

How to upgrade from ScriptBase 3 to ScriptBase 4

Introduction

Thank you for your interest in ScriptBase 4. This ‘how to’ guide is for people who already have a licensed copy of ScriptBase 3 installed on their computers and are considering an upgrade.

The upgrade process is **not** as quick and easy as previous upgrades, and not as easy as future upgrades of ScriptBase 4. If you wish to upgrade, it is **vital** that you read this document before you begin and follow the instructions carefully.

You are welcome to install ScriptBase 4 and import data from ScriptBase 3 even if you are not yet sure whether to purchase a license. The new version will run as a sixty-day trial, so you can evaluate the new features before making a decision.

**** Warning ****

This upgrade process may require re-setting the drug prescribed by individual prescriptions – you must take considerable care to ensure prescriptions are correct. To highlight a key risk, you must make sure the strength of drugs is the same and not just the dose.

You may for example previously have used 10mg/mL amps – take care not to switch to 25mg/mL amps without changing the dose accordingly.

The new Orange guidelines recommend 25mg/mL but earlier versions of ScriptBase (pre-guidelines) shipped with 10mg/mL amps as a standard drug on the database.

How long will the upgrade take

This upgrade requires that you set aside some time.

The first stage is to download and install the software. This takes only a few minutes.

The second stage is to run ScriptBase 4 for the first time. This may take several hours, depending on the size of your archive of previously printed prescriptions, though can run unattended. The reason this is time consuming is that ScriptBase 4 has introduced some changes to the database, such as industrial strength encryption. As a rough guide, assume the computer will be working on this for half an hour for every year of ScriptBase data.

The third stage is to check and adjust the drugs database, and make sure every prescription record is using the right drug. The reason this is necessary is that sophisticated new dose handling functions depend on drugs (such as Buprenorphine) having each dose size in a single drug record. As a rough guide, set aside half an hour for every year you have been running ScriptBase 3.

So for a five-year user of ScriptBase 3, assume the whole upgrade process may take five hours. Note that the first stage can run unattended, overnight if you can otherwise secure the computer.

The first stage could be carried out by IT support personnel, and will likely require their input to provide Administrative access to computers. The second stage requires an understanding of the medication list – it could be carried out by administrative or key worker staff who are familiar with ScriptBase, though the results should be checked by a clinician before sign off.

Preparation

Before you install ScriptBase 4, carry out the following tasks.

- a) Run the ‘fix tables’ utility from within ScriptBase 3 (Tools | utilities menu). This refreshes and checks the database. If you fail to do this and there are even minor problems with your existing data, the import process will probably fail.
- b) Make a backup of ScriptBase 3. The upgrade should leave ScriptBase 3 still running (it copies but does not overwrite ScriptBase 3) but you should take no chances.
- c) Using ScriptBase 3, print out a copy of the ‘Current Browse’ report. This is on the Reports menu. We will later use this to double-check that records have been correctly imported to ScriptBase 4.

Installing the ScriptBase 4 software

The installation of the software should be straightforward.

- a) Download ScriptBase 4 installation from www.scriptbase.co.uk and save to a shared folder / somewhere obvious on the computer.
- b) Reboot the computer and login as a System Administrator (speak to your IT people if you do not understand this)
- c) Run the installation program, accepting all the default values

Importing ScriptBase 3

The first time you run ScriptBase 4, you must still be logged in as a System Administrator. When it is fully installed, all users have sufficient rights to use the system.

Run ScriptBase 4 using the new menu item on the windows start menu. You will then be shown the startup wizard:

- a) There are several options, since you want to import existing ScriptBase 3 data, select the third option and click next.
- b) Read the summary information; note the issue that your new installation will be a trial version, as you have not yet purchased a license for ScriptBase 4.
- c) If you want to back out at this point, click cancel, otherwise Next.
- d) Use the ‘Find SB3 data’ to locate your existing ScriptBase 3 data. For most standalone users, click local disk (C:) then ScriptBase

The wizard will tell you when you have successfully selected a directory containing ScriptBase data. It is your responsibility to make sure this is the right data – be careful if you have old copies or are on a network (see ‘Finding the correct version of ScriptBase 3’ in Appendix A).

- e) Click next. It is recommended that you install to the default directory, you can always move it later. For the upgrade process, it is *strongly* recommended that you do not select a network drive at this stage (the upgrade process would be much slower and put heavy load on the network).
- f) Click next and check the directories are correct.
- g) When you click next, the upgrade process will begin.

As discussed, this may take several hours. Progress of each step is shown on progress bars, though not the overall process. Don't worry if the interface looks frozen for a few minutes (especially on files called Scriparchive) – check back ten minutes later that the % has changed. If this process crashes, see 'ScriptBase 4 crashed whilst upgrading' in Appendix A.

When this has run through successfully, ScriptBase will restart.

Why the drug list needs to be fixed

The next stage of your upgrade is not automatic and will take up to a few hours if you have a lot of drugs and clients on your ScriptBase.

ScriptBase 4 has introduced much more sophisticated handling of these drugs that are available in multiple unit sizes. For example, in ScriptBase 3, the different tablet sizes could only be handled by creating several drug records – each prescription could only use one drug record so you were limited to a single dose unit per drug. Eg. a prescription could be created with 2mg or 5mg or 10mg tablets but not a combination of these sizes.

The new version of ScriptBase allows you to create a single drug record that has up to three dose sizes. Continuing this example, we can have a single diazepam record on the drug list, with each of the tablet sizes. The advantage of this, is that you only need to select the drug and dose, ScriptBase works out the possible combination of tablet sizes.

With new installations, a sample drug database is created that contains commonly used drugs with the dose sizes already entered. This would not work for your upgrade, as you have existing prescriptions that must use the correct drug record – we explored ways of automating this but have not found a safe and reliable way of doing this.

The task is to make sure the drug list is correct, and then check each prescription and if necessary change to use a revised drug record from the drug list.

Checking and updating your drug list

You should now be able to run and login to ScriptBase 4. You can look at prescriptions, though may encounter 'ghost' errors that are related to the drugs list not being fixed. Certainly you must not print or consider your new ScriptBase ready for use.

Open the Options | Drug List.

Note that the layout has changed. If you scroll through the drugs list, the lower part of the form changes depending on the 'Dispense Form' of the drug. If the drug is in the form of Tablets, Capsules, Amps, Tubes or Reefers the additional fields are there to enter up to three different unit sizes.

Also note the new field 'is this drug on hold' – which is ticked. When a drug is marked 'On hold' it will appear in this drugs list, but when you create a script or change the drug of an existing script it will not be available for use. In the upgrade process, ScriptBase has marked all of your existing drugs as on hold. This has been done to ensure you explicitly 'approve' a drug record as correct before it is used.

If you have drugs that are unused, leave them 'On hold' for now.

Check drugs using liquid preparations

Drugs produced as Mixture, Linctus or Elixir preparations are the simplest. Go through the list and check all such drugs. In most cases, the settings will be correct and transferred over – though take care to check 'Dispense Form' – in our testing this appears sometimes to have been lost in the upgrade.

Take this opportunity to check the minimum and maximum doses are correct for your clinic and that the pricing information is correct. See Appendix A for instructions on how to calculate drug prices to the format required by ScriptBase. Also see Appendix C for our default drugs list.

When you are happy the drug is correct, un-tick the 'On hold' setting and work through the other liquid preparation drugs.

Check drugs using tablets available in single dose unit

Next go through those drugs available in Tablets, Capsules, Amps, Tubes or Reefers that are available in only ONE dose unit. For example, Antabuse is available in only 200mg Tablets.

For each of these drugs, check the information is entered correctly. Note that you will only have one Dose Unit entered in the lower section, the other two will be blank.

The field 'What units are used to define max / min' is here because it is possible to have different units for each of the three dose units – for drugs with only one dose unit, make sure this is the same as the Dose Unit for Dose Unit 1.

When you are happy with the results, un-tick the 'On hold' setting and work through the other drugs in this category.

Check drugs using tablets available in MULTIPLE dose units

These are the most complicated ones to deal with, because we need to consolidate multiple existing records into a single record with multiple unit information.

In most cases these are Tablets, though could in theory be Capsules, Amps, Tubes or Reefers. The two most obvious examples are Diazepam and Buprenorphine tablets, you may have others.

Lets work with Diazepam to illustrate. You probably have three existing records, 2, 5 and 10mg. What you want is a single active record called Diazepam Tablets, which includes these doses sizes within it.

To do this, create a *new* drug record by clicking the ‘create’ button. On the blank form, enter the information for all three Diazepam dose-sizes. Sample information is provided for you in Appendix C.

It is recommended that you leave the existing, old, Diazepam records in place. If you ever do complex reporting against your printed script archive there may be limitations on what you can do if you have removed these old drug records. For now, leave them in where they are but on hold, they will be invisible to most users.

Repeat this process for all your drugs with multiple dose units. Take special care with Buprenorphine, which is an unusual case: Buprenorphine not only has multiple dose sizes, but different dose *units* as well; it is available in 400 microgram tablets as well as 2 and 8 mg. ScriptBase can handle this as long as you input correctly.

Fix old on-hold drugs

Even drugs that are on hold should be correctly entered on the drug list. In particular, old Diazepam and Buprenorphine drug records that are no longer used, should have the standard daily dose entered into Dose Unit ‘Standard Dose Size’ in the lower section. Although you are not using these records for new drugs, having these records accurate helps ScriptBase correctly interpret records in the archive that were printed using these drugs, and avoids errors when you reconfigure prescriptions as described below.

Check drug list

Run through your drug list, checking that you have the full range of drugs not ‘on hold’ and each is correctly entered.

Reconfigure prescription list to use correct drug records.

Some of the your prescriptions are now using drugs that are ‘on hold’ – for example those that are using the old ‘5mg diazepam’ record. What we must do is work through the list and re-assign to a more appropriate drug record.

Work through the list top to bottom. If you don’t change the date, the list order will not change so you can be sure you have not missed any.

- a) For each and every drug (even liquid preparations):
- b) Open the prescription record.¹
- c) Make a *physical* note of the dose
- d) Click the second tab and click the ‘Change Drug’ button.
- e) Select the correct drug from the list and okay²

¹ If you get an error “the drug <drug name> has BLANK dose sizes, fix on the drug list’ it means that the old drug record needs to be fixed, open the drug list and find and fix the relevant drug. See the ‘Fix on-hold drugs’ section above.

² As soon as you click okay, you are committed: the script will be changed to this drug and saved to disk.

- f) Correct the dose, if it has changed. Take care to get the dose units correct, especially with Buprenorphine, for which the daily dose may previously have been expressed in mg but now in microgram.
- g) Check the script against your ScriptBase 3 list and save.

When you have corrected the whole drug list you should do some thorough checking. How you do this is up to you, but could include:

- a) Print out a copy of the 'Current Browse' report. Compare this, line-by-line with the same report you printed out from ScriptBase 3.
- b) Ordering the client list by key worker, printing the current browse report and cutting into key-worker sections so each worker checks their rx.
- c) Preview each prescription, highlight each and holding down the <ctrl> key, press V
- d) Click the refresh button, which updates the browse and performs some validation of each prescription.

Setting up templates

ScriptBase has a new feature called prescription templates. This is simply a list of standard prescriptions to choose from when you create a new script.

- a) Identify several 'typical' prescriptions that you tend to prescribe, in terms of drug, dose and regime. Open this record. In the top right corner is a button, click this and accept to save as a Template. Provide a meaningful name and save.
- b) Repeat this to create a small set of templates, we would suggest seven as a number that would not be too confusing.

You cannot edit Templates, if you need them to be different simply delete (see Options | Templates) and re-create. You might want to examine the new Instructions feature first, so that your templates benefit from standard Pharmacy instructions around supervised consumption or missed doses.

Edit Instructions list

A feature in ScriptBase 4 is more sophisticated handling of pharmacy instructions. Edit a prescription and click the 'Edit dispensing Instructions' button; experiment with adding instructions and previewing the rx to see what they look like.

The list of standard instructions have been extracted from the Orange guidelines. You might want to consider deleting any that you don't want to use in your clinic. You are able to add to this list, though this might not meet with the approval of your pharmacist or the home office.

Re-enter default stamp

Your default stamp will have been lost during the upgrade process. Go to the Options menu | Settings | All computers on network | Default Stamp. If needed, run your old ScriptBase 3 to check the previous wording.

Your upgrade is now complete...

Future upgrades to version 4 should be quick and painless.

Appendix A – Frequently Asked Questions

Can we import from any version of ScriptBase 3

The short answer is yes, the honest answer is we don't know as we have not tested the import process on *every* version of ScriptBase 3 released in the last ten years. The import should work with any version; though the chances of problems increase the earlier you go before the latest release, 3.76.

Our recommendation is to try the import as described, and if you have problems email us on support@scriptbase.co.uk. We will help you *first* upgrade your ScriptBase 3 to the latest version before you then upgrade to version 4.

How do we find the correct ScriptBase 3 data

The default database location for a standalone installation of ScriptBase3 is c:\scriptbase3\data. If you are running a network version, it is probably out on the network using a different drive letter (possibly v:\scriptbase or similar). What you must be careful of is that you may have several copies of the database, created as backups – finding data does not prove it is *the* data.

There is a fail safe way of checking where your live ScriptBase 3 data:

- a) Click windows start, then select 'run', then type 'regedit' into the box and ok. If you have permission on this computer, this will run the registry editor. NEVER make changes using this tool unless you are an IT specialist.
- b) In the left hand column, open HKEY_CURRENT_USER then Software, then (by scrolling down the list) find 'ScriptBase'. Click on ScriptBase.
- c) In the right hand column, look for the item called 'DataPath'. The path shown to the right of this is the actual current location of your ScriptBase 3 data.
- d) Make a note of this, so you can navigate to this location during the upgrade process.

For your background information, the ScriptBase 3 database contains many files with extensions such as .dat .blb .idx .bbk – the one we use as a marker is system.dat. One way of finding any copies of the ScriptBase database is to search (using Windows search tools) for system.dat

ScriptBase 4 crashed whilst importing from ScriptBase 3

Obviously this should not happen, but if it does (whether due to a problem in ScriptBase or because someone turned off the machine) your new installation may be left in an unstable state.

- a) The first thing to try is simply running ScriptBase 4 – the upgrade process might be retrievable and carry on from where it crashed.
- b) The other option is simply to delete the new imported data files and try again. Open Windows explorer, navigate to Documents and Settings, then All Users, then type Application Data into the menu bar (this folder is hidden so you will not see it

on the screen) and then ScriptBase. Delete all the files in this directory. Before re-running ScriptBase 4, re-run the repair tables utility in ScriptBase 3.

How do we work out drug costs to put in the drugs list

If you enter drug cost information into the drug list, ScriptBase can work out the cost of prescriptions. This is then shown on screen when you are editing scripts and recorded in the printed script archive where it can be used in reports.

For each drug (or unit size, where there are more than one) work out what 100 of that unit size would cost, using price information from the BNF.

The full formula for solid preparations is:

$$\left(\frac{100}{\text{unit size}} \times \left(\frac{\text{price per pack in pence}}{\text{number of items}} \right) \right) / 100$$

Where price is expressed in pence.

So for example, taking Diazepam, using an extract from the online BNF:

Tablets, diazepam 2mg, net price 28 = 55p; 5mg, 28 = 61p; 10mg, 28 = 76p.

$$\text{Price per 100mg} = 100 / 2 = 50$$

$$\text{Price per 2mg tablet} = 55 / 28 = 1.96 \text{ p}$$

$$50 * 1.96 = 98.2$$

$$98.2 / 100 = 0.98$$

So enter 0.98 into the field (which is in £).

The sample drugs in Appendix B have what we believe are up to date prices for common drugs.

Appendix B – sample drug records

Acamprosate Calcium	
Name	Acamprosate Calcium
Formulation	Tablets
Is drug on hold	Un-tick / blank
Misuse of Drugs Regulations	5
Dispense Form	Tablets
Can drug be interval dispensed	Un-tick / blank
Minimum daily dose	333
Maximum daily dose	1998
What units are used to define max / min	mg
Dose Unit 1 – standard dose size	333
Dose Unit 1 – Dose Units	mg
Dose Unit 1 Cost per hundred units	0.05
http://www.bnf.org/bnf/bnf/current/39076.htm	

Buprenorphine	
Name	Buprenorphine
Formulation	Tablets
Is drug on hold	Un-tick
Misuse of Drugs Regulations	3
Dispense Form	Tablets
Can drug be interval dispensed	Tick
Minimum daily dose	400
Maximum daily dose	32000
What units are used to define max / min	Microgram
Dose Unit 1 – standard dose size	400
Dose Unit 1 – Dose Units	Microgram
Dose Unit 1 Cost per hundred units	0.05
Dose Unit 2 – standard dose size	2
Dose Unit 2 – Dose Units	Mg
Dose Unit 2 Cost per hundred units	0.05
Dose Unit 3 – standard dose size	8
Dose Unit 3 – Dose Units	Mg
Dose Unit 3 Cost per hundred units	0.04
http://www.bnf.org/bnf/bnf/current/78667.htm	

Chlordiazepoxide

Name	Chlordiazepoxide
Formulation	Tablets
Is drug on hold	Un-tick
Misuse of Drugs Regulations	4
Dispense Form	Tablets
Can drug be interval dispensed	Un-tick
Minimum daily dose	5
Maximum daily dose	100
What units are used to define max / min	mg
Dose Unit 1 – standard dose size	5
Dose Unit 1 – Dose Units	mg
Dose Unit 1 Cost per hundred units	0.63
Dose Unit 2 – standard dose size	10
Dose Unit 2 – Dose Units	mg
Dose Unit 2 Cost per hundred units	0.36
http://www.bnf.org/bnf/bnf/current/3190.htm	

Diazepam Tablets

Name	Diazepam
Formulation	Tablets
Is drug on hold	un-tick / blank
Misuse of Drugs Regulations	2
Dispense Form	Tablets
Can drug be interval dispensed	Ticked
Minimum daily dose	2
Maximum daily dose	60 (your decision)
What units are used to define max / min	mg
Dose Unit 1 – standard dose size	2
Dose Unit 1 – Dose Units	mg
Dose Unit 1 Cost per hundred units	0.98
Dose Unit 2 – standard dose size	5
Dose Unit 2 – Dose Units	mg
Dose Unit 2 Cost per hundred units	0.44
Dose Unit 3 – standard dose size	10
Dose Unit 3 – Dose Units	Mg
Dose Unit 3 Cost per hundred units	0.27
http://www.bnf.org/bnf/bnf/current/3171.htm	

Disulfiram	
Name	Disulfiram
Formulation	Tablets
Is drug on hold	Un-tick
Misuse of Drugs Regulations	5
Dispense Form	Tablets
Can drug be interval dispensed	No
Minimum daily dose	200
Maximum daily dose	800
What units are used to define max / min	mg
Dose Unit 1 – standard dose size	200
Dose Unit 1 – Dose Units	mg
Dose Unit 1 Cost per hundred units	0.26
http://www.bnf.org/bnf/bnf/current/3687.htm	

Lofexidine Hydrochloride	
Name	Lofexidine Hydrochloride
Formulation	Tablets
Is drug on hold	Un-tick
Misuse of Drugs Regulations	5
Dispense Form	Tablets
Can drug be interval dispensed	Un-tick
Minimum daily dose	200
Maximum daily dose	2400
What units are used to define max / min	Microgram
Dose Unit 1 – standard dose size	200
Dose Unit 1 – Dose Units	Microgram
Dose Unit 1 Cost per hundred units	0.51
http://www.bnf.org/bnf/bnf/current/3699.htm	

Methadone Oral Solution	
Name	Methadone
Formulation	Oral Solution (1mg/1mL)
Is drug on hold	Un-tick
Misuse of Drugs Regulations	2
Dispense Form	Mixture
Can drug be interval dispensed	Tick
Minimum daily dose	2
Maximum daily dose	170 according to clinic policy
What units are used to define max / min	mL
Cost per hundred units	55
http://www.bnf.org/bnf/bnf/current/3701.htm	

As pricing for methadone is based on bottle size, but can dispensed in any amount, the price is approximate. Our suggested value is likely to be typical.

Methadone Oral Solution – Sugar Free

Name	Methadone
Formulation	Oral Solution (1mg/1mL) Sugar Free
Is drug on hold	Un-tick
Misuse of Drugs Regulations	2
Dispense Form	Mixture
Can drug be interval dispensed	Tick
Minimum daily dose	2
Maximum daily dose	170 according to clinic policy
What units are used to define max / min	ML
Cost per hundred units	0.55
http://www.bnf.org/bnf/bnf/current/3701.htm	

Methadone HCL

Name	Methadone HCL
Formulation	Tablets
Is drug on hold	Un-tick
Misuse of Drugs Regulations	4
Dispense Form	Tablets
Can drug be interval dispensed	Tick
Minimum daily dose	5
Maximum daily dose	160 according to clinic policy
What units are used to define max / min	mg
Dose Unit 1 – standard dose size	5
Dose Unit 1 – Dose Units	mg
Dose Unit 1 Cost per hundred units	1.19
http://www.bnf.org/bnf/bnf/current/3534.htm	

Naltrexone Hydrochloride

Name	Naltrexone HCL
Formulation	50MG Tablets
Is drug on hold	Un-tick
Misuse of Drugs Regulations	5
Dispense Form	Tablets
Can drug be interval dispensed	Un-tick
Minimum daily dose	50
Maximum daily dose	100
What units are used to define max / min	mg
Dose Unit 1 – standard dose size	50
Dose Unit 1 – Dose Units	mg
Dose Unit 1 Cost per hundred units	1.69
http://www.bnf.org/bnf/bnf/current/3703.htm	

Oxazepam

Name	Oxazepam
Formulation	Tablets
Is drug on hold	Un-tick
Misuse of Drugs Regulations	4
Dispense Form	Tablets
Can drug be interval dispensed	Un-tick
Minimum daily dose	10
Maximum daily dose	200
What units are used to define max / min	mg
Dose Unit 1 – standard dose size	10
Dose Unit 1 – Dose Units	mg
Dose Unit 1 Cost per hundred units	2.30
Dose Unit 2 – standard dose size	15
Dose Unit 2 – Dose Units	mg
Dose Unit 2 Cost per hundred units	1.65
http://www.bnf.org/bnf/bnf/current/3190.htm	

Temazepam

Name	Temazepam
Formulation	Tablets
Is drug on hold	Un-tick
Misuse of Drugs Regulations	3
Dispense Form	Tablets
Can drug be interval dispensed	Un-tick
Minimum daily dose	10
Maximum daily dose	40
What units are used to define max / min	mg
Dose Unit 1 – standard dose size	10
Dose Unit 1 – Dose Units	mg
Dose Unit 1 Cost per hundred units	1.06
Dose Unit 2 – standard dose size	20
Dose Unit 2 – Dose Units	mg
Dose Unit 2 Cost per hundred units	0.25
http://www.bnf.org/bnf/bnf/current/3152.htm	