





# NCIS Newsletter February 2025

### **Go Lives**

NCIS has now been rolled out across 20 hospitals, with Naas General Hospital going live most recently on December 12th. University Hospital Limerick hosted its first Tumour Conference on May 17th, while Sligo University Hospital implemented the Tumour Conference (MDM) on March 22nd. Tipperary University Hospital also went live with SACT on March 11th.

## SVUH NCIS Team Wins 2024 Staff Recognition Award

**Celebrating Accomplishment** 



The NCIS Project Team at St Vincent's University Hospital has been honoured with the SVUH Staff Recognition Award for Quality Improvement, recognising their work in implementing NCIS.

Congratulations to the SVUH Project Team for this well-deserved recognition.



Go - Live Naas General Hospital

### **New Website Links**

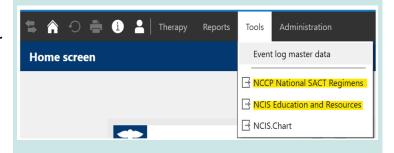
The Tools menu in NCIS.Med has two new web page links available:

### 1. NCCP National SACT Regimens

This is a link to the web page for the NCCP National SACT Regimens which includes all regimens as well as supporting documentation (such as antiemetic classifications).

#### 2. NCIS Education and Resources

This is the web page that includes all NCIS Guides, Briefing Notes and Regimen/Drug Lists



### **Education & Resources**

Training Guides & Training Videos are available on HSELand (navigate to the Discovery Zone & search for NCIS) Available here







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## **User Group Spotlight**

The NCIS User Group was inaugurated in August 2020 with membership from just the two hospitals that were live on NCIS at that time. It has grown to include members from over twenty hospitals and serves as an active forum for NCIS users to link in with each other nationally to see how other hospitals manage their workflows, discuss functionality and changes requests. It is run and chaired by the NCIS Users approximately every 6-8 weeks, with the NCIS Office providing administrative support. Occasionally the user group has ad hoc meetings on specific topics that are of interest, to discuss the item in depth. Users can submit requests for these type of meetings to the Chair of the User Group for consideration.

The NCIS User Group covers all aspects of NCIS.Chart and NCIS.Med from clerical support, physician ordering, nursing administration and assessment forms, pharmacy preparing and dispensing. There is also a Subgroup for MDM Users, where MDM conference specific items are discussed. Users with an interest in participating should request inclusion on the User Group invite list via their local NCIS administrator/superuser.

Often requests for change are discussed and progressed through the User Groups, to the NCIS Implementation Group for consideration, and so involvement from hospitals in this group helps to shape the ongoing development and improvement of the NCIS system.

Items that have been discussed and/or actioned to date include:

- Business Continuity
- Scheduling
- •Desired enhancements to the medication ordering functionality
- •Requests to NCIS office
  - ♦Additional guidance documents/ videos
  - **Additional flags or statuses in NCIS Med**
  - ♦ Creatinine capture and application rules/formulae
  - ♦ Regimen layout & content changes
  - **OHypersensitivity medication options**
  - ♦IVIG
  - ♦Access control queries e.g. NCRI users, UUID barcode question
  - **♦**Settings

For User Group General Enquires: <a href="mailto:ncis@cancercontrol.ie">ncis@cancercontrol.ie</a>

NCIS User Group Chairperson contact details: Tadhg Reddan email: tadhgreddan@svhg.ie

MDM Subgroup Chairperson contact details: Peter Kidd email: peter.kidd@hse.ie

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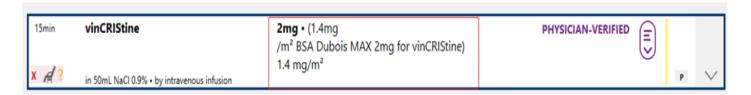


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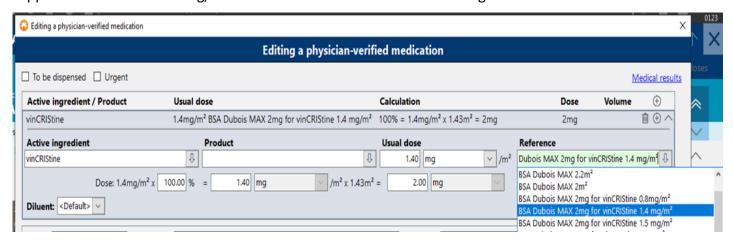
## **Learning Point**

## **Modification of Medicines with a Dose Capping Formula**

Reference formulas are included when a dose calculation is required, for example all medications based on body surface area in adult SACT regimens include the BSA Dubois reference formula. Reference formulas



are also utilised in NCIS where dose capping is required, for example below the reference formula has been applied for vincristine 1.4mg/m2 to ensure the dose never exceeds 2mg.



The reference formula applied can be altered by choosing from the drop down list in the reference section of the edit medication screen.

It is possible to modify any aspect of a medication that is planned, or physician verified **BUT** if a medication specific dose capping formula has been applied for example with vinCRIStine, DACTINomycin, oral cyclophosphamide the reference formula should also be manually adjusted before dose modification so that the correct BSA is used in the dose calculation.

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