2	20 Nov 2010 16:34	Afternoon Shift	1	

26 records found

To close a treatment, it is necessary to check the box corresponding to the first column and press the **Close treatments** button.

The filters located at the top of the page allow the desired treatments to be found quickly. A selected treatment that is excluded by the filter application keeps the check and can be closed even though it is not displayed. At the bottom of the list, the number of treatments displayed is always visible, followed by the number of treatments selected.

The filters available vary with the type of treatment to be closed. The time interval and the patient name are available for both types of treatment, while **Shift** and **Room** are characteristics of hemodialysis treatments only because they have to be performed at the clinic.

After pressing the **Close treatments** button, the procedure to close the treatments is started. An animation displays the state of advancement of the operation.

	c treatments c	osing								
		From					то 03/06/2019		III	
		Clinic shift			v	Ro	om Room			
	Patient nam	e or last name			0					
		Last name	First name	Date of birth		Treatment date	Shift name	Room name		
		Altken	David	15 Aug 1952	11	16 Nov 2010 00:00	Morning Shift	Room 1	Clinical case ID	
~		Aitken	David	15 Aug 1952	11	18 Nov 2010 00:00	Morning Shift	Room 1		
v 		Aitken		15 Aug 1952	11	20 Nov 2010 14:58	Afternoon Shift	100111		
			Nicholas		1	15 Nov 2010 14:58		Room 2		
<ul> <li></li> <li></li> </ul>	Show Details	Brennan Brennan	Nicholas	28 Oct 1962 28 Oct 1962	1	20 Nov 2010 00:00	Morning Shift Afternoon Shift	Room 1		
V		Hartley	Sarah	28 Oct 1962 21 May 1957	8	15 Nov 2010 15:16	Morning Shift	Room 2		
V						18 Nov 2010 00:00				
	Show Details	Hartley	Sarah	21 May 1957 21 May 1957	8		Morning Shift Afternoon Shift	Room 2		
1		Hartley		04 Nov 1940	9	15 Nov 2010 15:22		Room 1		
1	Show Details	Metcalfe	Jonathan		g		Morning Shift			
~	Show Details	Metcalfe	Jonathan	04 Nov 1940	din	17 Nov 2010 00:00	Morning Shift	Room 1		
4	Show Details	Metcalfe	Jonathan		oadin		Afternoon Shift			
Sec.	Show Details	Middleton	Mary	09 Jan 1935	0%	16 Nov 2010 00:00	Morning Shift	Room 2		
4	Show Details	Middleton	Mary	09 Jan 1935	070	18 Nov 2010 00:00	Morning Shift	Room 2		
1	Show Details	Middleton	Mary	09 Jan 1935		20 Nov 2010 16:50	Afternoon Shift			
$\checkmark$	Show Details	Moore	Eleanor	03 Apr 1938	4	16 Nov 2010 00:00	Afternoon Shift	Room 2		
1	Show Details	Moore	Eleanor	03 Apr 1938	4	18 Nov 2010 00:00	Afternoon Shift	Room 2		
1	Show Details	Moore	Eleanor	03 Apr 1938	4	20 Nov 2010 15:34	Afternoon Shift			
	Show Details	Morton	Katherine	06 Aug 1925	12	16 Nov 2010 00:00	Afternoon Shift	Room 2		
	Show Details	Morton	Katherine	06 Aug 1925	12	18 Nov 2010 00:00	Afternoon Shift	Room 2		
	Show Details	Morton	Katherine	06 Aug 1925	12	20 Nov 2010 15:41	Morning Shift	Room 2		
	Show Details	Newman	Noah	06 May 1950	3	15 Nov 2010 00:00	Morning Shift	Room 2		
	Show Details	Newman	Noah	06 May 1950	3	17 Nov 2010 00:00	Morning Shift	Room 2		
	Show Details	Newman	Noah	06 May 1950	3	20 Nov 2010 15:46	Afternoon Shift	Room4		
	Show Details	Thompson	Josie	23 Oct 1950	2	16 Nov 2010 00:00	Morning Shift	Room 1		
	Show Details	Thompson	Josie	23 Oct 1950	2	18 Nov 2010 00:00	Morning Shift	Room 1		
	Show Details	Thompson	Josie	23 Oct 1950	2	20 Nov 2010 16:34	Afternoon Shift			

At the end of the procedure, any errors that may have made closure impossible are displayed:

ie f	following errors have	been found o	luring the clo	sure:		
	Date	Last name	First name	Code	Error message	Error code
*	16 Nov 2010 00:00	Brennan	Nicholas	399489	Dilution factor is mandatory	[100501]
*	20 Nov 2010 15:16	Brennan	Nicholas	399489	Dilution factor is mandatory	[100501]
*	16 Nov 2010 00:00	Hartley	Sarah	93710	Dilution factor is mandatory	[100501]
*	18 Nov 2010 00:00	Hartley	Sarah	93710	Dilution factor is mandatory	[100501]
*	20 Nov 2010 15:22	Hartley	Sarah	93710	Dilution factor is mandatory	[100501]
*	15 Nov 2010 00:00	Metcalfe	Jonathan	16821	Medicinal product is mandatory	[100501]
*	17 Nov 2010 00:00	Metcalfe	Jonathan	16821	Medicinal product is mandatory	[100501]
*	20 Nov 2010 15:28	Metcalfe	Jonathan	16821	Medicinal product is mandatory	[100501]
m	16 Nov 2010 00:00	Middleton	Marv	63416	The selected measurement unit is not anymore supported	[170116]

Treatments not closed will remain selected so that they are easy to identify for correction. The **Show details** button opens the treatment in a window so that the data can be checked.

If there are no errors, a message informs the user that the operation has been completed.



During treatment closure, the user can continue to work on sections that belong to menus other than the clinic menus. At the end of the closure operation, the treatment closure page is automatically opened so that it is possible to verify if there have been any faults.

A message blocks the user from accessing other sections of the clinic menu during bulk closure.

information:	170029
lt is not possible to	o leave this section because a closing process is running.
	ок

Treatment closure from the clinic menu performs all operations required for individual closure of the patient treatments, like the PDF export of the treatment (if configured) or the operations defined by any plug-ins installed.

#### **11.10 MANAGING PATIENT GROUPS**

The same interface and the same functions found in Query Builder can be used to generate groups of patients.

The patient groups generated can be found (together with the default groups):

In the Patient section at the top of the list of patients. This allows the entire list to be filtered in accordance with the settings of the query;

As the recipients of a message sent from the user's Inbox section;

Patient groups also appear in the report section. In fact, for some reports, multiple printouts for several patients or groups of patients are possible.

To access this section, simply select "Patient Groups" from the Nephrology Clinic menu.

From here it is easy for the user to find his way around the groups of patients already created and to create new ones.

### **11.10.1 CREATING A NEW PATIENT GROUP**

To generate a new patient group, simply click the "New" button. Therapy Support Suite will show the user the same generation interface as for a query, but with some sections and options disabled:

- Charts: there would be no point in creating charts for patient groups.
- This is a private query: patient groups cannot be defined as private.
- "Output values" section: the fields for display are reset and cannot be modified.

Otherwise, the method for creating, saving, publishing (read only) and cancelling queries for patient groups is the same as described in the Query Builder sections.

•	Aitken Lam	bert, David [39807]	Manage patient groups	×	Query builder		External re	oorts		Co	nfiguration par	ameters	+		
Ma	nage patie	nt groups							Re	sults	Save query	Copy as	Return	n to query list	Charter
	Description:	:			Entity name:	Number	of records:		Is Pivo	t:	Aggregate	This is a p		Include patien	ts in other
	By Machine			Patie	ent	0	Show	all			results:	query:	1	clinics	
	Comment:											Automati -			
>	Dialysis D	field to create a paran Device Type 🥒													
Dr	ag and drop	the columns to display	10		10			1911				Expressi	on colum	Column	
2	Photo	national coo	le 🥒 🔣 First name 🥒	×	Last name 🥒 🏼	Second la	ist name 🥒 🗌	× Ge	ender		Date of birth	/			1
Dr	ag and drop	field to create a filter												Add Gr	roup
		Not Dialysis dev	ice type		Keyword i	is equal to		•			<dial< td=""><th>ysis De<mark>vic</mark>e</th><td>Type&gt;</td><th></th><td></td></dial<>	ysis De <mark>vic</mark> e	Type>		
Ni	at And	Not Positional st	tatus		Keyword i	is d <mark>iff</mark> erent t	han	-	1	Import	ed			-	1
		-													

Note: after a patient group has been published, the user must be enabled to use it via User Management.

Note: If a patient group contains more than 5000 patients and is published, it will never be sent to TMON.

#### **11.11 MANAGING HD SURVEY FOR ALL TREATMENT QUERIES**

The "All treatment query management" section allows the Query Builder interface and functions to be used to apply the first filter to a patient's treatments within the HD Survey analysis.

To generate a new query for all treatments simply click the "New" button. Therapy Support Suite shows the user the same query generation interface, but the aggregation of results and private queries are disabled.

Otherwise, the method for creating, saving, publishing (read only) and cancelling the query is the same as described in the Query Builder sections.

### **11.12 MANAGING HD SURVEYS FOR SINGLE TREATMENT QUERIES**

In the "Single treatment query management" section, the user can use the query builder interface and functions to set the list of values that define the "session details" of interest. These values can then be consulted by choosing a single treatment in the list of the patient's treatments filtered previously with the first filter.

To generate a single treatment query, simply click the "New" button. Therapy Support Suite shows the user the same query generation interface, but the user is only able to modify the values of the "query properties" section (except the private query flag) and the list of output values to be displayed.

These values can only be selected from the "Session details" entity; in fact, not even the queried entity from which the data was drawn can be changed.

Otherwise, the method for creating, saving, publishing (read only) and cancelling the query is the same as described in the Query Builder sections.

	Aitken Lambert, David [39807]	Manage patient groups	HD survey - Sin	gle treatment query ×	External reports	Config	guration parameters	+
ID	survey - Single treatment qu	ery			Rei	ults Save query	Copy as Retu	urn to query list Charts
	Description:		ain Entity name:	Number of records:	Is Pivot	: Aggregate	This is a private	Include patients in othe
	Session details demo	Se	ession details	50 Show	all 🗌	results:	query:	clinics
	Comment:						Ferrinard	
51	ag and drop field to create a paran	neter						
								6
								9
Dr	ag and drop the columns to display	Ŷ				Count column	Expression colu	
		v essure 🥒 🔀 Venous pressur	re 🥒 🗶 TMP pre	essure 🥒 🕱 Dialisate flo	w 🥒	Count column	Expression colu	
2		100 C	re 🥒 🕱 TMP pre	essure 🥒 🗷 Dialisate flo	w 🥒	Count column	Expression colu	
2	K Time 🥒 🗶 Arterial pre	100 C	re 🥒 🗷 TMP pre	essure 🥒 🔀 Dialisate flo	w 🥒	Count column	Expression colu	mn Column group
2	K Time 🥒 🗶 Arterial pre	100 C	re 🥒 🔀 TMP pre	essure 🎤 🔀 Dialisate flo	w 🥒	Count column	Expression colu	mn Column group
2	K Time 🥒 🗶 Arterial pre	100 C	re 🥖 🗵 TMP pre	essure 🥒 🔀 Dialisate flo	w 🥒	Count column	Expression colu	mn Column group

## **11.13 SCHEDULING TESTS**

In this section, the clinic's laboratory test schedule can be displayed. The tests are grouped by patient and date.

Therapy Support Suite							_ D X
demouser Patients	Default Clinic 🔻	Reporting				Search in Dialysis Unit	0,
Internal patient's admission		Treatment places	Clinic Drug catalogue	Clinic Home Page	× +		
New patient admission	Default Clinic						
Patient merge	Delault Clinic						
Basic data	Scheduled exams					Print Print prescriptions	
General information				na successione			
Home page	Accu	iracy Sept	ennuer	t selector			
Scheduler and transfers	Month	▼ 24/09/201	Active	patients	<ul> <li>Select one or m</li> </ul>	ore patients	
Clinic scheduler		24/05/201					
Clinic resource scheduler			🗔 Inci	lude hospitalised patients			
Patient transfers			-				
Daily walk-in clinic visits	Aitken Lambert Dav	d - 29/09/2019					
HD clinic treatments closing	Patient code: 39807	11	-				
PD Treatment scheduler	Patient code: 59807	11					
PD clinic treatments closing	[004] Anion gap						
Query & patient groups	[002] Sodium						
Manage query	[003] Chloride						
Manage patient groups	[001] Potassium						
HD survey							
Manage HD survey all treatments query	4 exams, 1	prescription					
Manage HD survey single treatment query							
Transplant management							
Donor data							
Clinic waiting list							
Medical prescription							
Scheduled exams							

The user can filter the laboratory tests by:

- Week
- Month
- Start date / End date
- The tests can also by filtered using the "Patient Selector".
- The user can choose to display or not display the tests of hospitalized patients using the flag:

Include hospitalised patients

The group of tests that are to be printed can be chosen. Press the  $\times$  button to exclude the group of tests from the printout:

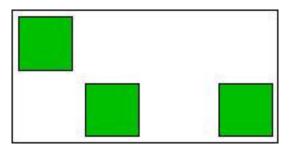
- Press the <sup>2</sup> button to include the group of tests in the printout again.
- If the clinic has activated a plug-in for the printout of medical prescriptions, the print prescriptions button is displayed.

## **11.14 PATIENT MERGE**

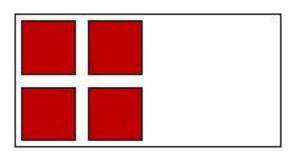
Patient merge is used to combine the data of two patients to form a single patient. The patient merged into another patient is called the "Source Patient", and the patient who receives the information the "Destination Patient".

Make sure that no data are overwritten during the merge process. All information already entered for the destination patient will not be overwritten by the source patient information.

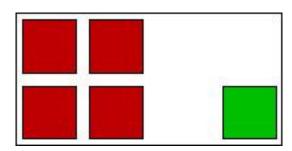
For example: Source Patient before the merge:



Destination Patient before the merge:



Destination Patient after the merge:



For example, if the source patient has a certain drug prescribed as home therapy and the destination patient has the same drug prescribed (always as home therapy), information about the destination patient's home therapy should not be overwritten.

The user is responsible for ensuring that the merge has been done correctly for every section where the merged data are duplicated (e.g. Treatment prescription).

#### **11.14.1 MERGE PREREQUISITES**

A new merge operation can be defined from the Therapy Support Suite user interface for patients with Active status only. All possible Merge cases (one or more non-existent patients, even with different statuses) are handled by the TSS.

### **11.14.2 STARTING THE MERGE**

To create a new Merge, the user presses the "New" button, then selects two active patients to be merged, and then save.

efault Clinic			
tient merge			Cancel Save
Patient merge			
Source patient	<u>Metcalfe</u> Jonathan <u>16821</u> × …	Destination patient	Hartley Sarah 93710 × …
Source patient actual clinic	<u>Default Clinic</u>	Destination patient actual clinic	Default Clinic
Request date		Approval date	
Review date		Merge status	Draft
Merge notes			

Simultaneously, a message (Inbox) informs all users defined in User Management are notified that a merge process has been requested.

ox messa	ges					Ref	resh Delete	Reply Reply to all Forward	Archive New messa
<ul> <li>Image: A start of the start of</li></ul>		Туре	Acknowledge	Attachments	Linked entities	Sender	Date	Subject	
	Show Details	$\square$				Therapy Support S	26 Sep 2019 08:55	Merge pending for approval	
ora tour	nd(1 Selected)								×
	Send	er							
	Thera	ipy Suppo	rt Suite						
	Recip	ients							
	User	groups -	Demo Group						
			ledgement 📃		Creat	e as Task 🛄			
	ls sch No	eduled							
	Subje	d.							
			for approval						
	Linke	d data							
		Patient me	erge						
	Attac	hments							
	Mess	age							
tasks ype	Am	nerge reg	uest from Met merge reques	alfe Jonathar before approv	to Hartley Sa ving it. A merge	rah has been created operation could lead	and is on hold pend o having patients wit	fing user approval. Please check h duplicate or conflicting information	with n. tatus Com
						chive Reply R			

The full list of requested merges is available in the "Patient merge" section of the Dialysis clinic menu. Users can "Approve" or "Reject" every Merge request in this overview.

## 11.14.2.1 REJECTING THE MERGE PROCESS

To refuse a merge, select the merge created by clicking on the

button. The following page opens:

× Patient merge Default Clinic Patient merge Cancel Delete S Appro Patient merge Nicholas Brennan 399489 Destination patient David Aitken Lambert 39807 Source patient Source patient actual clinic Default Clinic Destination patient actual Default Clinic clinic Request date 17 Nov 2017 11:31 Approval date Review date Merge status Approval required Merge notes

If the "Reject" button in the "Patient merge" section is pressed, the merge process will not start. The source and the destination patients will not be modified. All that will be left is a row in the "Merge patient" section with "Rejected" status.

Edit

## **11.14.2.2 ACCEPTING THE MERGE PROCESS**

To refuse a merge, select the merge created by clicking on the

button. The following page opens:

itient merge		Cancel Delete Save	Approve Reject	
Patient merge				
Source patient	Nicholas Brennan 399489	Destination patient	David Aitken Lambert 39807	
Source patient actual clinic	Defoult Clinic	Destination patient actual clinic	<u>Default Clinic</u> Approval required	
Request date	17 Nov 2017 11:31	Approval date		
Review date		Merge status		
Merge notes				

Press the "Approve" button in the "Patient merge" section to start the merge process immediately. For a few moments the status of the merge will be "In execution" (Therapy Support Suite will perform the merge by means of a batch command), and once it has been completed its status becomes "Review requested".

A new message will be sent to all users defined in User Management to notify them that the merge process has been completed, with all the details of the main sections modified. The main sections in the message are:

- Treatment prescription;
- Medical prescription;
- Treatment scheduling;
- Comorbidities;
- Allergies;
- Laboratory data;
- Clinical case.

The user has to review the destination patient data. The two patients involved in the Merge process are marked with an icon in the top menu bar.

•	Hartley, Sarah [93710] 🗙	Patient merge	Messages and tasks	+
⚠	Hartley , Sarah 🛃 Born 2	1/05/1957 (62y) Gende	erQ Cod. 93710 Status Active/He	emodialysis 🖂 호

### **11.14.3 MERGE DETAILS**

Two scenarios are possible during a merge:

- Only administrative and medical data were merged (because no other information was entered for one of the two patients);
- Some sensitive information was merged (not only administrative and medical data)

### 11.14.3.1 ONLY ADMINISTRATIVE AND MEDICAL DATA WERE MERGED

If the merge involved only administrative and medical data, the merge can be considered "complete", and the user does not need to complete the merge.

## 11.14.3.2 NOT ONLY ADMINISTRATIVE AND MEDICAL DATA WERE MERGED

In this case all data were merged from the source to the destination patient. The merge cannot be considered "complete", until the user has **reviewed** all the merged data.



### Note

In this state, it is not possible to create treatments with TMON or to use the Card Reader for either patient.

In the Source patient only the '	'Administrative"	and "Medical dat	a" will be visible; the c	other sections have been
emptied.				

Summary			
Last forty treatments			
	<b>F</b>		
Pre-dialys <mark>is w</mark> eight	Кд		
Post- <mark>dialysis weig</mark> ht	Кд		
Dry body weight	Kg		
Weight gain	Kg		
Weight gain percent	%		
UF volume	ml		
Pre-systolic/Diastolic pressure		No data	
Post-systolic/Diastolic pressure			
Pre- <mark>dialys</mark> is <mark>heart ra</mark> te	bpm		
Post-dialysis heart rate	bpm		
Critical RBV	%		
Min RBV	%		
Effective Kt/V			
Total substitution volume	L		

In the destination patient all the merged data will be visible, and the new "Treatment prescription" and "Treatment schedule" data will be marked as shown below.

tment presc	cription 🔒							Edit Copy to	o Print 🔇	
	Creation	date	30 Jun 2016	15:41			Prescription name	Default Prescription	- Merged from Metcalfe	
	Prescribing do	octor						Jonathan		
neral data			oagulant agent	Dialysis de	vice setting	Comments				
	General infor	mation								
	Leading presc	ription	Yes				Prescription enabled	Enabled		
Valid from		30 Jun 201	5			Valid to				
	Prescription v	version	8				Unique ID	111		
	Basic inform	mation								
	Treatmer	nt type	2 Cronic				Treatment category	4 HF		
	Treatment du	uration	04:00				Treatment frequency		3 Days/Week	
	Fluid	intake					Estimated tara weight	0.0 Kg		
	Dry body (	weight	85.8 Kg			,	Vascular access selection	Fistula Upper arm br	achial medial - Left	
Last availab	ble BCM measur	ement (date)				Last available	normohydration weight (BCM)			
La	ong term target v					Target TA	FO (Time Averaged Fluid			
							Overload)			
							Overload)			
Devic	e preparation du	uration					Device cleaning duration			
Devic	e preparation du	uration								
Allergy list		uration	Allergy type		Allergy ty	pe specification				
Allergy list Date 24 Feb 2	2017	uration	Allergy type Active ingredie	nt	Allergy ty (Nunpan	pe specification	Device cleaning duration			
Allergy list Date 24 Feb 2 1 record found	2017 d		Active ingredie		(Nunpan	pe specification	Device cleaning duration			
Allergy list Date 24 Feb 2 1 record found	2017 d p [93710] X	Patient	Active ingredie	Message	(Nunpan s and tasks	pe specification	Device cleaning duration			
Allergy list Date 24 Feb 2 1 record found	2017 d	Patient	Active ingredie	Message	(Nunpan s and tasks	pe specification	Device cleaning duration			
Allergy list P Date 24 Feb 2 1 record found lartley , Sarah lartley , Sarah	2017 d 1 [93710] X rah 🎒 Born 21	Patient	Active ingredie	Message	(Nunpan s and tasks	pe specification	Device cleaning duration		Edit	
Allergy list P Date 24 Feb 2 1 record found lartley , Sarah lartley , Sarah	2017 d 1 [93710] X rah 🎒 Born 21	Patient	Active ingredie	Message	(Nunpan s and tasks Status Active	pe specification	Device cleaning duration		Edit	
Allergy list Date 24 Feb 2 1 record found fartley , Sarah lartley , Sarah tement sched	2017 d s [93710] × ( rah & Born 21 dule plan 24 Jul 2010	Patient	Active ingredie merge 7 (62y) Gender	Message	(Nunpan s and tasks Status Active	pe specification	Device cleaning duration Details	Sa	Edit	
Allergy list Date 24 Feb 2 1 record found Hartley , Sarah Hartley , Sarah Hartley , Sarah Hartley , Sarah	2017 d s [93710] × ( rah & Born 21 dule plan 24 Jul 2010	Patient (	Active ingredie merge 7 (62y) Gender	Message: Q Cod. 93710	(Nunpan s and tasks Status Active Refe	pe specification	Device cleaning duration Details	59		
Allergy list - Date 24 Feb 2 i record found fou	2017 d s [93710] × ( rah & Born 21 dule plan 24 Jul 2010	Patient I ./05/195 Tu	Active ingredie merge 7 (62y) Gender	Message: Q Cod. 93710	(Nunpan s and tasks Status Active Refe	pe specification	Device cleaning duration Details	Sa Default Prescription		
Allergy list - Date 24 Feb 2 i record found fou	2017 d s [93710] × ( rah & Born 21 dule plan 24 Jul 2010	Patient i /05/195 Tu <u>Defaul</u>	Active ingredie merge 7 (62y) Gender To	Message: Q Cod. 93710	(Nunpan s and tasks Status Active Refe	/Hemodialysis	Device cleaning duration Details			
Allergy list 24 Feb 2 1 record found lartley , Sarah lartley , Sarah tement sched From	2017 d s [93710] × ( rah & Born 21 dule plan 24 Jul 2010	Patient I /05/195 Tu <u>Defaul</u>	Active ingredie merge 77 (62y) Gender To It Prescription	Message: Q Cod. 93710	(Nunpan s and tasks Status Active Refe	/temodialysis /	Device cleaning duration Details	Default Prescription		
Allergy list 24 Feb 2 1 record found lartley , Sarah lartley , Sarah tement sched From	2017 d s [93710] × ( rah & Born 21 dule plan 24 Jul 2010	Patient I /05/195 Tu <u>Defaul</u>	Active ingredie merge 7 (62y) Gender To <u>It Prescription</u> <u>con Shift</u>	Message: Q Cod. 93710	(Nunpan s and tasks Status Active Refe	/Hemodialysis	Device cleaning duration Details	Default Prescription Afternoon Shift		
Allergy list Date 24 Feb 2 1 record found Hartley , Sarah Hartley , Sarah Hartley , From	2017 d (93710) × ( 193710) × 2 24 Jul 2010 24 Jul 2010	Patient I /05/195 Tu <u>Defaul</u>	Active ingredie merge 7 (62y) Gender To <u>It Prescription</u> <u>con Shift</u>	Message: Q Cod. 93710	(Nunpan s and tasks Status Active Refe	/Hemodialysis	24 Jul 2010	Default Prescription Afternoon Shift		

### **11.14.3.3 REVIEWING THE MERGE**

As already mentioned, sometimes the merge has to be reviewed before it can become "Complete". This is a very important section. The critical sections are shown below. Some of them can stop completion of the merge until all conflicts have been resolved.

Blocking sections:

Treatment prescription: if the source and destination patients both have a main prescription, at this point the
destination patient will have 2 main prescriptions, and this is not correct. The user has to select one of these
prescriptions. If there are other merged prescriptions, the user must verify them. The merge cannot be
completed until the patient has just one main prescription.

reatment prescrip	tion				
Active prescriptions Disabled		Full list			
		Ŧ	Default Prescription	Default Prescription - Merg	
Prescription version			19	8	
Leading prescription		1	Yes	Yes	
Creation date			02 Nov 2017 15:01	30 Jun 2016 15:41	
Valid to					
Treatment category			4 HF	4 HF	
Treatment duration			03:30	04:00	
Treatment frequency		Days/Week	3	3	
Dry body weight		Kg	80.0	85.8	
Dialyzer name			FX 100	FX 100	
Anticoagulant			Tizeb - 50pieces 1mg Tablet	s	
Additional anticoagul	ant				

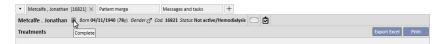
Not blocking sections:

- Vascular access: There may be two identical vascular accesses with different creation dates. The user must check this information.
- Treatment schedule: If the source and destination patients both have treatment schedules, now after the merge, the destination patient will have the entire treatment schedule. This is not correct because the two patients could have two different schedules. The user should review the schedules.
- Drug therapy: if both the source patient and the destination patients have drug therapies, now, after the
  merge, the destination patient will have the entire drug therapy. This is not correct and it is also dangerous for
  the destination patient. The user should review the drug therapy.
- Allergies: if for any reason the two patients have different allergies, the user should review the allergy section, because it could be dangerous for the destination patient.

### **11.14.4 COMPLETING THE MERGE**

After the Data Review, the user can complete the merge. This is done by pressing the "Complete" button in the "Patient merge" section. If there are two main prescriptions, when the user clicks the Complete button the system will stop the merge.

The source patient will become "Not active" and the icon in the top bar will show the patient's merged status.



The destination patient will remain "Active" and there will be no icon to indicate that the patient was involved in a merge process.

For the destination patient, it is now possible to create treatments with TMON and to use the Card Reader.

The merge is shown as "Completed".

Patient merge Default Clinic				×	
Patient merge			Edit Print	000	
Patient merge					
Source patient	Jonathan Metcalfe 16821	Destination patient	<u>Sarah</u> Hartley <u>93710</u>		
Source patient actual clinic	Default Clinic	Destination patient actual clinic	Default Clinic		
Request date	26 Sep 2019 08:55	Approval date	26 Sep 2019 08:55		
Review date	26 Sep 2019 08:56	Merge status	Completed		
Merge notes	Merged 9 Treatment prescription enti Merged 28 Treatments entities. Merged 1 Alergies entities. Merged 2 Comorbidity entities. Merged 1 Laboratory data entities. Merged 1 Patient status entities. Merge must be reviewed	ties.			

### **11.14.5 PATIENT STATUS**

The master patient's status on completion of the merge process is set in accordance with the basic rule that the "strongest" status wins.

Here are some examples:

- Before merge: master patient active, slave patient inactive -> After merge: master patient active
- Before merge: master patient inactive, slave patient active -> After merge: master patient active
- Before merge: master patient inactive, slave patient imported -> After merge: master patient imported

The table below contains all the rules for status assignment after merges:

		MASTER PA	FIENT STATUS	
MERGED PATIENT STATUS				
	Active	Imported	Not Active	In transit
Active	Active	Active	Active	Active
Imported	Active	Imported	Not Active	In transit
Not Active	Active	Not Active	Not Active	In transit
In transit	Active	In transit	In transit	In transit

### **11.14.6 MULTI-CLINIC MERGES**

Patients belonging to different clinics can be merged. In fact, when patients are selected those belonging to other clinics will also appear.

Patient merge				×
Default Clinic				
Patient merge			Cancel Save	
Patient merge Source patient Source patient actual clinic Request date	<u>Thompson Josie 166334</u> × ···· Default Clinie	Destination patient Destination patient actual clinic Approval date	<u>Newman Noah 137560</u> <mark>Satellite Clinit</mark>	×
Review date		Merge status	Draft	
Merge notes				

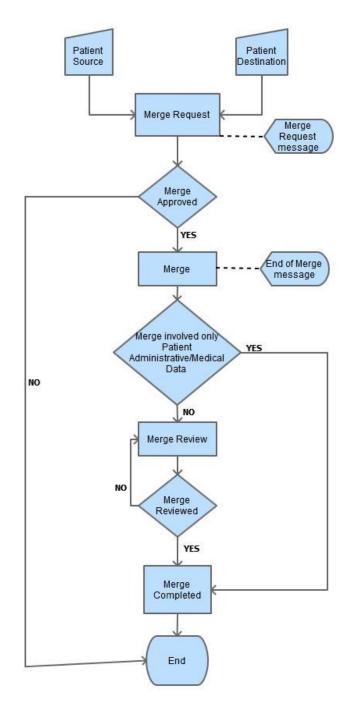
Once two patients belonging to different clinics have been selected and the merge process has been started, it can be viewed from the "Patient merge" menu of both clinics, as the screenshots below show

Satellite Clinic	Report	ing		FRESENIUS MEDICAL CARE		Search in Dialysis	Unit C
	Patient mer	rge × +					
atellite Clinic							
atient merge						New Exp	ort Excel Print
Only a	ctive patients 🗹			Mer	rge status Please select one entry	Ŷ	•
Request date	Merge status	Source patient actual clinic	Source patient code	Source patient last name	Destination patient actual clinic	Master patient code	Master patient las
			166334	Thompson	Satellite Clinic	137560	Newman
31 May 2019 14:52 Default Clinic	Approval required	ting	100534			Search in Dialysis U	nit <b>Q</b>
	Repor			FRESENIUS			nit 🔍
Default Clinic     Aitken Lambert, Dav	Repor	ting		FRESENIUS		Search in Dialysis U	nit Q rt Excel Print
Default Clinic     Aitken Lambert, Dav Default Clinic Patient merge	Repor	ting		FRESENIUS MEDICAL CARE	ge status Please select one entry	Search in Dialysis U	
Default Clinic     Aitken Lambert, Dav Default Clinic Patient merge	Repor	ting ent merge X +	•	FRESENIUS MEDICAL CARE		Search in Dialysis U New Expo	rt Excel Print
Default Clinic     Aitken Lambert, Dav Default Clinic Patient merge Only	Repor	ting ent merge X +	•	FRESENIUS MEDICAL CARE	ge status Please select one entry	Search in Dialysis U New Expo	rt Excel Print

Once the merge process has started, the procedure is the same as for merges in the same clinic: the only difference is that it will appear in the "Patient merge" menu of both clinics even after completion. The status of the patients involved in the merge will be modified using the same rules as for the merge within a single clinic.

### 11.14.7 FLOW CHART

A flow chart is provided below to aid in understanding the process.



# **12 REPORTING**

## **12.1 REPORTS**

In this section the user can view and print all the reports installed in the clinic. There are two types of report:

• External reports: reports customised inside the clinic.

Custom reports: reports created through Query Builder.

When you print a Custom Report, the "Print Options" window appears, where it can be indicated if the report should contain information about the date and time of printing (at the bottom of the page).



To run a report, simply click on its name on the side bar. Some reports open automatically, others require that further parameters be inserted (e.g. treatment date in a dialysis treatment report):

		Date From	dd/m	im/yyyy	Ħ	Date To	dd/mm/yyyy	
First name	Last name	Date of Lab	Test	Haemoglobin g/dl				
					Please make a sel	ection		

The *Pseudonymise report* option allows a user to extract a report containing pseudonymised sensitive patient data. This option may or may not be available depending on the clinic's configuration parameters (see the specific section in the Service Manual).

After entering the required parameters, press the Refresh button to launch the report. Reports can be easily exported in a variety of formats (Word, Excel, PDF).



# Warning

Risk for the patient as a result of an incorrect prescription being shown

Scheduling reports may have unrecognised recurrencies when recalculation is underway.

#### **12.2 DYNAMIC PRINTOUT REPORT**

Dynamic Printout Reports are special reports where it is possible to specify which sections to include inside the report itself via the creation of profiles (as described in detail in point 4.2.6 of the service manual).

Profiles are therefore presets which allow the user to specify which subset of information will be printed in the report. For example the user can create one profile to just print personal and medical history data and another which will print a series of information related to the dialysis process (prescription, treatments performed, treatment schedule plan, etc.)

When a Dynamic Printout report is selected, the user is requested to select a patient and a profile (in this case two profiles have been created in the Master Data section, one containing only the patient's administrative data and the other containing a set of information related to the patient's treatment and the relative scheduling)



Once a profile has been selected, clicking Update opens profile parameter compilation screen. This window shows all the sections which are available for the report, with only those found in the profile chosen by the user selected. In this phase it is possible to deselect certain sections or add others.

Profiles for dynamic printe	out	×
Sections		
Administrative data	$\checkmark$	
Diagnosis (primary renal disease)		
Patient medical history		
Allergies		
Laboratory data		
Diagnostic test		
Outpatient clinic visit		
Specialist examination		
Pharmacological prescription		
Hospitalisations		
Vascular access		
PD access		
Treatment schedule plan		
Treatment prescription		
PD prescription		
Treatments		
Transfusion list		
	OK Cancel	

Extraction filters can be specified for each enabled section (if it supports them). The filters vary depending on the section, for example, allowing the user to extract data in a specific time frame, active \non-active data, or as in the case of laboratory tests, to specify which tests should be included in the report.

Clicking OK prints the report, with the selected sections filled with data as specified by the user.

As for all reports, dynamic printout reports must be installed via \*.tcf before they can be used.

### **12.3 PRINTING PRESCRIPTIONS FOR GROUPS OF PATIENTS**

In the "Medical prescription for patient groups" section, which can be accessed from the clinic menu, it is possible to print the Italian NHS prescription for the laboratory tests of a patient group.

After creating a new prescription the user can enter the date of the prescription and the title and select the laboratory tests to be included in the prescription. To conclude, it is possible to specify a patient group for whom the prescription has to be printed, as shown in the screenshot below.

tient group		
F	Patient group description	
Show Details	Active patients	
Show Details	By Machine	
Show Details		
	Diabetic patients	
Show Details	Inactive patients	
Show Details	Patients by bed	
Show Details	Patients by shift	
Show Details	Patients by status	
Show Details	Patients disabled after merge	
Show Details	Patients with haemoglobin <11	
Show Details	Pre-dialysis patients	

Once all parameters have been entered, the user clicks "Save and Print" to access the prescription printout interface, where he can select the patients (from the group selected previously) for whom he wants to print the prescription.

	pe	itient code								
7	Show Details	Last name Aitken	Second last name			Photo	Patient code 39807	Gender Male	Patient monitor ID (key code) 41	Nat. Insura 654321
			Lambert	David	15 Aug 1952					
	Show Details	Brennan		Nicholas	28 Oct 1962	20	399489	Male	200	654321
	Show Details	Freeman		Mason	19 Jul 1936	20	3478	Male	336	
	Show Details	Hartley		Sarah	21 May 1957	20	93710	Female	80	654321
	Show Details	Metcalfe		Jonathan	04 Nov 1940	28	16821	Male	214	654321
	Show Details	Middleton		Mary	09 Jan 1935	25	63416	Female	60	654321
	Show Details	Morton		Katherine	06 Aug 1925	20	47829	Female	49	654321
	Show Details	Saunders		Benjamin	20 Sep 1957	25	72362	Male	63	654321
	Show Details	Thompson		Josie	23 Oct 1950	20	166334	Female	133	654321
) rec	ords found									

After selecting the patients, the user clicks "OK" to print one or more prescriptions depending on the number of Tests \ Patients selected.

### **13 CLINIC MASTER DATA**

This section is only visible to users with the "Clinic Manager" role activated. When a user enables the "Clinic Manager" role, the "Master data" section appears in the upper menu bar:

Therapy Support S	uite				
demouser	Patients	Default Clinic	V	Reporting	Master data

Clicking the "Configuration Parameters" button displays a menu in the left of the screen enabling configuration of the clinic's specific parameters (e.g. Shifts, staff, external personnel, etc.):

demouser	Patients
nic master data	-
asic setup	
Configuration parameters	
Clinic setup	
<u>Shifts</u>	
Shift groups	
Clinic wards	
Clinic rooms	
Treatment places	
Dialysis device lists	
Dialysis device disinfection	
Clinic staff	
External surgeons	
Family doctors	
Departments	
Categories and list settings	
Event catalogue	
Transport types	
Transport	
Clinical diary category	
Clinic drug	
Clinic drug catalogue	
Batch mapping	
User action	
Self sufficiency	
Dependency level	
Therapy education	
Mobility aids	
Concentrate source	
Department catalogues settings	
Clinic drug catalogue	
Clinic consumables catalogue	

### **13.1 BASIC CONFIGURATION**

### **13.1.1 CONFIGURATION PARAMETERS**

This section is used only for Clinic master data. It should only be used by IT technical support staff. Please refer to the Therapy Support Suite Service Manual for further information.

### **13.2 CLINIC MASTER DATA**

#### 13.2.1 SHIFTS

In this section, the Clinic Manager can specify the clinic shifts (e.g. morning - afternoon - night), where the start and end times, the colour, the head physician and the start of the next day can be configured. These are then displayed in the clinic resource scheduler.

When this section is opened, a timeline that shows the current shift configuration will be displayed. It will then be possible to click on the various shifts to change them, delete them, or add new ones.

	and the second		Refresh         Add         Export Excel         Prin           5:00         16:00         17:00         18:00
IO         07:00         08:00         09:00           1	11/11/11/11/11		
	11/11/11/11/11		
	ing Shift		Afternoon Shift
Shifts Shift name Aftern From 14:00 Responsible doctor for shift	noon Shift	Scheduler colour To	Edit Print 🐼

If the end time is less than the start time, it will be considered as the next day.

If the Start-next-day flag is active, the start time will be considered to be the next day following the day the shift is being used. For example, if a shift is used with the control field activated on Tuesday, its start time will be considered to be on Wednesday.

In this last case, if a treatment is created on Wednesday, the prescription selected will be for Wednesday in any case.

## 13.2.2 SHIFT GROUPS

In this section the Clinic Manager can specify the clinic shift groups that will be used during treatments.

Shift groups		Refresh Add Export Excel Prin
F Shift name		
M-W-F Afternoon		
M-W-F Morning		
T-T-S Afternoon		
T-T-S Morning		
records found		
Shift groups	^	Edit Print
Shift name Weekday list	M-W-F Afternoon	
Shift weekdays	Shift	
Wednesday	Afternoon Shift 14:00 18:00	
Monday	Afternoon Shift 14:00 18:00	
Friday	Afternoon Shift 14:00 18:00	

## 13.2.3 CLINIC WARDS

This section allows the user to manage different wards. The system shows all rooms linked to the ward.

Clinic wards  Ward name Default Ward New ward 2 records found  Clinic wards  Comment Test Ward	Ward name	Default Ward			ffreidh	Add	Print	
Default Ward New ward 2 records found Clinic wards Comment	Ward name	Default Ward	^		Edit		Print	
Default Ward New ward 2 records found Clinic wards Comment	Ward name	Default Ward	^		Edit		Print	
New ward 2 records found Clinic wards Comment	Ward name	Default Ward	^		Edit		Print	
Clinic wards	Ward name	Default Ward	^		Edit		Print	
Comment	Ward name	Default Ward	^		Edit	. F	Print	301
Comment Test Ward	Ward name	Default Ward						
Comment Test Ward								
Test Ward								
163t Ward								
Rooms in this ward								
Room name								
Room 1								
Room 2 2 records found								_

## 13.2.4 CLINIC ROOMS

This section is used to manage the clinic's different rooms by linking a room to a specific ward.

Default Clinic						
Clinic rooms					Refresh	Export Excel Pri
Room name			Ward			
Room 1			Default Ward			
Room 2			Default Ward			
Room4			New ward			
8 records found						
Clinic rooms					Edit	Print
	Room name	Room 1		Ward of the room	<u>Default Ward</u>	
Comment						

## **13.2.5 TREATMENT PLACES**

In this section the Clinic Manager will enter the beds for every single room in the clinic. Every bed will have a name and a number for sorting. . By selecting a resource, if it is occupied, which patients are using it can be seen immediately in the "HD Treatment Schedule Plan" section.

reatment places									Refresh	Add	Export E	xcel	Prin
		Enabled P	lease sele	ect one entry	•		Name	earch			0,		
Name	Enabled	Sort index	Room na	ame	 								
Room 1 - Bed 1	Yes	1	Room 1										
Room 1 - Bed 2	Yes	2	Room 1										
Room 2 - Bed 1	Yes	3	Room 2										
Room 2 - Bed 2	Yes	4	Room 2										
Room 4 - Bed 1	Yes	5	Room4										
records found													
						^						1	
	8					^				Edit	Print		
records found	8	Name	Room	1 - Bed 1		^	Enabl	ed I		Edit	Print	0	
reatment places		Name Room	Room <u>Room</u>			^	Enabl Sort ind			Edit	Print		
reatment places Patients using this	s resource	Room	Room	<u>11</u>		^				Edit	Print	0	
Patients using this	s resource Last name	Room Second la	<u>Room</u> st name   I	11 First name		^				Edit	Print	0	•
Patients using this	s resource	Room	<u>Room</u> st name   I	<u>11</u>		^				Edit	Print	•	

Resources can only be disabled if they are not being used in the patient schedule (HD Treatment Schedule Plan) and are not visible in the clinic scheduler associated with a patient.

Resources can only be deleted if they have never been used (even for old treatments) and if they are not currently scheduled. It is possible that resources that do not currently show any associated patients cannot be deleted because they may have been used in the past to create treatments.

Default Clinic								
Treatment places							Refresh	port Excel Print
		Enabled	lease select one entry	•	Name Search	ħ		0
P Name	Enabled	Sort index	Room name					
Room 1 - Bed 1	Yes	1	Room 1					
Room 1 - Bed 2	Yes	2	Room 1					
Room 2 - Bed 1	Yes	3	Room 2					
Room 2 - Bed 2		4	Room 2					
Room 4 - Bed 1 5 records found	Yes	5	Room4					
*								
Treatment places		🗙 En	or: 140219					
			ource cannot be deleted, it is us	ed in the schedulation of	Enabled	~		
			Lambert David - 39807 n Nicholas - 399489		Sort Index	1		
Patients using this		-	ок	al				
	Aitken	Lambert	David					
399489 2 records found	Brennan		Nicholas					
			Del	eting in p	rogress			

## **13.2.6 DIALYSIS DEVICE LIST**

The "Clinic Manager" can manage all the dialysis devices installed in the clinic in this section.

efault Clinic							-
alysis device lists				Refresh	Add	Export Excel	Prir
P Local ID	Serial number	Device types	Special Usages				
FMC4008	FMC4008001	4008	operation ongen				
FMC5008	FMC5008001	5008					
FMC5008 Modules	FMC5008002	5008 With Modules	HBsAg+ Pts, HCV+ Pts	, HIV+ Pts			
FMC5008	FMC6008001	6008	THE REAL PROPERTY IN O THE REAL PR				
GMB AK200	GMBAK200001	AK200					
alysis device lists		^		F	dit	Print	<
	FMC4008		Carial caret	FMC4008001			
Local ID	FIVIC4008		Serial number				
Device types	4008		Delivery	13 Jul 2007			
la se lla da s	12 Apr 2007		6				
Installation	13 Apr 2007		Special usages				
User Label			Software version				
Dialysis device lists					Edit	Print	
Local			Serial number		01	Print	
			Serial number Delivery		01	Print	
Local Device typ	es <u>5008</u>		Delivery	01 May 20	01	Print	
Local	es <u>5008</u>			01 May 20	01	Print	
Local Device typ	es <u>5008</u> 🐼 on 01 May 2010		Delivery	01 May 20	01	Print	

## **13.2.7 DIALYSIS DEVICE DISINFECTION**

In this section the Clinic Manager can specify which clinic disinfection program is associated with the dialysis devices.

Date	20/09/2019	<b>H</b>	Cleaning program	Disinfection (front concentrate suction t
Disinfection agent	Citrosteril	•	Frequency	after each dialysis treatment
esidual disinfectant test frequency	Please select one entry	•		
	L			

## 13.2.8 CLINIC STAFF

In this section the Clinic Manager can enter all information related to the clinic staff. The Clinic Manager can define the type of information for each clinic staff member. The following three fields are particularly important:

- Therapy Monitor Type: The "Clinic Manager" can specify the Therapy Monitor category to which each staff member belongs.
- Treatment doctor: The Clinic Manager can specify whether the clinic staff member is the doctor in charge of the treatment.
- **Doctor responsible for the pharmacological prescription**: The Clinic Manager can specify whether the clinic staff member is the doctor responsible for prescribing the pharmacological therapy.

ff				Cancel Save	
General information	_			-	
Badge ID			First name		
Last name			VAT Code		
Title	Title		Related user	Related user	•••
Туре	Туре		TMON type	Please select one entry	•
Treatment doctor	Please select one entry	T	Doctor responsible for the pharmacological prescription	Please select one entry	•
Form of address			Date of birth	dd/mm/yyyy	Ħ
Nationality	Nationality	•••			
Address					
Street			Postcode		
City			State / Country	State / Country	
Work					
Profession			Position		
Department					
Phone				-	
Telephone work			Private phone		
Private phone 2			Fax		
Comments					
nt					

The "print" field contains the text which will be printed in the Italian prescription form such as the doctor's stamp.



#### Note

The Clinic Staff section is not linked to the TDMS User Management module; it is only used in Therapy Support Suite to link patient information to the members of the clinic's staff.

#### **13.2.9 EXTERNAL SURGEONS**

In this section the Clinic Manager can enter the list of external specialist surgeons who are not clinic employees but who are present as private practitioners. The Clinic Manager can include a list of contact details (name, address, office address, telephone and a general comment).

#### 13.2.10 FAMILY DOCTORS

In this section the Clinic Manager can insert a list of all the patients' primary care General Practitioners.

#### **13.2.11 DEPARTMENTS**

In this section the Clinic Manager can insert a list of the medical departments in the hospital.

### **13.3 CATEGORIES AND LIST SETTINGS**

## **13.3.1 EVENT CATALOGUE**

In this section the Clinic Manager can customise the list of events that can occur during a treatment session, which the person in charge of the treatment can then send from the data eXchange panel (dXp).

This information is transferred to Therapy Monitor before the treatment session, to allow it to be accessed from the dialysis device dXp panel. After the treatment session this information is returned to Therapy Monitor and then back to Therapy Support Suite, and can be visualised in the dXp (data eXchange panel) tab of the Treatment data section in the Patients menu.

Description	Event One	Event code	1	

### **13.3.2 TRANSPORT CATEGORIES**

In this section the Clinic Manager can specify the transport types (e.g. taxi, ambulance). These categories will appear in the **Transport** section, **Type** field.

### 13.3.3 TRANSPORT

In this section the Clinic Manager can specify the means of transport used by the clinic.

#### **13.3.4 CLINICAL DIARY CATEGORY**

In this section the Clinic Manager can define the Clinical Diary categories. These categories will be seen by the doctor when he enters information in the Patient's Clinical Diary.

Default Clinic							
linical diary category				Refresh	Add	Export Ex	icel Pi
Category description							
Familiar Anamnesis							
Nurse HD comment							
Nurse PD comment							
Nurse Pre Dialyisis Visit Anamnesi							
Physical anamnesis							
Pre Dialyisis Visit Anamnesi records found							
linical diary category		^			Edit	Print	0
Category description	Familiar Anamnesis						
	1			AF			
Sort index	1		Category code	AF			

### 13.3.5 CLINIC DRUG

In this section the Clinic Manager can manually enter the drugs used without using the official drug database. For example, drugs made directly at the hospital or at an associated laboratory can be entered. The following information will be requested:

- drug/active ingredient: compulsory field, representing the drug's name;
- two flags, also compulsory, to indicate whether a drug is not generic or an active ingredient;
- active ingredient: this field can be left empty, but once it is selected one or more active ingredients must be entered;
- drug details: optional field where the user can insert an attachment to provide further explanatory details about the drug.

Default Clinic				
Clinic Drug				Cancel Save
Drug / Active ingredient 🚦		Commercial gener	ic 🔝	
Active ingredients		Medicinal detai	ls	Drop a file here or click on the button below to open file selector
Related drug catalogue	Pharmaceutical form description	ls t	he drug	enabled?
	No data			
Interactions				
Active ingredient name Description of the interaction	n			
	No data			

The "Drug catalogue" and "Interactions" sections are compiled automatically when the drug is saved. The first will show all the drug catalogues associated with the drug just entered. The Interactions section will show all the interactions between the selected active ingredient and the other existing active ingredients.

#### **13.3.6 CLINIC DRUG CATALOGUE**

In this section the Clinic Manager can manually specify the of drug catalogue used. This section is closely related to the "Clinic drugs" section, since a drug catalogue is only associated to a single clinic drug. Instead, a clinic drug can be associated to many drug catalogues. The following information will be requested:

- Drug: compulsory field where the user must select a drug from the list of drugs;
- Drug name: compulsory field where the user must enter the name of the drug again;
- Package: compulsory field where the user must specify the package details;
- Pharmaceutical form: optional field where the user can specify the drug's pharmaceutical form;
- ATC classification: voluntary field, but important as it is used to check for allergies and to filter anticoagulants in the prescription section;
- Possible administration routes: optional field, where the user can enter the drug's routes of administration;
- Drug details: optional field where the user can use an attachment to further describe the drug;
- Single unit cost: optional field where the user can enter the cost of a single unit;

- Single unit weight/capacity: optional but important field because it is used in the drug prescription.
- Measurement unit: optional but very important field because it is used in the drug prescription.

Default Clinic				
Clinic Drug Catalogue				Cancel Save
Information				
Drug	*	Drug		
Medicinal product name	83		Product code	
Package	*		Drug pharmaceutical form	Drug pharmaceutical form
ATC classification		ATC classification	Possible administration routes	ŧ
Medicinal details		Drop a file here or click on the button below to open file selector		
Unit's details				
Cost of the single unit		E	Weight/capacity of the single unit	
Measurement unit				
Active Ingredients				
F Active ingredient name				
		No d	ata	
Interactions				
Rective ingredient name Description	ion o	f the interaction		
		No d	ata	

The "Active ingredient" and "Interactions" sections are compiled automatically when the drug catalogue is saved. These show the list of active ingredients associated with each drug (entered in the Clinic Drug section) and the list of interactions among the active ingredients (selected in the Clinic Drug section) with other active ingredients.

#### **13.3.7 BATCH MAPPING**

In this section, the Clinic Manager can map the consumables and assign each a code and an expiry date.

## **13.3.8 USER ACTIONS**

In this section the Clinic Manager can map all the user actions, which will be displayed and can be selected on the Therapy Monitor (if connected).

#### **13.3.9 DEPENDENCY LEVEL**

In this section, the Clinic Manager can enter the patient's dependency level with respect to the nursing care required during treatment.

#### **13.3.10 THERAPY EDUCATION**

In this section the Clinic Manager can list the types of instruction the nurse can provide so the patient can become independent during a treatment.

## 13.3.11 MOBILITY AIDS

In this section the Clinic Manager can enter the list of aids the patient might request to improve mobility.

### **13.4 DEPARTMENT CATALOGUES SETTINGS**

#### **13.4.1 CLINIC DRUG CATALOGUE**

In this section the Clinic Manager can add drugs to the Clinic Drug Catalogue. The Clinic Drug Catalogue is a subset of the complete drug catalogue. It allows rapid drug searches to be performed in Therapy Support Suite (e.g., in the HD prescriptions section), filtering the list of drugs in the Clinic Catalogue.

Starting from a drug in the Clinic Drug Catalogue, a drug can be defined as well as one or more recommended doses. The doses selected can be quickly applied in Therapy Monitor.

All drugs saved in the Clinic Catalogue will be available in Therapy Monitor and on the dXp panel on the 5008 CorDiax device.

Full list House catalogue	Default Clinic									
Medicinal product name       ATC descrip       Pharmaceu       Medicinal product       Package       ATC descrip       Pharmaceu       Medicinal product            Medicinal product name       ATC description       Medicinal details       Package       Image: Comparison of the pharmaceu       Medicinal product       Package       Image: Comparison of the pharmaceu       Medicinal pharmaceu       Medi	Clinic Drugs									
Medicinal product name       adola       Pharmaceu       Medicinal product       Package       ATC descrip       Pharmaceu       Medicinal product       Medicinal product       Package       No data         Image: Adolaf - 20pieces 1ml       Paracetamol       Adolaf       20pieces 1ml vials       Package       Image: Adolaf - 20pieces 1ml vials       Package       Image: Adolaf - 20pieces 1ml vials       Package       Image: Adolaf - 20pieces 1ml vials       Image: Adolaf - 20piece	Full list					House catalogue				
Medicinal product name     ATC description     Medicinal details     Package       Adolaf - 20pieces 1ml     Paracetamol     Adolaf     20pieces 1ml vials							Package	ATC descrip	Pharmaceu	Medicin
Adolaf - 20pieces 1ml Paracetamol Adolaf 20pieces 1ml vials	Medicinal product	name adola		×	>	1		No data		
	F Medicinal product name	ATC description	Medicinal details	Package						
1 record found		Paracetamol	<u>Adolaf</u>	20pieces 1ml vials						

## **13.4.2 CLINIC CONSUMABLES CATALOGUE**

In this section the Clinic Manager can add consumables to the Clinic Catalogue. When clinic staff enter a consumable in another section of Therapy Support Suite (e.g. in HD prescriptions) they can filter the list of materials by those in the Clinic Catalogue. The contents of this field are transferred to Therapy Monitor.

Default Clinic													
Clinic consumables c	atalogue												
Consumable type	Acid concentrate	•											
ull list						- +	louse catalogue —						
Concentrate name	Article Number	Na + mmol/i Composi	K + mmoi/i	Ca ++ mmol/l	Mg ++ mmol/i	1	Concentrate	Article Number	Na + mmol/l	Composi	K + mmol/l	Ca ++ mmol/l	Mg ++ mmol/l
AC-F 119/5	6621631	138	1.00	1.25	0.50	>			No	data			
AC-F 113/1	2624631	138	1.00	1.50	0.50	$\leq$							
AC-F 219/1	4624631	138	2.00	1.25	0.50								
AC-F 213/4	2628631	138	2.00	1.50	0.50								
AC-F 313/2	5629631	138	3.00	1.25	0.50								
AC-F 313/1	5626631	138	3.00	1.50	0.50								
AC-F 119/5	6621621	138	1.00	1.25	0.50								
AC-F 113/1	2624621	138	1.00	1.50	0.50								
AC-F 219/1	4624621	138	2.00	1.25	0.50								
AC-F 213/4	2628621	138	2.00	1.50	0.50								
AC-F 313/2	5629621	138	3.00	1.25	0.50								
AC-F 313/1	5626621	138	3.00	1.50	0.50								

#### **14 SECURITY MANAGEMENT**

### 14.1 LOGGING

The Logging section has been created to store the list of all events that each user triggers using the application.

To see the **Log** information it is necessary to enable the *Security Manager* role for the user. When the role is active a **Logging** button appears on the top toolbar.

Clicking on the button opens a list of all actions and events recorded in the application.

Each row of the list contains information about:

- Action Type (Read, Update, Create, Switch to Edit, etc.).
- Date of action.
- User.
- Entity involved.

In case of exceptions a button shows the exception details (number of exceptions) to the *Security Manager* user. The complete list can be filtered using the filter fields at the top of the list.

From dat	e 01/12/2018	Ŧ	To date	31/12/2018	Ħ	Action type	Please select one entry	,
	t Patient		J User	User		Entity		
User extende	d							
IP Address	Host name	Entity	~			De	tails Related jo	ournaling
192.168.56.1	DESKTOP-9MAPO 70							
192.168.56.1	DESKTOP-9MAPO 70							
192.168.56.1	DESKTOP-9MAPO 70							
192.168.56.1	DESKTOP-9MAPO 70	[Patient] Sau	unders , Benjamin [72362]					
192.168.56.1	DESKTOP-9MAPO 70	[PD			×	Ĩ	e related	journal
192.168.56.1	DESKTOP-9MAPO 70	[PD :	details		î		e related	journal
		[TSS PAR	AMETER_1_Solution name			< N	e related	journal
		[TSS					e related	journal
192.168.56.1	DESKTOP-9MAPO 70	[PD solution	is]					
192.168.56.1	DESKTOP-9MAPO 70	[PD solution	ns] Available			Se	ee details	
192.168.56.1	DESKTOP-9MAPO 70	[TSS messag	ge] Inbox					
192.168.56.1	DESKTOP-9MAPO 70							
		[TSS schedu	ler status]				: related	journal
		[TSS schedu	ler status]				: related	journal
		[Patient] Sau	unders , Benjamin [72362]	[Consultation visit] Fi mag 2010 09:00	rst visit (new clinical ej	pisode), 01	e related	journal
		[FIS User gro	oups] demouser					

With the *Security Manager* role activated, a new button appears on entity views to show the rows which have been removed and by which user.

Therapy Support Suite				- FORGENHIE			- 6
demouser Patients	Default Clinic 🔻	Reporting Logging		FRESENIUS MEDICAL CARE	Search in F	Patient	
<b>v</b> Open patient list	Brennan , Nicholas [399-	189] × Clinic consumables catalogue	+				
lata	Brennan , Nicholas	Born 28/10/1962 (56y) Gender 7 Cod.	399489 Status Active/Hemodial	lysis 🖂 호			
tient summary	Patient status			· · · · · · · · · · · · · · · · · · ·	Add See deleted entitie	s Export Excel	Pri
eatment overview	Patient status			Refresh	Add See deleted entitle	Export Excel	Pn
iministrative data	Patient status Patient cha	ange status					
edical data	Event date	Patient status type	New dialysis status	New positional status	Description of patient status	Planned	1
ospitalisations	08 Jun 2010 16:22	Incoming - New patient admission	Hemodialysis	Active	Hospital One	No	
tient status	1 record found						
edical prescription							÷
tient agenda	Logging window					×	
						Print	1
scular access							
atment prescription	From date dd/mm/	ww 🌐	To date dd/mm/yyyy	Ŧ	Action type Delete	-	
ecklist	Patient Brennan	Nicholas 🗙 😶	User User		Entity Patient status	•	
atment schedule plan					Liney Line status		
armacological prescription	User extended						
ssages	And an an an					1	
atments	Action type Date	User IP Address	Host name Er	ntity			
survey							
ories							36
ioratory test							20
oratory data							
ioratory test schedule							
l Data							
nical diary							
ergies							
ccinations							
nily medical history							
rm situation							
nsfusion list							
morbidity							
cialist examination							
gnostic test							
f-sufficency							
tpatient clinic visit							
ient medical history							
putations							
nical case							
CONSTRUCTION OF THE OWNER							
access							
prescription							
treatment scheduler							
view							
Service Se							
me visit						1	
me visit treatments						1	
me visit treatments ritonitis nnel exit site							- Annual - Contraction - Contr

With the *Security Manager* role activated, a new button appears on the entity detail and will show the **Log** list related to that entity.

Therapy Support Suite							- 1
demouser Patient	s Default	: Clinic 🔻	Reporting	Logging			Search in Patient
<b>v</b> Open patient list	• Brenn	ian , Nicholas [39948	9] × Clinic consu	mables catalogue	+		
iic data	Brenn	nan , Nicholas B	orn 28/10/1962 (56	y) Gender 👌 Cod. 3994	89 Status Active/Hem	nodialysis 🖂 호	
Patient summary				······		Refresh	dd See deleted entities Export Excel P
Treatment overview	Allergies					Remean	dd See deleted entities Export Excel P
Administrative data	루 Creat	ion method Date	Allergy type	Allergy type	specification Details		
Medical data	Manu	ual 06 Mai	r 2015 Food				
Hospitalisations	Manu	ual Feb 20	07 Active ingre	dient (Eriramuf)			
Patient status	2 records f	ound					
Medical prescription							
Patient agenda							
attent agenda							
Vascular access							
Treatment prescription							
Checklist							
Treatment schedule plan							
Pharmacological prescription							
Messages							
Treatments							
HD survey							
pratories						^	
Laboratory test	Allergies					Ed	it Open entity log Print
Laboratory data			Date 06 N	Mar 2015		Allergy type	Food
Laboratory test schedule							
dical Data		Creation	n method Man	iual			
Clinical diary		1			-		~
Allergies	Logging wind	dow					×
Vaccinations							Print
Family medical history		Frank de	te dd/mm/yyyy		III	To date dd/mm/yy	yy <b>III</b>
Germ situation		Trom us	ue boyning yyyy			to date ob/min/yy	
Transfusion list		Action ty	pe Please select one	entry	-	User User	
Comorbidity		User extend	ed				274
Specialist examination							
Diagnostic test	Action type	Date	User	IP Address	Host name	Entity	
Self-sufficency	Read	20 Sep 2019 16	5:58 demouser	10.146.201.96	DVAITSSAP006	[Patient] Brennan , Nicholas [399489]>	[Allerev] 06 Mar 2015 Food
Outpatient clinic visit							
Patient medical history	Read	14 May 2019 0	9:37 demouser	10.146.201.19	PCMSUARDI	[Patient] Brennan , Nicholas [399489]>	[Allergy] 06 mar 2015 Food
Amputations	Read	14 May 2019 0	9:18 demouser	10.146.201.19	PCMSUARDI	[Patient] Brennan , Nicholas [399489]>	[Allergy] 06 mar 2015 Food
Clinical case	Read	13 May 2019 1	8:33 demouser	10.146.201.19	PCMSUARDI	(Patient) Brennan , Nicholas (399489)>	(Allerm) 06 mar 2015 Food
	heau	12 IMIGY 2019 1	uemouser	10.140.201.19	FUNDUARDI	[reacted pretman, Micholas [599469]	[Hind BA] on their 2010 Loon
PD access							
PD prescription							
PD treatment scheduler							
Review							
Home visit							
PD treatments							
Peritonitis							
Tunnel exit site							
Adequacy and nutrition							
Peritoneal equilibration tect							

## 14.1.1 REPORT LOGGING

Apart from other different activities, the use made by the user of the reports is traced in the Logging section. In particular it is possible to generate evidence logs, filtering by Action Type equal to Print or Execution of reports:

- When a report is executed
- By which user was the report executed
- On which patient(s)
- If the user has printed it out
- How the user has valued the input parameters (if reports provide for them). The input parameters and their evaluation are shown in the "View details" section, which can be consulted by pressing the button of the same name in the tracking records relating to the execution of the reports.
- In the "See details" section there is also information on whether or not the pseudonymisation of sensitive patient data has been enabled.
- In the case of a data export action type, the system also keeps track of the folder where the exported file was saved. This information is also available in the "See details" section.

Logging window								×
								Print
From date	dd/mm/yyyy	Ħ	To date	dd/mm/yyyy	Ħ	Action type	Report execut	tion 💌
Patient	Patient		User	User		Entity	7	•
User extended								
IP Address	Host name	Entity					Details	Related journaling
10.146.201.96	DVAITSSAP006	Database Health St	atus				See details	
10.146.201.96	DVAITSSAP006	Session details OCN	/I data					
10.146.201.96	DVAITSSAP006	Test Lab Data					See details	
3 records found								

#### **14.2 JOURNALING**

To see the Journaling information it is necessary to enable the Security Manager role for the user.

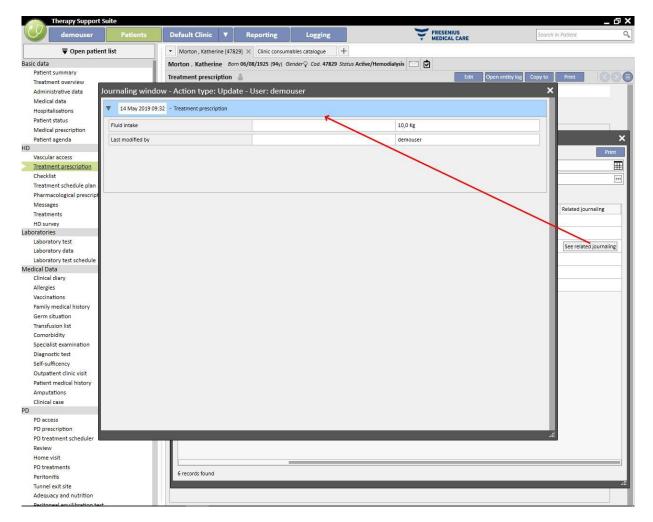
The Journaling enables the Security Manager user to see the list of modifications done by each user on entities.

To see Journaling information it is necessary to click on "See Related Journaling" in the Logging view:

Journaling information is grouped by modified entity;

It is possible to compare all modified fields except for : Scheduling Rules (always displayed in the list but with no differences highlighted).

Scheduling Rules (always displayed in the list but with no differences highlighted).



### **15 USER ACTIVITY**

This window includes the data extracted from FIS which present information related to all the users created for the Therapy Support Suite. Clicking on the "Update" button updates the data displayed on the screen. The first screen shows the status of the users and information related to the expiry dates of passwords and the most recent accesses, whereby the second screen is used to monitor the access to Therapy Support Suite and shows information about when and how the users logged on to the system.

### **15.1 USER STATUS**

Below is the first screen, and the main items are described below:

User activity	User activity						
Global master data							
User activity			Export Excel	Print	Refresh		
User status Users activity							
Recount name Password expiry date	Last login time Account sta	us					
	24 Sep 2019 07:40 Enabled						

- Account name: the user name of the account;
- Expiry date of password: if the option is defined in FIS it is displayed on the day it is obligatory to change the password;
- Last login time: the day and time of the user's last successful access;
- Account status: the status of the account which can be one of the following;
  - Enabled: the user can login
  - Manually disabled: the account has been disabled by FIS;
  - Disabled due to inactivity: the account has been automatically disabled because too much time has passed since the last access;
  - Disabled due to failed login attempts: the account has been disabled because the number of permissible failed logins has been exceeded.

## **15.2 USER ACTIVITY**

This screen shows the access events which have been carried out by all users:

lobal master dat	a					
ser activity				E	oport Excel Prin	t Refres
	activity					
Account name	Workstation name	Workstation IP	Login date			
demouser	DVAITSSAP006	10.146.201.96	24 Sep 2019 07:40			
demouser	DVAITSSAP006	10.146.201.96	20 Sep 2019 10:56			
demouser	DVAITSSAP006	10.146.201.96	20 Sep 2019 10:25			
demouser	DVAITSSAP006	10.146.201.96	19 Sep 2019 16:43			
demouser	DVAITSSAP006	10.146.201.96	03 Jun 2019 09:52			
demouser	DVAITSSAP006	10.146.201.96	03 Jun 2019 09:52			

- Account name: the user name of the account;
- Workstation name: name of the host where the user logged in;
- IP of the work-station: IP address of the host where the user logged in;
- Login date: date of access displayed in the line.

## **16 OPTIONAL MODULE: MULTI-CLINIC MANAGEMENT**

### **16.1 OWNER UNIT MANAGEMENT MODULE**

With Therapy Support Suite multiple clinics can be managed, each one with its own patients and specific settings. This chapter describes how to manage and create Clinics.

Enabling the "Global Manager" role you can manage all the clinics managed by Therapy Support Suite using Master Data (Global Manager)  $\rightarrow$  Owner Units menu. Please refer to the Therapy Support Suite Service Manual for further information.

In this section it is possible to create/delete/modify all Therapy Support Suite clinics. For every clinic it is also possible to specify the reference clinic so a complex organisation can be created.

### **16.2 MULTI-CLINIC FEATURES**

Clinics can be configured using the **Master Data** section enabled through the *Clinic Manager* role and enabled through the *Global Manager* role.

These sections are different and must be used for different purposes:

- Master Data (Clinic Manager) this allows the user to configure a specific clinic: all settings in this section will be linked to the clinic to which the user belongs. Using the Master Data menu, lists can be defined, e.g. personnel, events catalogue and so on or a drug or product or user actions can be specified for a specific clinic.
- The Master Data (Global Manager) section contains settings shared among all clinics created inside Therapy Support Suite: this means that these settings are applied to all the clinics. In this section you can specify, for example, the list of dialysis devices, consumables (blood lines, needles, etc.), vascular access positions, and treatment types that you can use later in order to populate specific clinic lists. See the Therapy Support Suite Service Manual for further information.

For example, if in the Master Data (Global Manager) section the dialysis device list is populated with values "AK200", "5008" and "4008", through the Master Data (Clinic Manager) menu it is possible to specify that, for a specific clinic, only "AK200" and "5008" devices are available. To summarise:

Master Data (Global Manager) is used to define the list of all available dialysis devices inside Therapy Support Suite ("AK200", "5008", "4008", "ARTIS");

Master Data (Clinic Manager) is used to specify which of these devices will be available for each clinic. For example:

- "AK200", "4008" for "clinic 1";
- "5008", "ARTIS" for "clinic 2";

### **17 OPTIONAL MODULE: INTEGRATION SERVICES**

## **17.1 INTERFACING WITH HOSPITAL COMPUTER SYSTEM**

This module allows Therapy Support Suite to be interfaced with the **Hospital computer system** and the **analysis lab** for the exchange of updated information about patients (e.g. administrative data, laboratory data, treatment data, etc.).



### Warning

Risk for the patient as a result of an incorrect prescription being shown

The user is responsible for verifying the correctness of data imported from the Hospital Computer System interface.



#### Note

Some Therapy Support Suite fields may become read-only if they have been correctly populated through the information exchange with the Hospital Computer System.

#### **17.2 IMPORTED PATIENT'S ADMISSION**

When the **Communication Data Link** module is activated, the user will find a new function in the dialysis clinic section that will permit the patient admission by selecting the patient to be admitted from a list that can be filtered using the Last name, First name, Patient code and patient status. After finding the patient to be admitted, the user simply clicks the patient to start the admission process immediately. In addition, there is a control field that can be configured from Master Data under the "Configuration parameters" item (for more details, section 4.1.1 of the Service Manual), which allows patients to be imported from other clinics.

User can filter the patients by status, the possible statuses are the following:

- Active
- Imported
- Not active
- Transit vacation
- Transit hospitalization
- Transit Acute
- Transit ICU
- Transit temporary
- In review

Therapy Support Suite						_ 0
demouser Patients	Default Clinic 🔻 Repor	rting		)÷	RESENIUS HEDICAL CARE	Search in Dialysis Unit
Internal patient's admission	<ul> <li>Morton , Katherine [47829]</li> </ul>	nic consumables catalogue	Clinic Home Page	×	+	
New patient admission Patient merge	Internal patient's admission					
Basic data	_		0			0
General information	First name	search			Last name Search	0,
Home page	Date of birth	dd/mm/yyyy	Ŧ		Patient code Search	0
Scheduler and transfers	Cont	Please select one entry			Clinical case ID Search	Q
Clinic scheduler	Status				Clinical case ID	~
Clinic resource scheduler	E Last name Second last name First	Please select one entry			Dialysis status Clinic name	
Patient transfers		Active	-			
Daily walk-in clinic visits		Imported		make a	a selection	
HD clinic treatments closing		Not active				
PD Treatment scheduler		Transit - vacation				
PD clinic treatments closing		Transit - hospitalisation Transit - acute				
Query & patient groups		Transit - ICU				
Manage query		Transit - temporary				
Manage patient groups		In review				
HD survey		in review.				
Manage HD survey all treatments query						
Manage HD survey single treatment query						
Transplant management						
Donor data						
Clinic waiting list						

When an inactive patient is imported, a confirmation message will appear. Clicking on Yes, a new popup will appear where the user can select the new admission status of the patient. Once the patient status has been filled in, it will be imported to the desired status. If the patient's clinic is the same as the clinic into which we are making the import, an "Internal Transfer - Patient Reactivation" will be created. Instead, If the patient's clinic is different from the clinic into which we are importing the patient, an "Internal transfer – Patient reactivation from another clinic" will be created.

Instead, when trying to import a patient with an "imported" status, a "New patient admission" popup will appear already filled in with the patient's data, filling in the mandatory fields and saving the patient will be imported.

In all other cases when the patient is already associated to the clinic where we are trying to do the import, a message will appear to inform the user that the patient is already in the list of patients. If the patient is not in the clinic we are using, a message will appear that it is necessary to make a transfer before the patient's data can be managed.

#### **17.3 HOSPITALISATIONS**

The patient's hospitalisations can be recorded and edited in this section. The user can select the ID, status, type and period of validity for a clinical case related to the selected patient. Note that hospitalisations will be considered by the internal logic only if they comply with the configurations set in "Configuration Parameters" under "Master Data" (see Service Manual section 4.1.1)

nical case				Cancel	ve I
Clinical case ID			Valid from	24/09/2019 00:00	
Valid to	dd/mm/yyyy hh:mm		Clinical case status	Open	[
Clinical case type 🙁		•	Hospital	Hospital	
Hospital department			Attachment	Drop a file here or click on the buttor to open file selector	
agnosis eason	Comment				
+ mment					

### **18 OPTIONAL MODULE: ANALYSIS AND REPORTS (QUERY BUILDER)**

## **18.1 QUERY BUILDER**

Query Builder is a tool provided by Therapy Support Suite that the user can use to create queries about the data stored in the application. Having the possibility to extract data from the entity, apply filters to them and generate graphics, offers users the possibility to improve the quality of the daily work.

To access Query Builder it is necessary to access the *Clinic* menu and select the *Open* item in the *Query Builder* submenu. The initial view provides a list of queries that have been saved in the past.

From here, it is possible to start creating a new query by clicking on the *"New"* button. The pop-up that appears permits the user to choose from which entity to select the most important data that the query he or she is creating will have to display.

Query builder								New	Save Conce
Query	Entity	Publish as view	Publish as report	Publish for dynamic report	Valid for all clinic	Owner Clinic	Comment		
Patients by country	Patient								2
Session details OCM data	Patient - Session details	✓							×
Test Hb	Patient - Lab Data	-							2
Test Lab Data	Patient - Lab Data	•	~	•					>

Patient	•
Patient	
Patient - Adequacy and nutrition	
Patient - Allergies	
Patient - Amputations	
Patient - BCM	
Patient - Carpal tunnel	
Patient - Charlson Comorbidity Index	
Patient - Checklist	
Patient - Clinical case	
Patient - Clinical diary	
Patient - Comorbidity	
Patient - Diagnostic test	
Patient - Dialysis dose	
Patient - Dietary history	
Patient - Dose management simulation	
Patient - Dose management simulation item	
Patient - Eurotransplant data	
Patient - External patient status	1947

By clicking on the desired entity and clicking on the OK button, the user accesses the query definition area.

demouser Patients	Default Clinic V Reporting	FRESENIUS MEDICAL CARE	Search in Dialysis Unit
Laboratory data	Morton , Katherine [47829] Clinic consumables cata	logue Query builder × +	
Search field	Query builder		Results Save query Copy as Return to query list Charts
Laboratory data	Description:	Main Entity name: Number of records:	Is Pivot: Aggregate This is a private Include patients in other
Acid-base balance and blood gases Actionantibodies Bone and mineral metabolism Carobolydrate metabolism Clotting studies	Test Hb Comment:	Laboratory data 50 Show all	results: query: clínics
Created in      Created i	Drag and drop field to create a parameter		
Cytokines     Dialysis adequacy     Electrolyte and water balance	Haemoglobin 🥖		
Enzymes     Haematology     Inflammation     Iron metabolism	Drag and drop the columns to display	oglobin 🥒	Count column Expression column Column group
Lab comment Lab Test Date	Drag and drop field to create a filter		Add Group
E Lab test request ↔ Last modified by	Not Haemoglobin	Lower than	
Lipid metabolism     Metabolic parameters     Nutritional			
Plasma proteins     Residual diuresis     Residual renal function			
Source laboratory for lab test      O+     Text results			
Therapeutic drug monitoring     Thyroid function     Toxic metal			
Tumor markers     Urine     Virology			

This area consists of five main sections.

## **18.1.1 LIST OF QUERY FIELDS**

The left-hand side of the interface contains a complete list of the Query Builder's query fields. From this list, it is possible to select which fields the query must return and which, for example, should be used as a filter or parameter. The list groups the fields according to the structure of the database. If the user is not able to pinpoint the requested field, he or she can use the search engine that Query Builder provides by typing the description of the field in the first box (*Search field*) at the top of the section in question.

Query Builder offers the possibility to be able to query not only the fields of the entity selected in the past, but also all the fields of the entity related to the Patient and in the same way all the fields of the entity related to the Clinic (this depends on whether the "starting" entity belongs to the Patient menu or to the Clinic menu).

To find fields in different entities than the one selected when the user started to create the query, select the entity that contains the desired field by expanding the list of entities located below the search box.

Search field	0
Laboratory data	•
Patient	
Adequacy and nutrition	
Allergies	
Amputations	
BCM	
Carpal tunnel	
Charlson Comorbidity Index	
Checklist	
Clinical case	
Clinical diary	
Comorbidity	
Diagnostic test	
Dialysis dose	
Dietary history	
Dose management simulation	
Dose management simulation item	
Eurotransplant data	
External patient status	
Family medical history	
Fast peritoneal equilibration test	
Germ situation	
Home visit	
Hospitalisations	
Lab test canceled	
Laboratory data	
Laboratory test	
Laboratory test schedule	
Medical assessment	
Medical data	
Medical data (History)	
Medical prescription	
Messages	
Nurse assessment	
Nurse visit history	
Outpatient clinic visit	

# Laboratory data

Apart from the table attributes in the database, Query Builder allows view attributes to be used as searchable fields.

## **18.1.2 QUERY PROPERTIES**

The query definition area is on the right-hand side of the screen. At the top, there is the area for defining the query properties, i.e. the area where the user can specify the following:

- Query description: The name that will identify the query;
- Comment: A more detailed description of the aim of the query;
- Maximum number of results that will be shown;
- "Is' Pivot" display mode: This is the list of results displayed by column. The desired fields make up the lines. A typical example of this display is the view of the central parts of the patient summary;
- Aggregate results: enables aggregate results with the same value;
- Private query: a query that can only be modified by the user who created it and, if it has been published, only the user who created it can see it in the view of the related section.
- Include patient of other clinics: enabling this flag the results displayed will include patients active in the current clinic and patients that were transferred into the clinic regardless of whether the patient is active or not.
- Pseudonymised data: this flag enables sensitive patient data to be pseudonymised during data extraction.
- Data drawn from other clinics: this flag allows the user to decide whether to extract information from all the dialysis clinics or only from the current one. To display this flag, there must be more than one clinic and that each of these must have enabled the "Enable patient admission from other clinics" field among the parameters in the "Configuration parameters" section of the Master Data (see the specific section in the Service Manual). Queries with this flag highlighted cannot be published as views but can be published as reports.

Description: Patients by country	Main Entity name: Number of records: Patient 50 Show all				This is a private query:	Include patients in other clinics
Comment:						
Extract data from other clinics						

## **18.1.3 OUTPUT VALUES**

The list of fields that the query has to return. It must be defined in the section called "*Drag and drop the columns to display*". As the title of the section says, to populate the section, simply drag the desired fields from the list of query fields. The only fields that cannot be queried are the *prompt Links* identified by the  $\bigcirc$  icon. By clicking on this icon, the field is expanded and the user can choose which of the fields of the linked entity he or she wants to drag into the output values section.

Once the field has been dragged to that section, a box appears with a description of it, and the Pencil symbol appears on the right-hand side.

Click on this symbol to open a pop-up where the column properties can then be defined:

- Column description: Column title containing the values of the field in question;
- Regrouping clause: How to regroup the values if the "*Aggregate results*" option was selected;
- To delete a value that is no longer required as an output, simply click on the X to the left of its description.
- Use drag & drop to change the order of the output columns.

■ To reorganise the position of an output column, simply click on its description. A symbol will appear beside it showing the type of ordering (▼ descending, ▲ ascending) and the order.



In addition to the entire list of application fields, Query builder enables particular expressions or "Numbers of columns" to appear as output. It also allows the creation of groups of columns in the final view (only in the case of *Pivot* view).

## 18.1.3.1 NUMBER OF COLUMNS

If the "Aggregate results" option is selected, the results displayed can be dragged to the "Number of columns" column. This column displays the number of results that have been joined in the line in question (e.g. the column may be useful in a query to know how many times the patient was treated on a Fresenius 5008 device).

To edit the description of the column, click on the pencil.

To reset the values inside the edit pop-up, click on the "*Refresh*" button.

To cancel the input, click on the "Delete" button.

## 18.1.3.2 EXPRESSION COLUMN

By dragging this option into the results to view, it is possible to apply the calculation of the expression "*Age*". To do this, after dragging & dropping the option, simply edit the properties of the column. Select "*Age expression*" statement and drag the Date field, selecting it from the list of available fields (list on the left).

If, for example, the user wants to visualise the age of a patient he should proceed as follows:

- Drag the "Age" item into the values to be displayed in the output;
- In the pop-up that opens automatically, edit the description of the column, and select "Calculate age" in the "Expression Type" list.
- Drag the Date of Birth field from the list of fields of the Patients entity into the pop-up section called "Drag and drop here".
- Click on the Save button.

Therapy Support Suite		FRESENIUS	_ @ ×
demouser Patients	Default Clinic V Reporting	WEDICAL CARE	Search in Dialysis Unit
Laboratory data	Morton , Katherine [47829] Clinic consumables catalogue Query builder	× +	
Search field	Query builder	Results Save query	Copy as Return to query list Charts
Laboratory data	Description: Main Entity name: N	lumber of records: Is Pivot: Aggregate	This is a private Include patients in other
Addresse balance and blood gaves     Autoantboolier     Bone and mineral metabolism     Carbolydrate metabolism     Carbolydrate metabolism     Carbolydrate metabolism     Crotation     Crotation     Crotation     Crotation     Crotation     Crotation     Control and water balance     Crotation     Control and water balance     Crotation     Crotatio     Crotation     Crotation     Crotation     Crotatio     Crota	Test Ho     Laboratory data     st       Comment:	0 Show all results:	Image: second

• To eliminate a data field, simply select the "x" button next to the description.

Lab test date

_	 

• To reset the values inside the pop-up, click on the "*Refresh*" button.

To cancel the input, click on the "Delete" button.

# 18.1.3.3 GROUP OF COLUMNS

The option "Group of Columns" can only be activated when the results view is in Pivot mode. With this option, the user can define groups of columns that can be viewed in output inside an expandable view at the user's discretion.

To define the group:

- Select the option and drag it into the section of columns to view;
- Click on the "Group" description to change the label;

Drag the columns from the list of fields (or from those of the output columns) to the area for definition of the group.

## **18.1.4 FILTER CREATION AREA**

The filter creation area is found at the bottom of the screen and is used to define the criteria for the selection of results to view as output. The filter criteria for the results must be expressed in an algebraic expression (e.g. Weight > 50 Kg and Height <= 185 cm).

To define a filter, simply drag & drop filters from the filter field to the filter creation area. Define the criteria from the combo box that appears next to the field name and insert the value to apply to the filter, enabling the data entry box for the value by clicking on the related check-box.

Drag a	nd drop f	field to create a filter			A	dd Group
		Not Haemoglobin	Is empty	•		
		Not Haemoglobin	Lower than	<ul> <li>▼ 10</li> </ul>		
Not	And	Not Lab Test Date	Greater than		<date from=""></date>	
		Not Lab Test Date	Lower than		<date to=""></date>	

The applicable filter criteria vary from field to field based on the type of field dragged into the filter area. Here are the details of the criteria based on the type of field:

Date:

- Equal to
- Not equal to
- Greater than
- Greater than or equal to
- Less than
- Less than or equal to
- Last <n> days
- Same year
- Same day
- Same month
- Same month and year
- Same week
- Null value

## Numeric:

- Equal to
- Not equal to
- Greater than
- Greater than or equal to
- Less than
- Less than or equal to
- Null value

## Text:

- Equal to
- Not equal to
- Greater than
- Greater than or equal to
- Less than
- Less than or equal to
- Contains
- Does not contain
- Contains (case insensitive)
- Does not contain (case insensitive)
- Starts with
- Finishes with
- Null value

Predefined list:

- Equal to
- Not equal to
- Null value

## Links:

- Equal to
- Not equal to
- Null value

To negate a condition (e.g. haemoglobin is NOT negative) enable the "*Not*" button (to the left of the field name) with a click.



When there are multiple conditions, they are incorporated in a single condition and the predefined algebraic operand is AND. To change to the operand OR click on the button marked "*and*".

Drag and drop	field to create a filter	Drag and drop field to create a filter
	Not Comment	Not Comment
Not And	Not Date diet pre-dialysis	Nor Date diet pre-dialysis

To negate the result deriving from the incorporation of multiple conditions, activate the *Not* in brackets next to the desired condition.

To define nested conditions, or to create different levels of brackets, simply drag the "*Add group*" button (located to the top right of this section) in the filter area. If one or more groups are already present, when dragging it, the level of brackets in which the new group will be positioned will be highlighted.

## Main:

Query builder		Number of records:	Result	S Streeter	This is a private query:	umn Column group
mns to display create a filter Allergy text code identifier	Allergies	0 Show a	all Pivot:	Aggregate results:	This is a private query:	umn Column group
mns to display create a filter Allergy text code identifier	Allergies	0 Show a		results:		umn Column group
rreate a filter Allergy text code identifier			N N	Count column	Expression col	Add Group
Allergy text code identifier			N N			
			N N			Add Group
Allergy text coding system	Contain	s (insensitive)				

#### Nested:

demouser Patients	Default Clinic 🔻 Reporting		SENIUS ICAL CARE	Search in Dialysis Unit
aboratory data	Query builder	× +		
earch field	Query builder		Results Save guery	Copy as Return to query list Charts
learch field Q aboratory data Acti-base balance and blood gases > Acto-base balance and blood gases > Acto-base balance and blood gases > Controlydrate metabolism > Corbing studies > Cortoing studies > Created in ↔ > Created in ↔ > Crokines > Diblyis adequacy > Electrolyte and water balance > Insymmes > Haematology > Infammation > Residual direction > Source laboratory for lab test > Three part column > Three infammation > Three infammatio	Query builder			This is a private Include patients in othe query: clinics

A filter can be deleted by clicking on the icon that appears on the right hand side when the mouse is placed over the filter in question.

## **18.1.5 PARAMETER DEFINITION AREA**

The above descriptions, related to the filter definition area to apply to the results, call for the user to define a specific value for the filter (greater than 2, less than 4, etc.). To make the query more dynamic, Query Builder offers users the possibility to apply values (parameters) to the filters entered by the user when the data are extracted.

To define the parameters, when creating the query, it is necessary to drag the list of fields from an entity for which you want to apply a filter, not only into the filter definition area, but also into the parameter definition space, which is below the area for defining the properties of the query. By clicking on the pencil, usually you access the properties of the parameters in order to define their description, visibility, whether they are mandatory, the width of visualisation and the typical different characteristics for the various types of prompt:

Date: Accuracy of the date (day, month, year, date and time, only time).

To apply a parameter to a filter, simply drag the parameter from the parameter definition area into the filter area, in the section related to the required filter, dedicated to the value that has to be applied to the filter.

demouser Patients	Default Clir	nic Reporting		FRESENIUS MEDICAL CARE			Search in D	ialysis Unit
aboratory data	<ul> <li>Aitken Lam</li> </ul>	bert, David [39807] Query builde	r × +					
orch field	Query builder	r			Results	Save guery	Copy as Retu	urn to query list Char
boratory data	Description	:	Main Entity name:	Number of records:	Is Pivot:	Aggregate		Include patients in ot
Acid-base balance and blood gases Autoantibodies	Test Lab Dat	ta	Laboratory data	50 Show all		results:	query:	clinics
Bone and mineral metabolism Carbohydrate metabolism Clotting studies	Comment:							
Created in or Cytokines	Drag and drop	field to create a parameter						
Dialysis adequacy Electrolyte and water balance	Lab Test	Date 🥒 🕱 Lab Test Date 🥒						
Enzymes Haematology		the columns to display					Expression colu	imn Column group
Inflammation	X First nam	e 🕶 1 🥖 🗶 Last name 🥖 🗶 Lab	Test Date 🔻 🥒 🔀 Haemogl	obin 🔻  🧪				
Iron metabolism Lab comment	Drag and drop	field to create a filter						Add Group
Lab Test Date Lab test request or		Not Haemoglobin	Is empty	( <b>•</b>				
Last modified by Lipid metabolism Metabolic parameters		Not Haemoglobin	Lower ti	nan 💌	10			
Nutritional Plasma proteins	Not And	Not Lab Test Date	Greater	than 💌			<date from=""></date>	
Residual diuresis Residual renal function Source laboratory for lab test 🗪		Not Lab Test Date	Lower ti	nan 💌			<date to=""></date>	
Thryciol function Toxic metal Tumor markers Urine Virology								

NOTE: Before dragging the parameter into the filter area, click on the pencil icon to deactivate the static filter, if the filter was previously defined as such.

# **18.1.6 SPECIAL FUNCTIONS**

# 18.1.6.1 IS PIVOT

The "Is' pivot" function allows the user to modify the results view in *pivot* mode. This mode foresees the display of the values defined in the section related to the output values (from the second value onward) as a line of a table. The first value in the list of columns to be shown, acts as a discriminant to determine the columns of the results table. To obtain pivot extractions that make sense, it is good practice to use a discriminant with a Date value to create the columns.

By doing so, Query Builder will generate a column for every date extracted and the list of remaining fields in output will form the remaining lines, allowing the user to examine and compare the values easily, as they are side by side. By ordering the output by date (ascending or descending), it is possible to provide the user with the option to compare the results in chronological order.

	7	20 Nov 2010	18 Nov 2010	16 Nov 2010	13 Nov 2010	11 Nov 2010
Pre-dialysis weight	Kg		66.80	68.20	67.40	68.30
Post-dialysis weight	Kg	84.10	65.20	65.20	65.20	65.40
Dry body weight	Kg	65.2	65.2	65.2	65.2	65.2
Weight gain	Kg		1.60	3.00	2.00	1.90
Weight gain percent	%		2.35	4.45	2.93	2.78
UF volume	ml	2480	1900	3300	2492	3300
Pre-systolic/Diastolic pressure		142/74	167/76	173/80	162/83	156/82
Post-systolic/Diastolic pressure		136/66	140/73	134/81	146/80	147/78
Pre-dialysis heart rate	bpm	74	68	77	71	70
Post-dialysis heart rate	bpm	66	74	83	88	77
Cr <mark>iti</mark> cal RBV	%	83				
Min RBV	%	98.9				
Effective Kt/V		1.43				
Total substitution volume	L	17.0	37.1	28.2	35.4	33.5

# **18.1.6.2 AGGREGATE RESULTS**

Activating the "Aggregate results" function orders the Query Builder to combine all output lines that contain exactly the same results in a single line. By selecting this option, it is possible to verify how in the "Columns to display" section every element that is present will expand by one line with the description "Group by":



By editing the properties of the columns to extract, it is possible to select different logic for aggregation, depending on the type of data shown.

String/predefined list/link:

- Group by (group according to rows with identical values).
- Numeric:
- Group;
- Max (calculates the maximum, for the field in question, of the grouped values);
- Min (calculates the minimum, for the field in question, of the grouped values);

- Average (calculates the average of the grouped values);
- Sum (calculates the sum of the grouped values);

## Date:

- Group;
- Group by day (groups lines that refer to the same day in the field in question);
- Group by month (groups lines that refer to the same month in the field in question);
- Group by year (groups lines that refer to the same year in the field in question);

The combination of different logic for grouping permits the user to perform extremely complex extractions (e.g. extract for every patient the average haemoglobin value for every month in the date range defined by the user).

## **18.1.6.3 PRIVATE QUERY**

By activating this option, the query can be modified only by the user who created it, and, if this has already been published as a view, only the user who created the query can view it in the relative section.

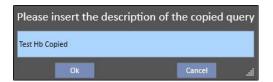
## **18.1.7 BUTTONS**

Two different series of buttons are available for the user based on which section of Query Builder he is in.

## **18.1.7.1 BUTTONS AVAILABLE IN THE QUERY CREATION PHASE**

In the query definition section, there are multiple buttons (as usual, located above and to the right of the windows) to cover various functions:

- Results: this button allows the user to perform the query in question and verify that the results are correct;
- Save a query: needed to save the created query;
- Copy as: the user can create a copy of the open query, changing its name. This operation is useful if he only wants to modify a small part of an existing query, eliminating the need to recreate it from scratch.
- By clicking on the button, a new pop-up window opens where the name of the new query can be specified.



- Click OK to confirm the query. Cancel deletes the changes.
- Return to the list of queries: takes the user to the list of saved queries.
- Charts:: allows the user to start the procedure to associate one or more charts to the extraction. How to
  generate the charts is described in the next chapter.

## **18.1.7.2 CREATE CHARTS**

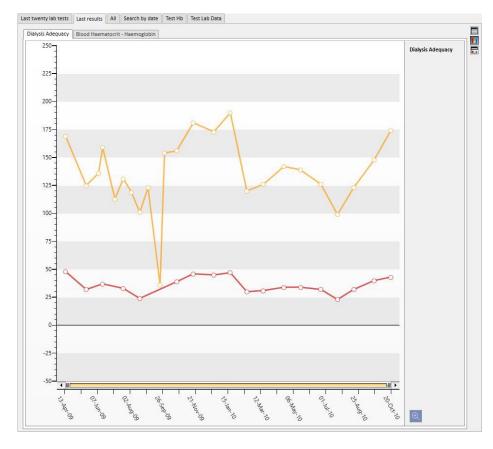
Query Builder also offers the possibility to create charts to be associated with (or to replace) the generated query. To start creating these charts click on the "Charts..." button in the top right of the window. A pop-up window will open. It can be used to perform three different tasks:

- Choose the chart display style
- Add or create a chart
- Add a tab or group charts together inside a tab
- Choose the chart display style

The charts can be displayed in different ways:

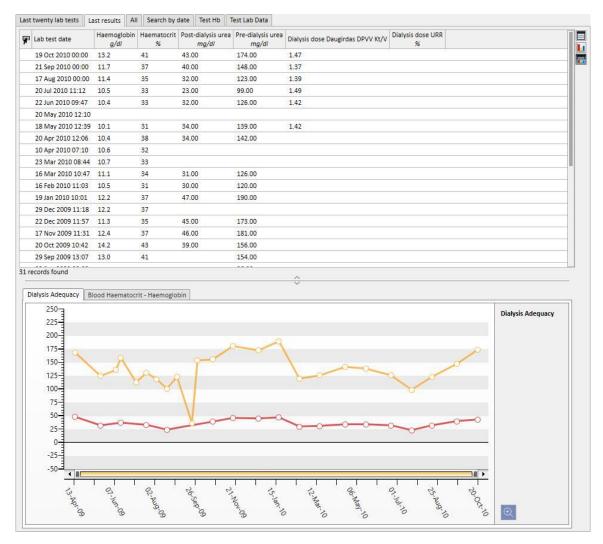
Predefined: the chart will be accessible via a button next to the list of results of the query;

ast twenty lab tests	Last results	All Search by	date Test Hb	Test Lab Data			
穿 Lab test date	Haemoglobi g/dl	n Haematocrit %	Post-dialysis urea mg/dl	a Pre-dialysis urea mg/dl	Dialysis dose Daugirdas DPVV Kt/V	Dialysis dose URR %	
19 Oct 2010 00:00	13.2	41	43.00	174.00	1.47		
21 Sep 2010 00:00	11.7	37	40.00	148.00	1.37		
17 Aug 2010 00:00	) 11.4	35	32.00	123.00	1.39		
20 Jul 2010 11:12	10.5	33	23.00	99.00	1.49		
22 Jun 2010 09:47	10.4	33	32.00	126.00	1.42		
20 May 2010 12:10	0						
18 May 2010 12:3	9 10.1	31	34.00	139.00	1.42		



#### Replace the view: The chart will be displayed as the first window of the query;

 Divided view: the space dedicated to the results of the view will be divided in two. The upper part will contain the grid of results, the lower part the assigned charts.



After selecting a type of view, by clicking on "Add new", the user is guided to the next step in the generation of the chart (see next section). The "Save" button allows the user to save changes, and "Cancel" allows him to cancel them.

# Generating a chart

Once the display type has been selected for the chart, it is possible to add new charts by dragging the button "Add chart" as described in the user interface. At this point, a pop-up opens related to the generation of a new chart.

Chart edito	r	×
Description		
Type		X-Axis field
	Drag and drop a field to create a data series	
Haemoglobin		
	Save	ancel Preview!

First of all, it is necessary to describe what the chart shows, entering the content in the Description field.

The field Type allows the user to specify the type of chart:

- Point: the values are shown as points in the chart;
- Line: the values are shown as points and are connected by a line;

Define which values to use on the X-axis by specifying them in the field "X-Axis Field". It is necessary to select a Date value for the X-axis, even though the list proposes all the values defined in the "Values to display" section of the related query.

To define a chart correctly, there must be at least one Date field in the output columns to define the time line on the X-axis.

To define which series of values to display on the chart simply drag the required value from the column on the left to the central area of the window.



The list of selectable values is composed solely of the numeric values established as "Columns to display" in the creation phase of the query.

In the central part, after dragging the required values, it is possible to modify the properties of the graphic

representation of each value selected (colour and line thickness). To modify the colour click on the 🖉 💷 icon; to

select the line thickness expand the

expand the section.

When selecting the values to display it is advisable to select values with the same unit of measurement, otherwise the scale of values on the X-axis will be incongruous.

To define charts with different units of measurement simply create more than one chart, grouping in each one values with the same unit of measurement.

To eliminate a value that has been dragged by mistake, click on the X that appears to the right of the parameter modification area.

Drag and drop a field to	create a data series		
Haemoglobin	× 🗖	()	×

Once the data to display have been selected, the user can see a preview of the chart by clicking on the "Preview" button. The "Save" button, as always, saves the changes made, while "Cancel" means that these changes are lost.

#### Modifying a chart

If the user wants to modify a chart created in the past, simply click (inside the pop-up window that opens after clicking on the "Charts..." button) on the row with the title of the chart, located under the display mode selection option.

Chart builder		×
Add chart	Add tab	Charts mode Default
Drag and drop a contro	ol to create a chart or tab	
test chart 📕 H	aemoglobin	×

#### Creating tabs and grouping charts together in tabs

The charts can be grouped together in tabs in order to be able to separate them or to show them at the same time together with the related query, thus allowing the user to compare the visualised data easily.

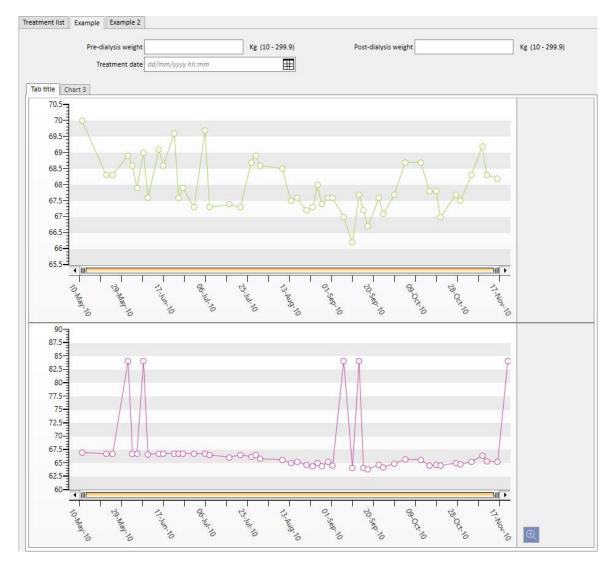
From the "Chart builder" window, it is possible to create new tabs, dragging the control "Add tab" as indicated in the user interface

Chart builder						>
Add chart	Add tab	]			Charts mode	Default 💌
Drag and drop a cor	trol to create a chart or	tab				
Table title	Pre-dialysis weight					×
			Save	Cancel		

Here, it is possible to modify the title by clicking on the name itself so that it becomes editable. To insert one of the charts in the tab that has just been created, simply drag it as shown on the user interface, which gives the following result

hart builder				3
Add chart	Add tab	Charts mode Default		•
ag and drop a control t	o create a chart or tab			
	Pre-dialysis weight		×	
Tab title	Post-dialysis weight		×	>
Chart 3 Weigh	t to lose			>

When the query is executed, the charts will be displayed to the user as shown below (the first two charts on the same tab, the third in a separate tab):



# 18.1.7.3 BUTTONS AVAILABLE IN THE SECTION WITH THE LIST OF QUERIES

Accessing the Query Builder section using the "Open" menu item in the clinic menu, the following three buttons are available:

- New: Always accessible, and enables the user to create a new query.
- Save: Initially disabled, enables the user to save the modifications made to the query list, for example, the modification of the publication flags (described in detail in the next chapter).
- Cancel: Deletes the modifications made to the query list.

## **18.1.8 QUERY PUBLICATION**

Once saved, the extractions can be made available to TSS users via the operation called "publish".

From the query list, it is possible to decide whether to publish all of them both as a "view" and as a "report".

# **18.1.8.1 PUBLISHING A QUERY AS A VIEW**

To publish an extraction as a view, simply enable the option "Publish as view" and save.

Query	Entity	Publish as view	Publish as report	Publish for dynamic report	Valid for all clinic	Owner Clinic	Comment	
Patients by country	Patient							×
Session details OCM data	Patient - Session details		<ul><li>✓</li></ul>					×
Test Hb	Patient - Lab Data	~	-	<b>&gt;</b>				×
Test Lab Data	Patient - Lab Data	~	~	$\checkmark$				×

This will allow all users (as long as the query is not private) to find the extraction as the last page of the views related to a selected entity as a starting point for creating the query (which is shown as the second column in the list).

If the entity in question is part of the patients menu, once the query has been published as a view, only those records related to the selected patient will be automatically filtered and displayed (in the specific section).

aboratory data						New Export Excel	Pr
Last twenty lab tests Last resu	Its All	Search by date Test Hb	Test Lab Data				
	7	Last	19 Oct 2010 00:00	21 Sep 2010 00:00	17 Aug 2010 00:00	20 Jul 2010 11:12	
Dialysis dose Daugirdas DPVV Kt	N	1.47	1.47	1.37	1.39	1.49	
Dialysis dose equil. Kt/V		1.47	1.47	1.36	1.38	1.48	
Haemoglobin	g/dl	13.2	13.2	11.7	11.4	10.5	
Sodium	mEq/l	140.00	140.00	145.00	142.00	144.00	
Potassium	mEq/l	7.20	7.20	7.03	6.49	5.57	
Bicarbonate	mEq/l						
Total protein	g/dl	6.5					
Total calcium	mg/dl	9.8	9.8	9.4	11.6	10.0	
Phosphate	mg/dl	6.5	6.5	5.0	5.0	3.8	
PTHi	ng/l	64			64		
Albumin	g/dl						
C-reactive protein	mg/l	5.60					
ALT (GPT)	IU/L	14		14		19	
Ferritin	μg/I	115.5			115.5		
Transferrin saturation	%	23			23		
Alkaline phosphatase	IU/L	57.00		57.00		55.00	
Glycohaemoglobin	%						
Thyroxine (T4)	μg/I			5			
International Normalized Ratio (		1.05					

# **18.1.8.2 PUBLISH A QUERY AS A REPORT**

To publish an extraction as a report simply enable the option "Publish as report" and save.

Query	Entity	Publish as view	Publish as report	Publish for dynamic report	Valid for all clinic	Owner Clinic Comme	nt
Patients by country	Patient						×
Session details OCM data	Patient - Session details	<ul> <li>Image: A start of the start of</li></ul>					×
Test Hb	Patient - Lab Data	~	~	~			×
Test Lab Data	Patient - Lab Data	~	~	$\checkmark$			×

This will allow all users (as long as the query is not private) to find the extraction as the last option of the section "personalised reports" in the Report menu.

Custom reports	
Session details OCM data	
Test Hb	
Test Lab Data	

When an extraction is selected from the "Personalized Report" section, a table is displayed containing all of the information returned by the query.

	Active Drugs
	Active Patients
	Active Patients by Machine
	Ambulatorial Visit
	Database Health Status
	Dialysis Protocol Blank
	Dynamic Printout Report
	Information about Dialysis
	Medical Orders Per Shift
	Medication Preparation Report
	Monthly Report
	Patient Anticoagulant
	Patient Treatment Status
	Patient Treatment Status Patient Treatment Status by Month
	Patient-Actual Lab Test
	Regular Medication Treatment Drug at home
	A TRANSPORT OF A CASE AND A CASE OF
	Treatment Drug for HD Treatment
	Treatment Preparation Report
	Treatment Prescription Report
	Treatment Protocol tom reports
Jus	Session details OCM data
	Test Hb
	Tort Lab Data
	Test Lab Data

The user can click on a row of the table to display the entity completely, and modify it if desired.

## **18.1.8.3 PUBLISH A QUERY FOR ALL CLINICS**

In a multi-clinic scenario, a query can be rendered visible for all the clinics by activating the option "Valid for all clinics". The query can only be created once without duplications and it is important to note that the data returned will be those from the current clinic and not overall data.

When this option is enabled, the queries will also have an owner clinic, which is the clinic that performed the last save.

The owner clinic is important if the option is disabled and is visible next to the option box.

#### View from Default Clinic: the option has been activated then saved

Query builder								New	Save	Cancel
Query	Entity	Publish as view	Publish as report	Publish for dynamic report	Valid for all clinic	Owner Clinic	Comment			
Patients by country	Patient									×
Session details OCM data	Patient - Session details	$\checkmark$								×
Test Hb	Patient - Lab Data	<b>\</b>			<b>&gt;</b>	Default Clinic				×
Test Lab Data	Patient - Lab Data	~	$\checkmark$	✓						×

## View from Satellite Clinic: the query Hb Test is now also visible for this clinic

•		Query build	ier ×	+						
Query b	uilder							New	Save	Cancel
Query	Entity	Publish as view	Publish as report	Publish for dynamic report	Valid for all clinic	Owner Clinic	Comment			
Test Hb	Patient - Lab Data					Default Clinic				×

The rights to activate the option "Valid for every clinic" are managed by FME User Management. If a user does not have the rights to set this option, he will see the following:

 If the query has the option "Valid for all clinics" (set by another user) he can only see the results and cannot modify the query and save the changes

Query builder								New	Save	Cancel
Query	Entity	Publish as view	Publish as report	Publish for dynamic report	Valid for all clinic	Owner Clinic	Comment			
Patients by country	Patient					ia	di Sat			×
Session details OCM data	Patient - Session details	•								×
Test Hb	Patient - Lab Data	~	~	~	~	Default Clinic				
Test Lab Data	Patient - Lab Data	-	•							×

escription:	Main Entity name:	Number of records:	Is Pivot:	Aggregate	This is a private	Include patients in ot
est Hb	Lab data	50 Show all		results:	query:	clinics
omment:						
g and drop field to create a parameter						
Haemoglobin 🥜						f
						le l
g and drop the columns to display			[	Count column	Expression colu	
g and drop the columns to display Last name 🕶 🥒 🗵 Lab Test Date 🕶 🥒	🔀 Haemoglobin 🥒			Count column	Expression colu	
	🗷 Haemoglobin 🥒		[	Count column	Expression colu	umn Column group
Last name 🕶 🥒 🗵 Lab Test Date 🕶 🥒	Haemoglobin				Expression colu	Jmn Column group

## If the query has the option "Valid for all clinics" deactivated, he will only have deactivated the option but can still update and save the changes

Query builder								New	Save	Cancel
Query	Entity	Publish as view	Publish as report	Publish for dynamic report	Valid for all clinic	Owner Clinic	Comment			
Patients by country	Patient			$\checkmark$			20 S.S.			×
Session details OCM data	Patient - Session details	~		$\checkmark$						×
Test Hb	Patient - Lab Data		•	$\checkmark$						×
Test Lab Data	Patient - Lab Data	-								×

escription:		Main Entity name:	Number of records:	Is Pivot:	Aggregate	This is a private	Include patients in
est Hb		Laboratory data	50 Show all		results:	query:	clinics
omment:							
g and drop field to create a pa	rameter						
Haemoglobin 🥒	rameter						
g and drop the columns to dis	play				Count column	Expression colu	mn Column grou
Last name 🕶 🥒 🗶 Lab T	est Date 🛛 🥖 🗶 H	laemoglobin 🥒					
g and drop field to create a fill	er						Add Group
Not Haemoglobin		Lower than	•		<ha< td=""><td>aemoglobin&gt;</td><td></td></ha<>	aemoglobin>	

Removing the option "Valid for all clinics", after having saved the modifications, the following scenarios are created:

- If the user is in the owner clinic of the query, it will continue to be available for this clinic but it will not be visible in the other clinics
- Default Clinic: the query remains visible

Query builder								New	Save	Cancel
Query	Entity	Publish as view	Publish as report	Publish for dynamic report	Valid for all clinic	Owner Clinic	Comment			
Patients by country	Patient									×
Session details OCM data	Patient - Session details	<ul><li>✓</li></ul>	<ul><li>✓</li></ul>							×
Test Hb	Patient - Lab Data	<b>V</b>	✓	$\checkmark$						×
Test Lab Data	Patient - Lab Data	~	~	•						×

Satellite Clinic: the query disappears

•			Query builder	× -	+						
Query	builder								New	Save	
Query	Entity P	ublish as view	Publish as report	Publish for dyna	mic report	Valid for all clinic	Owner Clinic	Comment			
											_

 If the option "Valid for all clinics" is disabled for a query that has a different owner clinic than the user's clinic, the user will be advised that the query will disappear consistently from the list, and he can choose whether to proceed or not

Query b	uilder									
Query	Entity	Publish as view	Publish as report	Publish for dynamic report	Valid for all clinic	Owner Clinic	Comment			
Test Hb	Patient - Lab Data	$\checkmark$	$\checkmark$			Default Clinic				×
		<mark>ן ו</mark> זד	Warning: 1405	14 ing to be invisible for this cli	nic because create	d in a different o	clinic. Do you want to p	proceed?		

The option "Valid for all clinics" will consistently affect the other options of the same query, in fact if a query has the two options "Publish as a view" and "Valid for all clinics" activated, this will be published as a view for all clinics. Similarly, this will also occur for the other options "Publish as a report" and "Publish as a dynamic report".

## **18.1.9 CANCEL A QUERY**

A value can be eliminated by clicking on the X that appears to the right of the parameter modification area, assuming the user has activated the possibility to delete records from the Query Builder.

Query	Entity	Publish as view	Publish as report	Publish for dynamic report	Valid for all clinic	Owner Clinic	Comment	
Patients by country	Patient							×
Session details OCM data	Patient - Session details	✓	<					×
Test Hb	Patient - Lab Data	~	~	$\checkmark$				×
Test Lab Data	Patient - Lab Data	~	~	~				×

## **18.1.10 USE OF QUERIES CREATED IN TSS**

The queries created (if published as views) can be viewed by navigating in the TSS menu to which they are related. For example, a query created with the start point "Patient treatments" is visible in the "Treatments" menu. All views generated in this manner, after being performed, display the number of extracted results in the bottom left-hand corner:

eatment list Example	e Example 2					
Pre	-dialysis weight		Kg (10 - 2	299 9)	Post-dialysis weight	Kg (10 - 299.9)
	-	dd/mm/yyyy hh:mm		Ī		
	· ·			Ξ		
Treatment date	Pre-dialysis we	ight Weight to lose Kg	Post-dialysis weight Kg			
17 Aug 2010 00:00	67.60	2.90	65.20			
12 Oct 2010 00:00	68.70	4.50	65.60			
17 Jun 2010 00:00	68.60	2.10	66.80			
10 Aug 2010 00:00	68.50	3.10	65.60			
31 Aug 2010 00:00	67.60	3.50	65.30			
01 Jun 2010 00:00	68.90	2.40	84.10			
05 Oct 2010 00:00	68.70	4.50	65.70			
05 Jun 2010 00:00	67.90	1.40	66.80			
08 Jun 2010 00:00	69.00	2.50	84.10			
27 Jul 2010 00:00	68.70	3.00	66.20			
16 Oct 2010 00:00	67.80	3.60	64.50			
30 Oct 2010 00:00	67.50	3.00	64.80			
03 Jun 2010 00:00	68.60	2.10	66.80			
01 Jul 2010 00:00	67.30	1.20	66.70			
28 Aug 2010 00:00	67.40	3.30	64.40			
06 Jul 2010 00:00	69.70	3.50	66.80			
30 Sep 2010 00:00	67.70	3.50	64.90			
24 Aug 2010 00:00	67.30	3.20	64.40			
02 Sep 2010 00:00	67.60	3.50	64.60			
04 Nov 2010 00:00	68.30	3.40	65.20			
14 Aug 2010 00:00	67.50	2.60	65.00			
11 Nov 2010 00:00	68.30	3.40	65.40			
28 Oct 2010 00:00	67.70	3.20	65.00			
22 Jun 2010 00:00	69.60	3.10	66.80			
26 Jun 2010 00:00	67.90	1.40	66.80			
21 Aug 2010 00:00	67.20	2.50	64.70			
11 May 2010 00:00	70.00	3.30	67.00			
21 Oct 2010 00:00	67.00	2.50	64.50			
07 Sep 2010 00:00	67.00	3.20	84.10			
29 Jul 2010 00:00	68.90	3.20	66.50			
31 Jul 2010 00:00	68.60	3.20	65.80			
10 Jun 2010 00:00	67.60	1.10	66.60			
09 Nov 2010 00:00	69.20	4.30	66.40			
14 Sep 2010 00:00	67.70	3.90	84.10			
23 Sep 2010 00:00	67.60	4.10	64.70			
22 Jul 2010 00:00	67.30	1.60	66.50			

# **18.1.10.1 PERSONALISING THE SUMMARY PAGE**

The patient summary page can be modified (only the column on the left) by defining which extractions should be displayed. To specify which queries to display simply fill-in, in the section "Configuration parameters" of the Master data menu, the group "Configuration of the summary page".

Dashboard configuration		
Dashboard HD first query	Dashboard HD second query	
Dashboard pre-dialysis first query	Dashboard pre-dialysis second query	
Dashboard Transplant first query	Dashboard Transplant second query	
Dashboard Ambulatory first query	Dashboard Ambulatory second query	
Dashboard PD first query	Dashboard PD second query	
Dashboard PD third query		

The field "First query of the HD summary page" allows the user to personalise the query, marked with a blue frame in the image below, for a patient in hemodialysis. The field "Second query of the HD Summary page" allows the user to personalise the query marked with a red frame in the image below, for a patient in hemodialysis.

	10 - 10 - 18 m					alysis 🔼 🖸				
Summary										
ast forty treatments							+	Active leading prescrip	tion	
	¥	20 Nov 2010	18 Nov 2010	16 Nov 2010	13 Nov 2010	11 Nov 2010		Prescription name	Test 1	
Pre-dialysis weight	Kg		66.80	68.20	67.40	68.30	L.	Creation date	20 Jan 2016 11:30	
Post-dialysis weight	Kg	84.10	65.20	65.20	65.20	65.40		Vascular access		
Dry body weight	Kg	65.2	65.2	65.2	65.2	65.2		Creation date	01 Jan 1999	
Weight gain	Kg		1.60	3.00	2.00	1.90		Type and position		
Weight gain percent	%		2.35	4.45	2.93	2.78		Type and position	Upper arm brachial m	nedial -
JF volume	mi	2480	1900	3300	2492	3300			Left	
Pre-systolic/Diastolic pressure		142/74	167/76	173/80	162/83	156/82				
Post-systolic/Diastolic pressure		136/66	140/73	134/81	146/80	147/78		Status	Functioning	
Pre-dialysis heart rate	bpm	74	68	77	71	70		Active regular therapy		+
Post-dialysis heart rate	bpm	66	74	83	88	77			edient Dosage and fre	200000
Critical RBV	%	83	C					Fascox	12 - 0 - 32 - 0 r	ng wo we
Min RBV	%	98.9								
Effective Kt/V		1.43						Active dialysis related	therapy edient Dosage and fre	+
fotal substitution volume	L	17.0	37.1	28.2	35.4	33.5		Fepili	12ml All treat	
			0					Mitopep	W 1 Mo: 12 Tu W 2 Mo: 10 Tu See more	
ast twenty lab tests							+			-
	Ŧ	Last	19	Oct 2010 00:00	21 Sep	2010 00:00		Messages		+
Dialysis dose Daugirdas DPVV Kt/V		1.47	1.4	17	1.37			Status Messi Active Check	age k blood pressure at dia	lysis end"
Dialysis dose equil. Kt/V		1.47	1.4	17	1.36			Active Need	l Potassium at dialysis e	end
Haemoglobin	g/dl	13.2	13	.2	11.7			1		
Sodium	mEq/I	140.00	14	0.00	145.00			Comorbidity		+
Potassium	mEq/I	7.20	7.2	10	7.03			🗣 Code 🛛 Nar	ne	
Bicarbonate	mEq/I							11	No data	
fotal protein	g/dl	6.5						Residual diuresis		+
fotal calcium	mg/dl	9.8	9.8	8	9.4			F Lab test date	Amount	
Phosphate	mg/dl	6.5	6.5	i -	5.0			-	mi	
тні	ng/l	64							No data	
Albumin	g/dl							Hospitalisations		+
C-reactive protein	mg/l	5.60						The Start date of hosp	italisation End date of	hospitalis
ALT (GPT)	IU/L	14	1		14				No data	

The same applies for the other fields in the group that refer to the summary pages of patients in peritoneal dialysis or pre-dialysis.

The selectable list of queries, for each of these fields, might not correspond to the complete list of extractions in the Query Builder section. This is because the selectable queries are exclusively those with the following prerequisites:

- The reference entity of the query is not "Patient", but is one of the other entities of the Patients menu;
- The query has to be published as a view

## **18.1.10.2 TREATMENT SESSION DATA**

As mentioned previously it is possible to consult the data of the dialysis session via the Query Builder. These data include all the values that the device measures and communicates at pre-determined time intervals, as established during the configuration phase.

These data can be consulted in the section "session information" of the treatment entity; by clicking on the button next to "Session details" a pop-up window opens where the user is invited to select a query from a predefined list.

								Close	Edit	Print 🔻	
	Treatment date	20 Nov 2010	14:58			Treatment	doctor	<u>00</u>			
	Responsible user					Second respo	onsible				
	Prescription name	Test 1 0				Uni	ique ID	367			
eneral data Co	onsumables used	Anticoagulant a	gent Treatm	nent information	dXp	Dialysis device settings	Assistanc	e Detaile	ed information	n Medical	services
	Pre dialysis dat	a —									
Pre	e-dialysis heart rat	e 74 bpm				Pre-dialysis blood glucose					
	sis systolic/diastol		mHg								
	re and post weight										
	Pre-dialysis weigh					Post-dialysis v		84.10 Kg			
	Target weight					Real	intake				
	Weight to los	e				Weigh	nt gain				
	Veight gain percen										
	Treatment sessio	n									
Treatn	ment session detai	ls Click to see	e session details	E	9	Related la	b tests	Click to see	ab tests		
	n measurements				ſ		b tests	Click to see	e lab tests		
	n measurements	ic systolic BP Intra-			ſ				e lab tests Markin	ng	в
Treatment session	n measurements Intra-dialyt mi	ic systolic BP Intra-	dialytic diastoli	c BP Mean arteri	ſ				T	ng	
Treatment session Time	n measurements Intra-dialyt 5:23 132	ic systolic BP Intra- Treatment :	dialytic diastolit session de	c BP Mean arteri tails	ſ	e Intra-dialytic heart rate /			T	ng	
Treatment session Time 20 Nov 2010 15	5:23 132 5:24 125	ic systolic BP Intra-	dialytic diastoli	c BP Mean arteri tails	ſ				T	ng	
Treatment session Time 20 Nov 2010 15 20 Nov 2010 15	n measurements           Intra-dialyt           5:23         132           5:24         125           5:29         135	ic systolic BP Intra- Treatment :	dialytic diastolit session de	c BP Mean arteri tails	ſ	e Intra-dialytic heart rate /			T	ng	
Treatment session Time 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 15	n measurements Intra-dialyt 5:23 132 5:24 125 5:29 135 6:02 147	ic systolic BP Intra- Treatment :	dialytic diastolit session de	c BP Mean arteri tails	ſ	e Intra-dialytic heart rate /			T	ng	
Treatment session Time 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 16	Intra-dialyt           5:23         132           5:24         125           5:29         135           6:02         147           7:45         155	ic systolic BP Intra- Treatment :	dialytic diastolit session de	c BP Mean arteri tails	ſ	e Intra-dialytic heart rate /			T	ng	
Treatment session Time 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 16 20 Nov 2010 17	measurements           Intra-dialyt           5:23         132           5:24         125           5:29         135           6:02         147           7:45         155           8:11         131	ic systolic BP Intra- Treatment :	dialytic diastolit session de	c BP Mean arteri tails	ſ	e Intra-dialytic heart rate /			T	ng	
Treatment session Time 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 16 20 Nov 2010 17 20 Nov 2010 17 20 Nov 2010 18	measurements           Intra-dialyt           5:23         132           5:24         125           5:29         135           6:02         147           7:45         155           8:11         131           8:12         141	ic systolic BP Intra- Treatment :	dialytic diastolit session de	c BP Mean arteri tails	ſ	e Intra-dialytic heart rate /			T	ng	
Treatment session Time 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 16 20 Nov 2010 17 20 Nov 2010 18 20 Nov 2010 18	n measurements Intra-dialyt 5:23 132 5:24 125 5:29 135 6:02 147 7:45 155 8:11 131 8:12 141 8:13 130	ic systolic BP Intra- Treatment :	dialytic diastolit session de	c BP Mean arteri tails	ſ	e Intra-dialytic heart rate /			T	ng	
Treatment session Time 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 16 20 Nov 2010 17 20 Nov 2010 18 20 Nov 2010 18 20 Nov 2010 18	n measurements Intra-dialyt 5:23 132 5:24 125 5:29 135 6:02 147 7:45 155 8:11 131 8:12 141 8:13 130 8:25 111	ic systolic BP Intra- Treatment :	dialytic diastolit session de	c BP Mean arteri	l pressure	e Intra-dialytic heart rate /			T	ng	
Treatment session Time 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 16 20 Nov 2010 16 20 Nov 2010 18 20 Nov 2010 18 20 Nov 2010 18 20 Nov 2010 18 20 Nov 2010 18	n measurements Intra-dialyt mr 5:23 132 5:24 125 5:29 135 6:02 147 7:45 155 8:11 131 8:12 141 8:13 130 8:25 111 8:26 134	ic systolic BP Intra- Treatment :	dialytic diastolit session de	c BP Mean arteri	ſ	e Intra-dialytic heart rate /	Arrhythmia	Position	T	ng	
Treatment session Time 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 16 20 Nov 2010 16 20 Nov 2010 18 20 Nov 200 18 20 Nov 200 18 20 Nov 200 18 20 Nov 2	n measurements Intra-dialyt mr 5:23 132 5:24 125 5:29 135 6:02 147 7:45 155 8:11 131 8:12 141 8:13 130 8:25 111 8:26 134 8:46 125	ic systolic BP Intra- Treatment : Select a query:	dialytic diastolit session de	C BP Mean arteri tails election	l pressure	e intra-dialytic heart rate	Arrhythmia		T	ng	
Treatment session Time 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 16 20 Nov 2010 16 20 Nov 2010 16 20 Nov 2010 16 20 Nov 2010 18 20 Nov 200 18 20 Nov 200 18 20 Nov 200 18 20 Nov 2	n measurements Intra-dialyt mr 5:23 132 5:24 125 5:29 135 6:02 147 7:45 155 8:11 131 8:12 141 8:13 130 8:25 111 8:26 134 8:46 125 8:48 125	ic systolic BP Intra- Treatment : Select a query:	dialytic diastolit session de	C BP Mean arteri tails election	l pressure	intra-dialytic heart rate	Arrhythmia	Position	T	ng	
Treatment session Time 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 15 20 Nov 2010 16 20 Nov 2010 16 20 Nov 2010 18 20 Nov 200 18 20 Nov 200 18 20 Nov 200 18 20 Nov 2	n measurements Intra-dialyt mr 5:23 132 5:24 125 5:29 135 6:02 147 7:45 155 8:11 131 8:12 141 8:13 130 8:25 111 8:26 134 8:46 125 8:48 125 9:48 133	ic systolic BP Intra- Treatment : Select a query:	dialytic diastolit session de	C BP Mean arteri tails election	l pressure	e intra-dialytic heart rate	Arrhythmia	Position	T	ng	

The list mentioned above includes all the extractions generated by the Query Builder (including those from the section "HD Survey Management – query on single treatment" whose main entity is "Session details").



#### Warning

It is the responsibility of the user to check that the results of Query Builder are correct by checking the patient data. Imprecise results cannot be ruled out.

# **18.1.11 DATA EXTRACTION BY SPECIFIC DIALYSIS CLINIC**

Using the "Created in" query field found under HD Prescription, the treatments for a specific Dialysis Clinic can be filtered. This allows all the treatments performed by a particular clinic to be used as results, regardless of the patient's current status or where the patient is actually located at the time of extraction. This field is divided into four items:

- Father reference clinic
- Classification index
- Description
- IDML

all of which can be used as filters, to distinguish the desired treatments to be extracted.

# Treatment prescription

Search field	0
Treatment prescription	•
<ul> <li>Anticoagulant agent</li> </ul>	
Comments	
Consumables	
E Created in 🗪	
Creation date	
Dialysis device settings	
🖻 General data	
Last modified by or	
Leading prescription	
▶ Patient ↔	
Prescribing doctor or	
Prescription enabled	
Prescription name	
Prescription version	
Unique ID	
Valid from	
Valid to	

## 18.1.12 USE NEEDLE VIEWS FOR PRESCRIPTIONS/TREATMENTS AS QUERY FIELDS

As described previously, the, in addition to allowing searchable fields to be selected the attributes of the DB tables, Query Builder also allows view fields to be used. Among these available views, there are:

- Needle for arterial/venous prescription
- Needle for arterial/venous treatment

Using the fields in these views to create queries, it is possible to extract from the results, within the same line, both information about the needle for Arterial prescription/treatment and information about the needle for Venous prescription/treatment. Unlike composing a query using the same fields, which were imported from the tables and not from the views, the results provide for a line for information about the needle for Arterial prescription/treatment and a line for information about the needle for Venous prescription/treatment.

Therapy Support Suite										_ 01
DemoUser Patients	Default Clinic 🔻	Reporting	Master data	Logg	ing			IS CARE	Search in Di	alysis Unit C
Patient	•	Query builder	× +							
Search field	Query builder						Results	Save query.	Copy as Retu	rn to query list 📔 Charts.
Patient 💌	Description:		Main Entit	y name:	Number o	of records:	Is Pivot:	Aggregate	This is a private	Include patients in othe
Amputations	83		Patient			Show all		results:	query:	clinics
BCM			-							
Carpal tunnel Charlson Comorbidity Index	Comment:									
Checklist										
Clinical case										
Clinical diary	Drag and drop field to crea	te a parameter								
Comorbidity	Drag in									
Consultation visit Dietary history	Long III									
Dose management simulation	Drag and drop the columns	to display							Expression colu	mn Column group
Dose management simulation item	B Drag in									
Eurotransplant data	Diag III									
External patient status	Drag and drop field to crea	te a filter								Add Group
Familiar anamnesis Germ situation										
HD treatment prescription										
HD Treatment schedule plan										
HD treatments										
Session details Hospitalisations										
Instrumental test										2
Lab data										
Lab test										
Lab test canceled										
Laboratory exam schedule Medical assessment										
Medical data										
Medical data (History)										
Medical order										
Medical prescription Nurse assessment										
Nurse visit history										
Out-patient information										
Patient anamnesis										
Patient nutritional status Patient status										
Pharmacological prescription										
Pharmacological therapy suspension										
Pregnancy related history										
Self sufficency Specialist examination										
Transfusion list										
Transplant										
Transplant data										
Transplant failure										
Rejection Therapy cicles										
Transplant event										
Transplantations waiting history										
Vaccinations										
Vascular access Waiting list										
Waiting list movement										
View: Arterial/Venous Prescription Needle										
View: Arterial/Venous Treatment Needle										

#### **19 OPTIONAL MODULE: PD**

#### **19.1 PERITONEAL DIALYSIS**

#### 19.1.1 PD ACCESS

The chronological record of the patient's access can be recorded in this section. To modify an existing access, simply select it from the screen and press the Modify button. To create a new access, simply press the "New" button.

- **Creation date**: this specifies when the access was created.
- Catheter type: in this field the type of access can be specified by choosing it from a predefined list.
- Created by (first surgeon): this field allows the first surgeon to be selected.
- Created by (second surgeon): this field allows the second surgeon to be selected.
- Anatomical position: this field allows the access's anatomical position to be specified, by choosing it from the preset list.
- Anatomical quadrant: in this field the anatomical quadrant in which the access was positioned can be specified by choosing it from the preset list.
- Date of first use: this is used to specify the data on which the vascular access was used for the first time.
- Status: this field is read-only. It is filled in by actions that define the active/not active status of the access.
- Closure date: this field is read-only. This is filled in automatically by creation of an event that causes the removal of the access.
- Termination reason: this is the reason for removal of the access. The value is drawn from the Event log.
- Anatomical schema: here it is possible to upload a working image using graphic tools.

Creation date	12 Apr 2010	Catheter type	Curved swan-neck
Created by (first surgeon)	Test Surgeon	Created by (second surgeon)	
Anatomical position	Above the umbilical line	Anatomical quadrant	Midline
Date of first use	18 Apr 2010	Status	Closed
Closure date	03 Jun 2019	Termination reason	Events PD - Peritonitis
Anatomical schema		Surgery report	
Surgery report comment			
Comment			

- Surgery report: this field allows a surgery report to be uploaded as a document attached to the access.
- Surgery report comment: this is a text field that allows additional comments to be added to the Surgery Report.
- **Comment**: this is a summary comment applicable to the entire section.
- The insertion technique section allows the user to enter additional details concerning the access insertion technique selecting one from a predefined list.
- Marsupialization: if the insertion involves marsupialization.
- Resting time duration: interval, expressed in days, before starting dialysis.
- **Event log**: This is a *multi-value* field, where the user can record access-related actions (creation, incidents, or termination). The first event is automatically generated when the access is created.

Inserc	tion technique –					
Laparo	scopic surgical	Laparoscopic		Buried at insertion	No	
Resting	time duration	5.00 days				
vent history					1	
Date	Type		Status	Hospitalisation	Anatomical position photo	Note
03 Jun 2019	Events F	PD - Peritonitis	Closed		123	
26 Aug 2010	Events F	D - Infection	Functioning			
		PD - Other	Functioning		10.0	

## **19.1.2 PD PRESCRIPTION**

The **PD prescriptions** relating to a specific patient are recorded in this section. Prescriptions are identified by a name.

Selecting a Prescription, the PD prescription section, which comprises two tabs, is opened:

- General data: this is the main tab where all of the dialysis prescription characteristics are defined.
- Comments: on this tab, specific comments relating to the prescription can be added.

#### 19.1.2.1 GENERAL DATA

On the **General data** tab, the user must indicate if the prescription that is being modified is enabled. The prescription has two other dates that define its interval of validity. **Valid from** is mandatory and prefilled whereas **Valid to** does not need to be specified.

The fields that follow are valid for any mode of peritoneal dialysis:

- Catheter: the implanted catheter.
- Theoretical Weight: the patient's dry weight.
- Assistance type: indicates the type of assistance that the patient requires.
- Treatment frequency: is the number of treatments the patient must undergo each week. The field is editable by the user and is only for reference for the treatment prescription. There is no correlation with the real schedule of the treatments.

General information					
Leading prescription	Yes	•	Prescription enabled	Enabled	•
Valid from	02/11/2017	Ħ	Valid to	dd/mm/yyyy	<b>=</b>
Prescription version	0		PD modality	CAPD	•
				INCR	•
Set	Nipro	× •••	Body weight	63	Kg (10 - 299.9)
Assistance type	Remote dialysis	•	Catheter	Curved swan-neck	×
				Above the umbilical lin	e <u>Midline</u>
Treatment frequency	5 Days	/Week (1 - 7)			

The combined field **PD modality** allows the user to choose between the three main methods of peritoneal dialysis: APD, CAPD and Break-in. Sub-procedures can also be defined for APD and CAPD. Based on the choice made, various fields are displayed, characteristic of the type of dialysis.

#### **19.1.2.2 CAPD PRESCRIPTION**

When CAPD or one of the sub-procedures is selected as PD procedure, a table is shown to allow the information related to the exchanges to be entered. By default a new prescription will show 4 exchanges and the user can change it from a minimum of 1 to a maximum of 6.

The following values must be specified for each exchange:

- Exchange start and end time
- PD Solution to be used, can be selected from a list of PD solutions
- Volume in
- Volume out
- Volume UF

The system will calculate the total of the Volume In, UF Volume and Total Time to complete the exchanges.

	CAPD settings							
	Exchange number	2		(1 - 6)		Total	time	3 hours 30 minutes
T	otal used volume	2000.00 r	nl			Total UF vo	lume	400.00 ml
Dialysis PD solution	volume							
Exchange start	Exchange en	d	PD solution		Volume in <i>ml</i>	Volume out ml	UF volur ml	ne
08:00	10:00		BICA Vera 2.30%	×	1000	1200	200.00	
10:30	12:00		BICA Vera 2.30%	× •••	1000	1200	200.00	

# **19.1.2.3 APD PRESCRIPTION**

The APD peritoneal dialysis modality allows the following fields to be selected:

- Device type: this is the dialysis device the patient must use.
- APD Mode: the APD treatment mode (Adapted APD, PD Plus, Standard, or Tidal). Varying the type of treatment, varies the fields visible for the modality selected.
- Treatment duration: mandatory field that indicates how long the treatment lasts.
- Flexpoint
- Total set UF volume
- Total prescribed UF volume
- Total real UF volume
- Total used volume
- Diuresis
- Initial fill volume
  - Volume
  - Drainage: when this is "Yes", the Initial fill volume cannot be modified

#### Base Cycles

- Cycles
- Standby time
- PD solution
- Infusion fill volume
- Expected outlet volume

Device type	Please select one entry		
APD modality	Standard	Treatment duration	🔀 hh:mm
Flexpoint	Please select one entry	▼ Total set UF volume	mi
Total prescribed volume		I Total real UF volume	ml
Total <mark>used volume</mark>		l Diuresis	ml/24h
Initial outflow			
Volume	ml (0	- 3500) Drain	No
Base cycles			
Cycles		Inflow volume	ml (25 - 3500)
Dwell time	hh · mm : ss	Expected outflow volume	ml (0 - 3500)
PD solutions	PD solution		
	+		

## **19.1.2.4 TREATMENT TYPE**

The **Treatment type** selected allows the user to define other specific values based on the type.

The Adapted APD mode allows the user to define the Initial cycles in the section: Cycles (initial value of 2), Inflow volume, Expected outflow volume, Standby time e la PD solution. This mode defines a PD solution list to be used during treatment.

First cycles			
Cycles	2	Inflow volume	ml (0 - 3500)
Dwell time	hh · mm : ss	Expected outflow volume	ml (0 - 3500)
PD solutions	PD solution		
	+		

The PD Plus mode allows you to define the following fields: **Inflow volume**, **Expected outflow volume** and **Standby time**. This mode defines a **PD solution** list to be used during treatment.

PD plus			
Pause duration	hh · mm : ss	Inflow volume	ml (0 - 3500)
PD solutions	PD solution		ml (0 - 3500)
	+		

The **Tidal** mode allows the definition of the following fields: **Cycles** (initial value of 4), **Inflow volume, Expected outflow volume**. The **Inflow volume** % and **Inflow volume** can be modified in an exclusive manner. The modified Fill Mode field allows the selection of which field can be modified. Instead, the read-only field is calculated with reference to the **Inflow volume** of the **Basic cycles** section. This mode defines a **PD solution** list to be used during treatment.

Tidal –			
Cycles	4	Inflow edit mode	Please select one entry
Inflow volume %		Inflow volume	ml (25 - 3500)
Dwell time	hh - mm : ss	Expected outflow volume	mi (0 - 3500)
PD solutions	PD solution		
	+		

## 19.1.2.5 LAST INFLOW

Independently from the APD modality selected will be possible to define value for the last inflow and when necessary manual exchanges.

- Last inflow
  - Last inflow: when is "Yes" will be possible to define the following fields:
    - Last inflow volume
    - PD Solution list
    - Standby time

Last inflow				
Last inflow	Yes	Volume	2000	ml (0 - 3500)
PD solutions	Aminoocid 2000.00ml × ···	Dwell time	01 - 30 :00	

# 19.1.2.6 PROFILE

The prescription can be profiled specifying for each cycle the **Inflow volume**, the **Standby time** and the **Expected outflow volume** and which solution to use among those available.

Setting the **Profiled** flag a "Yes" will be created and the profile initialised. Volume and standby fields will no longer be visible in the cycle sections but only in the profile.

solutions				
Cycles	PD solution	Inflow volume ml	Dwell time	Expected outflow v ml
Initial outflow				2500
Base cycle 1/Tidal cycle 1	Aminoacid 2500.00ml	: := := := := :	06 · 00 :00	2300
Base cycle 1/Tidal cycle 2	Aminoacid 2000.00ml	1000	00 - 30 - 00	1200
Base cycle 1/Tidal cycle 3	Aminoacia 2000.00ml	1000	00 - 30 - 00	1200
Base cycle 1/Tidal cycle 4	Aminoacid 2000.00ml	1000	00 - 30 - 00	1200
Base cycle 2/Tidal cycle 1	Aminoacid 2500.00ml	2000	06 · 00 :00	2300
Base cycle 2/Tidal cycle 2	Aminoacid 2000.00ml	1000	00 30 00	1200
Base cycle 2/Tidal cycle 3	Aminoacid 2000.00ml	1000	00 30 00	1200
Base cycle 2/Tidal cycle 4	Aminoacid 2000.00ml	1000	00 - 30 - 00	1200
Base cycle 3/Tidal cycle 1	Aminoacid 2500.00ml	2000	06 - 00 - 00	2300
Base cycle 3/Tidal cycle 2	Aminoacid 2000.00ml	1000	00 - 30 - 00	1200
Base cycle 3/Tidal cycle 3	Aminoacid 2000.00ml	1000	00 - 30 - 00	1200
Base cycle 3/Tidal cycle 4	Aminoacid 2000.00ml	1000	00 - 30 - 00	1200
Last inflow	Aminoacid 2000.00ml	2300	4 hours 0 minute	

A profile is comprised as follows:

- Initial outflow (Volume)
- Cycles provided for by the selected mode according to the settings indicated in the previous sections (Solution, Fill Volume, Standby Time and Expected Output Volume)
- Any Last inflow (Solution, Inflow volume, Standby time)

While the **Initial outflow** and the **Last inflow** show the values read from the respective sections, the cycles can be configured by the user in terms of **Solution**, **Inflow volume**, **Standby time** and **Expected outflow volume**.

If the sections relating to the cycles of the prescription have been previously valued, activating the profiling will show the values in the profile. If the number of solutions foreseen for the type of cycle is one, then the **PD solution** will also be shown in the profile. Otherwise the section will remain empty but the user can choose from the only solutions available in the respective cycle sections.

The fields of each profile cycle, except for the **Initial outflow** and the **Last inflow**, have buttons that facilitate the profile being filled out. They are visible by moving the mouse cursor over the profile fields. The available buttons vary according to the characteristics of the underlying cycle.

Namely:

- Copy to next one end of the same type. This one copies the value of the current field to the corresponding field of the next cycle.
- Copy to the next ones is visible when there are several cycles after the current one and that they are of the same type. This one copies the value of the current field to the corresponding fields of the next cycles.
- Copy to corresponding fields O
  this is only visible in "Tidal" cycles and sub-cycles and allows you to copy the value of the current field into the corresponding fields of the subsequent corresponding cycles or sub-cycles. For example, the Inflow volume of the "Base 2/Tidal 3" sub-cycle will not be copied in all subsequent cycles but only in sub-cycle "3".
- Copy cycle : this is visible only in Tidal cycles and allows the whole current cycle in the following cycles to be copied.

#### Note



The buttons appear on the right of the field you want to copy. It is possible that in clients that can function as tablets the buttons will appear on the left. If the condition is not acceptable, you can change the setting from the Windows Control Panel. In the Control Panel search box, search for "Tablet PC settings"-> "Other" and change the hand used.

If the cycle sections are changed, the profile will automatically be updated. A warning will be shown to the user if the fields in the profile have already been populated manually and they need to be redefined. The events that can lead to profile regeneration are, for example, changing the **Profiled** setting, changing the **APD mode** or changing the number of cycles.



#### Note

Just changing the number of cycles in the field is sufficient to trigger a profile update: the cursor must be removed.

## Note

There shall not be more than a total of 200 cycles provided for in a prescription. For Tidal prescriptions, the total is achieved by multiplying the number of basic cycles by the "Tidal" cycles. The **Last inflow** is not counted.

### **19.1.2.7 MANUAL EXCHANGE**

This section allows manual exchanges to be added after the automatic ones. A manual exchange consists of the following fields:

- Manual Exchange
  - Exchange start and end time
  - PD Solution to be used, can be selected from a list of PD solutions
  - Volume in
  - Volume out
  - Volume UF

Excl	hanges number	4	(0	- 6)		Total	time	7 hours 10 minutes	
	Total volume in	2000.00	mi			Total UF vol	ume	450.00 ml	
Dialysis PD solution vo Exchange start	Exchange er	nd	PD solution		Volume in ml	Volume out	UF vo		
16:00	18:30		Aminoacid 2500.00ml X	•••	500	680	180.	00	
18:30	20:00		Aminoacid 2500.00ml ×	•••	500	620	120.	00	
20:00	21:30		Aminoacid 2500.00ml ×		500	600	100.	00	
21:30	23:10		Aminoacid 2500.00ml ×		500	550	50.0	0	

The total of the Fill Volume, UF Volume and Total Time to complete the exchanges will be calculated.

# 19.1.2.8 OTHER INFORMATION, SOLUTION SUMMARY AND DIALYTIC ADEQUACY

In this **Other information** section, it is possible to specify if the treatment calls for an empty abdomen period. If required, the time interval can be indicated. The duration will be calculated automatically.

In the **Solution summary** all the solutions used in the prescription will be automatically summarised: with the same solutions, the volumes are added together, keeping the manual part of the treatment separate from the automatic part. The number of bags can then be entered manually.

Finally in the **Dialysis adequacy** there will be displayed some patient information extracted from **Adequacy**, **PET** and from **Laboratory data**.

Othe	r information	1							
Em	pty abdomen	Yes		•	Empty a	bdomen (	duration	35 minutes	
Empty al	domen from	14:10	14:10		Empty ab			14:45	
Soluti	ons summary	ı —							
APD solutions				10					
APD solution				Total used volume ml		Quantity			
Aminoacia 2000.00	<u>n/</u>			800.00		1			
Aminoacid 2000.00	<u>n/</u>			3000.00		2			
Aminoacid 2500.00	<u>n/</u>			1500.00		1			
Dialysis adequacy									
穿 Date	Renal GFR ml/min	Weekly creatinine clearance L/w/1.73m <sup>2</sup>	wKT/Vr+p	Creatinine T4	Diuresis ml				
16 Sep 2019 12:28	6.43	86.6	2.32	0.877193 (19 Sep 2019)	3900.00				
15 Nov 2017 00:00	6.76	90.0	2.39	0.701754 (15 Nov 2017)	4100.00				

# **19.1.3 PD TREATMENT SCHEDULER**

In this section the user can define in which day the patient should perform peritoneal dialysis. The plan is divided in three subsections. The main section show the actual plan, the next section show the future plan and the last show the History. The schedule can't be in overlap.

iders, benjanin bon	20/09/1957 (62y) Gender o	COU. 72502 Status Active/1	critorical analysis								
reatment scheduler										Edit	
rent schedulation											
From 25 Sep 2	2019 To	04 Oct 2019									
Лo	Tu	We	Th		Fr		Sa		Su		
APD Saunders		APD Sounders			APD Sound	<u>ers</u>					
APD		APD			APD						
nned schedulation											
From	То	Schedule Mo		Tu	We		Th		Fr		Sa
05 Oct 2019		1.000 A.000		CAPD prescription	CAPD		CAPD prescrip	tion - CAPD			CAPD pre
cord found											
tory											
From	То	Mo	Tu	We		Th		Fr		Sa	
02 Oct 2017	24 Sep 2019	CAPD prescription - CAP	PD CAPD prese	cription - CAPD CAPE	prescription - CAPI	D CAPD presc	iption - CAPD	CAPD prescripti	ion - CAPD	- 1900	
n Tue Wed Thu Fr 2 3 4 5		August Wed Thu Fri Sat 1 2 3	Sun Mon 1	September Tue Wed Thu Fri	Sat Sun Mo		tober Thu Fri Sat 3 4 5	Sun 6	1	November d Thu Fri 1	Sat Sun
n Tue Wed Thu Fr	6 7	Wed Thu Fri Sat	4			on Tue Wed	Thu Fri Sat		1	d Thu Fri 1	
n Tue Wed Thu Fr	6 7 2 13 14 5 6	WedThuFriSat123	4 11 2	Tue Wed Thu Fri	1	on Tue Wed 1 2 7 8 9	Thu Fri Sat 3 4 5	6	Tue We	d Thu Fri 1 7 8	2 3
Tue         Wed         Thu         Fr           2         3         4         5           9         10         11         12	6     7       2     13       9     20       21     13	Wed         Thu         Fri         Sat           1         2         3           7         8         9         10	4 11 18 25 16	Wed     Thu     Fri       3     4     5     6	1 7 8 7	Tue         Wed           1         2           7         8         9           4         15         16           1         22         23	Thu         Fri         Sat           3         4         5           10         11         12	6 13 4	Tue We	Image: Marked Thu         Fri           7         8           14         15           21         22	2 3 9 10

Each schedule has a validity range and a day week list where can be specified one of the enabled treatment prescription to be performed. If the user selects a prescription with a validity interval that is not compatible with the schedule timeline, an error will appear.

When the current schedule reaches its end, it is moved to the list of past schedules. Likewise, when a future schedule becomes valid because of the time it is being moved from the list of future plans to the current one.

At the bottom of the page, you can see a preview of schedule applied to the calendar. Moving the mouse over the desired date displays information containing the scheduled prescription name for that day.

#### **19.1.4 REVIEW**

The *Review* menu item is used to save the data from the review of each patient performed in the hospital. This item allows the values taken at home by the patient to be compared with the values taken in the clinic by the nurse. These values are: **systolic pressure**, **diastolic pressure** and **weight**.

Review				Cancel Save	
Review date		Ŧ	Next review	dd/mm/yyyy	Ŧ
Status	Open		Doctor	Doctor	
T.A.S. at home		( > 0)	T.A.S. in clinic		( > 0)
T.A.D. at home		( > 0)	T.A.D. in clinic		(>0)
Weight at home	Kg	( > 0)	Weight in clinic		Kg (>0)
Infused volume/24h	mi	( > 0)	Drained volume/24h		ml (>0)
UF volume/24h			Urine 24h		ml (>0)
Total fluid removed			Oedemas	Please select one entry	•
Access status	Please select one entry	•	Drainage fluid status	Please select one entry	•
Tunnel infected			Cure		

Volume and catheter status values can also be entered:

- Infused volume/drained volume / Urine 24h: volume relating to the treatment of the last 24 h.
- Oedemas: information concerning any oedemas at the access can be entered.
- Access status: the status of the patient's catheter.
- Drainage flow status: the status of the fluid drained from the patient.

It is also possible to indicate the status of the tunnel (infected tunnel), the name of the **Prescription**, and indicate a **Therapy** and write more details in the **Visit comment** field.

view						Ca	ncel Save
Re	eview date			Ħ	Next review	dd/mm/yyyy	III
	Status	Open			Doctor	Doctor	
TAS	S. at home			(>0)	T.A.S. in clinic		( > 0)
T.A.C	D. at home			(>0)	T.A.D. in clinic		( > 0)
Weigh	nt at home			Kg (>0)	Weight in clinic		Kg (>0)
Infused vo	olume/24h			ml (>0)	Drained volume/24h		ml (>0)
UF vo	blume/24h				Urine 24h		ml (>0)
Total fluid	d removed				Oedemas	Please select or	e entry
Acc	cess status	Please select	one entry	•	Drainage fluid status	Please select or	e entry
	el infected	_			Cure		
TUNN	er miected [				Cure		<u></u>
eview comment							
Other planned activities							
Other planned activities Revision date	Creation date	Activity		Comment	Status	Realised by	
Other planned activities Revision date	Creation date	Activity		Comment	Status		
Dther planned activities Revision date + Home visit	Creation date	Activity	Realised by	Comment	Status		
Other planned activities Revision date + Mome visit	1	Activity	Nurse	Comment			Distance Km 30
+ Home visit ▼ Visit date 25 Sep 2010 25 Apr 2010	Status	Activity		Comment			Uistance Km
Other planned activities Revision date + Home visit Visit date 25 Sep 2010	Status Open	Activity	Nurse	Comment			Distance Km 30
Other planned activities Revision date + Home visit Visit date 25 Sep 2010 25 Apr 2010 records found Germ situation	Status Open Open		Nurse Nurse		Location		Distance Km 30
Other planned activities Revision date + Home visit ↓ Visit date 25 Sep 2010 25 Apr 2010 records found Germ situation	Status Open Open		Nurse Nurse		Location		Distance Km 30
Other planned activities Revision date + Home visit Visit date 25 Sep 2010 25 Apr 2010 records found	Status Open Open		Nurse Nurse	est indication Cultiv	Location		Distance Km 30

A table entitled **Other planned activities** appears in the lower part of the screen. Rows can be added to plan various types of activities related to the PD patient.

Below this there are two additional tables containing the list of home visits and the results of the germ cultures.

There is also a section containing a **Medical services list** for combination with the PD Review. The user can enter the services by hand, filling in all the compulsory fields.

For PD Reviews, it is possible to set Expressions (see "Service Manual" section 4.2.9) that, once satisfied, will enable the system to enter services automatically.

Click the Close button to set the PD Review in "Closed" status. Here again, automatic generation of reports in PDF format can be associated with closure. Specifically, the expressions (see "Service Manual" section 4.2.9) defined in the "Configure PDF Export" section (see "Service Manual" section 4.2.7), which are enabled and valid for the current clinic, will be assessed.

If the PD Review meets the expression criteria, the report associated with the valid expression is generated automatically. Depending on the setup, the report may be exported via Filesystem and/or sent via cDL.

PDF reports created can be viewed in the "PDF export" section (see "Service Manual" section 4.2.8).

When the PD Review status is "Closed", its data can no longer be edited. Press the Reopen button to "Reopen" the review; its data become editable again.

If the automatic generation of reports in PDF format have been configured and, in Power Tool, the option "Filesystem Undo" has been enabled, when "Re-opening" the PD Review, the PDF file connected to the reopened PD Review will be deleted/renamed (based on the action configured in Power Tool).

### **19.1.5 HOME VISITS**

The **Home visit** section is intended to contain the user's comments (e.g. A nurse) after a visit to the patient's home. The fields proposed in this item are the **Visit date**, the **Location** of the visit, the **Distance** from the hospital and the **Reasons for the visit**. Two "*self-populated*" fields are related to the **Creation date** of the record and the user who made the visit.

The main section is dedicated to the Visit comment, written by the user, that summarises its results.

ome visit				Cancel	Save
Creation date	24 Sep 2019		Visit date	24/09/2019	Ŧ
Status	Open		Realised by	<u>demouser</u>	× •••
Location			Distance		Km (>0)
Visit reasons	+				
Comment					
Medical service list					

There is also a section containing a **Medical services list**, to combine with the Home visit. The user can enter the services by hand, filling in all the compulsory fields.

Also for Home Visits it is possible to set Expressions (see "Service Manual" section 4.2.6) which, once satisfied, will enable the system to enter services automatically.

Click the Close button to set the PD Home Visit in "Closed" status. Here again, automatic generation of reports in PDF format can be associated with closure. Specifically, the expressions (see "Service Manual" section 4.2.9) defined in the "Configure PDF Export" section (see "Service Manual" section 4.2.7), which are enabled and valid for the current clinic, will be assessed.

If the Home Visit meets the expression criteria, the report associated with the valid expression will be generated automatically. Depending on the setup, the report may be exported via Filesystem and/or sent via cDL.

PDF reports created can be viewed in the "PDF export" section (see "Service Manual" section 4.2.8).

When the Home Visit status is "Closed", its data can no longer be edited. Press the button to "Reopen" the visit.

If the automatic generation of reports in PDF format have been configured and, in Power Tool, the "Filesystem Undo" option has been enabled, when "Re-opening" the PD Home Visit, the PDF file connected to the reopened PD Home Visit will be deleted/renamed (based on the action configured in Power Tool).

# **19.1.6 PD TREATMENTS**

Peritoneal dialysis treatments consist of:

- Date: mandatory field that indicates when the treatment was performed.
- Status: treatment status. When the status is "Closed" the treatment can't be modified.
- Name of the prescription: a reference to the prescription.
- PD modality: a combined field that allows the user to choose between the three main methods of peritoneal dialysis. The field is automatically populated when the Name of Prescription field is set.
- Unique ID: field that uniquely identifies the treatment.
- Services: the list of the services associated with the treatment.

The treatments can be created from the patient menu or using the **PD scheduler** from the clinic menu.

Multiple PD treatments can be "closed" simultaneously from the section Close PD treatments in the clinic menu.

# **19.1.7 PERITONITIS**

The **Peritonitis** section allows the user to introduce peritoneal inflammation with the respective **actions** to treat it. The section is divided into two parts: the first part summarizes the event, the second describes the actions taken by the medical staff.

	Da	ate	25/09/2017		Ŧ			Set	<u>FMC</u>		×
	Episode numb	er	1				L	ast modified by	demous	er	
	Codi	ng	Gram negative		•			Germ	staphylo	ococcus aureus	
	Healing da	ite	16 Oct 2017								
ction	ns										
	Date	Intra j	peritoneal therapy	Systemic therapy	Chronic top	ical therapy	Healing	Outcome		Comment	
å	26/09/2017	No	•	No	No	•	No 💌	Catheter av	The second s	n D	
å	16/10/2017	Yes	•	No	No	•	Yes 💌				
+											
omm	ient										

The first part consists of the following fields:

- Date: the data that the event occurred.
- Set: the dialysis device defined in the dialysis prescription.
- Episode Number: an automatically incremented number that identifies the event.
- Coding: the coding of peritonitis.
- Germs: the type of germ that caused the peritonitis.
- Healing date: the date when the peritonitis is classified as resolved. This field is automatically filled in following an action of Healing equal to "Yes".

The second part lists all of the actions performed by the medical staff. Each action consists of:

- Date: The date when an action was performed.
- Intra peritoneal therapy
- Systemic therapy
- Chronic topical treatment
- Healing: indicates if the action leads to the patient healing.
- Outcome: is only visible if not healed. There are 3 possible causes and they are not mutually exclusive ("Catheter removal", "Fungal superposition", and "Relapse").
- Comment: free text.

For each action, the user that created it is saved, as well as the last user who modified it.

It is not possible to enter actions that occurred after the date of healing.

#### **19.1.8 TUNNEL EXIT SITE**

The **Tunnel exit-site infection** allows the user to enter tunnel infections with their respective evaluations. This item is divided in two parts: the first summarizes the event, the second lists the medical evaluations.

		Date	25/	09/2017	#		Episode number	1	
		Healing date	16 (	Oct 2017			Last modified by	demouser	
Evalu	ations								
	Date	He	ealing	Buffer	Germ	Picture	Exit-site score system		Therapy
Å	02/10/2017		10	No	staphylococcus aureus 💌		Swelling         No •         <0.5 cm exit only >           Crust             No •         <0.5 cm •		Acid burn     Inflitration     Surgery     Systemic     Topical application
•	16/10/2017	III V	es 💌	No 💌	staphylococcus aureus 💌		Swelling         No       <0.5 cm exit only		<ul> <li>Acid burn</li> <li>Infiltration</li> <li>✓ Infiltration</li> <li>✓ Surgery</li> <li>Systemic</li> <li>Topical application</li> </ul>
+									

The first part consists of the following fields:

- Date: the data that the event occurred.
- Episode Number: (automatically incremented) number that identifies the event.
- Healing date: the date when the infection is defined resolved. This field is automatically populated following a Healing assessment equal to "Yes".

The second part lists all of the evaluations performed by the medical staff. Each evaluation consists of:

- Date: The date when an evaluation was performed.
- Healing
- Buffer
- Germs: the type of germ that caused the peritonitis.

- Picture
- Exit-site score system: the values of the score can be personalised.
- Therapy
- Outcome: is only visible if not healed. There are 3 possible causes and they are not mutually exclusive (Catheter removal, Cuff removal, and Peritonitis)
- Ultrasound comment
- Comment
- Created by

For each evaluation, the user that created it is saved, as well as the last user who modified it.

It is not possible to enter evaluations that occurred after the date of healing.

#### **19.1.9 ADEQUACY AND NUTRITION**

Adequacy and nutrition consists of different parts and are divided by topic.

### **19.1.9.1 GENERAL DATA AND WEIGHT**

The first section is general and it is possible to indicate the **Date** of evaluation. The user can define medical data such as weight, height and circumference of the patient's wrist. Thanks to these values and to the information regarding the sex of the patient coming from the **Medical data** menu it is possible to determine the **Body mass index**, la **Body surface area**, the **Body size index** and the **Body size** of the patient.

The general data in the Weight section allow the definition of the Ideal weight, Relative and according to Kopple.

Date	24/09/2019 12:39	I	Real weight	63	Kg (10 - 299.9)
Patient height	160	cm (30 - 250)	Wrist circumference	15	cm
Gender	Male		Body mass index	24.61 Kg/m²	
Body surface area	1.68 m²		Body size index	10.67	
Body size	Medium				
ldeal weight	57.6 Kg		Relative	109.4 %	
Kopple	61.7 Kg				

### **19.1.9.2 LABORATORY AND NUTRITION**

The sections **Laboratory** and **Nutrition** allow the user to populate the input fields used to obtain the results displayed in the following sections. The **Laboratory** divides the entry data in three categories: **Serum, Urine** and **Dialysate**.

	Serum			Urine		Dialysate
Nitrogen (mg/dl)	127		268		126	
Creatinine (mg/dl)	7.5		19.8		6.2	
ß2-microglobulin (mg/l)	14.6		21.37		5.3	
Volume (ml)			3900		4700	
Glucose (mg/dl)					129	
Proteins (mg/dl)			52		161	
Sodium (mmol/l)			59		138	
Potassium (mmol/l)			9		4.4	
Nutrition –						
Total protidemia	6.4	g/dl		Phoresis albumin	3.4	g/d
Nephelometric albumin	3490	mg/dl		Bicarbonate	5	mEq/
Cholesterol	140	mg/dl		Triglycerides	130	mg/d
Haemoglobin	16.3	g/dl		Proteinuria		g/24h
Micro albuminuria		mg/24h				

### 19.1.9.3 RESULTS

The results obtained from the data entered in the **Laboratory** and Nutrition sections are distributed in these sections:

- Protein Nitrogen Appearance (PNA)
- normalised Protein Nitrogen Appearance (nPNA)
- Creatinine
- H2O volume
- Clearance
- wKT/V Watson
- Other

Some results from these sections can be used as input data for processing in other sections. The formulas used as described in the document "TSS - PERITONEAL DIALYSIS FORMULAS" issued on request.

Basation	71.28		Teehan	66.4
Bergstrom	/1.20		leenan	00.4
Normalised protein nitrogen –				
appearance	121.2			
	Real	Ide	eal	Kopple
Bergstrom	1.13	1.24		1.16
Teehan	1.05	1.15		1.08
Creatinine				
Eliminated	980 mg/day		Metabolised	180 mg
Created	1160		Lean body mass	41 Kg
LBM % BW	65.11 %	Weekly cre	atinine clearance	86.6 L/w/1.73m²
Renal wCC percentage	76.95 %			
H2O volume				
Watson	34.9 L			
Clearance				
	Renal			Peritoneal
Creatinine (ml/min)	7.2		2.7	
Urea (ml/min)	5.7		3.2	
GFR (ml/min)	6.43			
ß2 (ml/min)	4.0		1.2	
wKT/V Watson				
wKT/Vr	1.65		wKT/Vp	0.67
wKT/Vr+p	2.32		wKT/Vr%p	0.712 L
Other				
Urea nitrogen appearance	6.9 g/day		Protein loss	9.6 g/day
Clearance Beta2 micro	5.15			

# **19.1.10 PET (PERITONEAL EQUILIBRATION TEST)**

The **PET (Peritoneal Equilibration Test)** is divided into three parts. The first contains general information about the test, such as:

- Test date
- PD Solution
- Volume In and Volume out
- UF Volume (as the difference between Volume in and Volume out)
- CA-125

Instead, the second part allows the user to enter the levels of **Glucose**, **Urea**, **Creatinine** and **Sodium** in the **Plasma**, in the **Solution** and in three of the four time **T** intervals available.

Information –						
Date	24/09/2019	E	E	PD solution	Aminoacid 2000.0	1 <u>0ml</u> × •
Volume in	1500		nl	Volume out	2260	n
Volume UF	760.00 ml			CA125		
Data						
	Plasma	Fresh solution	TO	T1	T2	<b>T4</b>
Glucose (mg/dl)	109	4399	4006	2270		1190
Urea (mg/dl)	156		19	108		154
Creatinine (mg/dl)	5.7		0.4	2.5		5
Na (mEq/I)	134	139	131	123		126
Results						
D/P creatinine	0.88 mg/dl			D/D0 glucose	0.30 mg/dl	
D/P Na	0.92 mEq/I			Delta Na Fr.ST1	16.00 mEq/I	
Delta Na TO-T1	8.00 mEq/I					

The T1 and T2 columns are mutually exclusive, therefore a value entered in any row of a column disables the other.

The results of the test appear in the third section called **Results**. The calculation does not consider the disabled column. The formulas used as described in the document "TSS - PERITONEAL DIALYSIS FORMULAS" issued on request.

# **19.2 PD LABORATORIES**

# **19.2.1 DIALYSIS DOSE**

This section calculates the results of a test on a Peritoneal Dialysis Dose. The **Creatinine**, **Urea** and **Vitamin B12** levels are taken from the last laboratory test. These data can be updated.

	Dialysis dose					
	Date	23/11/2010	<b></b>	No. of samples	2	
	Creatinine	8.09	µmol/l (4.42 - 1326)	Urea	100	mmol/l (6.64 - 116.2)
	Vitamin B12	2400	pg/ml (30 - 3000)			
Doses						
Total volume in L	drainage Creatinine in µmol/		e Vitamin B12 in drainage pg/ml			
2	9	100	2500			
2	8.5	120	2300			

The **number of samples** must be specified in the relative field. This will automatically update the same number in the middle of the table. Once the table has been filled-in with the **Total volume**, **Creatinine**, **Urea** and **Vitamin B12** values of each sample, the system displays the results of the test.

Calculate dialysis dose –			
KT/V	0.715	KT/V Co	1.731
Creatinine clearance	4.33	Creatinine clearance for week	30.28
Urea clearance	4.40 ml/min	Creatinine clearance for week	30.80 ml/min
Vitamin B12	4.00 pg/ml	Vitamin B12 for week	28.00 pg/ml

### **19.2.2 FAST PERITONEAL EQUILIBRATION TEST (FAST PET)**

The Fast Peritoneal Equilibration Test consist of two sections: the first receive the incoming data of the test, the second calculate the results. The **Test date** and the **Test duration** are filled in by default with the current date and the duration of four.

The following fields must be filled in:

- Residual kidney function around 200 ml;
- Glucose: Specify the blood glucose level;
- 2 litres volume PD standard: Specify whether a standard 2 litre bag was used;
- Creatinine in dialysis fluid: Creatinine level in the dialysis fluid;
- Glucose in the dialysis fluid: The quantity of glucose in the dialysis fluid;
- Blood creatinine: Creatinine level in the blood;
- Dialysis fluid volume at end of exchange: Dialysis fluid volume at the end of the four-hour test.

TSS calculates the values in the fast peritoneal test according to the fast peritoneal equilibration test guidelines.

Calculated fast peritoneal test values –			
Glucose pre-procedure	Good	Volume pre-procedure	Yes
		Creatinine indicator	Low
Blood creatinine pre procedure	0.06		
FPET net ultafiltration value	50.00	PD blood glucose indicates	High
PD blood glucose result	1.96	Net ultrafiltration indicates	High average

### **19.3 CHANGES TO FUNCTIONALITY IN CASE OF TSS-PATIENTONLINE INTERFACE**

Through the installation of the appropriate plugin you can share data between the **TSS** and the **PatientOnLine** application (hereinafter POL). This interface changes and updates some features inside patient entities.

The TSS acts as the master of personal data, medical data, allergies and amputations. Therefore, any medical data modified on POL will not be sent to TSS. Below is a detailed description of the data that POL sends to TSS.

### **19.3.1 PATIENT SYSTEMS**

TSS stores information about all the systems created by the POL application and used by the patient for peritoneal dialysis. If a system is changed in the POL application after it has already been imported into TSS, then it will be updated. If a system is deleted in POL after an export then in TSS it will be disabled during the next export.

DOI nation				•	97 Status Act	tive/Peritone	al dialysis	□ 🖸							
or patient	nt systems										Ref		Export E	xcel	Print
Active patie	ent systems	Disabled	Full list												
F System	n date Con	nment Lang	uage												
04 De	c 2018														1
26 Sep	p 2005	Engl	ish												
01 Au	g 2002	Engl	ish												]
							~				 				
POL patien	nt systems						^				Delete	F	Print	3	
POL patien	nt systems	System da	ate	26 Sep 2005			^		c	omment	Delete	F	Print	3	
POL patien	ıt systems	System da Langua		26 Sep 2005 English					c	omment	Delete	F	Print	3	000
POL patien							~		c	omment	Delete	F	Print	3	
							^		C	omment	Delete	F	?rint	3	
	15 Code						^		C	omment	Delete	F	Print	3	0

### **19.3.2 PD PRESCRIPTION**

TSS stores all the prescriptions imported from the POL application in the **PD prescription** section. If a prescription is changed in the POL application after it has already been imported into TSS, then a new version of the same will be created. If a prescription is deleted in POL, it will not be deleted in TSS but will be disabled.

The prescriptions exported by POL will be stored in TSS as "Enabled" and as a non-principal prescription: when the POL Plugin is enabled, in fact, it is not compulsory to have the "Main prescription".

This constraint is also reflected in the Patient Summary section where, for a patient in peritoneal dialysis, all active prescriptions will appear in the prescription list instead of only in the main list.

Using the **Resource** field it is possible to understand if a prescription has been created by TSS or imported by POL. As far as the prescriptions imported by POL are concerned, the fields in the "PD Prescription" section are different, compared to a prescription created by TSS, as you can see from the following image:

prescription			Copy to Edit Print
Creation date	21 Sep 2005 00:00	Prescription Nam	ne ccpd_pdplus_extra
Prescribing doctor		Last modified b	ν.
General data Comments			
General information			
Leading prescription	No	Prescription enabled	d Enabled
Valid from	03 Jan 2019	Valid to	0
Prescription version	0	PD modality	y APD
Set		Body weigh	st.
Assistance type		Cathete	r
Treatment frequency			
APD settings			
Device type			
APD modality		Treatment duration	n 👪
Flexpoint		Total set UF volume	e
Total prescribed volume		Total real UF volume	
Total used volume		Diuresi	
Initial outflow			<u> </u>
Volume		Drair	n No
Base cycles			
Cycles		Inflow volume	e
Dwell time		Expected outflow volume	e
PD solutions			
Last inflow			
Last inflow			
Profile			
Profiled			
Manual exchange			
Exchanges number		Total time	e
Total volume in		Total UF volume	e
Dialysis PD solution volume			
Exchange start Exchange	end PD solution	Volume in Volume out U	UF volume ml
Empty Grid			

# 19.3.3 QA TEST

TSS stores all QA Tests imported from the POL application in the "POL QA Test" section, including those in the "draft" state. If a QA Test is changed in the POL application after it has already been imported into TSS, it will be overwritten during the next export. Instead if a test is deleted in POL after an export then in TSS it will be disabled during the next export.

QA tests													Delete Print	
		Date	18 Jan 2	016							Days/Week	7		
	Ter	t type	PFT								Test sub-type	Extended PF	T	
	- Patien		ect.								Test sub-type	Extended Pr	1	
		veight	73.20 K	-							Height	164 cm		
	*	1		2										
		Age	55.84 Ye	ears							Gender	Male		
Adult statu			Adult								Adult status type	By age		
Set	tings&For	mulae –												
	Use I	JreaN	~							Use fre	ee water clearances	~		
Use GFR in crea	tinine clea	rance	$\checkmark$								Adulthood age	16		
Bo	ody surface	e area	DuBois 8	& DuBois	8					Body surfa	ce area for children	DuBois & Du	Bois	
1	otal body	water	From BS	A						Total bod	y water for children	Mellits-Chee	•k	
		NPCR	Gotch								NPCR for children	Gotch		
out data Results	1													
Blood samples														
Blood sample code	Urea		e Glucose											
	mg/dl	mg/dl	mg/dl	g/di	g/0	-	mEq/I							
PFT	81.51	9.50	68.50	6.6	3.7	1 2	112.3							
Urine samples														
Urine sample code	Collection	time U	ine volume ml	Urea mg/dl	1000	ng/di	e Protein g/di	mEq	8 CO.					
PFT	1 day 0 h	nour 2	50	414.5	7 6	7.92		150	.00					
Dialysate samples														
Urine sample code		Dwell ti	me	Inf		ume		olume	Solution		Solution input sodium			
QA sample for PF	[ test	3 hour	s 0 minute	2'	<i>ml</i> 200	-	<i>ml</i> 2530		2.30	%	mEq/l	mg/dl 77.03	mg/dl 7.12	mg/a 724.3
						-		-	and and				10.1.200	
1st sample for PF			s 50 minute		200	-	2440	-	1.50		134.0	81.79	8.14	403.6
2nd sample for Pf			s 55 minute	CF	200	_	2430	_	1.50		134.0	82.35	7.67	464.9
3rd sample for PF	T test	2 hour	s 35 minute	s 22	200		2290		1.50		134.0	70.31	5.48	659.5
	T test	401	rs 25 minut		200		3050		-4096.0	0	134.0	85.15	8.93	131.5

#### 19.3.4 BCM DATA

BCM data imported from the POL application is stored in the BCM section of TSS. If BCM data have already been imported from TSS, a subsequent export from POL of the same BCM data will not increase the number of entities present in the BCM section of TSS. If a BCM measurement is deleted from POL and then a new export is performed then the entry will be marked with **Have the measurements been deleted?** to "Yes".

# **19.3.5 TREATMENT RESULTS**

POL sends the results of the treatments carried out to TSS. Treatments can be viewed in the **PD treatments** section. The **Resource** field allows you to identify the treatments created manually in TSS by those forwarded by POL. If a treatment previously exported to TSS is changed to POL and then re-exported, then it will be updated in TSS. If the treatment status is already "Closed" then it will be reopened and updated. A treatment removed from POL will not be modified in TSS.

The **Prescription name** contains the theoretical reference prescription used for the treatment. Since there is no certainty which prescription is used in the PD device, the field can be modified in TSS. In any case, TSS tries to associate one of the available prescriptions provided that the prescription:

- It was created in POL
- It has the same PD modality
- it is valid in the interval when the treatment took place
- is the only one to satisfy the above points

) treatments						Close	Edit	Print	
Date	18 Sep 2015				Status	Open			
Prescription name					PD modality	APD			
Unique ID	0								
Medical service list									
Date Medical service Quantity	Performed	Status	Auto creation	Version	Service unique ID				

### **20 OPTIONAL MODULE: TRANSPLANTS**

# **20.1 TRANSPLANT – PATIENT SECTION**

### 20.1.1 WAITING LIST

This section shows the status of the waiting list for the transplant of each organ. The system manages the following organs:

- Kidney
- Pancreas
- Heart
- Liver

The waiting list is created for each patient by default and each organ is set in "Excluded" status.

The patient's waiting list can be modified if he or she is in one of the following dialysis statuses: Hemodialysis, Hemodialysis ICU, Hemodialysis Acute, Peritoneal Dialysis, Pre-Dialysis, Ambulatory, or Transplant follow-up.

The current status of each organ and the relative movements which generated the current status are shown in the first part of this section.

Waiting list				Edit	New movement Print
	Primary hospital			Secondary hospital	
	Kidney		Pancreas	Heart	Liver
Waiting list status	Excluded for trans (4 years 6 months)		Excluded (4 years 7 months)	Included (4 years 6 months)	Excluded (4 years 7 months)
Clinical note					
atient waiting list mov	ement				
	ve <mark>ment</mark> Waiting list status	Organs (	Comment		
	Waiting list status		Comment		
F Date	Waiting list status Excluded for transplant		Comment		
Date 25 Feb 2015 11:33	Waiting list status Excluded for transplant Included	Kidney	Comment		

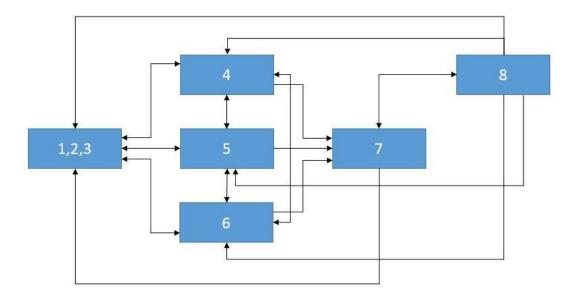
A new movement can be entered by clicking the "New movement" button.

			up 🖂 🔁
ing list movement			Cancel Sive
here is 1 error			
Date 24/0	9/2019 14:35	Responsible user	<u>demouser</u>
Waiting list status 🔉	•	Transplant unit	Transplant unit
Kidney	Pancreas	Heart	Liver

The user must compile the new **Waiting list status** and specify the organ (or organs) involved in the movement (at least one organ must be selected). The possible statuses are:

- Excluded
- Temporarily Excluded
- Excluded for transplant
- Pre-Included
- Pre-Study
- Under Study
- Included
- Call as Reserve

Transition from one status to another is not always permitted. The system checks that changes in status comply with the following workflow (the numbers correspond to the above list)



For example, if the organ is in **Excluded** (1) status, the new statuses permitted are **Pre-included** (4), **Pre-study** (5) and **Under study** (6). Direct transition from an **Excluded** status (1,2,3) to the **Included** (7) status is not permitted.

Similarly, if the organ is in **Included** (7) status, the new statuses permitted are **Call as reserve** (8) and all **Excluded** statuses (1,2,3).

The system allows the movement to be entered if all the organs it involves comply with the above workflow and the new status is not the same as the current one:

aiting list movement			Cancel Save	
There are 3 errors				
Vaiting list status: New status is not va (idney involved: New status for this or	lid for one or more involved organs [150015] gan is not valid [150014]	Responsible user	<u>demouser</u>	
Heart involved: New status for this org	an is not valid [150014]	Transplant unit	Transplant unit	
rgans involved	-			
Kidney	Pancreas	Heart	Liver	
-				
Comment				

There is also a check which only allows "Included" status to be set if the information concerning **Blood group**, **Rh** factor, **HLA** and **Urgency** have been entered for the patient concerned.

	0/00/1057 (Ch) Carden 7	Carl 70060 States	Active (Devices and distants	-	×
	0/09/1957 (62y) Gender 🕂	Coa. 72362 Status	Active/Peritoneal dialysis		
Waiting list movement				Cancel Save	
X There are 2 errors					
Date	24/09/2019 14:36	Ħ	Responsible user	<u>demouser</u>	_
Waiting list status	Included	•	Transplant unit	Transplant unit	
	Can't create a movement t	o status Included as	long as HLA, Urgency and Blo	ood data are empty [150018]	
Kidney	Pancreas		Heart	Liver	

The system also allow the entry of past movements which do not cause changes in the current status, unless they are the last movement for the organ concerned. The status, as of the date of the movement, must also comply with the above workflow for movements in the past.

After deletion of a movement entered previously, the system recalculates the current status of the waiting list.

The second part of the **Waiting list** section contains the patient-related information that has to be compiled by the user. The patient's waiting list can be modified when at least one organ is in a status other than **Excluded**(1,2,3).

hompsor	Josie Born 23/10/1		on parameters			Medical histories	External		+		
	Josle Born 23/10/1	950 (68	y) Gender♀	coa. 166334 Status	Active/ Iransplan	t follow-up					-
iting list							Ed	it New mo	vement	. Print	
nical note											
ent waiting list	movement		5.0					6			
Date	Waiting list stat	us	Organs	Comment							
25 Feb 2015 1	1:33 Excluded for tra	nsplant	Kidney								
25 Feb 2015 1	1:33 Included		Heart								
25 Feb 2015 1	1:32 Included		Kidney								
	1:31 Pre-study		Kidney, Hea	rt							
cords found											
andidate data	Anti-hla ac rate	Clinical	evaluation	Diagnostic tests	Dialysis situation	1					
	Urgency	Hi	<u>ah</u>			Blood	group	В			
	Rh	ne	g								
	Candidate suitability	114									
Suital	bility with HCV donor					Suitability with asystolic	donor				
Suitability w	ith double transplant										
	Immunity										
Nu	umber of pregnancies					Number of abo	rtions				
	· · · · · · · · · · · · · · · · · · ·										
1220100220000	region and the second second										
	of blood transfusions										
Number HLA						irus serology					
		A	3	<u>A</u> 2		irus serology nd others		Neg	ative	Positive	Unknown
	<u>[]</u>	<u>A</u> . <u>B</u> .		A 2 B 1	a				ative	Positive	Unknown
	AB	B	2	<u>B</u> 1		nd others		(			
	A B DR	B			a	nd others HBs Ag		(	C	0	0
	AB	B	2	<u>B</u> 1	a	HBs Ag HBs Ab			0	0	0
	A B DR DQ	B	2	<u>B</u> 1	a	HBs Ag HBs Ab HBc Ab				0	0
HLA	A B DR DQ	B	2	<u>B</u> 1	a	HBs Ag HBs Ab HBc Ab HBC NA				0	
HLA	A B DR DQ	B	2	<u>B</u> 1	a	HBs Ag HBs Ab HBc Ab HBV DNA HCV				0	0 0 0 0
HLA	A B DR DQ	B	2	<u>B</u> 1 <u>DR 1</u>	a	HBs Ag HBs Ab HBc Ab HBV DNA HCV PCR HCV					
Programs	A B DR DQ	B	2	<u>B</u> <u>1</u> <u>DR</u> <u>1</u> Included	a	HBs Ag HBs Ab HBs Ab HBc Ab HBV DNA HCV PCR HCV HIV					
Programs Combined From living	A B DR DQ	B	2	<u>₿</u> 1 <u>DR</u> 1 Included	a	HBs Ag HBs Ab HBc Ab HBC DNA HBV DNA HCV PCR HCV HIV CMV IgG					
Programs Program <u>Combined</u> <u>From Ilving</u> <u>HCV</u>	A B DR DQ	B	2	<i>B</i> 1 <i>DR</i> 1 Included ✓	a	HBs Ag HBs Ab HBc Ab HBV DNA HCV PCR HCV HIV CMV IgG Epstein-Barr					
Programs Combined From living	A B DR DQ	B	2	<i>B</i> 1 <i>DR</i> 1 Included ✓	a	HBs Ag HBs Ab HBc Ab HBC Ab HBV DNA HCV PCR HCV PCR HCV HIV CMV IgG Epstein-Barr Herpes Zoster HZV-IgM					
Programs Program <u>Combined</u> <u>From Ilving</u> <u>HCV</u>	A B DR DQ	B	2	<i>B</i> 1 <i>DR</i> 1 Included ✓	a	HBs Ag HBs Ab HBc Ab HBC Ab HBV DNA HCV PCR HCV PCR HCV PCR HCV HIV CMV IgG Epstein-Barr Herpes Zoster HZV-IgM Herpes simplex					
Programs <u>Combined</u> <u>Erom living</u> <u>HCV</u> <u>HIV</u>	A B DR DQ	B	2	<i>B</i> 1 <i>DR</i> 1 Included ✓	a	HBs Ag HBs Ag HBs Ab HBc Ab HBV DNA HCV PCR HCV HIV CMV IgG Epstein-Barr Herpes Zoster HZV-IgM Herpes simplex VDRL					
Programs Program <u>Combined</u> <u>Erom Ilving</u> <u>HCV</u> <u>HIV</u> <u>Immune</u> <u>Injury risk inc</u>	A B DR DQ	B	2	<u>₿</u> 1. <u>DE</u> 1 Included	a	HBs Ag HBs Ag HBs Ab HBc Ab HBV DNA HCV PCR HCV HIV CMV IgG Epstein-Barr Herpes Zoster HZV-IgM Herpes simplex VDRL Ac IgG anti T Pallidum					
Programs Program <u>Combined</u> <u>Erom living</u> <u>HCV</u> <u>HIV</u> <u>Immune</u>	A B DR DQ Creased in-colculable	B	2	£ 1. <u>DE 1</u> Included ✓ 	a	HBs Ag HBs Ag HBs Ab HBc Ab HBV DNA HCV PCR HCV HIV CMV IgG Epstein-Barr Herpes Zoster HZV-IgM Herpes simplex VDRL Ac IgG anti T Pallidum Ac IgG anti T Pallidum					

There are 5 tabs:

- Candidate data: contains information about the patient. It should be noted that, if already present, the Blood group and Rh Factor are automatically recovered by the system from the patient's medical data. If no values are available, the user must enter these two items of information before saving the waiting list, and the system will also automatically enter the corresponding values in the Medical data section.
- Anti-HLA AC rate
- Clinical evaluation
- **Diagnostic tests**: shows the patient's diagnostic tests performed since the date of the creation of the first waiting list status change movement.
- Dialysis situations: shows the current clinic, patient status, dialysis status, date of first dialysis and time passed since first dialysis.

# 20.1.2 TRANSPLANT

This section shows all information relating to transplants and immunosuppressive therapy.

ransplant							New	transplant
		145				515 T		
	Kidney	Kidney (	Second)	Pancrea	5	Heart	Liver	
Status	Functioning							
Survival time	4 years 6 months							
Waiting list status	Excluded for transpl	ant Excluded	d for transplant	Exclude	d	Included	Excluded	
Donor	Johnston Emma							
Transplant number	1							
Actions	See transplar Add failure	nt.						
ansplant history								
🗗 Date	Event type Organs							
25 Feb 2015 11:3	3 Transplant Kidney							
record found								
mmunosuppressive t	herapy Timeline							
mmunosuppressive t	therapy						Print prescri	iption Add new
Show o	current drug only 🗹							
						Dosage and frequency		1

The first part of the section contains the Transplant summary divided by organ. The information displayed is:

- Status: shows the status of the transplant. It can have the following values: "Functioning" or "Failed".
- **Survival time**: shows the time which has passed since the transplant was performed. If the transplant has failed, it shows the length of time from the performance to the failure of the transplant.
- Waiting list status: shows the current status of the waiting list.
- Donor: shows the donor of the organ.
- Actions: shows the actions which can be taken. The user can display the information about the transplant and, if the transplant is in "Functioning" status, enter its failure.

The "**Transplant history**" table shows all the events relating to the patient's transplants. Clicking each individual line allows the user to view the data relating to the transplant (or its failure).

The drugs administered to the patient as immunosuppressive therapy can be viewed in the "**Immunosuppressive therapy**" table. These drugs can also be viewed in the "Home therapy" part of the **Pharmacological prescription** section.

Pressing the "Add New" button enables the user to add a new drug for use in the immunosuppressive therapy. For instructions on the correct entry of the new therapy see the specific section.

# 20.1.2.1 ADDING A TRANSPLANT

ransplant data							Cancel	Save Create donor fo	r transplant
	Date	24/0	9/2019 14:38		I		Centre	Centre	
	Protoco	Proto	col			Transplant	number	2	
Respon	sible docto	r Respo	onsible doctor				Donor	Johnston Emma DonorCo	ode 2 × …
	Organ	s Hear	<u>t Dead 1 Ava</u>	iahle			Туре	Please select one entry	•
		+		101070					
Receiver and donor Hear	Inducti	on therapy	Other inform	ation	Rejections Antibodies Test sch	eduling			
	HL		e and a morth		ingentional interview interview				
		Receiver			Donor	Match HLA		Mismatch HLA	1
A		A3; A2			A1; A2				
В		B2; B1			B2; B3				
DR		DR2; DR1			DR1; DR3				
DQ					DQ2; DQ3	-			
/irus serology and others					Receiver PRA results				
ind others	Receiver		Donor			Last			% (0 - 100)
HBs Ag		-	Negative	-		Maximum			% (0 - 100)
HBs Ab	Negative	•	Negative	•	<ul> <li>Receiver medical data</li> </ul>				
HBc Ab	Negative	•	Negative	•		Receiver weight	50		Kg (10 - 299.9)
HBV DNA		-		•	Receiver	body mass index	17.72 Kg/	/m²	
HCV		-	Negative	•	Comment				
PCR HCV		-	Negative	•					
HIV	Negative		Unknow	-					
CMV IgG	Negative	•	Negative	•					
Epstein-Barr		•	Negative	•					
Herpes Zoster HZV-IgM		-		•					
Herpes simplex		•	Negative	•					
VDRL	Negative	•	Unknow	•					
Ac IgG anti T Pallidum	Negative	-	Unknow	-					
Ac IgG anti Toxoplasmosis		-	Unknow	•					
Mantoux		•	Unknow	•					
Quantiferon	-	-	1	-					

A new transplant can be entered by clicking the "New transplant" button.

To enter a new transplant, the **Donor** must be defined.

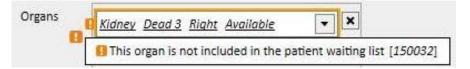
Last name       Sourch       C         Donor type       Ist name       Sourch       C         Show Details       Freeman       Mason       DonorCode 1       Ist name       Sourch       C         Show Details       Johnston       Emma       DonorCode 2       Ist name       Sourch       C       Ist name       Sourch       Sourch       Ist name       Sourch       Ist name       Sourch       Ist name       Sourch       Sourc	Donor						×
Show Details Johnston Emma DonorCode 2 2 records found							_
Show Details Johnston Emma DonorCode 2 2 records found	La:	st name Search		0	First name	Search Q	•
Show Details Johnston Emma DonorCode 2 2 records found	Dor	nor type		•	Donor code	Search Q	
Show Details Johnston Emma DonorCode 2 2 records found	🐙 U	ast name Second last name	First name	Donor code			
Show Details Johnston Emma DonorCode 2 2 records found	Show Details F	reeman	Mason	DonorCode 1			
		ohnston	Emma	DonorCode 2			

All donors for which the donor data have been entered and who may have at least one organ in "Available" status are displayed. If a patient is defined as **receiver** in the data of a living donor, the latter is set as donor by default.

After setting the donor, the user must set the **organs** involved in the transplant. All the organs of the selected donor which are in "Available" status are shown.

Transplant data												
🛆 Thompson , Josie Bo	orn 23/10/1	1950 (68	y) Geno	derQ Cod. 10	i6334 S	tatus Active/Transplar	nt follow-up					
Transplant data									Cancel		Create donor for tran	splant
	Date	2	24/09/20	019 14:38		Ħ			Centre	Centre		
	Protocol	P	rotocol					Transplant r	number	2		
Respons	ible doctor	R	esponsil	ble doctor					Donor	Johnston	Emma DonorCode 2	×
	Organs		Organ			××			Туре	Please se	lect one entry	•
		E3										
Receiver and donor Induct	ion therapy	( Ot )	Heart De	ead 1 Availat Dead 3 Right /	le Wailaht	Test	scheduling					
	HLA	, i	Liver Dea	ad 4 Availabl	e	-	e l					
	R	Receive	Pancreas	s Dead 5 Ava	ilable			Match HLA			Mismatch HLA	
A		A3; A2				A1; A2						
B		32; B1				B2; B3						
DR DQ	L	DR2; DR1	2			DR1; DR3 DQ2; DQ3						
Virus serology						Receiver PRA resu	lts					
and others						heteiver i ha resu	113	Last	-			% (0 - 100)
102 1	Receiver			onor				Maximum				% (0 - 100)
HBs Ag				egative	•	- Receiver medical da	ita					
HBs Ab	Negative			egative	•		Rec	eiver weight	50			Kg (10 - 299.9)
HBV DNA	Negative		• Ne	egative	-		Receiver bod	y mass index	17.72 Kg	g/m²		
HCV	1			egative	•	Comment						
PCR HCV				gative		8						••
HIV	Negative	_		hknow	•							
CMV IgG	Negative	-		egative	-							
Epstein-Barr	Barine	5		egative								
Herpes Zoster HZV-IgM			-		•							
Herpes simplex				gative	•							
VDRL	Negative			hknow	-							
Ac IgG anti T Pallidum	Negative			nknow	•							
Ac IgG anti Toxoplasmosis			▼ Un	hknow	•							
Mantoux			▼ Un	nknow	•							
	-		-		-							

The transplant may involve one or more organs. The system signals a warning if the selected organ is not in "Included" status in the waiting list:



An error is signalled if the user selects an organ for which a still functioning transplant has already been entered:

Organs	C Kidney Live 1 Left Available	
8	This organ is not included in the patient waiting list [1]	50032]
	For kidney we already have two functioning transplan	ts [160002]

To enter a transplant, the following tabs must be compiled:

- **Receiver and Donor:** this tab allows comparison of the **HLA** and **Serology** between receiver and donor. Other information about the donor and receiver is also available.
- Induction therapy: this tab is used to enter the number of cycles of Plasmapheresis and add one or more drugs
- Rejections: this tab allows one or more rejections to be entered. Each rejection includes general information such as Date, Interval elapsed from transplant, Type and Category, and one or more Therapy cycles can also be added to the rejection. Each Therapy Cycle has Date, number of Immunosorbent cycles and number of Plasmapheresis cycles and one or more drugs can be associated to each therapy cycle

Rejections	
Date         Interval from transplant         Type         Category	
18 Aug 2015 00:00 5 months 22 days Acute Cellular 1 record found	
1 record round	
Rejection	×
Date 18 Aug 2015 00:00 Interval from transplant 5 months 22 days	
Type Acute Category Cellular	
Therapy cicles	
Date 18 Aug 2015 Immunosorbent cycles 1	
Plasmapheresis cycles 1	
Rejection therapy           P         Status         From         To         Drug / Active ingredient         ATC code         Dosage this we	ak Dorara i
	the second se
Active 18 Aug 2015 Mitopep - Nunpan A02BC01 35.00 mg/ml	5 mg/m
1 record found	
Comment	
OK Cancel	

- Other information: this tab contains any information about histological tests and information about complications.
- Antibodies: this tab contains a list of one or more antibodies, each of them comprising a Date and the values of the class 1 and 2 HLA Antigen
- Test scheduling: this tab is used to schedule instrumental tests on the patient.

A tab is then dynamically added for each organ involved in the transplant:

Transplant data																		×
🛕 Thompson , Josi	ie Born	23/10/19	950 (6	8y) G	Gender Q	Cod. 166334 S	tatus A	ctive/Transplant	follow	-up 🖂	٢							
Transplant data											[	Cancel	Save		Create donor for tra	insplant		
		Date		24/0	9/2019 14	4:41		Ŧ				Centre	Centr	e			•••	1
	F	Protocol	Ī	Proto	col			•••			Transplant	number	2					
R	esponsible	e doctor	Ī	Respo	insible doc	tor						Donor	Johns	ton E	Emma DonorCode	2	× •••	
		Organs	Ī	Hear	t Dead 1	Available						Туре	Pleas	e sele	ct one entry		•	
			1			Right Availa	ible											
					Dead 4		1210											
						d 5 <u>Available</u>												
			1	+														
Receiver and donor	Kidney	Pancre	as I	Liver	Heart	Induction the	erapy	Other informat	ion F	Rejections	Antibodie	s Test s	cheduling	5				
		HLA																
		R	eceive	r			Donor	•			Match HLA			1	Mismatch HLA			
A		A	3; A2				A1; A2	2										
В			2; B1	1			B2; B3	Literatur						_				
DR		D	R2; DR	81			DR1; D	1.49725						_				
DQ							DQ2; I											
Virus serology and others							Rec	eiver PRA result	s —		100					1		
	R	eceiver			Donor						Last						(0 - 100)	
HBs Ag	_			-	Negative	-					Maximum	1				%	(0 - 100)	
HBs Ab	N	egative		•	Negative	•	- Recei	iver medical data	a —	-		-						
HBc Ab	N	egative		•	Negative	•					ver weight	50	1941 A.C.P. (1947 - 1947 - 19			Kg (10	- 299.9)	
HBV DNA				•					Receiv	ver body r	nass index	17.72	Kg/m²					
HCV				-	Negative	-	Com	ment										
PCR HCV				•	Negative	•												
HIV	N	egative		•	Unknow	-												
CMV IgG	N	egative		•	Negative	•	-											
Epstein-Barr				-	Negative	•												
Herpes Zoster HZV-IgN	vi 🗌			•		•												
Herpes simplex				•	Negative	•												
VDRL	N	egative		•	Unknow	•												
Ac IgG anti T Pallidum	N	egative		-	Unknow	•												
Ac IgG anti Toxoplasm	osis			-	Unknow	-												

Saving a transplant triggers the following changes:

- The Transplant summary is recalculated. The organs involved in the transplant are set in "Functioning" status
- The "Transplant history" table is updated with the addition of a "Transplant" event.
- If the transplant involves a live donor, a movement which changes the donor's dialysis status is created. The new status set is "Donor"
- A movement which changes the receiver's dialysis status is created. The new status set is "transplant followup"
- For each organ involved in the transplant, a movement is entered in the "Waiting list" which changes the status to "Excluded for Transplant"
- For each organ involved in the transplant, the organ's status is changed from "Available" to "Transplanted" in the donor's data.

The system also allows past transplants to be saved for the management of any historic records. In this case, if the transplant entered is not the last in chronological order at the level of the individual order, saving the transplant does not cause any change in the **Transplant summary**.

### 20.1.2.2 ADDING A FAILURE

A transplant failure can be entered by clicking the "New Failure" button. Unlike a transplant, a failure is added at the individual organ level.

plant failure				Cancel Save	
Date	24/09/2019 14:38	Ħ	Organ	<u>Kidney Dead 2</u> <u>Left</u> <u>Transplanted</u>	•
Cause of failures	+		Transplantectomy performed	Please select one entry	•
Transplantectomy date	dd/mm/yyyy hh:mm	Ħ	Transplantectomy type	Please select one entry	-
ment					

To save a failure, the user must define the **organ** involved in the failure and specify the cause of the **failure**.

Saving a failure triggers the following changes:

- The Transplant summary is recalculated. The organ involved in the failure is set in "Failed" status
- The "Transplant history" table is updated with the addition of a "Failure" event.
- A movement is entered in the "Waiting list" which changes the status to "Pre-Included"
- For each organ involved in the transplant, the organ's status is changed from "Transplanted" to "Failed" in the donor's data

# **20.2 TRANSPLANTS - CLINICAL SECTION**

# 20.2.1 DONOR DATA

The "Donor data" section allows the user to manage organ donors within the system.

Freeman         Mason         DonorCode 1         25 Feb 2015         Live donor           Johnston         Emma         DonorCode 2         25 Feb 2015         Dead donor	Donor type     Image: Construction of the second last name     Donor code     Creation date     Donor type       Preeman     Mason     DonorCode 1     25 Feb 2015     Live donor       Johnston     Emma     DonorCode 2     25 Feb 2015     Dead donor	onor data							New	Export Excel
Donor type     Donor code     Search       Iteration     Iteration     Iteration     Iteration       Iteration     Mason     Donor code     Creation date     Donor type       Iteration     Mason     DonorCode 1     25 Feb 2015     Live donor       Johnston     Emma     DonorCode 2     25 Feb 2015     Dead donor	Donor type     Image: Construction of the second last name     Donor code     Creation date     Donor type       Image: Construction of the second last name     Mason     Donor Code 1     25 Feb 2015     Live donor       Johnston     Emma     DonorCode 2     25 Feb 2015     Dead donor		ſ							
Iterational constraint     Mason     Donor code     Creation date     Donor type       Instance     Mason     DonorCode 1     25 Feb 2015     Live donor       Johnston     Emma     DonorCode 2     25 Feb 2015     Dead donor	Itast name       Second last name       First name       Donor code       Creation date       Donor type         Freeman       Mason       DonorCode 1       25 Feb 2015       Live donor		Last name	Search		0	First name	Search		
Freeman         Mason         DonorCode 1         25 Feb 2015         Live donor           Johnston         Emma         DonorCode 2         25 Feb 2015         Dead donor	Freeman         Mason         DonorCode 1         25 Feb 2015         Live donor           Johnston         Emma         DonorCode 2         25 Feb 2015         Dead donor		Donor type			•	Donor code	Search		0
Freeman         Mason         DonorCode 1         25 Feb 2015         Live donor           Johnston         Emma         DonorCode 2         25 Feb 2015         Dead donor	Freeman         Mason         DonorCode 1         25 Feb 2015         Live donor           Johnston         Emma         DonorCode 2         25 Feb 2015         Dead donor	Last name	Second last name First r	ame Donor code	Creation date	Donor type				
records found	records found		Emm	a DonorCode 2	25 Feb 2015	Dead donor				

A new donor can be entered by clicking the "New" button.

The system manages two types of donor:

- Live Donor
- Dead Donor

### 20.2.1.1 LIVE DONOR

To enter a live donor, the "**Donor type**" field must be set at "Live donor". In this case, the live donor must be a patient already present in the system. All patients for whom the dialysis status is set as "**Donor candidate**" are candidates.

onor data						Edit	Print	
Creation date	25 Feb 2015			Donor code	DonorCo	ode 1		
Donor type	Live donor			Class of donor	Class 2			
Donor	Mason Freem	n		Receiver				
Immunological relationship				Relationship				
Immunological relationship				Relationship				
Medical data								
Height	178 cm			Weight	76.0 Kg			
Blood group	0			Rh factor	neg			
Diabetes	No			Hypertension				
HLA				Serology and				
A	<u>A 1</u>	<u>A</u> 3		others				
В	<u>B 2</u>	<u>B</u> <u>3</u>		110-4-		Negative	Positive	Unknown
				HBs Ag HBs Ab		0	0	0
DR	<u>DR 1</u>	<u>DR 2</u>		HBc Ab		0	0	
DQ	<u>DQ</u> 1	<u>DQ</u> 2		HBV DNA		0	0	0
				HCV		۲	Õ	ĬŎ
				PCR HCV		۲	Õ	Õ
				HIV		۲	0	0
				CMV IgG		0	0	۲
				Epstein-Barr		0	0	۲
				Herpes Zoster HZV-IgM		0	$\bigcirc$	0
				Herpes simplex		۲	0	0
				VDRL		۲	0	0
				Ac IgG anti T Pallidum		0	0	۲
				Ac IgG anti Toxoplasmosis		0	0	۲
				Mantoux Quantiferon		0	0	0
				quantinerun		0	0	
	Organ code		Right or left	Status				
Organ availability Porgan								

If the "Designer" role is enabled, the "Immunological Relationship", "Donor class" and "Relationship" field values (selectable through the drop-down menu) can be customized by clicking on the small pencil icon displayed inside the relevant field. More details can be found in section 4.5.1 of the "TSS Service Manual".

The system also checks that the donor and receiver are not the same patient.

Creation date	24/09/2019	III	Donor code	DonorCode1	
Donor type	Live donor	•	Class of donor	Please select one entry	]
Donor 🛽	Mason Freeman	×	Receiver 🛱	Mason Freeman × ···	-
Immunological relationship	Please select one entry	•	Relationship	Donor and receiver have to be different [15001	0]

If values are already entered in the **height, weight, blood group and Rh factor** fields, these are the data already entered in the patient's **medical data** section. If the user modifies one of these fields and saves the donor's data, the system asks the user if he also wishes to update the medical data.



# 20.2.1.2 DEAD DONOR

To enter a dead donor, the "Donor type" field must be set at "Dead donor".

nor data							Edit	Print	
Creation date	25 Feb 2015				Donor code	DonorC	ode 2		
Donor type	Dead donor				Class of donor	Class 1			
Administrative data									
First name	Emma				Last name	Johnsto	n		
Second last name					Gender	Female			
Date of birth	23 Sep 1938				Donor age	76 Year	5		
Date of donation	25 Dec 2014				Generating centre	Hospita	l One - Defaul	t Clinic	
Medical data									
Cause of death					Death type	Brain de	ath		
Height	165 cm				Weight	59.0 Kg			
Blood group	AB				Rh factor	pos			
10 No.						pos			
Diabetes HLA				6	Hypertension				
		4.2		Serology and others					
A	<u>A 1</u>	<u>A</u> 2					Negative	Positive	Unknown
В	<u>B</u> <u>2</u>	<u>B</u> <u>3</u>		HBs Ag			۲	0	0
DR	<u>DR 1</u>	DR 3		HBs Ab			۲	0	0
DQ	DQ 2	<u>DQ</u> 3		HBc Ab			۲	0	0
bq				HBV DNA			0	0	0
				HCV			۲	0	0
				PCR HCV			۲	0	0
				HIV			0	0	۲
				CMV IgG			۲	0	0
				Epstein-Barr			۲	0	0
				Herpes Zoster	HZV-IgM		0	0	0
				Herpes simples	(		۲	0	0
				VDRL			0	0	۲
				Ac IgG anti T P	allidum		0	0	۲
				Ac IgG anti Tox			0	0	۲
				Mantoux			0	0	۲
				Quantiferon			Õ	Õ	Õ
Organ availability									-
P Organ	Organ code		Right or left		Status				
Heart	Dead 1				Available				
Kidney	Dead 2		Left		Transplanted				
Kidney	Dead 3		Right		Available				
Liver	Dead 4				Available				

In this case the user must enter the administrative data (first name, last name, second last name, gender, date of birth).

The user can also enter medical data such as weight, height, blood group, Rh factor, etc. for dead donors.

The system shows a warning message if a dead donor with the same first name, last name, second last name and date of birth is already present.

Administrative data				-		
First name	Emma		Last name	Johnston		
Second last name	A dead donor with the same find present	irstname, lastname, second lastn	ame and birth date is already [1	50043]	ne entry	•
Date of birth	23/09/1938	III III	Donor age	81 Years		
Date of donation	dd/mm/yyyy	<b>==</b>	Generating centre	Generating a	centre	•••

If the "Designer" role is enabled, the "Donor Class", "Cause of Death" and "Type of Death" field values (selectable through the drop-down menu) can be customized by clicking on the small pencil icon displayed inside the relevant field. More details can be found in section 4.5.1 of the "TSS Service Manual".

The other information present in this section, relevant for the donor (whether live or dead) is the **HLA** and **Serology**. This information will be compared with the receiver's details during creation of the transplant.

The user must add the donor's transplantable organs in the organ availability section.

Organ availability				×
Organ Organ code City	▼ Heart Kidney	. Status Hospital	New Hospital	
Organ history	 Liver Pancreas		Let a construct the second sec	
		o data		
	0	Cancel		

For a live donor, only a single Kidney can be transplanted (specify whether right or left)

For a dead donor, the following organs are transplantable:

- Kidney (specify whether right or left or whether both can be donated) •
- Liver
- Heart
- Pancreas

When one or more organs are added and the donor's data have been saved, the organs are set in "Available" status.

P Organ	Organ code	Right or left	Status	
Kidney	Live 1	Left	Available	

#### For each organ involved in a transplant, the organ's status is changed from "Available" to "Transplanted"

F Organ	Organ code	Right or left	Status	
Heart	Dead 1		Available	
Kidney	Dead 2	Left	Transplanted	
Kidney	Dead 3	Right	Available	
Liver	Dead 4		Available	
Pancreas	Dead 5		Available	

5 records found

#### In the event of the failure of a transplant, the status is set as "Failed"

🗗 Organ	Organ code	Right or left	Status	
Heart	Dead 1		Transplanted	
Kidney	Dead 2	Left	Transplanted	
Kidney	Dead 3	Right	Transplanted	
Liver	Dead 4		Transplanted	
Pancreas	Dead 5		Failed	

5 records found

# 20.2.2 CLINIC WAITING LIST

The "Clinic waiting list" section shows all the information concerning the status of the waiting lists of all the clinic's patients.

Configuration p	arameters	Medical histories	External reports	Clinic Home Page	^ <u>  T</u>		
efault Clinic							
linic waiting list							
tatistics							
Status		Total	Kidney	Pancreas	Heart	art Liver	
Pre-included		0	0	0	0	0	
Pre-study		0	0	0	0	0	
Under study		0	0	0	0	0	
Temporarily exclude	d	0	0	0	0	0	
Excluded		42	10	11	10	11	
Excluded for transpl	ant	1	1	0	0	0	
Included		1	0	0	1	0	
Call as reserve		0	0	0	0	0	
All Status		44	11	11	11	11	
Clinic waiting list filt	or						
anne worting ist fift		· · · · · · · · · · · · · · · · · · ·	10.000				
	Candidate stat	us	•	Or	gan	ĺ¥.	
	Patie	nt Patient			0		
🚰 Organ	Patient code	Last name	Second last name	First name	Waiting li	st status	Patie
Heart	39807	Aitken	Lambert	David	Excluded	(10 February 2015)	Hem
Heart	399489	Brennan		Nicholas	Excluded	(10 February 2015)	Hem
Heart	3478	Freeman		Mason	Excluded	(25 February 2015)	Don
Heart	93710	Hartley		Sarah	Excluded	(10 February 2015)	Hem
Heart	16821	Metcalfe		Jonathan	Excluded	(10 February 2015)	Hem
Heart	63416	Middleton		Mary	Excluded	(10 February 2015)	Hem
Heart	39841	Moore		Eleanor	Excluded	(10 February 2015)	Hem
Heart	47829	Morton		Katherine	Excluded	(10 February 2015)	Hem
Heart	137560	Newman		Noah	Excluded	(10 February 2015)	Amb
Heart	72362	Saunders		Benjamin	Excluded	(10 February 2015)	Perit
Heart	166334	Thompson		Josie Included (25		(25 February 2015)	Tran
Kidney	39807	Aitken	Lambert	David	Excluded	(10 February 2015)	Hem
Kidney	399489	Brennan		Nicholas	Excluded	(10 February 2015)	Hem
Kidney	3478	Freeman		Mason Exclu		Excluded (25 February 2015)	
Kidney	93710	Hartley		Sarah Excl		Excluded (10 February 2015)	
Kidney	16821	Metcalfe		Jonathan Exclude		(10 February 2015)	Hem
Kidney	63416	Middleton		Mary	Excluded	(10 February 2015)	Hem
Kidney	39841	Moore		Eleanor	Excluded	(10 February 2015)	Hem
Kidney	47829	Morton		Katherine	Excluded	(10 February 2015)	Hem
Kidney	137560	Newman		Noah	Excluded	(10 February 2015)	Amb
Kidney	72362	Saunders		Benjamin	Excluded	(10 February 2015)	Perit
Kidney	166334	Thompson		Josie	Excluded	for transplant (25 February 2015)	Tran
Liver	39807	Aitken	Lambert	David	Excluded	(10 February 2015)	Hem
Liver	399489	Brennan		Nicholas	Excluded	(10 February 2015)	Hem
Liver	3478	Freeman		Mason	Excluded	(25 February 2015)	Done

The "Statistics" table indicates the number of patients in a given waiting list status for a given organ.

When the user clicks on a box in the "Statistics" table, the system automatically sets the filter of the view underneath so that only the patients who meet the required conditions are displayed.

<ul> <li>Configurati</li> </ul>	on parameters	Medica	al histories	External reports	Clinic He	ome Page X -	F			
Default Clinic										
Clinic waiting	list									
tatistics										
Status		Tota	d.	Kidney	Panc	reas	Heart		Liver	
Pre-included		0		0	0		0		0	
Pre-study		0		0	0		0		0	
Unde <mark>r</mark> study		0		0	0		0		0	
Temporarily exc	luded	0		0	0		0		0	
Excluded		42		10	11		10		11	
Excluded for tra	nsplant	1		1	0		0		0	
Included		1		0	0		1		0	
Call as reserve		0		0	0		0		0	
All Status		44		11	11		11		11	
	Candidate st		Excluded			Organ	Hea	rt	•	
		tient.	Patient							
		tient	Patient	•••		-				
	Patient code	tient	Last name	Second last nar	me	First name		Waiting list status		0.000000
Organ Heart	39807	tient	Last name Aitken		me	First name David		Excluded (10 Februa	ry 2015)	Hemo
Heart Heart	39807 399489	tient	Last name Aitken Brennan	Second last nar	me	First name David Nicholas		Excluded (10 Februa Excluded (10 Februa	ry 2015) ry 2015)	Patient Hemoo Hemoo
Heart Heart Heart	39807 399489 3478	tient	Last name Aitken Brennan Freeman	Second last nar	me	First name David Nicholas Mason		Excluded (10 Februa Excluded (10 Februa Excluded (25 Februa	ry 2015) ry 2015) ry 2015)	Hemoo Hemoo Donor
Heart Heart Heart Heart	39807 399489 3478 93710	tient	Last name Aitken Brennan Freeman Hartley	Second last nar	me	First name David Nicholas Mason Sarah		Excluded (10 Februa Excluded (10 Februa Excluded (25 Februa Excluded (10 Februa	ry 2015) ry 2015) ry 2015) ry 2015) ry 2015)	Hemo Hemo Donor Hemo
Heart Heart Heart Heart Heart	39807 399489 3478 93710 16821	tient	Last name Aitken Brennan Freeman Hartley Metcalfe	Second last nar	me	First name David Nicholas Mason Sarah Jonathan		Excluded (10 Februa Excluded (10 Februa Excluded (25 Februa Excluded (10 Februa Excluded (10 Februa	ry 2015) ry 2015) ry 2015) ry 2015) ry 2015) ry 2015)	Hemo Hemo Donor Hemo Hemo
Heart Heart Heart Heart Heart Heart	39807 399489 3478 93710 16821 63416		Last name Aitken Brennan Freeman Hartley Metcalfe Middleton	Second last nar	me	First name David Nicholas Mason Sarah Jonathan Mary		Excluded (10 Februa Excluded (10 Februa Excluded (25 Februa Excluded (10 Februa Excluded (10 Februa Excluded (10 Februa	ry 2015) ry 2015) ry 2015) ry 2015) ry 2015) ry 2015) ry 2015)	Hemo Hemo Donor Hemo Hemo Hemo
Heart Heart Heart Heart Heart Heart Heart	39807 399489 3478 93710 16821 63416 39841		Last name Aitken Brennan Freeman Hartley Metcalfe Middleton Moore	Second last nar	me	First name David Nicholas Mason Sarah Jonathan Mary Eleanor		Excluded (10 Februa Excluded (10 Februa Excluded (25 Februa Excluded (10 Februa Excluded (10 Februa Excluded (10 Februa Excluded (10 Februa	ry 2015) ry 2015) ry 2015) ry 2015) ry 2015) ry 2015) ry 2015) ry 2015)	Hemo Hemo Donor Hemo Hemo Hemo
Heart Heart Heart Heart Heart Heart Heart Heart	39807 399489 3478 93710 16821 63416 39841 47829		Last name Aitken Brennan Freeman Hartley Metcalfe Middleton Moore Morton	Second last nar	me	First name David Nicholas Mason Sarah Jonathan Mary Eleanor Katherine		Excluded (10 Februa Excluded (10 Februa Excluded (25 Februa Excluded (10 Februa Excluded (10 Februa Excluded (10 Februa Excluded (10 Februa Excluded (10 Februa	ry 2015) ry 2015) ry 2015) ry 2015) ry 2015) ry 2015) ry 2015) ry 2015) ry 2015)	Hemore Hemore Donor Hemore Hemore Hemore Hemore
Heart Heart Heart Heart Heart Heart	39807 399489 3478 93710 16821 63416 39841		Last name Aitken Brennan Freeman Hartley Metcalfe Middleton Moore	Second last nar	me	First name David Nicholas Mason Sarah Jonathan Mary Eleanor		Excluded (10 Februa Excluded (10 Februa Excluded (25 Februa Excluded (10 Februa Excluded (10 Februa Excluded (10 Februa Excluded (10 Februa	ry 2015) ry 2015)	Hemo Hemo Donor Hemo Hemo Hemo

10 records found

### **21 OPTIONAL MODULE: EUROTRANSPLANT**

#### **21.1 EUROTRANSPLANT DATA**

#### **21.1.1 TRANSPLANT ADMINISTRATIVE DATA OVERVIEW**

The Eurotransplant section shows all the patient's significant data for Eurotransplant, and comprises 3 screens, divided into TABs:

- Administrative data overview: shows general administrative data of relevance for Eurotransplant
- **Patient history summary**: shows the patient's medical history data valid for Eurotransplant.
- Transplant examinations: shows the list of the examinations performed for Eurotransplant.
- The Administrative data overview screen contains various fields containing the patient's details, others
  editable and relating only to Eurotransplant and others read-only and taken from the Administrative data
  section (red box).

ansplant administrative data overview	Transplant anamnesis data overview	Transplant examinations	
Next general evaluation	24/02/2017	å	
nment			
			•••
Referred hospital	Hospital Three X	Transplantation status	Transplantation status 1
Last name	Thompson	First name	Josie
Birth name		Date of birth	23 Oct 1950
Gender	Female	Ethnicity	
Street	92 Ponteland Rd	Postcode	<u>CB10 8ZC</u>
City	HOWLETT END	Nationality	
Patient Tel: Home		Patient Tel: Home (2)	
Patient Tel: Work		Patient Tel: Mobile	
Insurance company name		Nat. Insurance number	654321
EDTA number			
mment on transplantation status			
			•••

- Apart from the standard validation originating from the type of value stored, some fields in the Eurotransplant section have additional validation arising from the period of validity of the field itself.
- To allow some data to be constantly updated, for some fields the date of the latest change is saved and a validity period is set.
- Once the current date is after the expiry date of the field, a validation warning appears on the field concerned.
- The period of validity of these fields can be defined in the Master Data section and can be specific for a defined "**Referral hospital**" and are valid for all the patients (see section 4.2.12 of the Service Manual).

We will now take a detailed look at this new type of validation:

When the Eurotransplant section relating to a patient is opened for the first time, the fields are empty, with no validation

nsplant administrative data overview	v Transplant anamnesi	s data overview Trans	plant examinations		
Next general evaluation	24/02/2017	<b>Ⅲ</b> ≟			
nment					
Referred hospital	Hospital Three	× 🛔	Transplantation status	Transplantation status 1	• 0
Last name	Thompson		First name	Josie	
Birth name			Date of birth	23 Oct 1950	
Gender	Female		Ethnicity		
Street	92 Ponteland Rd		Postcode	<u>CB10 8ZC</u>	
City	HOWLETT END		Nationality		
Patient Tel: Home			Patient Tel: Home (2)		
Patient Tel: Work			Patient Tel: Mobile		
Insurance company name			Nat. Insurance number	654321	
EDTA number					
ment on transplantation status					
					•••
					- 1

- In this phase the fields with expiry dates cannot be distinguished, so fill in the editable fields in the Transplant Administrative Data Overview screen and save them.
- A clock icon now appears next to the Transplant status field, indicating that this field has an expiry date. This
  icon is a button, which opens a pop-up menu with 3 values: Last modification date, Modified by and Expiration
  date.

otransplant data					Edit	Print	101
ansplant administrative data overview	Transplant anamnesis data overview	Transplant examination	ns				
Next general evaluation	24 Feb 2017	÷					
omment							
				-			
Referred hospital	Hospital Three		ransplantation status		ntation status :	7 01000000	0
Last name	Thompson		Last upd	ate date	03 Jun 2019	09:26	_
Birth name			Mo	dified by	demouser		
Gender	Female		Expirat	ion date			
Street	92 Ponteland Rd		Postcode	CB10 8Z	2		
City	HOWLETT END		Nationality				
Patient Tel: Home			Patient Tel: Home (2)				
Patient Tel: Work			Patient Tel: Mobile				
Insurance company name		N	at. Insurance number	654321			
EDTA number							
omment on transplantation status							

- The Last modification date is the date when the field was last changed/set, Modified by contains the user who last changed/set the field and the Expiration date is the sum of the Last modification date + Validity period of the field, set in the Master Data section.
- No validity period has been set for the Transplantation Status, so the Expiration Date is empty and the validation is ineffective.
- If a validity period of 5 days is set for the Transplantation Status in the Master Data section, the situation will be as follows

obal master data					
rotransplant settings				Set default for all	Edit Print
'Eurotransplant settings' has been sav	ed successfully				
Eurotransplant settings list	Field for expiration date calculation	Valid for	Turne	Referred hospital	Lico se default
Field		Valia Ior	Type	Referred hospital	Use as delault
Field Transplantation status	Self			RAN EN	

Transplantation status <u>T</u>	splantation status 1
Last update d	03 Jun 2019 09:26
Modified	demouser
Expiration d	08 Jun 2019 09:26

- At this point the validation becomes effective and the value is accepted because the current date has not exceeded the expiration date (in fact, no warning icon is displayed).
- If no change is made to this field for 6 days, on the sixth day this situation will arise.

rotransplant data			Edit Print	
Transplant administrative data overview	Transplant anamnesis data overview	Transplant examinations		
Next general evaluation	24 Feb 2017	å -		
Comment				
Referred hospital	Harnital Three	Transplantation status	Transplantation status 1	0
	Hospital Three	-	Transplantation status' has expired for	-
Last name	Thompson	First nar	inanspiantation status inas expired for	this patient [17]
Birth name		Date of birth	23 Oct 1950	
Gender	Female	Ethnicity		
Street	92 Ponteland Rd	Postcode	CB10 8ZC	
City	HOWLETT END	Nationality		
Patient Tel: Home		Patient Tel: Home (2)		
Patient Tel: Work		Patient Tel: Mobile		
Insurance company name		Nat. Insurance number	654321	
EDTA number				
Comment on transplantation status				

- In this case, we can see that the expiration date validation has failed for this field. The validation is a warning and does not prevent saving of the form.
- The warning informs us that the value we have added is "out of date", so it must be updated so that it is more recent and therefore more reliable. In this case, we can switch to form edit mode and select the new value corresponding to the current date (if the value is still the same, simply select another one and them reselect the current one).

• The validation now disappears and the latest update date will be the current date.

otransplant data				Cancel Save	
nsplant administrative data overview	Transplant anamnesis data overview	Transplant examinations			
Next general evaluation	24/02/2017	ů.			
Referred hospital	Hospital Three × …	La Transplantation	status <u>Transp</u>	antation status 1	•
Last name	Thompson		Last update date	03 Jun 2019 09:26	
Birth name			Modified by	demouser	
Gender	Female	c	ustom expiry date	dd/mm/yyyy hh:mm	Ħ
Gender			Expiration date	08 Jun 2019 09:26	
Street	92 Ponteland Rd				10
	92 Ponteland Rd <u>HOWLETT END</u>				
Street		Patient Tel: Ho			
Street		Patient Tel: Ho Patient Tel: Tel: Tel: Tel: Tel: Tel: Tel: Tel:	me (2)		
Street City Patient Tel: Home			me (2) Mobile		

- The pop-up menu therefore shows the current date as the Last modification date and the new Expiration date; there is no longer a warning on the field, so once the form has been saved the field will be updated correctly.
- To allow the warning to be eliminated even if the up-to-date value is not available for the patient, the user can
  extend the expiry date of the field concerned for the current patient only, without changing the field's validity
  period (which can be set from the Master Data section), since this applies to all the patients.
- To do this, set the new expiry date in the **Custom expiration date** field in the pop-up menu.

otransplant data				Cancel Save	
ansplant administrative data overview	Transplant anamnesis data overview	Transplant examinations			
Next general evaluation	24/02/2017	<b>å</b>			
Comment					
Referred hospital	Hospital Three × ···	Transplantation s	tatus Transpla	intation status 1	
Last name	Thompson		Last update date	03 Jun 2019 09:26	
Birth name			Modified by	demouser	
Gender	Female	Cu	stom expiry date	07/06/2019 00:00	Ħ
Street	92 Ponteland Rd		Expiration date	07 Jun 2019 00:00	
City	HOWLETT END		Reset Custo	m Expiration Date	
City		Patient Tel: Hom	ie (2)		
Patient Tel: Home					
		Patient Tel: M	obile		
Patient Tel: Home		Patient Tel: M Nat. Insurance nu			

- The Expiration Date will now be the same as the Custom Expiry Date just set, and the warning will therefore disappear. The form must be saved to render the changes effective.
- In some case it will be necessary to delete the Custom Expiry Date to enable the validity period set at the general level to regain control of the Expiration Date. This can be done by clicking the Reset Custom Expiration Date button in the pop-up menu.

 To set and reset the Custom Expiry Date, the user must have been awarded the necessary rights by means of FME User Management and the form must be in Edit mode.

				Cancel	Save	
Transplant anamnesis data overview	Transplant examinations					
24/02/2017	<b></b>					
						•••
						- 11
	-	-				
Hospital Three X	🛔 Transpla	antation status	Transplantati	on status 1		• 0
Thompson		Last update o	date 0	3 Jun 2019 (	09:26	
		Modifie	d by d	emouser		
Female		Custom expiry o	date d	d/mm/yyyy	hh:mm	Ħ
92 Ponteland Rd		Expiration of	date 0	3 Jun 2019 (	09:26	
HOWLETT END						
	Patient	: Tel: Home (2)				
	Patie	ent Tel: Mobile				
	Nat. Insu	rance number 6	554321			
	24/02/2017	Z4/02/2017       Hospital Three       X       Transpit       Thompson       Female       92 Ponteland Rd       HOWLETT END       Patient       Patient       Patient       Patient	Z4/02/2017       Hospital Three       X       Thompson       Last update of Modifie       Female       92 Ponteland Rd       HOWLETT END       Patient Tel: Home (2)       Patient Tel: Mobile	Z4/02/2017     Image: Constraint of the second	Z4/02/2017       Image: Construct on status         Hospital Three       X Image: Construct on status         Transplantation status       Transplantation status         Thompson       Last update date       03 Jun 20191         Modified by       demoser         Female       Outsom expiry date       04/rmm/yyyy         92 Ponteland Rd       Expiration date       08 Jun 20191         HOWLETT END       Coston Expiration Cold         Patient Tel: Home (2)       Patient Tel: Mobile	Z4/02/2017         Hospital Three         X Image: Second S

• When in Master Data the settings are that the expiration date is calculated based on the value of another field instead of the last change date of the field itself (see section 4.2.12 of the Service Manual), the popup will show the last update date (which in this case is not used for the calculation of the expiration date) and the value of the defined field.

bal master data									
otransplant settings						Set default for	rall Edit	Print	
'Eurotransplant settings' has been saved s	uccessfully								
urotransplant settings list					1	-			
Field	Field for exp	iration date calculat	ion	Valid for	Туре	Referred hosp	ital Use as defa	iult	
Transplantation status	Next gener	al evaluation		5	Days		~		
Thompson , Josie [166334] X Eurotran	- The second base			-	•				
Thompson , Josie Born 23/10/1950 rotransplant data	(68y) Gender⊊ Cod. 16	6334 Status Active,	/ Iransplant follow-up		<b>3</b>		Cancel	Saus	
Transplant administrative data overview	Transplant anamne	sis data overview	Transplant examina	tions			Cancer	CHE-	
Next general evaluation	24/02/2017	Ŧ							
Comment	0								•••
Comment Referred hospital	Hospital Three	×	å -	[ranspla	ntation stat		antation status		
	<u>Hospital Three</u> Thompson	×	ă.	Franspla		us 🚺 <u>Transpi</u> t update date	antation status 03 Jun 2019		
Referred hospital	and manual and a solar. Car	×	Å	Franspla					
Referred hospital Last name	and manual and a solar. Car	×···	å	Franspla	Las	t update date	03 Jun 201	9 09:26	
Referred hospital Last name Birth name	Thompson	×	Å	Franspla	Las Next gene	t update date Modified by	03 Jun 2019 demouser	9 09:26 7 00:00	
Referred hospital Last name Birth name Gender	Thompson Female	×	Å.	Franspla	Las Next gene Custo	t update date Modified by ral evaluation	03 Jun 2019 demouser 24 Feb 201	9 09:26 7 00:00 yy hh:mm	
Referred hospital Last name Birth name Gender Street	Thompson Female 92 Ponteland Rd	×	Å · · ·	Franspla Par	Las Next gene Custo	t update date Modified by ral evaluation m expiry date xpiration date	03 Jun 2019 demouser 24 Feb 201 dd/mm/yy	9 09:26 7 00:00 yy hh:mm .7 00:00	
Referred hospital Last name Birth name Gender Street City	Thompson Female 92 Ponteland Rd	×···	Å	Pai	Las Next gene Custo	t update date Modified by ral evaluation m expiry date xpiration date	03 Jun 2019 demouser 24 Feb 201 <i>dd/mm/yy</i> 01 Mar 201	9 09:26 7 00:00 yy hh:mm .7 00:00	
Referred hospital Last name Birth name Gender Street City Patient Tel: Home	Thompson Female 92 Ponteland Rd	×···		Patie	Las Next gene Custo E	t update date Modified by ral evaluation m expiry date xpiration date Reset Contro ile	03 Jun 2019 demouser 24 Feb 201 <i>dd/mm/yy</i> 01 Mar 201	9 09:26 7 00:00 yy hh:mm .7 00:00	
Referred hospital Last name Birth name Gender Street City Patient Tel: Home Patient Tel: Work	Thompson Female 92 Ponteland Rd	×		Patie	Las Next gene Custo E nt Tel: Mob	t update date Modified by ral evaluation m expiry date xpiration date Reset Contro ile	03 Jun 2019 demouser 24 Feb 201 <i>dd/mm/yy</i> 01 Mar 201	9 09:26 7 00:00 yy hh:mm .7 00:00	

 Expiry date management and validation is possible for all Eurotransplant section fields with the clock icon beside them, exactly as described for the Transplantation Status field. For fields with the icon of the human figure next to them, only the user who made the last modification to the field is saved, with no date validation system.

Referred hospital	<u>Hospita</u>	I Three	N
Mo	dified by	Demo User	13
WIG	unieu by	Denio Osei	

### **21.1.2 TRANSPLANT PATIENT HISTORY SUMMARY**

The central tab of the Eurotransplant section contains a number of fields relating to the patient's medical history. Many of these data must be kept constantly up to date, and their expiry date is therefore managed exactly as for the Transplantation Status, as described in the previous point (blue box).

Here again, there are some read-only fields, taken from the patient's Medical Data (red box).

otransplant data				Cancel	
nsplant administrative data overview	Transplant anamnesis data overview	Transplant examinations			
Next general evaluation	dd/mm/yyyy	<b>=</b>			
omment					
	1				
Peritoneal dialysis	● Yes ○ No		odialysis	● Yes ○ No	0
Date of first dialysis after transplantation	dd/mm/yyyy				
Blood group	в	Rh	h factor	ccDEe pos	
Renal diagnosis for transplantation	Renal diagnosis for transplantation	Renal diagnosis for transpla	antation		
(ICD10)	_(ICD10)			Drop a file here or click on to open file selector	the button below
Allergy list					
	ergy type Allergy ty	ype specification	Details		
F Date All	ergy type Allergy ty	ype specification	Details		
	imals	ype specification	Details		
Date All 24 Feb 2017 Ar	imals	ype specification	Details		
Date         All           24 Feb 2017         An           23 Feb 2017         Fo	imals		Details t weight	50.00 Kg	
Date     All       24 Feb 2017     An       23 Feb 2017     Fo       records found     Fo	imals od			50.00 Kg	
Date All     24 Feb 2017 An     23 Feb 2017 Fo     records found     Patient height	imals od 168 cm	Patient	t weight		
Date All     24 Feb 2017 Ar     23 Feb 2017 Fo records found     Patient height     Body mass index     Residual diuresis	imals od 168 cm 17.72 Kg/m <sup>2</sup>	Patient ml Finding date of residual c	t weight diuresis	50.00 Kg dd/mm/yyyy	
Date All     24 Feb 2017 Ar     23 Feb 2017 Fo     records found     Patient height     Body mass index     Residual diuresis     (Pre-) Transfusions	imals od 168 cm	Patient ml Finding date of residual c	t weight		
Date All     24 Feb 2017 Ar     23 Feb 2017 Fo records found     Patient height     Body mass index     Residual diuresis     (Pre-) Transfusions Previous organ transplants	imals od 168 cm 17.72 Kg/m² Please select one entry	Patient ml Finding date of residual o Pregr	t weight diuresis		
Date All     24 Feb 2017 An     23 Feb 2017 Fo     records found     Patient height     Body mass index     Residual diuresis     (Pre-) Transfusions  Previous organ transplants Organ Date of first dialysis after transplant	imals od 168 cm 17.72 Kg/m² Please select one entry	Patient ml Finding date of residual o Pregr	t weight diuresis		
Date All     24 Feb 2017 Ar     23 Feb 2017 Fo records found     Patient height     Body mass index     Residual diuresis     (Pre-) Transfusions     Previous organ transplants     Organ Date of first dialysis after transplant	imals od 168 cm 17.72 Kg/m <sup>3</sup> Please select one entry natation Reason for loss of function Date	Patient Patient Inding date of residual c Pregr of function loss	t weight diuresis gnancies		
Date All     24 Feb 2017 Ar     23 Feb 2017 Fo records found     Patient height     Body mass index     Residual diuresis     (Pre-) Transfusions     Previous organ transplants     Organ Date of first dialysis after transplant     Potential living donor available	imals od 168 cm 17.72 Kg/m² Please select one entry	Patient Patient Finding date of residual c Pregr of function loss Bladder c	t weight diuresis gnancies capacity	dd/mm/yyyy	
Date All     24 Feb 2017 Ar     23 Feb 2017 Fo records found     Patient height     Body mass index     Residual diuresis     (Pre-) Transfusions     Previous organ transplants     Organ Date of first dialysis after transplant	imals od 168 cm 17.72 Kg/m <sup>3</sup> Please select one entry natation Reason for loss of function Date	Patient Patient Inding date of residual c Pregr of function loss	t weight diuresis gnancies capacity		
Date All     24 Feb 2017 Ar     23 Feb 2017 Fo records found     Patient height     Body mass index     Residual diuresis     (Pre-) Transfusions     Previous organ transplants     Organ Date of first dialysis after transplant     Potential living donor available     Malignant pre-existing conditions Serious diseases (2)	imals od 168 cm 17.72 Kg/m <sup>2</sup> Please select one entry ntation Reason for loss of function Date	Patient Patient Finding date of residual c Pregr of function loss Bladder c	t weight diuresis gnancies capacity	dd/mm/yyyy	
Date All     24 Feb 2017 An     23 Feb 2017 Fo     records found     Patient height     Body mass index     Residual diuresis     (Pre-) Transfusions     Previous organ transplants     Organ Date of first dialysis after transplant     Potential living donor available     Malignant pre-existing conditions	imals od 168 cm 17.72 Kg/m <sup>2</sup> Please select one entry tation Reason for loss of function Date Yes No Attachment	Patient Patient Finding date of residual c Pregr of function loss Bladder c	t weight diuresis gnancies capacity	dd/mm/yyyy	
Date All     24 Feb 2017 Ar     23 Feb 2017 Fo records found     Patient height     Body mass index     Residual diuresis     (Pre-) Transfusions     Previous organ transplants     Organ Date of first dialysis after transplant     Potential living donor available     Malignant pre-existing conditions Serious diseases (2)	imals od 168 cm 17.72 Kg/m <sup>2</sup> Please select one entry Please select one of function Date Yes No Attachment	Patient Patient Finding date of residual c Pregr of function loss Bladder c	t weight diuresis gnancies capacity	dd/mm/yyyy	
Date All     24 Feb 2017 Ar     23 Feb 2017 Fo records found     Patient height     Body mass index     Residual diuresis     (Pre-) Transfusions     Previous organ transplants     Organ Date of first dialysis after transplar     Potential living donor available     Malignant pre-existing conditions Serious diseases (2)     Diseases name     Diseases date	imals od 168 cm 17.72 Kg/m <sup>2</sup> Please select one entry Please select one of function Date Yes No Attachment	Patient ml Finding date of residual c v Pregr of function loss Bladder c Serious disea the button below to open file selector	t weight diuresis gnancies capacity	dd/mm/yyyy	

Note that this section contains the "Serious Diseases (2)" field, which is a table and has expiry date validation. In this case the field is considered to have been updated whenever any field of any line of the table is changed, when a new line (even an empty one) is added or when a line is deleted.

Diseases date	Attachment	
24/02/2017	Drop a file here or click on the button below to open file selector	
21/02/2017	Drop a file here or click on the button below to open file selector	
	24/02/2017	24/02/2017       Image: Drop a file here or click on the button below to open file selector         21/02/2017       Image: Drop a file here or click on the button below to open file selector

All table fields with expiry date validation behave in the same way as "Serious diseases (2)".

# **21.1.3 TRANSPLANT EXAMINATIONS**

The third tab of the Eurotransplant section contains a long list of fields, most of them of table kind, referring to the patient's examinations (e.g. X-rays, CAT scans, coronary artery angiograms, etc.). All these fields always have to be up to date, so they all have expiry date validation.

Every line of these examinations has the same structure:

- Date of finding: date field relating to the current line
- Attachment: any document attached to the line
- Responsible doctor: doctor responsible for the current line (clinic staff member)
- Doctor's assessment: drop down menu configurable from Master Data (see section 4.2.12 of the Service Manual) containing the physician's evaluation relating to the current line
- Comment of physician: free text field for entering the physician's comment
- Modifier of the evaluation section: the user who last updated the "Evaluation of physician" field of the current line (a value is set automatically by the system)

000002002			
nurse1	<u>test1</u>	хох	<u>Demo User</u>
nurse1	<u>test1</u>	ууу	Demo User
	<u>nurse1</u>	nurse1 test1	nurse1 test1 yyy

This part of the form contains a series of read-only values taken from the patient's Laboratory data.

Unlike the administrative data and patient history data, which are unique for the patient, each laboratory parameter contains a set of fields, some with values and others without, and they are repeated over time. In this section, we show a subset of these fields (useful for Eurotransplant) with the date of last update for each field.

In the form below, we can see that the HBs Ag, HBs Ab Value, HIV status and HIV status (ELISA) values were entered in the Laboratory data of 17/08/2010, and the HBs Ab in the Laboratory data of 14/04/2009

HBsAc (mu/mL + Alpha)			Hbs Ag	Negative	(17/08/201
HBs Ab		(14/04/2009)	HBs Ab Value	46.80 IU/L	(17/08/201
Hbc Ab			HBe Ag		
HBe Ab			HIV status	Negative	(17/08/20)
HIV2 status			HCV status (RIBA or western blot)		
HCV status (RT_PCR)			HCV Rna		
HCV status (ELISA)	Negative	(17/08/2010)	Cytomegalovirus CMV IgG		
Cytomegalovirus CMV IgM			Epstein-Barr virus EBV IgG		
Epstein-Barr virus EBV IgM			Toxoplasmosis IgG		
Toxoplasmosis IgM			VDRL		
Herpes simplex IgG			Herpes simplex IgM		
Herpes zoster HZV-IgG			Herpes zoster HZV-IgM		
Homocysteine					

# **22 APPENDIX**

# 22.1 CHANGE THERAPY MONITOR SESSION PRESCRIPTION

This chapter explains the procedure to be followed to solve the problem caused in case of the following scenario:

- A user creates a new session for a patient on Therapy Monitor, and a 5008 prescription can be downloaded from the Therapy Support Suite because it is currently scheduled for that patient.
- For some reason it might be necessary to change the prescription for a Therapy Monitor session in order to work with a 4008 device (for example, a working 5008 device is currently not available at the site).

There are two possible solutions:

If there is no treatment in the Therapy Support Suite, the solution is the following:

- Create a new prescription in Therapy Support Suite for the desired device (for example 4008)
- Schedule it for the selected patient