



The Surgicom : Discovery Health Governance Project

HOW THE DISCHARGE SUMMARY WORKS

Phil Matley

Chairman: Surgicom

The Essentials

- Discovery Health ID
- Obtaining Consent
- The on-line Discharge Summary
- Billing code 0177



The discharge summary is completed and accessed through Discovery Health ID

HealthID

Fast, up-to-date access to your patients' electronic health records.



Find out more

www.discovery.co.za/healthid

HealthID

Fast, up-to-date access to your patients' electronic health records.



[Find out more](#)

In the patient's Health ID record you will be able to access previous summaries as well as vital information such as a list of the chronic medications that the patient is on as well as pathology results and episodes of care



Features of Health ID



Electronic Health Record

Access patients' data and details of their previous doctor and hospital visits

- Episodes of Care
- Discharge Summaries
- Chronic Medication
- Allergies
- Measurables: BP, Chl, Glucose
- Pathology Results



Electronic Medicine Scripting

Prescribe medicine for chronic and acute conditions



Electronic Chronic Illness Benefit (CIB)

Complete an electronic CIB application form



Web



Ipad



Patients' personal and benefit details

View patients' personal and benefit information



Electronic Referrals

Refer a patient to another healthcare professional with automatic approval on select plans



Consent

Patients can grant consent in real-time by signing on the screen, website, SMS, or via the member app



Call me feature

Provides the opportunity to request a call for any assistance you may require whether it be clinical, technical or administrative



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Features of Health ID



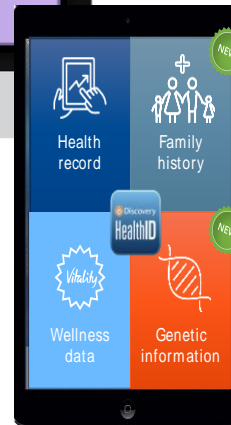
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Ipad



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Consent

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Call me feature

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Consent

In order to access a patient's record on Health ID, the patient's consent is required. Once they have consented to you accessing this, it follows through to the discharge summary and future consultations or procedures with this patient. It is not necessary to get consent on each occasion





Consent

There are 4 ways to get this consent:

- Ipad

If you have the Health ID app on I-pad (recommended), The patient signs on the screen to give consent

- Web

Go to www.discovery.co.za and select 'HealthID Consent'

- Discovery App for smartphones

Most DH patients have the DH app on their smart phone. select HealthID consent

- SMS

Almost everyone can send an **SMS** to 31347: Consent3, patient's date of birth, doctor's individual practice number

eg; Consent3, 19700726, 1543261





Completing the discharge summary step-by-step



Go to www.discovery.co.za/healthid

REGISTER

LOG IN



HOME

HEALTH

LIFE

INSURE

INVEST

VITALITY

CARD

REWARD PARTNERS

Home / Health / HealthID

HealthID

Fast, up-to-date access to your patients' electronic health records.



Find out more

Healthcare professionals

Login

HealthID: The technology that puts your patients' health records in your hands.

By placing important patient information at your fingertips, HealthID provides you with a more complete view of your patient's health history and test results. This improves patient care and reduces the likelihood of serious medical errors and duplicate or unnecessary pathology tests. In addition, HealthID also reduces your administrative burden by making it quick and easy to fill in Chronic Illness Benefit applications, and providing you with the relevant scheme formulary list.

Access HealthID through several platforms

HealthID is available through several platforms, for example:

Log in with your username and password

REGISTER

LOG IN



HOME

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Access HealthID through several platforms

HealthID is available through several platforms, for example:

Log in with your username and password

REGISTER LOG IN

Discovery

HOME HEALTH LIFE INSURE INVEST VITALITY CARD REWARD PARTNERS

Discovery

Home

Please log in to access the page

Username: pmatley

Password:

Log in

are
onals

Login

health

By placing important patient information at your fingertips, HealthID provides you with a more complete view of your patient's health history and test results. This improves patient care and reduces the likelihood of serious medical errors and duplicate or unnecessary pathology tests. In addition, HealthID also reduces your administrative burden by making it quick and easy to fill in Chronic Illness Benefit applications, and providing you with the relevant scheme formulary list.

Access HealthID through several platforms

HealthID is available through several platforms, for example:

A list of your DH patients appears (10 per screen). You can select from this list or enter the patient's DH number here



Patient List

Help Me



Search using member number



10 records per page

Member no	Name & surname	Age	Gender	Contact no	Consent Status
12345678912	[REDACTED]	54	Male	[REDACTED]	Consent granted
12345678912	[REDACTED]	78	Male	[REDACTED]	Consent granted
12345678912	[REDACTED]	51	Female	[REDACTED]	Consent granted
12345678912	[REDACTED]	56	Male	[REDACTED]	Consent granted
12345678912	[REDACTED]	51	Male	[REDACTED]	Consent granted
12345678912	[REDACTED]	82	Female	[REDACTED]	Consent granted
12345678912	[REDACTED]	21	Female	[REDACTED]	Consent granted
12345678912	[REDACTED]	44	Female	[REDACTED]	Consent granted
12345678912	[REDACTED]	69	Male	[REDACTED]	Consent granted
12345678912	[REDACTED]	66	Male	[REDACTED]	Consent granted

Patient List

Help Me

10 records per page

Member no	Name & surname	Age	Gender	Contact no	Consent Status
12345678910	[redacted]	54	Male	[redacted]	Consent granted
12345678910	[redacted]	78	Male	[redacted]	Consent granted
12345678910	[redacted]	51	Female	[redacted]	Consent granted
12345678910	[redacted]	56	Male	[redacted]	Consent granted
12345678910	[redacted]	51	Male	[redacted]	Consent granted
12345678910	[redacted]	82	Female	[redacted]	Consent granted
12345678910	[redacted]	21	Female	[redacted]	Consent granted
12345678910	[redacted]	44	Female	[redacted]	Consent granted
12345678910	[redacted]	69	Male	[redacted]	Consent granted
12345678910	[redacted]	66	Male	[redacted]	Consent granted

Check that the patient has granted consent

Now you are into this patient's Health ID Record



Patient list

Electronic Health Record

Timeline

Loading MyDNA reports

Pathology

Measures and Tracking

Medicine

Notifications

Chronic Applications

AIB Applications

Consultation

Hospital Summaries

Doctor Information



Member name: [Redacted]
Plan type: [Redacted]
Date of birth: 10 Dec 1949 (66)
Allergies: Not captured
Blood type: Not captured

John Hopkins rating

- 2012 > Very High
- 2011 > Very High
- 2010 > Moderate

Quick links

Help Me

Timeline

Filters

Now

22 Jun 16

Pathology Order History

Pathology Results

- CKD-EPI (GFR ESTIMATE)
- MDRD (GFR ESTIMATE)
- U/E + CREAT-S*
- BLOOD COUNT-NO PLATELETS
- PLATELET COUNT*

Now you are into this patient's Health ID Record

Patient list

Electronic Health Record

Timeline

Loading MyDNA reports

Pathology

Measures and Tracking

Medicine

Notifications

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AIB Applications

Consultation

Hospital Summaries

Doctor Information



Member name: [Redacted]
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Date of birth: 10 Dec 1949 (66)
Allergies: Not captured
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2012 > Very High
2011 > Very High
2010 > Moderate

Quick links

Help Me

Timeline

Filters

Now

22 Jun 16

Pathology Order History

Pathology Results

CKD-EPI (GFR ESTIMATE)

MDRD (GFR ESTIMATE)

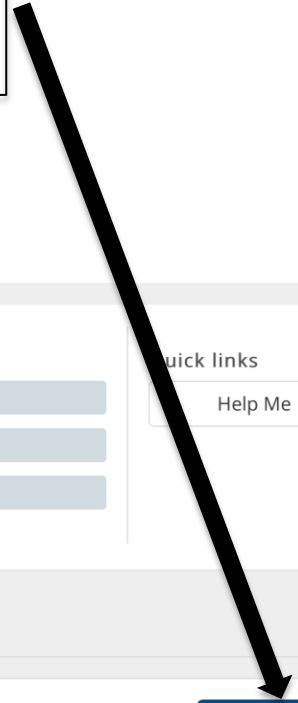
U/E + CREAT-S*

BLOOD COUNT-NO PLATELETS

PLATELET COUNT*

Select the "Hospital Summaries" Option

Previous summaries can be accessed here. Click on “new summary”



Patient list

Electronic Health Record <

Notifications

Chronic Applications

AIB Applications

Consultation <

Hospital Summaries

Doctor Information v

Doctor's Profile

View Disclaimer



Member name:

Plan type:

Date of birth:

Allergies:

Blood type:

10 Dec 1949 (66)

Not captured

Not captured

John Hopkins rating

2012 > Very High

2011 > Very High

2010 > Moderate

Quick links

Help Me

Hospital summaries



Hospital summaries history

New summary

No completed summaries found

The screen displays active authorisations

Patient list

Electronic Health Record <

Notifications

Chronic Applications

AIB Applications

Consultation <

Hospital Summaries

Doctor Information ▾

Doctor's Profile

View Disclaimer



Member name:

Plan type:

Essential Core (005656060)

Date of birth:

10 Dec 1949 (66)

Allergies:

Not captured

Blood type:

Not captured

John Hopkins rating

2012 > Very High

2011 > Very High

2010 > Moderate

Quick links

Help Me

Hospital summaries



Hospital authorisations

This is information that Discovery Health has on record from the pre-authorisation.

Authorisation number	Pre-authorisation description
18467782	Atherosclerosis of arteries of extremities without gangrene

Add summary

Showing 1 to 1 of 1

<< 1 >>

Back

The screen displays active authorisations

Patient list

- Electronic Health Record <
- Notifications
- Chronic Applications
- AIB Applications
- Consultation <
- Hospital Summaries**
- Doctor Information ▾
- Doctor's Profile
- View Disclaimer

Member name: [Redacted]

Plan type: [Redacted]

Date of birth: 10 Dec 1949 (66)

Allergies: Not captured

Blood type: Not captured

John Hopkins rating

- 2012 > Very High
- 2011 > Very High
- 2010 > Moderate

Quick links

Help Me

Hospital summaries

Hospital authorisations

This is information that Discovery Health has on record from the pre-authorisation.

Authorisation number	Pre-authorisation description	
18467782	Atherosclerosis of arteries of extremities without gangrene	Add summary

Showing 1 to 1 of 1

[Back](#)

« 1 »

Select the one that you are doing the summary on

The screen is automatically pre-populated with information from pre-authorisation

AIB Applications

Consultation <

Hospital Summaries

Doctor Information ▾

Doctor's Profile

View Disclaimer

Hospital summaries ⓘ

Admission details

This is information that Discovery Health has on record from the pre-authorisation.

Hospital name	Life Kingsbury Hospital
Authorisation number	18467782
Admission date	21-06-2016
Primary diagnosis on admission	Atherosclerosis of arteries of extremities without gangrene
Other relevant diagnosis on admission	N/A
Comorbidities	Essential (primary) hypertension Hyperlipidaemia, unspecified

Emergency contact for patient

Doctor's name	<input type="text" value="Dr P Matley"/>
Doctor's contact *	<input type="text" value="0216704000"/>

Check that this is correct and click on "next"



Discharge details

Some of the following information has been pre-populated from pre-authorisations but must be updated if anything has changed. Please complete all fields marked with an asterisk(*).

Please indicate the type of hospital care event* Procedural Non-procedural

If a procedure other than consultations was performed, please select the procedural form.

Date you discharged the patient*

Primary diagnosis on discharge*

Other relevant diagnosis on discharge

Add diagnosis

Comorbidities on discharge

Add comorbidity

Code	Comorbidity	
I10	Essential (primary) hypertension	
E785	Hyperlipidaemia, unspecified	

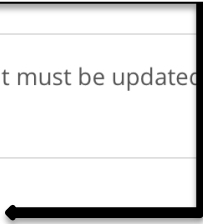


Indicate whether this is a summary for a procedure or non-procedural eg: an admission for cellulitis

Discharge details

Some of the following information has been pre-populated from pre-authorisations but must be updated if anything has changed. Please complete all fields marked with an asterisk(*).

Please indicate the type of hospital care event* Procedural Non-procedural



If a procedure other than consultations was performed, please select the procedural form.

Date you discharged the patient*

21/06/2016

Primary diagnosis on discharge*

Atherosclerosis of arteries of extremities without gangrene

Other relevant diagnosis on discharge

Please enter diagnosis

Add diagnosis

Comorbidities on discharge

Please enter diagnosis

Add comorbidity

Code	Comorbidity	
I10	Essential (primary) hypertension	
E785	Hyperlipidaemia, unspecified	



Discharge details

Some of the following information has been pre-populated with an asterisk(*).

The discharge date is the date DH thinks the patient was discharged. You can change it by clicking on the calendar

Please indicate the type of hospital care event* Procedural Non-procedural

If a procedure other than consultations was performed, please select the procedural form.

Date you discharged the patient*

21/06/2016

Primary diagnosis on discharge*

Atherosclerosis of arteries of extremities without gangrene

Other relevant diagnosis on discharge

Please enter diagnosis

Add diagnosis

Comorbidities on discharge

Please enter diagnosis

Add comorbidity

Code	Comorbidity	
I10	Essential (primary) hypertension	
E785	Hyperlipidaemia, unspecified	



Discharge details

Some of the following information has been pre-populated from pre-authorisations but must be updated if anything has changed. Please complete all fields marked with an asterisk(*).

Please indicate the type of hospital care event* Primary
If a procedure other than consultations was performed, please select 'Procedure'.

Check that the primary diagnosis on discharge is correct

Date you discharged the patient*

Primary diagnosis on discharge*

Other relevant diagnosis on discharge

Add diagnosis

Comorbidities on discharge

Add comorbidity

Code	Comorbidity	
I10	Essential (primary) hypertension	
E785	Hyperlipidaemia, unspecified	



Discharge details

Some of the following information has been pre-populated from pre-authorisations but must be updated if anything has changed. Please complete all fields marked with an asterisk(*).

Please indicate the type of hospital care event* Primary
If a procedure other than consultations was performed, please select a procedure

If you want to change this, click the drop-down menu and start typing the diagnosis or enter the ICD-10 code

Date you discharged the patient*

21/06/2016

Primary diagnosis on discharge*

Atherosclerosis of arteries of extremities without gangrene

Other relevant diagnosis on discharge

Please enter diagnosis

Add diagnosis

Comorbidities on discharge

Please enter diagnosis

Add comorbidity

Code	Comorbidity	
I10	Essential (primary) hypertension	<input type="text"/>
E785	Hyperlipidaemia, unspecified	<input type="text"/>



Discharge details

Some of the following information has been pre-populated from pre-authorisations but must be updated if anything has changed. Please complete all fields marked with an asterisk(*).

Please indicate the type of hospital care event* Procedural Non-procedural

If a procedure other than consultations was performed, please select the procedural form.

Date you discharged the patient*

21/06/2016

You can add an additional diagnosis if necessary

Primary diagnosis on discharge*

Atherosclerosis of arteries of extremities without gangrene ▼

Other relevant diagnosis on discharge

Please enter diagnosis ▼

Add diagnosis

Comorbidities on discharge

Please enter diagnosis ▼

Add comorbidity

Code	Comorbidity	
I10	Essential (primary) hypertension	
E785	Hyperlipidaemia, unspecified	



Discharge details

Some of the following information has been pre-populated from pre-authorisations but must be updated if anything has changed. Please complete all fields marked with an asterisk(*).

Please indicate the type of hospital care event* Procedural Non-procedural

If a procedure other than consultations was performed, please select the procedural form.

Date you discharged the patient*

21/06/2016

Click here to access the drop down menu and start typing a key word in the diagnosis.

Primary diagnosis on discharge*

Atherosclerosis of arteries of extremities without gangrene ▼

Other relevant diagnosis on discharge

Please enter diagnosis ▼

Add diagnosis

Comorbidities on discharge

Please enter diagnosis ▼

Add comorbidity

Code	Comorbidity	
I10	Essential (primary) hypertension	
E785	Hyperlipidaemia, unspecified	



Discharge details

Some of the following information has been pre-populated from pre-authorisations but must be updated if anything has changed. Please complete all fields marked with an asterisk(*).

Please indicate the type of hospital care event* Procedural Non-procedural

If a procedure other than consultations was performed, please select the procedural form.

Date you discharged the patient*

21/06/2016

Or if you know the ICD code enter it here

Primary diagnosis on discharge*

Atherosclerosis of arteries of extremities without gangrene

Other relevant diagnosis on discharge

Please enter diagnosis

Add diagnosis

Comorbidities on discharge

Please enter diagnosis

Add comorbidity

Code	Comorbidity	
I10	Essential (primary) hypertension	
E785	Hyperlipidaemia, unspecified	



Discharge details

Some of the following information has been pre-populated from pre-authorisations but must be updated if anything has changed. Please complete all fields marked with an asterisk(*).

Please indicate the type of hospital care event* Procedure

If a procedure other than consultations was performed, please select

Date you discharged the patient*

21/06/2016

Primary diagnosis on discharge*

Atherosclerosis of arteries of extremities without gangrene

Other relevant diagnosis on discharge

Please enter diagnosis

aneu

I713 - Abdominal aortic aneurysm, ruptured

I714 - Abdominal aortic aneurysm, without mention of rupture

M8550/0 - Acinar cell adenoma, benign

M8550/6 - Acinar cell carcinoma, malignant, metastatic site

M8550/3 - Acinar cell carcinoma, malignant, primary site

M8550/1 - Acinar cell tumour, uncertain whether benign or malignant

I219 - Acute myocardial infarction, unspecified

M8550/6 - Acinar cell carcinoma, malignant, metastatic site

In this example I want to add "abdominal aortic aneurysm" as the additional diagnosis. I have selected the drop down menu and typed "aneu..."



Add diagnosis

Add comorbidity





Discharge details

Some of the following information has been pre-populated from pre-authorisations but must be updated if anything has changed. Please complete all fields marked with an asterisk(*).

Please indicate the type of hospital care event* Procedure
If a procedure other than consultations was performed, please select

Date you discharged the patient*

21/06/2016

Primary diagnosis on discharge*

Atherosclerosis of arteries of extremities without gangrene

Other relevant diagnosis on discharge

Please enter diagnosis

aneu

- I71.3 - Abdominal aortic aneurysm, ruptured
- I71.4 - Abdominal aortic aneurysm, without mention of rupture**
- M8550/0 - Acinar cell adenoma, benign
- M8550/6 - Acinar cell carcinoma, malignant, metastatic site
- M8550/3 - Acinar cell carcinoma, malignant, primary site
- M8550/1 - Acinar cell tumour, uncertain whether benign or malignant
- I219 - Acute myocardial infarction, unspecified
- M8550/6 - Acinar cell carcinoma, malignant, metastatic site

I can select I71.4 “Abdominal aortic aneurysm, without mention of rupture” from the drop-down menu



Add diagnosis

Add comorbidity





Discharge details

Some of the following information has been pre-populated from pre-authorisations but must be updated if anything has changed. Please complete all fields marked with an asterisk(*).

Please indicate the type of hospital care event* Procedure

If a procedure other than consultations was performed, please select

Date you discharged the patient*

21/06/2016

Primary diagnosis on discharge*

Atherosclerosis of arteries of extremities without gangrene

Other relevant diagnosis on discharge

Abdominal aortic aneurysm, without mention of rupture

Add diagnosis

Comorbidities on discharge

Please enter diagnosis

Add comorbidity

Code	Comorbidity	
I10	Essential (primary) hypertension	
E785	Hyperlipidaemia, unspecified	

Alternatively, if I know the ICD-10 code I can simply enter it. If the drop-down menu doesn't have what you want, you will have to add the ICD-10 code manually





Discharge details

Some of the following information has been pre-populated from pre-authorisations but must be updated if anything has changed. Please complete all fields marked with an asterisk(*).

Please indicate the type of hospital care event* Procedure

If a procedure other than consultations was performed, please select

Date you discharged the patient*

21/06/2016

Primary diagnosis on discharge*

Atherosclerosis of arteries of extremities without gangrene

Other relevant diagnosis on discharge

Abdominal aortic aneurysm, without mention of rupture

Add diagnosis

Comorbidities on discharge

Please enter diagnosis

Add comorbidity

Code	Comorbidity	
I10	Essential (primary) hypertension	
E785	Hyperlipidaemia, unspecified	

When you are happy with the additional diagnosis click "add diagnosis" to enter this into the record





Discharge details

Some of the following information has been pre-populated from pre-authorisations but must be updated if anything has changed. Please complete all fields marked with an asterisk(*).

Please indicate the type of hospital care event* Procedure
If a procedure other than consultations was performed, please select

Date you discharged the patient*

21/06/2016

Primary diagnosis on discharge*

Atherosclerosis of arteries of extremities without gangrene

The additional diagnosis has now been entered into the record

Other relevant diagnosis on discharge

Please enter diagnosis

Add diagnosis

Code	Other relevant diagnosis
I714	Abdominal aortic aneurysm, without mention of rupture

Comorbidities on discharge

Please enter diagnosis

Add comorbidity

Code	Comorbidity
I10	Essential (primary) hypertension
E785	Hyperlipidaemia, unspecified



Discharge details

Some of the following information has been pre-populated from pre-authorisations but must be updated if anything has changed. Please complete all fields marked with an asterisk(*).

Please indicate the type of hospital care event* Procedural Non-procedural

If a procedure other than consultations was performed, please select the procedural form.

Date you discharged the patient*

21/06/2016

Primary diagnosis on discharge*

Atherosclerosis of arteries of extremities without gangrene

Other relevant diagnosis on discharge

Please enter diagnosis

Code	Other relevant diagnosis
I714	Abdominal aortic aneurysm

The patient's recorded co-morbidities are already listed

Comorbidities on discharge

Please enter diagnosis

Add comorbidity

Code	Comorbidity
I10	Essential (primary) hypertension
E785	Hyperlipidaemia, unspecified





Discharge details

Some of the following information has been pre-populated from pre-authorisations but must be updated if anything has changed. Please complete all fields marked with an asterisk(*).

Please indicate the type of hospital care event* Procedural Non-procedural

If a procedure other than consultations was performed, please select the procedural form.

Date you discharged the patient*

Primary diagnosis on discharge*

Other relevant diagnosis on discharge

Code	Other relevant diagnosis
I714	Abdominal aortic aneurysm

But you can add another by clicking the drop-down menu

Comorbidities on discharge

Code	Comorbidity	
I10	Essential (primary) hypertension	
E785	Hyperlipidaemia, unspecified	

In this example I want to add “asthma” so I start typing asth...
and then select what I want from the drop-down menu

Comorbidities on discharge

Please enter diagnosis

asth

▼ R005 - Abnormal findings in specimens from male genital organs, unspecified abnormal finding

Y556 - Adverse effects in therapeutic use, antiasthmatics, not elsewhere classified

J301 - Allergic rhinitis due to pollen

J459 - Asthma, unspecified

J60 - Coalworkers pneumoconiosis

G702 - Congenital and developmental myasthenia

F607 - Dependent personality disorder

M525 - Disorders of accommodation

Add comorbidity



Add procedures

In this example I want to add “asthma” so I start typing asth... and then select what I want from the drop-down menu

Comorbidities on discharge

Please enter diagnosis ▼

asth|

- ✓ **R869** - Abnormal findings in specimens from male genital organs, unspecified abnormal finding
- Y556** - Adverse effects in therapeutic use, antiasthmatics, not elsewhere classified
- J301** - Allergic rhinitis due to pollen
- J459** - Asthma, unspecified
- J60** - Coalworkers pneumoconiosis
- G702** - Congenital and developmental myasthenia
- F607** - Dependent personality disorder
- H525** - Disorders of accommodation

Add comorbidity



Add procedures

Click on "Add comorbidity" to enter the new comorbidity into the record



Comorbidities on discharge

Please enter diagnosis



Add comorbidity

Code

Comorbidity

I10 Essential (primary) hypertension



E785 Hyperlipidaemia, unspecified



J459 Asthma, unspecified



Procedures performed*

Date*

Search for an RPL code



22/06/2016

Add procedures

Significant procedures other than the principle procedure

New chronic medicines after discharge

Medication

Search using medicine description, NAPPI code or active ingredient





Discharge details

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Please indicate the type of hospital care event* Procedural Non-procedural

If a procedure other than consultations was performed, please select the procedural form.

Date you discharged the patient*

Primary diagnosis on discharge*

Other relevant diagnosis on discharge

Code	Other relevant diagnosis
I714	Abdominal aortic aneurysm

If the drop-down menu doesn't have what you are looking for you will have to add the ICD-10 code manually

Comorbidities on discharge

Add comorbidity

Code	Comorbidity
I10	Essential (primary) hypertension
E785	Hyperlipidaemia, unspecified





Discharge details

Some of the following information has been pre-populated from pre-authorisations but must be updated if anything has changed. Please complete all fields marked with an asterisk(*).

Please indicate the type of hospital care event* Procedural Non-procedural

If a procedure other than consultations was performed, please select the procedural form.

Date you discharged the patient*

21/06/2016

Primary diagnosis on discharge*

Atherosclerosis of arteries of extremities without gangrene

Other relevant diagnosis on discharge

Please enter diagnosis

Code	Other relevant diagnosis
I714	Abdominal aortic aneurysm

And then click "add comorbidity"

Comorbidities on discharge

Please enter diagnosis

Code	Comorbidity		
I10	Essential (primary) hypertension		
E785	Hyperlipidaemia, unspecified		

Comorbidities on discharge

Please enter diagnosis

Code

Comorb

I10

Essentia

E785

Hyperlip

J459

Asthma, unspecified

Procedures performed*

Search for an RPL code

Date*

22/06/2016

Add procedures

Significant procedures other than the principle procedure

Now enter the procedure performed. The quickest way is to simply enter the RPL code eg 5060 but if you don't know the code use the drop-down menu

New chronic medicines after discharge

Medication

Search using medicine description, NAPPI code or active ingredient

Comorbidities on discharge

Please enter diagnosis

Code

Comorb

I10

Essentia

E785

Hyperlip

J459

Asthma, unspecified

Comorbidity



If there was more than one operation during that admission enter the additional operations by changing the date on which the subsequent operations were performed

Procedures performed*

Search for an RPL code



Date*

22/06/2016

Add procedures

Significant procedures other than the principle procedure

New chronic medicines after discharge

Medication

Search using medicine description, NAPPI code or active ingredient



Comorbidities on discharge

Please enter diagnosis

Code

Comorb

I10

Essentia

E785

Hyperlip

J459

Asthma, unspecified



**For example, I need to code for stenting of the SFA
but I can't remember the RPL code. I click on the
drop-down menu**

Procedures performed*

Search for an RPL code



Date*

22/06/2016

Add procedures

Significant procedures other than the principle procedure

New chronic medicines after discharge

Medication

Search using medicine description, NAPPI code or active ingredient



Comorbidities on discharge

Please enter diagnosis

Code

Comorb

I10

Essentia

E785

Hyperlip

J459

Asthma, unspecified

morbidity



If I start typing “stent...” a list of all the stent codes appears. I can select “5062 Stent insertion: Femoral popliteal bifurcation” by clicking on that option

Procedures performed*

Date*

Search for an RPL code

22/06/2016

Add procedures

stent

angioplasty (PIA)

5060 | Stent insertion: Iliac/subclavian/AV fistula - including percutaneous transluminal angioplasty (PTA)

5062 | Stent insertion: Femoral popliteal bifurcation, axillary and brachial - including percutaneous transluminal angioplasty (PTA)

5064 | Stent insertion: Sub-popliteal - including percutaneous transluminal angioplasty (PTA)

5066 | Stent insertion: Renal/visceral/brachiocephalic - including percutaneous transluminal angioplasty (PTA)



Comorbidities on discharge

Please enter diagnosis

Comorbidity

Code

Comorbidity

I10

Essential hypertension

E785

Hyperlipidaemia

J459

Asthma, unspecified



And then click “add procedure”

Procedures performed*

Date*

Search for an RPL code

stent

angioplasty (PIA)

5060 | Stent insertion: Iliac/subclavian/AV fistula - including percutaneous transluminal angioplasty (PTA)

5062 | Stent insertion: Femoral popliteal bifurcation, axillary and brachial - including percutaneous transluminal angioplasty (PTA)

5064 | Stent insertion: Sub-popliteal - including percutaneous transluminal angioplasty (PTA)

5066 | Stent insertion: Renal/visceral/brachiocephalic - including percutaneous transluminal angioplasty (PTA)

22/06/2016

Add procedures



**The correct procedure code and text now appears
in the record**

Comorbidities on discharge

Please enter diagnosis

comorbidity

Code

Comorbidity

I10

Essential hypertension

E785

Hyperlipidaemia, unspecified

J459

Asthma, unspecified

Procedures performed*

Date*

Search for an RPL code



22/06/2016

Add procedures

Significant procedures other than the principle procedure

Date

Procedure code

Description

22-06-2016

5062

Stent insertion: Femoral popliteal bifurcation, axillary and brachial - including percutaneous transluminal angioplasty (PTA)



Comorbidities on discharge

Please enter diagnosis



Add comorbidity

Code

Comorbidity

I10 Essential (primary) hypertension



E785 Hyperlipidaemia, unspecified



J459 Asthma, unspecified



Procedures performed*

Date*

Search for an RPL code



22/06/2016

Add procedures

Significant procedures other than the principle procedure

Date

Procedure code

De

22-06-2016

5062

Ste

per

Insert any new chronic medication that you have put the patient on. Don't include short-term medication such as analgesics or anti-emetics

New chronic medicines after discharge

Medication

Search using medicine description, NAPPI code or active ingredient



plav

Plavix

75mg

Schedule: 3

TAB

Qty: 28

Operative or post-operative complications

Comorbidities on discharge

Please enter diagnosis



Add comorbidity

Code

Comorbidity

I10 Essential (primary) hypertension



E785 Hyperlipidaemia, unspecified



J459 Asthma, unspecified



Procedures performed*

Date*

Search for an RPL code



22/06/2016

Add procedures

Significant procedures other than the principle procedure

Date

Procedure code

De

22-06-2016

5062

Ste
per

In this example I am selecting "plavix" for the SFA stent. I simply start typing "plav.." and the correct drug and dosage should appear

New chronic medicines after discharge

Medication

Search using medicine description, NAPPI code or active ingredient



plav

Plavix

75mg

Schedule: 3

TAB

Qty: 28

Operative or post-operative complications

Now record any complications using the Clavien-Dindo classification. The default is “Grade 0 – No complications”. If this is correct leave it undisturbed

Operative or post-operative complications

Clavien-Dindo classification*

Grade 0 - No Complications

Scopes and other diagnostic procedures not involving incisions are excluded

Follow-up care

Has a follow-up appointment been scheduled?*

No appointment necessary

Supporting notes

Comments

Back

Save

If you click on the complication field it will display the classification. Simply click on the option that you want

Operative or post-operative complications

Clavien-Dindo classification*

✓ Grade 0 - No Complications

- Grade I - Any deviation from the normal post-op course. Includes infections opened at the bedside
- Grade II - Requiring pharmacological treatment with drugs other than routine post-op
- Grade IIIa - Requiring surgical, endoscopic, or radiological intervention NOT under general anesthesia
- Grade IIIb - Requiring surgical, endoscopic, or radiological intervention under general anesthesia
- Grade IV - Life-threatening complication requiring ICU management
- Grade IVa - Single organ dysfunction (including dialysis)
- Grade IVb - Multiorgan dysfunction
- Grade V - Death of a patient

No appointment necessary

Supporting notes

Comments

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Save

A table of possible complications appears: Click on the appropriate box

Operative or post-operative complications

Clavien-Dindo classification*

Grade I - Any deviation from the normal post-op course. Includes infections opened at the bedside

Scopes and other diagnostic procedures not involving incisions are excluded

Please select at least one complication*

Complications

- Un-planned re-operation
- Unplanned ICU / HC
- Prolonged hospital stay
- Mortality
- Other

Bowel

- Anastomotic leak
- Bowel obstruction
- Fistula
- GIT bleed
- Ileus

Cardiac

- Acute CCF
- Angina / MI
- Arrest
- Arrhythmia

Neurological

- Delirium / confused
- Seizures
- Stroke / focal neurology

Respiratory

- Atelectasis
- Pneumonia
- Pulmonary embolism

Urinary

- Acute renal failure
- Dialysis
- Urine retention
- UTI

Vascular

- Acute arterial occlusion
- Arterial false aneurysm
- DVT
- Graft sepsis
- Line sepsis

Wound Complications

- Superficial sepsis
- Wound abscess
- Wound dehiscence

Other



If the complication you are looking for is not on the menu, use this box to enter a short description eg “small groin haematoma”

Operative or post-operative complications

Clavien-Dindo classification*

Grade I - Any deviation from the normal post-op course. Includes infections opened at the bedside

Scopes and other diagnostic procedures not involving incisions are excluded

Please select at least one complication*

Complications

- Un-planned re-operation
- Unplanned ICU / HC
- Prolonged hospital stay
- Mortality
- Other

Bowel

- Anastomotic leak
- Bowel obstruction
- Fistula
- GIT bleed
- Ileus

Cardiac

- Acute CCF
- Angina / MI
- Arrest
- Arrhythmia

Neurological

- Delirium / confused
- Seizures
- Stroke / focal neurology

Respiratory

- Atelectasis
- Pneumonia
- Pulmonary embolism

Urinary

- Acute renal failure
- Dialysis
- Urine retention
- UTI

Vascular

- Acute arterial occlusion
- Arterial false aneurysm
- DVT
- Graft sepsis
- Line sepsis

Wound Complications

- Superficial sepsis
- Wound abscess
- Wound dehiscence

Other

Small groin haematoma

**This menu will not appear if you selected “Grade 0-
No Complications” or if you are doing the summary
for a non-procedure event**

Operative or post-operative complications

Clavien-Dindo classification*

Grade I - Any deviation from the normal post-op course. Includes infections opened at the bedside

Scopes and other diagnostic procedures not involving incisions are excluded

Please select at least one complication*

Complications

- Un-planned re-operation
- Unplanned ICU / HC
- Prolonged hospital stay
- Mortality
- Other

Bowel

- Anastomotic leak
- Bowel obstruction
- Fistula
- GIT bleed
- Ileus

Cardiac

- Acute CCF
- Angina / MI
- Arrest
- Arrhythmia

Neurological

- Delirium / confused
- Seizures
- Stroke / focal neurology

Respiratory

- Atelectasis
- Pneumonia
- Pulmonary embolism

Urinary

- Acute renal failure
- Dialysis
- Urine retention
- UTI

Vascular

- Acute arterial occlusion
- Arterial false aneurysm
- DVT
- Graft sepsis
- Line sepsis

Wound Complications

- Superficial sepsis
- Wound abscess
- Wound dehiscence

Other



Indicate what follow-up arrangements have been made. The default is “no appointment necessary”

Follow-up care

Has a follow-up appointment been scheduled?*

No appointment necessary

Supporting notes

Comments

Back

Save

If you click on this field a drop-down menu will allow you to choose who will be seeing the patient again

Follow-up care

- Appointment is scheduled with me
- Appointment to be scheduled with me
- Appointment to be scheduled with another doctor
- No appointment necessary



Supporting notes

Comments

Back

Save

And when that will be. Select the number of days, weeks, months or years

Follow-up care

Has a follow-up appointment been scheduled?*

Appointment is scheduled with me

In how many days will the appointment be scheduled?

1

Months

Supporting notes

Comments

Back

Save

**The final field is purely optional:
If you choose to use it you can enhance the detail in
the final PDF report which you will be able to print,
save or email (eg :to the referring doctor)
You can simply type the text in here or copy and
paste from another source**

Follow-up care

Has a follow-up appointment been scheduled?

Appointment is scheduled with me

1

Months

Supporting notes

Comments



Back

Save

In this example I have made a note referring to the abdominal aortic aneurysm that was detected and added as a secondary diagnosis

Follow-up care

Has a follow-up appointment been scheduled?

Appointment is scheduled with me

1

Months

Supporting notes

Comments

An aortic aneurysm was detected on angiography. On ultrasound it measures 4.5cm. This requires follow-up with a repeat ultrasound in 6 months.

Back

Save

Follow-up care

Has a follow-up appointment been scheduled?*

Appointment is scheduled with me

In how many days will the appointment be scheduled?

1

Months ▾

Supporting notes

Comments

An aortic aneurysm was detected on angiography.

**The summary has been completed. Simply click on
“save”**

Back

Save

**The PDF file will be displayed. Click “download”
and the PDF can be printed or emailed**

1

All captured information is displayed on the PDF. As well as all relevant clinical information as part of the member’s Electronic Health Record information

2

This PDF can be printed and/ or shared with other health professionals via email

3

Returns the user to the history page

Hospital summary

2 Download View in a new window

Hospital Summary Form

1 Patient Information

Full name:	Mr Shbbcfjmkkb Krbbcfjmkkb
Membership number:	504064530

Hospital Event Information

Hospital name:	GARDEN CITY CLINIC
Authorisation number:	18314788
Admission date:	2016-05-02
Primary diagnosis on admission:	(K610) Anal abscess
Other relevant diagnosis on admission:	N/A
Comorbidities on admission:	N/A

3 Done

Accurate Coding

- Enter the discharge summary as completely as you can
- Remember that your profile with Discovery Health is based on this information
- Entering all the co-morbidities, additional diagnoses and complications helps us to understand why this particular patient may be different to the “average”



The discharge summary has been completed

- Once you have pressed “save” and downloaded the PDF it is not possible to go back and change anything
- Additional information (such as a histology result that was not available at the time of doing the discharge summary) can be subsequently added into the notes section of the Health ID record.



Billing Code 0177

- Add 0177 your account. No ICD-10 code required
- This is EDI enabled and understood by the various switch houses
- R 380 will be paid to you directly by DHMS
- This is regardless of the patient's plan type or savings status
- It is never paid by the patient



