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New functions of the eReceipt system in the Czech Republic

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SUMMARY

*Under the Treaty on the Functioning of the European Union (EU), the EU aims to provide a high level of protection for human health, to improve the functioning of the internal market and to guarantee the free movement of goods, persons and services. Member States are responsible for providing safe, high-quality, effective and quantitatively sufficient healthcare to citizens in their own territory. [3]. The poster introduces the topic of the new functions of the eRecipe system in the Czech Republic, which include a) **the shared patient medication record** and b) **the cross-border electronic prescription**.*

INTRODUCTION

Under the **Lisbon Strategy** approved in March 2000, the leaders of the Member States and governments of the EU set goals for the direction of the EU, which by 2010 was to become the most competitive and dynamic knowledge-based economy in the world, capable of sustainable growth, with more jobs and greater social cohesion. Subsequently, the **eEurope Action Plan** was announced in June 2000 as part of the Lisbon Strategy, whereby the European Parliament, the European Commission and the EU Member States made a political commitment to cooperate in activities aimed at developing a **European Information Society**. As the results of the strategy's implementation were not sufficient, the Lisbon Strategy was revised in 2005. Later, in 2010, the **Europe 2020 strategy** was adopted by the European Council, which included the Digital Agenda for Europe. The strategy's obligations for Member States included the spread and promotion of the use of online health services [1,2].

The Czech Republic – The shared patient medication record

The implementation of electronic healthcare in the Czech Republic (CR) falls under the responsibility of the **National Centre for e-Health**. From 1 June 2020, the functionalities of the eReceipt information system were extended. A shared patient medication record allows authorised persons (**patient, physician, clinical pharmacist and pharmacist**) to view data related to the prescribed and dispensed medications for a specific patient. This way, pharmacists in the CR have the opportunity to **consider drug interactions** not only within the medicines they dispense, but also within all medicines prescribed and dispensed to the patient. The eRecipe system enables the physician to view the patient's data through the medication record for 5 years and the pharmacist, clinical pharmacist for 1 year after the data is created. A shared medication record provides better safety and better information as a basis for more effective treatment. However, when working with it, one has to take into consideration the fact that unauthorised access and abuse of data is legally sanctioned and the patient has tools (web, mobile apps) available to them to stop their data being shared if necessary [3,4,6,7].

The Czech Republic – The cross-border electronic prescription

Since 12 June 2023, the eReceipt system of the CR has joined the cross-border exchange of electronic prescriptions (eRp) with Poland, which allows Czechs to pick up their prescription medicines in Poland and Poles in the Czech Republic by presenting an identification document (passport, ID card and eRp identifier from an SMS message, email, app). Currently, the involvement of Czech pharmacies in the cross-border eRp exchange project is voluntary. The cross-border exchange of electronic prescription of CR does not apply to individually prepared medicinal products, multi-component medicinal products and medicinal products containing narcotic drugs and psychotropic substances prescribed on prescriptions with an oblique blue stripe. The CR is also seeking to join the cross-border exchange project with other countries where the system is currently being tested, namely Croatia, Finland, Estonia, Portugal and Spain. Since its introduction, the ePrescription system of the CR has undergone, in addition to the extension of the cross-border electronic prescription, the extension of other functions, namely: a) **ePrescription**, b) **electronic prescription with a blue bar**, c) **shared patient medication record** and d) **electronic vaccination records** [5].

CONCLUSION

According to the European Commission's Communication on facilitating the digital transformation of healthcare in the digital single market, empowering citizens and building a healthier society, the digitalisation of healthcare has the potential to improve the quality of life of patients, contribute to health promotion, disease prevention, change the way healthcare is delivered and support the reform of healthcare systems with a focus on the needs of patients. At the same time, digital solutions can contribute to better use of health data in research and support for personalised healthcare. Health data is a key enabler of digital transformation, but it is not managed in the same way across EU Member States. The European Commission has long supported the introduction of eHealth across the EU. The EU promotes cooperation in the exchange of information and health data between Member States in a secure, efficient and interoperable way, as it is the infrastructure of digital eHealth services that provides continuity of care for citizens when they travel abroad within the EU. The EU aims to progressively introduce a) **electronic prescribing and dispensing of electronic prescriptions**, b) **summary patient records**, c) **medical images, laboratory results and hospital discharge reports**, and d) **a complete health record in all Member States in the context of cross-border healthcare provision** [2,7].

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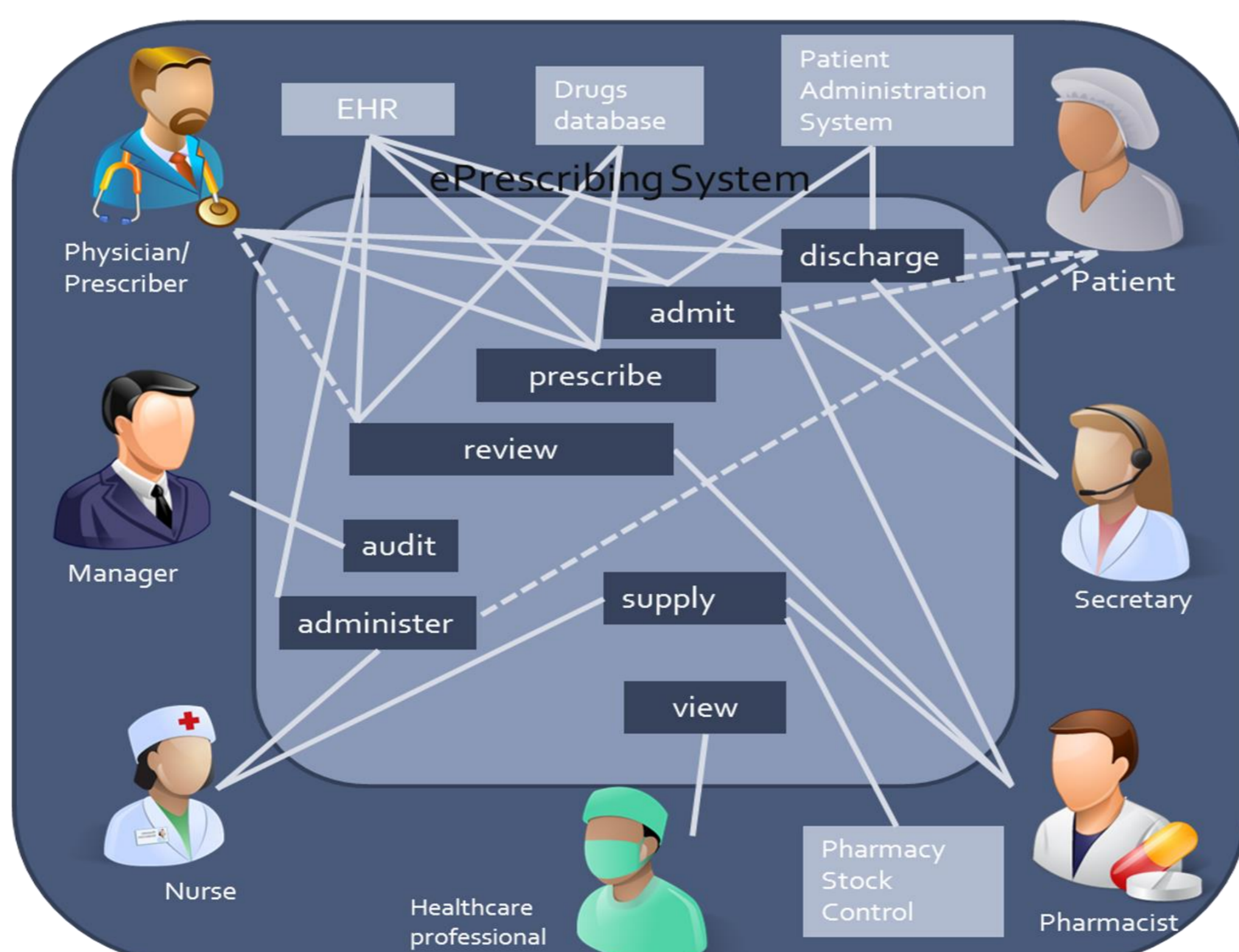


Fig. 1. eHealth – connecting health professionals

<https://dutchhealthcare.wordpress.com/2011/06/22/electronic-prescribing/>