
161. How well is clinical decision support implemented in general practice software?

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Background

A range of clinical decision support (CDS) features are offered in general practice electronic prescribing systems (ePS) in Australia. CDS systems can have benefits for GPs and their patients but can also have unintended consequences. These systems are generally not independently evaluated and there is no certification system to ensure their quality and reliability. Features of ePS to improve quality and safety and that are useful to clinicians and patients have previously been identified. This study evaluated CDS features in general practice software to assess which recommended features were implemented.

Methods

Seven commonly used ePS in Australia were evaluated to find out if 22 CDS features were implemented.

Results

CDS implementation varied markedly in the 7 systems, with a range of 15 to 60% of the 20 scored features being fully implemented. All systems provided CDS for drug-drug interactions and drugs in pregnancy. Some systems provided CDS for therapeutic duplication (n=3), drug-condition contraindications (n=3) and drug use in renal impairment (n=2). There was little or no CDS for harmful drug dosage regimens or for drug safety warnings issued by regulatory authorities.

Discussion

This study demonstrates there is high variability in the implementation of CDS in Australia. A significant barrier to CDS implementation is viable access to a range of suitable high quality, evidence-based knowledgebases in appropriate formats. We also need to demonstrate the benefits of good CDS in the Australian context and provide guidance on priorities and models of implementation. A guiding body is required to bring stakeholders together and coordinate efforts in this area, including development of processes to independently test and certify knowledgebases and CDS systems.

Speaker Abstracts