

# Emergency Hormonal Contraception (EHC)

## How to input consultation on neo360

[www.needleex.co.uk/secure](http://www.needleex.co.uk/secure)

### Select 'Enhanced Services' tab

#### DETAILS

- **Input Client Details:**

Gender                      Date of Birth                      → **click find**

*NOTE* provision of this service can NOT be anonymous – details have to be attributed so information can be passed on to GP practices

- **Define further by Secret Question:**

Has the patient accessed this 'new' service before?

- If yes they will already have selected their secret question you can select the correct patient from the list of questions and answers

OR

- If no they will need to select a secret question and answer.

Secret Questions include:

Favourite City?

Favourite Colour?

Place of Birth?

**Remember:** You can **view 'Transaction History'** before continuing to consultation – this allows you to see details of previous consultations (inc conditions, OTC medications, referrals made).

#### QUESTIONS

- **Which doctors surgery is the client registered with?**

- Start typing in box and it will predict surgery from the list in Tameside & Glossop

OR

- Type in 'any' for GP surgery Greater Manchester - **please type in name of surgery in 'Notes' section.**

**NOTE:** If you do not record the details of the out of area GP practice in the notes section you may not get paid for the transaction!

- **Does the client pay for prescriptions?**

- Select from drop down box:                      ➤ No                      ➤ Yes

\*\* This is a required field but please note that EHC is always required free of charge to patient via the pharmacy enhanced service \*\*

- **Is this the client or a representative?**

Client → ok to proceed to consultation

Representative of client over 16 years → for EHC consultation client must be present so need to discontinue the consultation and request client attend in person

Representative of client under 16 years → for EHC consultation client must be present so need to discontinue the consultation and request client attend in person.

#### ITEMS

Select Emergency Hormonal Contraception (EHC) from the list of enhanced services to choose from (others options minor ailments and minor eye conditions (MEC) dispensing service).

Answer relevant questions by ticking boxes as appropriate

<b>QUESTION 1</b> <b>EHC consultation undertaken?</b>	No - not required	
	Yes - consultation by accredited pharmacist undertaken  ** please record pharmacist name in notes **	Confirm all that apply: <ul style="list-style-type: none"> <li>Assessment of patient need has been undertaken</li> <li>Advice has been given re: ectopic pregnancy</li> <li>Information has been given re: option for copper coil</li> <li>Information has been given re option to have long acting contraception</li> <li>Advice has been given re: attending Sexual Health Services for STI screening</li> <li>Considered client age &amp; competence (Frazer Guidelines)</li> </ul>
<b>QUESTION 2.</b> <b>Levonorgestrel Supplied?</b>	<b>No</b> – not required	
	<b>No</b> - patient declined treatment	
	<b>No</b> – referred on to other services	<ul style="list-style-type: none"> <li>Confirm patient met exclusion criteria</li> </ul>
	<b>Yes</b> – Single dose of Levonorgestrel 1500mcg Tablet supplied	Confirm all that apply: <ul style="list-style-type: none"> <li>patient met inclusion criteria</li> <li>UPSI was within 72 hours</li> <li>dose taken in pharmacy</li> <li>manufacturers Patient Information Leaflet supplied</li> <li>dose taken away</li> </ul>
	<b>Yes</b> - Double dose (TWO Tablets) Levonorgestrel 1500mcg Supplied	<ul style="list-style-type: none"> <li>Confirm patient is taking enzyme inducing medication</li> </ul>
	<b>Yes</b> - Repeat single dose Levonorgestrel 1500mcg Tablet Supplied	<ul style="list-style-type: none"> <li>Confirm that patient has vomited within 3 hours of taking initial dose</li> </ul>
<b>QUESTION 3.</b> <b>Chlamydia Screening Offered (Aged 15-25 years)?</b>	Offered AND supplied	
	Offered but NOT accepted	

### OPTION

**Save or Cancel** **DON'T FORGET TO SAVE YOUR CONSULTATION**

If you leave the page without saving everything is lost!

CLARE LIPTROTT

### **Pharmacist providing this service must have:**

1. Received, read, understood and signed the Patient Group Direction (PGD) Version 16th March 2016, for the supply / administration of LEVONORGESTREL without prescription for a named individual
2. Agree to work within its confines
3. Have fulfilled the staff group criteria contained within page one of the PGD
4. Completed, and submitted to Tameside Council, a copy of the self-declaration of competence to deliver an Emergency Contraception (EC) hosted by CPPE.