

ML DQ Medication Optimisation LES Guide

This guide includes the following:

- Structured Medication Review
- Topiramate and Valproate

Structured Medication Review

Template:ML ICB Structured Medication Review v2.0

ML ICB Structured Medication template should be used to provide the correct code for capturing those patients who required a Structured Medication Review

SMR details

An SMR is a comprehensive and clinical review of a patient's medicines and detailed aspects of their health, requiring shared decision-making conversations with patients.

* Structured medication review No previous entry

Medication Review by: No previous entry

Type of medication review No previous entry

Invitation for Structured Medication review declined Text No previous entry

Previous SMR action plan or Eclipse SMR live notes summary

NO TEARS Tool for Medication Review

It may be appropriate to change, reduce or indeed add medications in an SMR based on the needs and preferences of the individual using the NO TEARS approach.

- Need and indication
- Open questions
- Tests and monitoring
- Evidence and guidelines
- Adverse events
- Risk reduction or prevention
- Simplification and switches

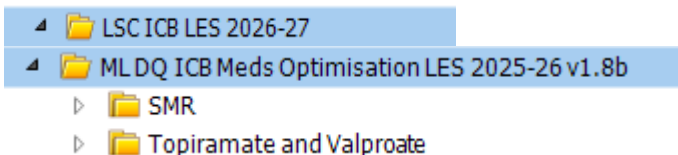
[NO TEARS Tool](#)

Structured Medication Review Searches:

Please find detailed below information about the searches, check population reporting Distributed folder for latest version:

All searches for the Enhanced Services can be found in the distributed searches folder in ES&R.

Please find detailed below information about the searches:









SMR Search work on the assumption that relevant codes have been added to the patients record from the template ML ICB Structured Medication Review v2.0

ACTION Searches:

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This folder contains searches which may affect your payments. Please review these searches and take action to ensure that these patients are not missed from your claims

-
-  SMRDQ1 SMR coded on the same day as another
 -  SMRDQ1 SMR coded on the same day as another Report
 -  SMRDQ2 SMR's coded within 7 days of another
 -  SMRDQ2 SMR's coded within 7 days of another Report
 -  SMRDQ3 SMR claim codes, CHECK consultations codes
 -  SMRDQ3 SMR claim codes, CHECK consultations codes Report




SMRDQ1 – Identifies patients who have had more than 1 SMR coded on the same day. As per the spec Where two SMR's are coded on the same day, payment will be made for one procedure only.

SMRDQ2 – Identifies patients who have had an SMR coded within 7 days of a previous SMR

SMRDQ3 - As the claim search has consultation types applied activity must be recorded using the appropriate consultation type, you can use the report to check activity.

CLAIMS folder:

This search identifies how many patients have had the appropriate coding added from the template for a SMR YTD. The aggregate report gives a monthly count of SMR clinical codes.

-
-  SMR undertaken YTD
 -  SMR Undertaken (monthly)
 -  xPLEASE READ

Topiramate and Valproate

For Valproate and Topiramate the practices must complete the elements of the pregnancy prevention programme.

Valproate – practices should not initiate this medication, and the ARAF needs to be completed by the specialist, for all females who have the potential to become pregnant. See [valproate risk mitigation material](#)

Topiramate – for the treatment of [migraine the annual risk awareness](#) form is usually completed by a primary care health care professional, because the patient is unlikely to be under secondary care, however for epilepsy the specialist must complete the [epilepsy annual risk awareness](#) form. And it is described that way in the forms, which are linked above.

Template: ML ICB Topiramate and Valproate v2.1

ML ICB Topiramate and Valproate template should be used to provide the correct code for capturing those patients who required a Pregnancy Prevention Programme and Annual Risk Acknowledgment Form.

Pregnancy Prevention Programme Topiramate and Valproate

Pregnancy Prevention Programme (PREVENT)

Is PREVENT needed?

The requirements apply in full for all women or trans men with childbearing potential: Annual review with ARAF signed and countersigned by a specialist and signed by the patient or their parent, carer or guardian. Patients with a learning disability, in a same sex relationship, a vow of celibacy and other reasons must be offered the same quality of care as other patients.

Pregnancy Prevention Programme started 06-Mar-2026 18-Sep-2025
Text

Pregnancy Prevention Programme not needed 06-Mar-2026 18-Sep-2025
Text

Female children who have not yet reached menarche (not started her periods) DO NOT need to fulfil the conditions of PREVENT, but they and their responsible person need to be aware of the risks for the future. You should provide a copy of the Patient Guide and remind the responsible person to contact their GP once the female child using valproate experiences menarche. Please refer the patient back to the specialist prescriber.

Primary amenorrhoea 06-Mar-2026 18-Sep-2025
Other Reasons Pregnancy Prevention Programme not needed
Text

Pregnancy Prevention Programme discontinued 06-Mar-2026 18-Sep-2025
Text

Pregnancy Prevention Programme Declined 06-Mar-2026 No previous entry

Annual Risk Acknowledgement Form Topiramate

Annual review

Annual Risk Acknowledgement Form (ARAF) needs to be completed on initiation and annually by the specialist prescriber for Epilepsy and GP for Migraine.

Please check an Annual Risk Acknowledgement Form (ARAF) is in place (check documents and code if ARAF has been received).

Epilepsy: If the form has not been received, please contact the specialist for a copy or refer the patient for their annual review if due. Migraine: Please complete the Topiramate for Migraine ARAF form on your Clinical System.

Topiramate Annual Risk Acknowledgement Form completed 06-Mar-2026 20-Jun-2025
Topiramate Indication 06-Mar-2026

Annual Risk Acknowledgement Form Valproate

Female

Annual Risk Acknowledgement Form (ARAF) needs to be completed on initiation and annually by the specialist prescriber. The patient should be reviewed by the specialist every year.

Please check an Annual Risk Acknowledgement Form (ARAF) is in place (check documents and code if ARAF has been received). If the form has not been received, please contact the specialist for a copy or refer the patient for their annual review if due.

Valproate Annual Risk Acknowledgement Form for Female Patients completed 06-Mar-2026 No previous entry
Text

Referral for completion of Valproate Annual Risk Acknowledgement Form 06-Mar-2026 No previous entry
Text

Topiramate and Valproate Searches

Please find detailed below information about the searches, check population reporting Distributed folder for latest version:

All searches for the Enhanced Services can be found in the distributed searches folder in ES&R.

Please find detailed below information about the searches:

- ▲ LSC ICB LES 2026-27
- ▲ ML DQ ICB Meds Optimisation LES 2026-27 v1.0
- ▲ Topiramate and Valproate
 - ▲ ACTION Topiramate and Valproate
 - ▲ ACTIVITY Topiramate and Valproate
 - ▶ xBI Report

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Search work on the assumption that relevant codes have been added to the patients record from the template ML ICB Topiramate and Valproate template

ACTION Searches:

This folder contains searches which may affect your payments. Please review these searches and take action to ensure that these patients are not missed from your claims

-
- 🔍 T1. Topiramate in female (10-55) of childbearing potential
 - 🔍 T2. Patients with a PPP status within last 12m
 - 🔍 T3. Patients with ARAF status within the last 12m
 - 🔍 T4. Patients with both PPP & ARAF status within last 12 months
 - 🔍 T5. Patients without PPP & ARAF status within last 12 months
 - 🔍 V1. Female Patients of childbearing age taking Valproate
 - 🔍 V2. Patients with a PPP status within last 12m
 - 🔍 V3. Patients with ARAF status within last 12m
 - 🔍 V4. Patients with both PPP & ARAF Status within last 12 months
 - 🔍 V5. Patients without both PPP & ARAF Status within last 12 months

T5 & V5 will show female patients of childbearing age who have not had a PPP or ARAF in the last 12 months.

ACTIVITY Folder:

These searches identify how many patients have had the appropriate coding added from the template for both Topiramate and Valproate:

- 🔍 T1. Topiramate in female (10-55) of childbearing potential
- 🔍 T2. Patients with a PPP status within last 12m
- 🔍 T3. Patients with ARAF status within the last 12m
- 🔍 V1. Female Patients of childbearing age taking Valproate
- 🔍 V2. Patients with a PPP status within last 12m
- 🔍 V3. Patients with ARAF status within last 12m