SNOMED CT implementation frequently asked questions

What is the impact to end users?

Our aim is to minimise the impact to practices in the transition from Read v2 to SNOMED CT. Our approach is for a phased transition, avoiding a single switch over date when all functionality would be based on SNOMED CT.

Read more on our phased implementation approach.

Has data entry changed?

Data entry will be unchanged, other than SNOMED CT will be the clinical vocabulary supporting data entry in place of Read v2.

A new SNOMED CT code picker will allow a user to:

- Enter existing Read v2 codes to find the appropriate SNOMED CT mapped item.
- Search by term to find SNOMED CT descriptions. Fully Specified Names (FSNs) will be visible when searching for codes in Consultations, with a user option to show/hide the FSN. In the main code picker, FSNs will be visible where duplicate matching search results are returned.

Via the code picker, EMIS Web will show hierarchy views that contain all SNOMED CT codes. Users will only be able to select a SNOMED CT term from within the GP subset for data entry. A code may be displayed that is not within the subset; however it will be disabled for the purpose of selection. We have applied the same design principles to the new SNOMED CT code picker as the old Read code picker to help you with the transition.

Will EMIS Health local codes still be available?

EMIS Health national codes will still be present in the system. Where a SNOMED CT concept exists that has the same meaning as a current local code, we have mapped it to the appropriate SNOMED CT description.

How will I see historical patient data in EMIS Web?

When you view historical data in EMIS Web, you will see the original clinical term used at the point of entry. This enables new searches written in SNOMED CT, to access data captured in Read.

What happens to my local templates, searches, protocols and concepts written in Read?

Existing templates, searches, protocols and concepts will continue to work in SNOMED CT, but any hierarchies contained within will run based on Read hierarchies until they have been reviewed and
edited by organisations. Once edited, they will run based on SNOMED CT hierarchies. Any obsolete codes or codes that have moved in the hierarchy within these will be flagged so that the practice can review and replace as needed.

New templates, searches, reports, protocols and concepts can only be created using the SNOMED CT vocabulary and/or EMIS Health national codes. Where new coded entries are needed which do not have a Read equivalent, these will **not** be included in an existing Read defined search.

It will be possible to update an existing Read code search to one that runs as a SNOMED CT search. We will be providing guidance to assist users in reviewing and updating their templates, searches, reports, protocols and concepts to SNOMED CT coding. Users will run templates, searches, protocols and concepts at risk if these are not reviewed in order to validate that all patients have been selected.

EMIS Health authored templates, concepts, protocols, searches and reports will be converted by EMIS Health to use the SNOMED CT terms and hierarchy.

**How long will dual coding be available in EMIS Web?**

Dual coding of content that has an equivalent Read code will continue indefinitely. New SNOMED CT codes without a Read equivalent will only be stored as SNOMED CT.

**How can I prepare my practice for the transition to SNOMED CT?**

We will be providing training materials on the support centre (to include articles, videos, e-learning tools, a downloadable standalone demo version of EMIS Web, live and recorded webinars) to help you get everyone in your practice ready for the transition. We will also be providing a practice checklist (based on job roles/activities) to guide all your EMIS Web users through the online training materials they need to view/read.

**Related content**

- EMIS Health implementation update
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- Get ready for SNOMED CT
- General FAQs
- NHS Digital SNOMED CT Browser
- Mapping database for SNOMED CT codes and terms
- NHS Digital webinars
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