



OUTPATIENT PHARMACY (PSO)

MANAGER'S USER MANUAL

Version 7.0
December 1997

(Revised January 2013)

Revision History

Each time this manual is updated, the Title Page lists the new revised date and this page describes the changes. If the Revised Pages column lists “All,” replace the existing manual with the reissued manual. If the Revised Pages column lists individual entries (e.g., 25, 32), either update the existing manual with the Change Pages Document or print the entire new manual.

Date	Revised Pages	Patch Number	Description
01/2013	i-iv vii-xiii 10, 13, 131 6, 8, 42, 83, 84, 85a, 85c, 85d, 88, 122u, 122w, 122z, 122bb, 122jj, 122zz, 136, 149, 157, 161, 165, 166, 167, 169, 175, 188, 200, 202, 243, 288 34a-34d 122a1-122a2 122bbb, 122ccc, 122ddd 137, 161, 169a 249-250 293-298 299-302	PSO*7*390	Updated Revision History Updated Table of Contents Added new option Check Drug Interaction Added Creatinine Clearance (CrCL) and Body Surface Area (BSA), when available, to the header area of Patient and Medication Profile displays Added new option Check Drug Interaction Added information regarding clinic orders Added drug allergy changes Update Hidden Actions Fix page numbering Update Glossary Update Index (G. Tucker, PM; S. Heiress, Tech Writer)
09/12	i- iia, ix, xi, 169a – 169d, 175 – 177b, 187, 195a, 292s	PSO*7*386	Updated TOC Added section on HOLD and UNHOLD functionality. Updated Flagging and Unflagging Pending Orders. Updated Activity Log for HOLD/UNHOLD comments. Added PSO TECH ADV key information. (Niha Goyal, PM; John Owczarzak, Tech Writer)

Date	Revised Pages	Patch Number	Description
03/12	i, 59, 62, 195a-195b, 248a-248b, 268, 269, 270, 270a – 270b, 293 – 297	PSO*7*354	<p>Add an option to the Maintenance menu</p> <p>Added Site Parameter</p> <p>Added Domain Name Server (DNS) and mail tracking information</p> <p>A file named PHARMACY AUTOMATED DISPENSING DEVICES added.</p> <p>A new multiple named OPAI added to DISPENSING SYSTEM PRINTER sub-file.</p> <p>Added the acronym and definition of ADD and OPAI to the Glossary (Niha Goyal, PM; John Owczarzak, Tech Writer)</p>
02/2012	i-ii, iia-iib, v-xi, 12, 18, 30-31, 107, 126a-126b, 128, 133, 150, 150a-150n, 159, 198, 204-206, 209-211, 211a-211b, 212-213, 213a-213b, 215-216, 218, 218a-218b, 219-220, 220a-220b, 221-222, 222a-222b, 223-226, 226a-226b, 227-229, 229a-229b, 230-233, 234-236, 236a-236b, 237, 237a-237b, 238-240, 242-243, 244a-244b, 245-246, 276-277, 277a-277b, 278, 292s-292t, 293-297, 300-301	PSO*7*385	<p>Removed incorrect listing of View Additional Reject Info (ARI) action</p> <p>Added new actions Submit Multiple Actions (SMA) and Suspense Date Calculation (SMA)</p> <p>Added new option View ePharmacy Rx (VER)</p> <p>Added TRICARE and CHAMPVA examples of rejects on a new order</p> <p>Corrected earlier formatting errors</p> <p>Added signature alert</p> <p>Corrected typos</p> <p>Updated Service Code values</p> <p>Updated changed security key names</p> <p>Updated name of TRICARE CHAMPVA Bypass/Override Report</p> <p>Updated screen shots related to patch changes</p> <p>Updated wording based on reviewer feedback</p> <p>Added CHAMPVA functionality</p> <p>Added separate section to list changes to security keys</p> <p>Updated wording for ¾ Days Supply Hold</p> <p>Added rounding functionality for ¾ Days Supply Hold</p> <p>Added CHAMPVA to Glossary (S. Spence, PM; C. Smith, Tech Writer)</p>

Date	Revised Pages	Patch Number	Description
10/2011	i-ii, v-xi, 6, 9, 12, 105, 135, 137, 147, 149, 178, 205, 207-209b, 210, 212, 215-216b, 217-218b, 219-220, 223-225, 227-233b, 234-238, 240-244, 297, 299-301	PSO*7*359	Added new action View Additional Reject Info (ARI) Expanded ECME Numbers to twelve digits Updated screen shots related to patch changes Added TRICARE to Glossary Corrected typos Corrected formatting errors from 11/10 reissue (S. Spence, PM; C. Smith, Tech Writer)
09/2011	i, ii, v-xii, 85a-85f	PSO*7*382	Added information regarding the new [PSO HRC PROFILE/REFILL] option. (N. Goyal, PM; J. Owczarzak, Tech Writer)
04/2011	i v-xii 7 9 10 62 66 82 83 85 106 116 121-122ddd 132-132r 133 134a-134h 137-138 285-285b 292-292d 292e-292n 292o-292p 292q-292r 293-294 299-302	PSO*7*251	Updated Revision History Updated Table of Contents Added Order Status Add the word “prompt” New OP Hidden Action Added site parameter Added example of site parameter Added codes New example Added information regarding Intervention Menu Hidden Actions Added blank page Added blank page Allergy/ADR Order Checks and Drug-Drug Interaction Enhancements Enhanced Order Checks Added remote order checking note CPRS Order Checks Added Intervention Menu to the screen example Incorporate dosing checks in verification process Incorporate dosing checks in verification process examples Verifying ePharmacy Orders Updated screens for Process Checks and Rx Verification CPRS Order Checks – How They Work Error Messages and Order Check Added API, DATUP, DIF, & FDB to the Glossary, and updated page numbering Updated Index to include Enhanced Drug-Drug Interactions, Duplicate Drug Order Check, Allergy/ADR Order Check

Date	Revised Pages	Patch Number	Description
			Display and CPRS Order Checks, and updated page numbering (G. Tucker, PM, H. Whitney, Developer, S. Heiress and G. Scorca, Tech Writer)
11/10	All	PSO*7*358	Added information regarding TRICARE Active Duty Bypass/Override details (S. Spence, PM; G. Johnson, Tech Writer)

Preface

This user manual describes the functional characteristics of Outpatient Pharmacy V. 7.0. It is intended for pharmacists and technicians who are familiar with the functioning of Outpatient Pharmacy in a Veterans Affairs Medical Center (VAMC).

(This page included for two-sided copying.)

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Chapter 2: List Manager

The screen displayed when processing an order has changed dramatically from the previous version of Outpatient Pharmacy (e.g., v. 6.0). The new screen was designed using List Manager.

This new screen gives more information and easier accessibility to vital reports and areas of a patient's chart.

Please take the time to read over the explanation of the screen and the actions that can now be executed at the touch of a key. This type of preparation before attempting to use List Manager will reduce the time and effort needed to become skilled in order processing with this new version of List Manager.

Outpatient List Manager

Allergy Indicator

The screenshot shows the 'Outpatient List Manager' interface. It is divided into several sections:

- Screen Title:** Points to the top bar containing 'Patient Information', the date/time 'Feb 09, 2006 16:31:03', and the page number 'Page: 1 of 2'.
- Header Area:** Points to the top section of the patient data, including 'OPPATIENT17, ONE', 'PID: 000-12-3456', 'DOB: AUG 30, 1948 (57)', 'SEX: MALE', 'Ht (cm): 175.26 (08/06/2000)', and 'Wt (kg): 108.18 (01/14/2006)'. It also includes a '+' sign and a '<A>' button.
- List Area (Scrolling region):** Points to the main body of the screen containing eligibility information ('Eligibility: SERVICE CONNECTED 50% to 100% SC%: 70'), patient status ('RX PATIENT STATUS: SC LESS THAN 50%'), disabilities ('Disabilities:'), address ('1313 TWIN OAKS LANE ANYVILLE ALABAMA 12345'), home/phone numbers ('HOME PHONE: 555-555-8361', 'CELL PHONE:', 'WORK PHONE:'), and prescription mail delivery ('Prescription Mail Delivery: Regular Mail').
- Message Window:** Points to the 'Allergies' section, which shows 'Verified: PEANUTS,' and a prompt 'Enter ?? for more actions'.
- Action Area:** Points to the bottom section containing action codes and descriptions: 'EA Enter/Edit Allergy/ADR Data', 'DD Detailed Allergy/ADR List', 'PU Patient Record Update', 'EX Exit Patient List', and 'Select Action: Quit//'.

Screen title: The screen title changes according to what type of information List Manager is displaying (e.g., Patient Information, Medication Profile, New OP Order (ROUTINE), etc.).

Allergy indicator: This indicator displays when there has been information entered into the ALLERGY field for the patient. The indicator displays "NO ALLERGY ASSESSMENT" if there is no allergy assessment for the patient.

Header area: The header area is a "fixed" (non-scrollable) area that displays patient information.

List area: (scrolling region) This area scrolls (like the previous version) and displays the information on which action can be taken.

Message window: This section displays a plus (+) sign, minus (-) sign, or informational text (i.e., Enter ?? for more actions). If a plus sign is entered at the action prompt, List Manager will "jump" forward a page. If a minus sign is displayed and entered at the action prompt, List Manager will "jump" back a screen. The plus and minus signs are only valid actions if they are displayed in the message window.

Action area: A list of actions display in this area of the screen. If a double question mark (??) is entered at the "Select Item(s)" prompt, a "hidden" list of additional actions that are available will be displayed.

Example: Showing more Indicators and Definitions

Order Status and CMOP Indicators

Allergy Indicator

Copay Indicator

ePharmacy Indicator

Pending Orders

Flagged Order

Non-VA Meds Orders

Return To Stock Indicator

Medication Profile		May 22, 2006 10:44:56	Page: 1 of 1					
OPPATIENT16,ONE			<A>					
PID: 000-24-6802		Ht (cm): 177.80 (02/08/2004)						
DOB: APR 3,1941 (65)		Wt (kg): 90.45 (02/08/2004)						
SEX: MALE		Non-VA Meds on File						
CrCL: 102.4 (est.) (CREAT:1.0mg/dL 10/30/12)		BSA (m2): 2.08						
Last entry on 01/13/01								
#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----ACTIVE-----								
1	503902	ACETAMINOPHEN 500MG TAB	60	AT	05-22	05-22	3	30
2	503886\$	DIGOXIN (LANOXIN) 0.2MG CAP	60	A>	05-07	05-07	5	30
3	503871\$	HISTOPLASMIN 1ML	1	A	03-14	03-14R	5	30
4	100002042\$e	NALBUPHINE HCL INJ 10MG/ML	1	A	03-14	03-14	5	30
5	100002040\$	SALICYLIC ACID 40% OINT (OZ)	1	S	03-14	03-17	5	30
-----DISCONTINUED-----								
6	503881	BACLOFEN 10MG TABS	30	DC	04-07	05-01	2	30
7	100002020A\$	TIMOLOL 0.25% OPTH SOL 10ML	1	DE	02-03	02-03	5	30
-----HOLD-----								
8	100001942	ABDOMINAL PAD 7 1/2 X 8 STERILE	1	H	09-28	09-28	5	30
-----NON-VERIFIED-----								
9	100002039\$	BACLOFEN 10MG TABS	30	N	03-14	03-14	5	30
-----PENDING-----								
10	AMPICILLIN 250MG CAP		QTY: 40		ISDT: 05-29		REF: 0	
11	SIMETHICONE 40MG TAB		QTY: 30		ISDT: 05-30		REF: 3	
-----NON-VA MEDS (Not dispensed by VA)-----								
GINKO EXT 1 TAB ONCE A DAY BY MOUTH					Date Documented: 01/13/01			
IBUPROFEN 50MG TAB					Date Documented: 12/10/00			
Enter ?? for more actions								
PU Patient Record Update			NO New Order					
PI Patient Information			SO Select Order					
Select Action: Quit//								

All orders are sub-grouped by like statuses and then listed alphabetically within the sub-group.

Order Status: The current status of the order. These statuses include:

- A Active
- S Suspended
- N Non-Verified or Drug Interactions
- HP Placed on hold by provider through CPRS
- H Placed on hold via backdoor Pharmacy
- E Expired
- DP Discontinued by provider through CPRS
- DE Discontinued due to edit via backdoor Pharmacy
- DC Discontinued via backdoor Pharmacy

The Status column will also display some additional discontinue type actions performed on the order. The codes and the action they represent are as follows:

- DF Discontinued due to edit by a provider through CPRS
- DD Discontinued due to death
- DA Auto discontinued due to admission



A “B” will be appended to the above statuses if the Bad Address Indicator was set and there was no active temporary address at the time of the last label activity.

CMOP Indicators: There are two separate indicators when the drug in an order is marked for Consolidated Mail Outpatient Pharmacy (CMOP) processing. This indicator is displayed after the Order Status if applicable.

- > Drug for the prescription is marked for CMOP
- T Displayed when the last fill is either in a Transmitted or Retransmitted CMOP state. (This indicator can overwrite the “>” indicator.

Copay Indicator: A “\$” displayed to the right of the prescription number indicates the prescription is copay eligible.

ePharmacy Indicator An ‘e’ displayed to the right of the prescription number indicates that the prescription is electronic third-party billable.

Return to Stock Indicator: An “R” displayed to the right of the Last Fill Date indicates the last fill was returned to stock.

Pending Orders: Any orders entered through Computerized Patient Records System (CPRS), or another outside source, that have not been finished by Outpatient Pharmacy.

Non-VA Meds Orders: Any over the counter (OTC) medications, herbal supplements, medications prescribed by providers outside the VA, and medications prescribed by the VA, but purchased by the patient at an outside pharmacy are displayed here. Non-VA Meds orders cannot be placed or updated in Outpatient Pharmacy. The user can input information about a patient’s use of Non-VA Meds only through CPRS. However, the user can use either CPRS or Outpatient Pharmacy menu options to view Non-VA Meds data in a patient’s medical records.

Third Party Rejects Any prescriptions that are rejected by third-party payers because of Refill Too Soon (code 79) or Drug Utilization Review (DUR - code 88) are displayed in this section.

Example: Showing Rejected Prescriptions

Medication Profile		August 12, 2006@12:35:04		Page: 1 of 1	
OPPATIENT16,ONE				<A>	
PID: 000-24-6802		Ht(cm): 177.80		(02/08/2005)	
DOB: APR 3,1941 (65)		Wt(kg): 90.45		(02/08/2005)	
SEX: MALE					
CrCL: 78.1(est.) (CREAT:1.0mg/dL 6/24/03)		BSA (m2): 2.08			
		ISSUE		LAST REF DAY	
#	RX #	DRUG	QTY ST	DATE	FILL REM SUP
-----REFILL TOO SOON/DUR REJECTS (Third Party)-----					
1	51368009\$e	DIGOXIN (LANOXIN) 0.05MG CAP	90 A>	02-16 02-16	3 90
2	51360563e	OXYBUTYNIN CHLORIDE 15MG SA TAB	180 S>	02-15 05-06	0 90
-----ACTIVE-----					
3	100003470e	ABSORBABLE GELATIN FILM	1 A	11-04 11-04	5 31
4	100003461	ACETAMINOPHEN 650MG SUPPOS.	10 A>	11-04 11-04	1 10
5	100003185e	ALBUMIN 25% 50ML	2 A	08-01 08-01	5 5
-----DISCONTINUED-----					
6	100003530	ANALGESIC BALM 1 POUND	1 A	01-08 01-08	3 90
7	100003400	APPLICATORS, COTTON TIP STERILE	10 A	09-23 09-23	5 31
+ Enter ?? for more actions					
PU Patient Record Update		NO New Order			
PI Patient Information		SO Select Order			
Select Action: Next Screen//					

Using List Manager with Outpatient Pharmacy

List Manager is a tool designed so that a list of items can be presented to the user for an action.

For Outpatient Pharmacy, the List Manager does the following:

- Allows the pharmacist or technician to browse through a list of actions
- Allows the pharmacist or technician to take action against those items
- Allows the user to select an action that displays an action or informational profile
- Allows the user to select a different action without leaving an option.

Entering Actions

Actions are entered by typing the name(s), or synonym(s) at the “Select Item(s)” prompt. In addition to the various actions that may be available specific to a particular option, List Manager provides generic actions applicable to any List Manager screen. A double question mark (??) may be entered at the “Select Action” prompt for a list of all actions available. The following is a list of generic List Manager actions with a brief description. The synonym for each action is shown in brackets following the action name. Entering the synonym is the quickest way to select an action.

Action	Description
Next Screen [+]	Move to the next screen (may be shown as a default).
Previous Screen [-]	Move to the previous screen.
Up a Line [UP]	Move up one line.
Down a Line [DN]	Move down one line.
Shift View to Right [>]	Move the screen to the right if the screen width is more than 80 characters.
Shift View to Left [<] characters.	Move the screen to the left if the screen width is more than 80 characters.
First Screen [FS]	Move to the first screen.
Last Screen [LS]	Move to the last screen.

Action	Description
Go to Page [GO]	Move to any selected page in the list.
Re Display Screen [RD]	Redisplay the current.
Print Screen [PS]	Prints the header and the portion of the list currently displayed.
Print List [PL]	Prints the list of entries currently displayed.
Search List [SL]	Finds selected text in list of entries.
Auto Display (On/Off) [ADPL]	Toggles the menu of actions to be displayed/not displayed automatically.
Quit [QU]	Exits the screen (may be shown as a default).

Outpatient Pharmacy Hidden Actions

The Outpatient Pharmacy hidden actions will display with the previous hidden actions once a completed or finished order is selected and a double question mark (??) is entered at the “Select Action:” prompt.

The following hidden actions appear on the Medication Profile screen and can only be applied to one order at a time.

Action	Description
Activity Logs [AL]	Displays the Activity Logs.
Copy [CO]	Allows the user to copy and edit an order.
Check Interactions [CK]	Allows a user to perform order checks against the patient’s active medication profile with or without a prospective drug.
DIN	Displays available drug restriction/guideline information for the Dispense Drug and Orderable Item associated with the selected medication order.
Intervention Menu [IN]	Intervention menu allows the user to enter a new intervention or delete, edit, print, and view an existing intervention.
Hold [HD]	Places an order on a hold status.
Other OP Actions [OTH]	Allows the user to choose from the following sub-actions: Progress Note [PN], Action Profile [AP], Print Medication Instructions [MI], Display Orders' Statutes [DO], or Non-VA Meds Report [NV].

Chapter 3: Using the *Outpatient Pharmacy Manager* Menu

This manual describes options available on the *Outpatient Pharmacy Manager* menu. This menu should be assigned to supervisors, package coordinators, and members of the Automated Data Processing (ADP)/Information Resources Management Service (IRMS) staff.

Example: Accessing the *Outpatient Pharmacy Manager* menu

```
Select OPTION NAME: PSO MANAGER      Outpatient Pharmacy Manager
Outpatient Pharmacy software - Version 7.0
```

The following options are available on the *Outpatient Pharmacy Manager* menu.

- *Archiving...*
- *Autocancel Rx's on Admission*
- *Bingo Board...*
- *Change Label Printer*
- *Check Drug Interaction*
- *Clozapine Pharmacy Manager...*
- *Copay Menu...*
- *DUE Supervisor...*
- *Enter/Edit Clinic Sort Groups*
- *External Interface Menu...*
- *Label/Profile Monitor Reprint*
- *Maintenance (Outpatient Pharmacy)...*
- *Medication Profile*
- *Output Reports...*
- *Pharmacy Intervention Menu...*
- *Process Drug/Drug Interactions*
- *Release Medication*
- *Return Medication to Stock*
- *Rx (Prescriptions)...*
- *ScripTalk Main Menu...*
- *Supervisor Functions...*
- *Suspense Functions...*
- *Update Patient Record*
- *Verification...*

Patient Lookup

The ability to look up a patient by prescription number or wand a barcode with the prescription has been added to the patient lookup prompt on the following options.

- *Patient Prescription Processing* [PSO LM BACKDOOR ORDERS]
- *Medication Profile* [PSO P]
- *Rx (Prescriptions)* [PSO RX]
- *Update Patient Record* [PSO PAT]
- *Manual Print of Multi-Rx Forms* [PSO LM MULTI-RX PRINT]
- *ScripTalk Patient Enter/Edit* [PSO SCRIPTALK PATIENT ENROLL]
- *Patient Address Changes Report* [PSO ADDRESS CHANGE REPORT]
- *List Prescriptions Not Mailed* [PSO BAI NOT MAILED]
- *Non-VA Meds Usage Report* [PSO NON-VA MEDS USAGE REPORT]
- *Enter New Patient* [PSO BINGO NEW PATIENT]
- *Action Profile (132 COLUMN PRINTOUT)* [PSO ACTION PROFILE]
- *Poly Pharmacy Report* [PSOPOLY]

The help text for patient lookup reads as follows.

```
Enter the prescription number prefixed by a # (ex. #XXXXXXX) or
Wand the barcode of the prescription. The format of the barcode is
NNN-NNNNNNN where the first 3 digits are your station number.
- OR -
Answer with PATIENT NAME, or SOCIAL SECURITY NUMBER, or last 4 digits
of SOCIAL SECURITY NUMBER, or first initial of last name with last 4
digits of SOCIAL SECURITY NUMBER
Do you want the entire NNNNNNNN-Entry PATIENT List?
```


Chapter 7.5: Check Drug Interaction

This chapter describes the *Check Drug Interaction* option shown on the Outpatient Pharmacy Manager [PSO MANAGER] menu and the Pharmacist Menu [PSO USER1].

Check Drug Interaction

[PSO CHECK DRUG INTERACTION]

This option allows a user to check drug interactions between two or more drugs.

```
Select Outpatient Pharmacy Manager Option: CHECK Drug Interaction
Drug 1:    WARFARIN 2MG TABS          BL110
          ...OK? Yes//    (Yes)

Drug 2: SIMVASTATIN 40MG TAB
      Lookup: GENERIC NAME
SIMVASTATIN 40MG TAB          CV350
          ...OK? Yes//    (Yes)

Drug 3:

Now Processing Enhanced Order Checks!  Please wait...

*** DRUG INTERACTION(S) ***
=====
***Significant*** with SIMVASTATIN 40MG TAB and
                  WARFARIN 2MG TABS

CLINICAL EFFECTS:  Increase hypoprothrombinemic effects of warfarin.
=====
Press Return to Continue...:

Display Professional Interaction monograph? N// YES

DEVICE: HOME//    SSH VIRTUAL TERMINAL    Right Margin: 80//

-----
Professional Monograph
Drug Interaction with SIMVASTATIN 40MG TAB and WARFARIN 2MG TABS
  This information is generalized and not intended as specific medical
  advice. Consult your healthcare professional before taking or
  discontinuing any drug or commencing any course of treatment.

MONOGRAPH TITLE:  Selected Anticoagulants/Selected HMG-CoA Reductase
Inhibitors

SEVERITY LEVEL:  3-Moderate Interaction: Assess the risk to the
patient and take action as needed.

MECHANISM OF ACTION:  The exact mechanism of this interaction is
unknown. The HMG-CoA reductase inhibitor may inhibit the hepatic
hydroxylation of warfarin. The HMG-CoA reductase inhibitors, which
are highly plasma protein bound, may displace warfarin from its
binding site.

Press Return to Continue or "^" to Exit:
```

Professional Monograph

Drug Interaction with SIMVASTATIN 40MG TAB and WARFARIN 2MG TABS

CLINICAL EFFECTS: Increase hypoprothrombinemic effects of warfarin.

PREDISPOSING FACTORS: None determined.

PATIENT MANAGEMENT: Patients should be monitored for changes in prothrombin time when a HMG Co-A reductase inhibitor is added to or discontinued from warfarin therapy, or if the dosage of the HMG Co-A reductase inhibitor is adjusted.

DISCUSSION: Case reports in the medical literature and to the manufacturer have documented an interaction between lovastatin and warfarin. A case report has documented an interaction between pravastatin and fluindione (an orally administered indanedione anticoagulant), suggesting that pravastatin could also interact similarly with warfarin. Information concerning a potential interaction with simvastatin is conflicting. A case report has documented an interaction between simvastatin and acenocoumarol while another case report showed no interaction with warfarin. One group of authors reported three case reports of increased international normalized ratios (INRs) following the addition of fluvastatin to warfarin therapy. The addition of rosuvastatin to patients stabilized on warfarin resulted in clinically significant changes in INR.

Press Return to Continue or "^" to Exit:

Professional Monograph

Drug Interaction with SIMVASTATIN 40MG TAB and WARFARIN 2MG TABS

REFERENCES:

- 1.Ahmad S. Lovastatin. Warfarin interaction. Arch Intern Med 1990 Nov; 150(11):2407.
- 2.Hoffman HS. The interaction of lovastatin and warfarin. Conn Med 1992 Feb; 56(2):107.
- 3.Iliadis EA, Konwinski MF. Lovastatin during warfarin therapy resulting in bleeding. Pa Med 1995 Dec;98(12):31.
- 4.Personal communication. Merck & Co., Inc. 1991.
- 5.Trenque T, Choisy H, Germain ML. Pravastatin: interaction with oral anticoagulant?. BMJ 1996 Apr 6;312(7035):886.
- 6.Grau E, Perella M, Pastor E. Simvastatin-oral anticoagulant interaction. Lancet 1996 Feb 10;347(8998):405-6.
- 7.Gaw A, Wosornu D. Simvastatin during warfarin therapy in hyperlipoproteinaemia. Lancet 1992 Oct 17;340(8825):979-80.
- 8.Trilli LE, Kelley CL, Aspinall SL, Kroner BA. Potential interaction between warfarin and fluvastatin. Ann Pharmacother 1996 Dec; 30(12):1399-402.

Press Return to Continue or "^" to Exit:

Professional Monograph

Drug Interaction with SIMVASTATIN 40MG TAB and WARFARIN 2MG TABS

- 9.Crestor (rosuvastatin calcium) US prescribing information. AstraZeneca Pharmaceuticals LP February, 2012.

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Enter RETURN to continue or '^' to exit:

Display Professional Interaction monograph? N// O

(This page included for two-sided copying.)

Chapter 9: Handling Copay Charges

The copay status of a prescription is determined at the time of entry and re-evaluated every time a fill for that prescription is released. A prescription will be designated as exempt from copay under the following conditions:

- ✓ The drug is marked as a supply item, nutritional supplement or for investigational use.
- ✓ The Rx Patient Status assigned to the prescription is exempt from copayment.
- ✓ The Veteran is copay exempt based on income.
- ✓ The medication prescribed is used in the treatment of:
 - A Service Connected (SC) condition
 - Combat Veteran (CV)
 - Vietnam-era herbicide/Agent Orange (AO) exposure
 - Ionizing Radiation (IR) exposure
 - Southwest Asia Conditions
 - Shipboard Hazard and Defense (SHAD)
 - Military Sexual Trauma (MST)
 - Cancer of the Head and/or Neck (HNC)

The copay status of a prescription is re-evaluated whenever a fill is released. Various actions can occur based on changes to the criteria that determine the copay status of a prescription, including no action, automatic copay status reset, or a MailMan message generated detailing missing information required for user follow up.

Once a Veteran meets the designated annual copayment cap, subsequent fills for any prescriptions dispensed will not be charged a copay. Any fills for copay-eligible prescriptions entered after the cap is reached are not billed and are identified as potential charges. If editing the Days Supply of an Rx or returning an Rx fill to stock results in the total copayment of the Veteran to fall below the annual cap, Integrated Billing (IB) software shall initiate a copay charge for any fill that was identified as a potential charge until the annual cap is once again reached.

A user will be prompted to respond to any medication copay exemption questions that apply to the patient when entering a new prescription. Responses entered for the medication copay exemption questions are stored with the prescription and display as default values when an order is renewed, copied, or edited in such a way that a new order is created.

If none of the copay exemptions listed apply, the order is released as a copay prescription with no questions asked. (See “Patient Prescription Processing-New Order Entry,” for a complete order entry example.)

Example: Entering an Rx for a patient with no applicable medication copay exemptions

```
Do you want to enter a Progress Note? No// <Enter> NO

Rx # 559157          10/23/06
OPPATIENT24,ONE      #30
TAKE ONE TABLET BY MOUTH EVERY DAY

NIACIN (NIASPAN-KOS) 500MG SA TAB
OPPROVIDER,ONE       OPPHARMACIST,ONE
# of Refills: 11
Is this correct? YES//
```

If any medication copay exemptions apply to a patient when entering a new prescription, the applicable questions are displayed for the user to respond “Yes” or “No.” The responses will be used to determine the copay status of the prescription. The prescription fill will not generate a copay charge when released if at least one of the responses is “Yes.” Responses are required.

Example: An order with medication copay exemptions, but no responses entered

```
Rx # 3754648          10/24/06
OPPATIENT24,ONE      #30
APPLY SMALL AMOUNT TO AFFECTED AREA TWICE A DAY

HYDROCORTISONE 1% CREAM
OPPROVIDER,ONE      OPPHARMACIST,ONE
# of Refills: 11
    SC Percent: 30%
    Disabilities: NONE STATED

Was treatment for Service Connected condition? NO <Enter>
Was treatment related to Combat? NO <Enter>
Was treatment related to Agent Orange exposure? NO <Enter>
Was treatment related to service in SW Asia? NO <Enter>
Was treatment related to PROJ 112/SHAD? NO <Enter>
Was treatment related to Military Sexual Trauma? NO <Enter>
Was treatment related to Head and/or Neck Cancer? NO <Enter>
Is this correct? YES// <Enter>
```

All Service Connected and Environmental Indicators that apply will be asked regardless of a previously entered “Yes” response. SC will be asked for SC 0-100%, but copay charges will continue to be formulated in the same manner.)

```
Was treatment for a Service Connected condition? NO <Enter>
Was treatment related to Combat? NO <Enter>
Was treatment related to Agent Orange exposure? N// Y
Is this correct? YES//
```

A dollar sign is displayed next to the copay prescription number if the copay status is billable.

Example: Billable Copay Status

Medication Profile		Oct 24, 2006@15:14:58		Page:	1 of	1
OPPATIENT24,ONE						
PID: 000-34-5678P		Ht (cm) : _____ (_____)				
DOB: DEC 2,1921 (85)		Wt (kg) : _____ (_____)				
CrCL: <Not Found>		BSA (m2) : _____				
-----ACTIVE-----						
No Copay Copay	1	559163	FOSINOPRIL NA 20MG TAB	30 A>	10-24 10-24	11 30
	2	559157\$	NIACIN (NIASPAN-KOS) 500MG SA TAB	30 A>	10-23 10-23	11 30
Enter ?? for more actions						
PU	Patient Record Update			NO	New Order	
PI	Patient Information			SO	Select Order	
Select Action: Quit//						

Example: Medication Short Profile

Medication Profile Jun 12, 2006@22:33:13 Page: 1 of 1

OPPATIENT16, ONE
 PID: 000-55-3421 Ht (cm): ()
 DOB: DEC 2, 1923 (82) Wt (kg): 100.00 (06/24/2003)
 SEX: MALE Non-VA Meds on File
 CrCL: <Not Found> BSA (m2): _____

Last entry on 1-20-05

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----REFILL TOO SOON/DUR REJECTS (Third Party)-----								
1	2390\$e	DIGOXIN (LANOXIN) 0.05MG CAP	90	A>	02-16	02-16	3	90
2	2391e	OXYBUTYNIN CHLORIDE 15MG SA TAB	180	S>	02-15	05-06	0	90
-----ACTIVE-----								
3	2396	AMPICILLIN 250MG CAP	40	A>	06-12	06-12	0	10
4	2395	AZATHIOPRINE 50MG TAB	90	E	06-10	05-03	3	90
-----DISCONTINUED-----								
5	2398	FOLIC ACID 1MG TAB	90	DD>	05-03	05-03R	3	90
6	2400	HYDROCORTISONE 1%CR	1	DE>	05-03	05-03R	11	30
7	2394	IBUPROFEN 400MG TAB 500'S	270	DC	05-03	05-03	3	90
8	2399	MVI CAP/TAB	90	DP>	05-03	05-03R	3	90
9	2402	TEMPAZEPAM 15MG CAP	30	DF	06-01	06-01	5	30
10	2392	THIAMINE HCL 100MG TAB	90	DA>	05-03	05-03R	3	90
-----HOLD-----								
11	2393	WARFARIN 5MG TAB	90	H	05-03	-	3	90
12	2401	FUROSEMIDE 40MG TAB	90	HP	05-03	-	2	90
-----NON-VERIFIED-----								
13	2397	BACLOFEN 10MG TABS	30	N	03-14	03-14	5	30
-----PENDING-----								
14	CAPTOPRIL 25MG TAB		QTY: 180		ISDT: 06-12	REF: 3		
15	MULTIVITAMIN CAP/TAB		QTY: 30		ISDT: 06-12>	REF: 3		
-----NON-VA MEDS (Not dispensed by VA) -----								
GINKGO EXT 1 TAB ONCE A DAY BY MOUTH					Date Documented: 01/13/01			
Enter ?? for more actions								
PU	Patient Record Update				NO	New Order		
PI	Patient Information				SO	Select Order		
Select Action: Quit//								



NOTES:

Order #4 indicates that it has recently expired.

Orders #5,7,10 indicate that they were recently discontinued.

Hold Type display codes are shown in **blue**.

Discontinue Type display codes are shown in **blue**.

Medication Profile: Long Format

The long format displays all information contained on the short format as well as the following additional fields:

- physician's name
- fill date
- dates of refills/partial fills
- whether the prescription was filled at the pharmacy window or by mail
- clerk code
- total allowable refills
- which division filled it

The long report format of the fields for Non-VA Med orders include the start date, CPRS order #, status, documented by, order check(s), override reason, override provider, and statement of explanation.

Example: Medication Profile – Long Format

```
Select PATIENT NAME:  OPPATIENT,ONE      8-5-19      666000777      NO      NSC
VETERAN      OPPATIENT,ONE
WARNING : ** This patient has been flagged with a Bad Address Indicator.
LONG or SHORT: SHORT// LONG
Sort by DATE, CLASS or MEDICATION: DATE// <Enter>

All Medications or Selection (A/S): All// <Enter>
DEVICE: HOME// [Select Print Device]  GENERIC INCOMING TELNET

OPPATIENT,ONE
      (TEMP ADDRESS from AUG 28,2006 till (no end date))
LINE1      DOB:  AUG 5,1919
ANYTOWN      PHONE: 555-1212
TEXAS 77379      ELIG: NSC
CANNOT USE SAFETY CAPS.

WEIGHT(Kg) :      HEIGHT(cm) :
CrCL: <Not Found>      BSA (m2) : _____

DISABILITIES:
ALLERGIES: _____
ADVERSE REACTIONS: _____

Enter RETURN to continue or '^' to exit: <Enter>

Outpatient prescriptions are discontinued 72 hours after admission
```

Medication Profile Sorted by ISSUE DATE

```
Rx #: 100001968Ae      Drug: LOPERAMIDE 2MG CAP
SIG: TAKE TWO CAPSULES BY MOUTH EVERY DAY
QTY: 60      # of Refills: 5      Issue/Expr: 12-15-05/06-16-06
Prov: OPPROVIDER16,TWO      Entry By: 10000000013 Filled: 01-14-06 (M)
```


Last Released:	Original Release:
Refilled: 02-19-04 (M)	Released:
Remarks:	
Division: ALBANY (500)	Active 4 Refills Left

-----example continues-----

Example: Medication Profile – Long Format (continued)

Non-VA MEDS (Not Dispensed by VA)

GINKGO BILLOBA TAB
 Dosage: 1 TABLET
 Schedule: ONCE A DAY
 Route: MOUTH
 Status: Discontinued (10/08/03)
 Start Date: 09/03/03 CPRS Order #: 12232
 Documented By: OPCLERK21,FOUR on 09/03/03
 Statement of Explanation: Non-VA medication not recommended by VA provider.

ACETAMINPHEN 325MG CT
 Dosage: 325MG
 Schedule:
 Route:
 Status: Active
 Start Date: 09/03/03 CPRS Order #: 12234
 Documented By: OPCLERK21,FOUR on 09/03/03
 Statement of Explanation: Non-VA medication recommended by VA provider
 Patient wants to buy from Non-VA pharmacy

The Intervention menu hidden action has been included in the Patient Information, the Medication Profile and Detailed Order ListMan screens when utilizing the following options:

- Patient Prescription Processing [PSO LM BACKDOOR ORDERS]
- Complete Orders from OERR [PSO LMOE FINISH]
- Edit Prescriptions [PSO RXEDIT]

See Chapter 17, “Using the Pharmacy Intervention Menu” for more details.

Medication Reconciliation

The Medication Reconciliation product (patch PSO*7*294) introduces the components necessary to build four tools useful for medication reconciliation. The product utilizes Health Summary components and Text Integrated Utility (TIU) data objects to create a list of current medications. Medication Reconciliation also leverages the Remote Data Interoperability (RDI) software to include medication data from other sites.

For a complete list of functionality, please refer to the Medication Reconciliation Implementation Guide.

Medication Profile and Refill

[PSO HRC PROFILE/REFILL]

This option was originally requested by the Health Resource Center (HRC) to provide a new standalone option similar to that of the ePharmacy Medication Profile (View Only) [PSO PMP] option for the Compensation and Pension Record Interchange (CAPRI) system. It allows users to view a medication profile as well as refill prescriptions for a specific patient.

Example 1: Medication Profile with default view

Patient Medication Profile		Jun 04, 2007@19:22:16	Page: 1 of 1
OPPATIENT,ONE		<A>	
PID: 000-12-5678		HEIGHT (cm): 175.26 (11/21/2006)	
DOB: NOV 28,1900 (111)		WEIGHT (kg): 108.18 (08/09/2007)	
SEX: MALE		EXP/CANCEL CUTOFF: 120 DAY	
CrCL: 78.1 (est.) (CREAT:1.0mg/dL 2/19/99)		BSA (m2): 2.23	

#	Rx#	DRUG [^]	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
1	100004112	ALBUTEROL INHALER	1	A	04-21-07	04-21-07	11	7
2	300483e	ALPRAZOLAM 0.25MG TABS	30	DC	06-14-07	06-14-07	11	30
3	100004113	AMITRIPTYLINE 10MG TAB	60	A	04-21-07	04-21-07	11	30
4	100004075e	CABERGOLINE 0.5MG TAB	7	E	05-18-05	05-18-05	6	7
5	100004155	DESIPRAMINE 25MG	90	S	02-23-07	02-11-07	11	90
6	100004022\$e	DIGOXIN 0.05MG/ML ELIX (60CC)	30	A	02-01-07	02-20-07	10	90
7	100004081	METAPROTERENOL 5% SOLUTION 10ML	15	DC	06-02-07	06-03-07	11	15
8	100004082	METAPROTERENOL 5% SOLUTION 10ML	10	DC	06-02-07	06-03-07	11	10
9	100004083	METAPROTERENOL 5% SOLUTION 10ML	15	A>	06-02-07	06-23-07	11	15
10	100004079	NICOTINE 10MG/ML SOLN NASAL SPRAY	1	A>	06-02-07	06-23-07	11	15
11	100003298	SIMVASTATIN 20MG TAB	5	DC	05-28-05	04-27-07	3	30
12	100003298A	SODIUM CHLORIDE 0.9% NASAL SOLN(O	1	A	05-10-07	05-10-07	11	30
13	100004070e	VALSARTAN 80MG TAB	5	S	06-28-07	05-31-07	11	30
PENDING (2 order)								
14	ALBUTEROL INHALER			RF	06-03-07		2	30
15	AMITRIPTYLINE 10MG TAB			RN	06-02-07		3	10
Non-VA MEDS (Not dispensed by VA) (1 order)								
16	TAMOXIFEN CITRATE 10MG TABS				Date Documented: 06/04/07			
Enter ?? for more actions								
CV	Change View	PI	Patient Information	SIG	Show/Hide	SIG		
GS	Group by Status	RF	Refill					
Select: Quit//								

The following options are available as Hidden Menu actions on this screen:

DR	- Sort by Drug	LF	- Sort by Last Fill
RX	- Sort by Prescription	ID	- Sort by Issue Date

The CV (*Change View*) action allows the user to change some characteristics of the screen above. The user can also save and/or delete preferences, which will be used every time the user runs this option. The users can have one set of preferences for each Division defined.

Example 2: Change View action

Enter CV at the “Select” prompt to change the view preferences.

```
OPPROVIDER,ONE's current default view (ALBANY):
-----
EXP/CANCEL CUTOFF   : 120 DAYS
SORT BY             : DRUG NAME
SORT ORDER          : ASCENDING
DISPLAY SIG         : NO
GROUP BY STATUS     : YES
DISPLAY ORDER COUNT : YES

Delete this default view? NO// <Enter>

EXP/CANCEL CUTOFF: 120// 120 DAYS
SORT BY: DR// DRUG NAME
SORT ORDER: ASCENDING// ASCENDING
DISPLAY SIG: OFF// OFF
GROUP BY STATUS: OFF// ON
DISPLAY ORDER COUNT: ON// OFF

Save as your default View? NO// YES

Saving...OK!
```

Example 3: Patient Information action

Enter PI at the “Select” prompt to view patient information.

```
Patient Information      Jul 12, 2011@13:28:53      Page:    1 of    2
OPPATIENT,ONE                               <A>
  PID: 000-12-5678                      Ht (cm) : _____ (_____)
  DOB: NOV 28,1900 (111)                 Wt (kg) : _____ (_____)
  SEX: MALE

Eligibility: NSC, VA PENSION
RX PATIENT STATUS: OPT NSC

Disabilities: POST-TRAUMATIC STRESS DISORDER-100% (SC),

2222 CENTRAL AVE

ALBANY                                HOME PHONE:
NEW YORK 01280-7654                   CELL PHONE:
Prescription Mail Delivery: Regular Mail WORK PHONE:
Cannot use safety caps.

Allergies
  Verified: PENICILLIN,

Adverse Reactions

+      Enter ?? for more actions
DD Detailed Allergy/ADR List          EX Exit Patient List
Select Action: Next Screen//
```

Example 4: Medication Profile with SIG expanded

Enter SIG at the “Select” prompt to show/hide the Rx SIG.

Patient Medication Profile				Jun 04, 2007@19:22:16		Page: 1 of 1		
OPPATIENT,ONE				<A>				
PID: 000-12-5678				HEIGHT (cm): 175.26 (11/21/2006)				
DOB: NOV 28,1900 (111)				WEIGHT (kg): 108.18 (08/09/2007)				
SEX: MALE				EXP/CANCEL CUTOFF: 120 DAY				
CrCL: <Not Found>				BSA (m2): 2.23				
#	Rx#	DRUG [^]	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
1	100004112	ALBUTEROL INHALER	1	A	04-21-07	04-21-07	11	7
SIG: TAKE 1 PUFF BY MOUTH EVERY DAY FOR 10 DAYS								
2	300483e	ALPRAZOLAM 0.25MG TABS	30	DC	06-14-07	06-14-07	11	30
SIG: TAKE ONE CAPSULE BY BY MOUTH EVERY MORNING								
3	100004113	AMITRIPTYLINE 10MG TAB	60	A	04-21-07	04-21-07	11	30
SIG: TAKE ONE TABLET BY BY MOUTH EVERY MORNING								
4	100004075e	CABERGOLINE 0.5MG TAB	7	E	05-18-05	05-18-05	6	7
SIG: TAKE 2 TABLET(S) BY BY MOUTH EVERY 12 HOURS								
5	100004155	DESIPRAMINE 25MG	90	S	02-23-07	02-11-07	11	90
SIG: TAKE 2 TABLET(S) BY BY MOUTH EVERY 12 HOURS								
6	100004022\$e	DIGOXIN 0.05MG/ML ELIX (60CC)	30	A	02-01-07	02-20-07	10	90
SIG: INJECT 1000IM EVERY DAY								
7	100004081	METAPROTERENOL 5% SOLUTION 10ML	15	DC	06-02-07	06-03-07	11	15
SIG: INJECT 1000 IM EVERY DAY								
8	100004082	METAPROTERENOL 5% SOLUTION 10ML	10	DC	06-02-07	06-03-07	11	10
SIG: INJECT 1000 IM EVERY DAY								
9	100004083	METAPROTERENOL 5% SOLUTION 10ML	15	A>	06-02-07	06-23-07	11	15
SIG: INJECT 1000 IM EVERY DAY								
10	100004079	NICOTINE 10MG/ML SOLN NASAL SPRAY	1	A>	06-02-07	06-23-07	11	15
SIG: APPLY 1 PATCH ON SHOULDER DAILY								
11	100003298	SIMVASTATIN 20MG TAB	5	DC	05-28-05	04-27-07	3	30
SIG: TAKE 2 TABLET(S) PO FOUR TIMES A DAY								
12	100003298A	SODIUM CHLORIDE 0.9% NASAL SOLN(O	1	A	05-10-07	05-10-07	11	30
SIG: TAKE 2 PUFFS EACH NOSTRIL EVERY 8 HOURS								
13	100004070e	VALSARTAN 80MG TAB	5	S	06-28-07	05-31-07	11	30
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING								
PENDING (2 order)								
14	ALBUTEROL INHALER			RF	06-03-07		2	30
SIG: 1 PUFF BY MOUTH EVERY DAY FOR 5 DAYS								
15	AMITRIPTYLINE 10MG TAB			RN	06-02-07		3	10
SIG: TAKE 2 TABLET(S) PO FOUR TIMES A DAY								
Non-VA MEDS (Not dispensed by VA) (1 order)								
16	TAMOXIFEN CITRATE 10MG TABS			Date Documented: 06/04/07				
SIG: TAKE 2 TABLET(S) PO FOUR TIMES A DAY								
Enter ?? for more actions								
CV	Change View		PI	Patient Information		SIG Show/Hide SIG		
GS	Group by Status		RF	Refill				
Select: Quit//								

Example 5: Group By Status action

Enter GS at the “Select” prompt to group/ungroup list by Rx status.

Patient Medication Profile			Jun 04, 2007@19:22:16			Page: 1 of 1				
OPPATIENT,ONE						<A>				
PID: 000-12-5678			HEIGHT (cm): 175.26			(11/21/2006)				
DOB: NOV 28,1900 (111)			WEIGHT (kg): 108.18			(08/09/2007)				
SEX: MALE			EXP/CANCEL CUTOFF: 120 DAY							
CrCL: <Not Found>			BSA (m2): 2.23							
ISSUE	LAST	REF	DAY		QTY	ST	DATE	FILL	REM	SUP
#	Rx#	DRUG	[^]							
ACTIVE (6 orders)										
1	100004112	ALBUTEROL INHALER			1	A	04-21-07	04-21-07	11	7
2	100004113	AMITRIPTYLINE 10MG TAB			60	A	04-21-07	04-21-07	11	30
3	100004022\$e	DIGOXIN 0.05MG/ML ELIX (60CC)			30	A	02-01-07	02-20-07	10	90
4	100004083	METAPROTERENOL 5% SOLUTION 10ML			15	A>	06-02-07	06-23-07	11	15
5	100004079	NICOTINE 10MG/ML SOLN NASAL SPRAY			1	A>	06-02-07	06-23-07	11	15
6	100003298A	SODIUM CHLORIDE 0.9% NASAL SOLN(O			1	A	05-10-07	05-10-07	11	30
DISCONTINUED (4 orders)										
7	300483e	ALPRAZOLAM 0.25MG TABS			30	DC	06-14-07	06-14-07	11	30
8	100004081	METAPROTERENOL 5% SOLUTION 10ML			15	DC	06-02-07	06-03-07	11	15
9	100004082	METAPROTERENOL 5% SOLUTION 10ML			10	DC	06-02-07	06-03-07	11	10
10	100003298	SIMVASTATIN 20MG TAB			5	DC	05-28-05	04-27-07	3	30
SUSPENDED (2 orders)										
11	100004155	DESIPRAMINE 25MG			90	S	02-23-07	02-11-07	11	90
12	100004070e	VALSARTAN 80MG TAB			5	S	06-28-07	05-31-07	11	30
EXPIRED (1 order)										
13	100004075e	CABERGOLINE 0.5MG TAB			7	E	05-18-05	05-18-05	6	7
PENDING (2 order)										
14	ALBUTEROL INHALER				RF	06-03-07		2	30	
15	AMITRIPTYLINE 10MG TAB				RN	06-02-07		3	10	
Non-VA MEDS (Not dispensed by VA) (1 order)										
16	TAMOXIFEN CITRATE 10MG TABS				Date Documented: 06/04/07					
Enter ?? for more actions										
CV	Change View		PI	Patient Information		SIG Show/Hide SIG				
GS	Group by Status		RF	Refill						
Select: Quit//										

Example 6: Refill action

Enter RF at the “Select” prompt to request a refill for one or more prescriptions as shown below. This action is also available after selecting a specific prescription.

```
Enter ?? for more actions
CV Change View          PI Patient Information  SIG Show/Hide SIG
GS Group by Status      RF Refill
Select: Quit// RF Refill
Barcode Refill? NO//
Select Orders by number: (1-16): ?

This response must be a list or range, e.g., 1,3,5 or 2-4,8.

Select Orders by number: (1-16): 2
FILL DATE: (5/2/2011 - 11/2/2011): TODAY// (JUL 12, 2011)
MAIL/WINDOW: MAIL// MAIL
Now refilling Rx# 100004113 Drug: AMITRIPTYLINE 10MG TAB

Qty: 120 Sig: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY

RX# 100004113 has been suspended until 07-12-11.
```

NOTE: The system has the flexibility to sort the Medication Profile by different columns (RX, drug name, date, etc). When selecting a range of prescriptions from the Medication Profile to be refilled, selection is not limited to active prescriptions. If discontinued or expired prescriptions are included in a range, the system will display a message stating the status of each prescription as they are processed within the range. For example:

Cannot refill Rx # 100002897, Rx is in DISCONTINUED status.

Action Profile (132 COLUMN PRINTOUT)

[PSO ACTION PROFILE]

This option provides a list of a patient's active prescriptions, the expired and canceled prescriptions that may be renewed, and any Non-VA Med orders documented via the CPRS GUI application, and any remote prescriptions the patient may have are added to the end of the list as shown in the following report. Each prescription is followed by a place for the provider to indicate the action, renew or discontinue. This profile can be printed for an individual patient, for all patients with appointments in a clinic, all patients in all clinics, or for a clinic group.

In addition, a polypharmacy report can be printed with the action/informational profile. To get this report, answer **Yes** to the "POLYPHARMACY W/ACTION PROFILE" prompt in the *Site Parameter Enter/Edit* option to turn on this site parameter. This profile can be printed in an 80- or 132-column format. The Action Profile must be sent to a printer.

Barcodes may not show up on the action profile if the site parameters have not been set up for them.

If a prescription is for a drug marked for lab monitoring, the most recent lab result will be printed.

Copay affects the output report for this option. The letters SC (service connected) and NSC (non-service connected) will print on the same line as the RENEW/MD line only if the Veteran is rated service connected less than 50% and the prescription is not a supply item. This allows the physician to indicate (circle) the correct Veteran eligibility so that the Veteran may be charged a copay for the prescription, if applicable.

This report now displays ****BAD ADDRESS INDICATED**** if the patient has a bad address indicator. Also, if a temporary address has no end date, the following text is now displayed: "(Temp address from XXX 99,9999 till (no end date))".



If the prescription has been returned to stock, the letter (R) will appear next to the last fill date.

Example: Action Profile Report

```
Select Output Reports Option: action Profile (132 COLUMN PRINTOUT)
Action or Informational (A or I): A// I Informational
By Patient, Clinic or Clinic Group (P/C/G): P// <Enter> atient
Do you want this Profile to print in 80 column or 132 column: 132// <Enter>
Select PATIENT NAME: OPPATIENT,TEN OPPATIENT,TEN SC VETERAN

Profile Expiration/Discontinued Cutoff: (0-9999): 120// <Enter>
DEVICE: [Select Print Device] GENERIC INCOMING TELNET
```

-----example continues-----

Informational Rx Profile Run Date: DEC 19,2012 Page: 1
Sorted by drug classification for Rx's currently active and for those Rx's that have
been inactive less than 120 days. Site: VAMC ZZ ALBANY (500)

Outpatient prescriptions are discontinued 72 hours after admission.

Name : AMATO,CHARLES
DOB : 1942

Address : SLDK SLDK SLDK
LSDK LSDK LSDK
SALT LAKE CITY, UTAH 84108
Phone :

WEIGHT(Kg): 68.18 (12/12/2002) HEIGHT(cm): 139.70 (12/12/2002)
CrCL: 55.2(est.) (CREAT:1.2mg/dL 11/17/99)BSA: 1.55
DISABILITIES:

ALLERGIES: PENICILLIN, SOYBEANS, WHEAT,

ADVERSE REACTIONS:

Enter RETURN to continue or '^' to exit:

Medication/Supply Rx#
Status
Expiration
Provider
Date
Classification: RE400 - MUCOLYTICS
ACETYLCYSTEINE 20% 30ML Qty: 30 for 90 Days 501217
Active
12-19-2013
RITCHIE,ROXANNE
Sig: 1 MOUTH TWICE A DAY
Filled: 12-18-2012
Remaining Refills: 3 Clinic: 10TH FLOOR
Price: \$76.59

Press Return to Continue or "^" to Exit:

Informational Rx Profile Run Date: DEC 19,2012 Page: 2
Sorted by drug classification for Rx's currently active and for those Rx's that have
been inactive less than 120 days. Site: VAMC ZZ ALBANY (500)

Outpatient prescriptions are discontinued 72 hours after admission.

Name : AMATO,CHARLES
DOB : 1942

Address : SLDK SLDK SLDK
LSDK LSDK LSDK
SALT LAKE CITY, UTAH 84108
Phone :

WEIGHT(Kg): (12/12/2002) HEIGHT(cm): (12/12/2002)

-----PENDING ORDERS-----

Drug: ACETAMINOPHEN 325MG TABLET
Eff. Date: 03-20-2009Qty: 180 Refills: 2 Prov: FOX,KIRK
Sig: TAKE ONE TABLET BY MOUTH TWICE A DAY THESE ARE THE PATIENT
INSTRUCTIONS FOR ACETAMINOPHEN FOR THE MARTINSBURG NOIS CALL WITH THE
HELP OF JEANIE & SHIRLEY
Press Return to Continue or "^" to Exit:

Informational Rx Profile Run Date: DEC 19,2012 Page: 3
Sorted by drug classification for Rx's currently active and for those Rx's that have
been inactive less than 120 days. Site: VAMC ZZ ALBANY (500)

Outpatient prescriptions are discontinued 72 hours after admission.

Name : AMATO,CHARLES
DOB : 1942 Address : SLDK SLDK SLDK
LSDK LSDK LSDK
SALT LAKE CITY, UTAH 84108
Phone :

WEIGHT(Kg): (12/12/2002) HEIGHT(cm): (12/12/2002)

-----PENDING ORDERS-----

Drug: DAPSONE 25MG TAB
Eff. Date: 03-20-2009Qty: 360 Refills: 0 Prov: FOX,KIRK
Sig: TAKE TWO TABLETS BY MOUTH TWICE A DAY
Press Return to Continue or "^" to Exit:

Informational Rx Profile Run Date: DEC 19,2012 Page: 4
Sorted by drug classification for Rx's currently active
and for those Rx's that have been inactive less than 120 days. Site: VAMC
ZZ ALBANY (500)

Outpatient prescriptions are discontinued 72 hours after admission.

Name : AMATO,CHARLES
DOB : 1942 Address : SLDK SLDK SLDK
LSDK LSDK LSDK
SALT LAKE CITY, UTAH 84108
Phone :

WEIGHT(Kg): (12/12/2002) HEIGHT(cm): (12/12/2002)

-----PENDING ORDERS-----

Drug: ERYTHROMYCIN 250MG TAB
Eff. Date: 03-20-2009Qty: 180 Refills: 3 Prov: FOX,KIRK
Sig: TAKE ONE TABLET BY MOUTH TWICE A DAY
Press Return to Continue or "^" to Exit:

Informational Rx Profile Run Date: DEC 19,2012 Page: 5
Sorted by drug classification for Rx's currently active
and for those Rx's that have been inactive less than 120 days. Site: VAMC
ZZ ALBANY (500)

Outpatient prescriptions are discontinued 72 hours after admission.

Name : AMATO,CHARLES
DOB : 1942 Address : SLDK SLDK SLDK
LSDK LSDK LSDK
SALT LAKE CITY, UTAH 84108
Phone :

WEIGHT(Kg): (12/12/2002) HEIGHT(cm): (12/12/2002)

-----PENDING ORDERS-----

Example: Action Profile with the Polypharmacy Report

```
Select Outpatient Pharmacy Manager Option: Output Reports

Select Output Reports Option: Action Profile (132 COLUMN PRINTOUT)
Action or Informational (A or I): A// <Enter>   Action
Do you want generate a Polypharmacy report?: NO// YES
Minimum Number of Active Prescriptions: (1-100): 7// <Enter>
By Patient, Clinic or Clinic Group (P/C/G): P// ?

Enter 'P' to print by patient
      'C' for printing by clinic
      'G' for printing by clinic group
      'E' to exit process

      Select one of the following:

          P          Patient
          C          Clinic
          G          Clinic Group
          E          Exit

By Patient, Clinic or Clinic Group (P/C/G): P// G Clinic Group
Select Clinic Sort Group: WEST CLINIC
FOR DATE: 021007 (FEB 10, 2007)
Profile Expiration/Discontinued Cutoff: (0-9999): 120// <Enter>
Select a Printer: [Select Print Device]
DO YOU WANT YOUR OUTPUT QUEUED? NO// <Enter> (NO)

Select Clinic Sort Group: <Enter>
```

Alpha Drug List and Synonyms

[PSO ALPHA]

This report lists all drugs in alphabetical order by generic name. Any existing synonyms for each drug are listed in lowercase letters under the generic name.

AMIS Report

[PSO AMIS]

This report lists prescription statistics that are required by the VA Central Office. For a multidivisional site, the print device will report each division's statistics on a separate page with the grand totals on the last page. This report must be printed on a 132-column printer.



Month/day/year may be specified for a current month report, but only month and year can be specified for reports of past months.

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Significant Drug Interaction with Remote Rx

Significant Drug Interaction with Prospective Drug:
WARFARIN 5MG TAB and

LOCATION: <VA or DOD facility> Remote RX#: 10950021
Drug: ASPIRIN 325MG EC TAB (ACTIVE)
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
Last Filled On: 11/08/06

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Critical Drug Interaction with Remote Rx

CRITICAL Drug Interaction with Prospective Drug:
INDINAVIR 400MG CAP and

LOCATION: <VA or DOD Facility> Remote Rx#: 2443
Drug: AMIODARONE 200MG TAB (ACTIVE)
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY
Last Filled On: 11/08/06

The concurrent administration of amiodarone with indinavir, (1) nelfinavir, (2) ritonavir, (3) or tipranavir coadministered with ritonavir (4) may result in increased levels, clinical effects, and toxicity of amiodarone.

Critical Drug Interaction with Non-VA Med Order

Critical Drug Interaction with Prospective Drug:
WARFARIN 5MG TAB and

Non-VA Med: CIMETIDINE 200MG TAB
Dosage: ONE TABLET Schedule: AT BEDTIME

The pharmacologic effects of warfarin may be increased resulting in severe bleeding.

Significant Drug Interaction with Non-VA Med Order

Significant Drug Interaction with Prospective Drug:
WARFARIN 5MG TAB and

Non-VA Med: ASPIRIN 325MG TAB
Dosage: ONE TABLET Schedule: <NOT ENTERED>

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Critical Drug Interaction with Pending Order

CRITICAL Drug Interaction with Prospective Drug:
INDINAVIR 400MG CAP and

Pending Drug: AMIODARONE 200MG TAB
SIG: TAKE ONE TABLET EVERY 8 HOURS

The concurrent administration of amiodarone with indinavir, (1) nelfinavir, (2) ritonavir, (3) or tipranavir coadministered with ritonavir (4) may result in increased levels, clinical effects, and toxicity of amiodarone.

Significant Drug Interaction with Pending Order

SIGNIFICANT Drug Interaction with Prospective Drug:
WARFARIN 5MG TAB and

Pending Drug: ASPIRIN 325MG TAB

SIG: TAKE ONE TABLET EVERY 8 HOURS

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Clinic Orders

Clinic orders are created via CPRS generally using the Meds Inpatient tab or the IV Fluids tab. Drug orders that have a clinic and an appointment date and time are considered clinic orders. The clinic must be defined with 'ADMINISTER INPATIENT MEDS?' prompt answered YES under the SETUP A CLINIC [SDBUILD] option in the Scheduling package. Defining the clinic in this manner ensures that an appointment date and time are defined. Orders placed via backdoor inpatient medications are not considered clinic orders.

MOCHA 1 Enhancement 1 adds drug interaction and therapeutic duplication order checks for clinic orders to Outpatient Pharmacy. Previously Inpatient Medications package performed order checks on active, pending and non-verified clinic orders. With the MOCHA 1 Enhancement 1, Inpatient medications will perform enhanced order checks for recently discontinued and expired inpatient medications clinic orders.

For both packages, the system will display clinic orders in a standard format to differentiate them from Inpatient Medications and Outpatient Pharmacy order checks.

Discontinued/expired orders must have a stop date within the last 90 days to be evaluated during enhanced order checks. For pending clinic orders, a variety of start and stop dates are available based on the information that the provider enters during initial order entry. The following are the scenarios that drive which dates will be displayed for the clinic order:

- If there are start/stop dates defined, they are displayed.
- If there are no stop/start dates defined, the 'requested start/stop dates' will be displayed with the word "Requested" prior to the start/stop date header.
- If there are no requested start/stop dates defined, the order date will be displayed and the start/stop date headers will be displayed with "*****" for the date.
- If there is either a requested start date or a requested stop date, the available date will be displayed and "*****" will be displayed for the undefined date.

Unit Dose Clinic Order Check example:

Now Processing Enhanced Order Checks! Please wait...
This patient is receiving the following order(s) that have a CRITICAL Drug Interaction with CIMETIDINE 300 MG:

Clinic Order: PHENYTOIN 100MG CAP (DISCONTINUED)
Schedule: Q8H
Dosage: 100MG
Start Date: FEB 27, 2012@13:00
Stop Date: FEB 28, 2012@15:22:27

Concurrent use of cimetidine or ranitidine may result in elevated levels of and toxicity from the hydantoin. Neutropenia and thrombocytopenia have been reported with concurrent cimetidine and phenytoin.

IV Clinic Order Check example:

This patient is receiving the following order(s) that have a CRITICAL Drug Interaction with WARFARIN 2MG TAB:

Clinic Order: POTASSIUM CHLORIDE 20 MEQ (ACTIVE)
Other Additive(s): MAGNESIUM SULFATE 1 GM (1), CALCIUM GLUCONATE 1 GM (2),
HEPARIN 1000 UNITS, CIMETIDINE 300 MG
Solution(s): DEXTROSE 20% 500 ML 125 ml/hr
AMINO ACID SOLUTION 8.5% 500 ML 125 ml/hr
Start Date: APR 05, 2012@15:00
Stop Date: APR 27, 2012@24:00

The pharmacologic effects of warfarin may be increased resulting in severe bleeding.

Therapeutic Duplication - IV and Unit Dose clinic order therapeutic duplications display in the same format as drug interactions.

Unit Dose Clinic Order Check example:

This patient is already receiving the following INPATIENT and/or OUTPATIENT order(s) for a drug in the same therapeutic class(es):

Drug(s) Ordered:
POTASSIUM CHLORIDE 30 MEQ

Clinic Order: POTASSIUM CHLORIDE 10MEQ TAB (PENDING)
Schedule: BID
Dosage: 20MEQ
Requested Start Date: NOV 20, 2012@17:00
Stop Date: *****

Class(es) Involved in Therapeutic Duplication(s): Potassium

IV Order Check example:

This patient is already receiving the following INPATIENT and/or OUTPATIENT order(s) for a drug in the same therapeutic class(es):

Drug(s) Ordered:
CEFAZOLIN 1 GM

Clinic Order: CEFAZOLIN 2 GM (PENDING)
Solution(s): 5% DEXTROSE 50 ML
Order Date: NOV 20, 2012@11:01
Start Date: *****
Stop Date: *****

Clinic Order: CEFAZOLIN SOD 1GM INJ (EXPIRED)
Solution(s): 5% DEXTROSE 50 ML
Start Date: OCT 24, 2012@16:44
Stop Date: OCT 25, 2012@24:00

Class(es) Involved in Therapeutic Duplication(s): Beta-Lactams,
Cephalosporins, Cephalosporins - 1st Generation

The FDB standard professional drug interaction monograph is shown below:

This information is generalized and not intended as specific medical advice. Consult your healthcare professional before taking or discontinuing any drug or commencing any course of treatment.

MONOGRAPH TITLE: Anticoagulants/Salicylates

SEVERITY LEVEL: 2-Severe Interaction: Action is required to reduce the risk of severe adverse interaction.

MECHANISM OF ACTION: Multiple processes are involved: 1) Salicylate doses greater than 3 gm daily decrease plasma prothrombin levels. 2) Salicylates may also displace anticoagulants from plasma protein binding sites. 3) Salicylates impair platelet function, resulting in prolonged bleeding time. 4) Salicylates may cause gastrointestinal bleeding due to irritation.

CLINICAL EFFECTS: The concurrent use of anticoagulants and salicylates may result in increased INR values and increase the risk of bleeding.

PREDISPOSING FACTORS: None determined.

PATIENT MANAGEMENT: Avoid concomitant administration of these drugs. If salicylate use is necessary, monitor prothrombin time, bleeding time, or INR values closely. When possible, the administration of a non-aspirin salicylate would be preferable.

DISCUSSION: This interaction has been reported between aspirin and warfarin and between aspirin and dicumarol. Diflunisal, sodium salicylate, and topical methyl salicylate have been shown to interact with anticoagulants as well. Based on the proposed mechanisms, other salicylates would be expected to interact with anticoagulants as well. The time of highest risk for a coumarin-type drug interaction is when the precipitant drug is initiated, altered, or discontinued.

REFERENCES:

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Copying an Order – Significant Interaction

```
Medication Profile      Feb 14, 2008@08:56:40      Page: 1 of 1
OPPATIENT,TWO                                     <A>
  PID: 666-33-3333                                     Ht(cm): 167.64 (10/16/1993)
  DOB: JUL 1,1934 (73)                                Wt(kg): 68.18 (10/16/1993)
  SEX: MALE
  CrCL: <Not Found>                                   BSA (m2): 1.77

#  RX #          DRUG          QTY ST  DATE  FILL REM SUP
-----
-----ACTIVE-----
1 2528$          AMINOPHYLLINE 200MG TAB      120 A 02-13 02-13 11 30
2 2529$          ASPIRIN 325MG EC TAB        30 A 02-13 02-13 11 30
3 2527$          CIMETIDINE 300MG TAB         30 A 02-13 02-13 11 30
4 2531$          INDOMETHACIN 25MG CAP        90 A 02-13 02-13 11 30
5 2530$          WARFARIN 2.5MG TAB           30 A 02-13 02-13 11 30

DC  Discontinue      PR  Partial      RL  Release
ED  Edit             RF  Refill       RN  Renew
Select Action: Next Screen// co  CO

New OP Order (COPY)      Feb 14, 2008@08:56:43      Page: 1 of 2
OPPATIENT,TWO                                     <A>
  PID: 666-33-3333                                     Ht(cm): 167.64 (10/16/1993)
  DOB: JUL 1,1934 (73)                                Wt(kg): 68.18 (10/16/1993)

  Orderable Item: ASPIRIN TAB,EC
(1)      Drug: ASPIRIN 325MG EC TAB <DIN>
(2) Patient Status: OPT NSC
(3)      Issue Date: FEB 14,2008                    (4) Fill Date: FEB 14,2008
(5) Dosage Ordered: 325 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: TABLET
      Route: ORAL
      Schedule: QAM
(6) Pat Instruction:
      SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
(7)      Days Supply: 30                            (8) QTY (TAB): 30
(9)      # of Refills: 11                          (10) Routing: WINDOW
+      Enter ?? for more actions
AC  Accept          ED  Edit
Select Action: Next Screen// ac  Accept
-----
Duplicate Drug in Local RX:

      Rx #: 2529
      Drug: ASPIRIN 325MG EC TAB
      SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
      QTY: 30                      Refills remaining: 11
      Provider: OPPROVIDER, ONE      Issued: 02/13/08
      Status: ACTIVE                  Last filled on: 02/13/08
      Processing Status: Released locally on 02/13/08@08:55:32 (Window)
                                      Days Supply: 30
-----

Discontinue Rx #2529 ASPIRIN 325MG EC TAB? Y/N YES

Rx #2529 ASPIRIN 325MG EC TAB will be discontinued after the acceptance of the new order.

Now doing remote order checks. Please wait...
Now Processing Enhanced Order Checks! Please Wait...

***SIGNIFICANT*** Drug Interaction with
ASPIRIN 325MG EC TAB and
```

```

Local RX#: 2530
      DRUG: WARFARIN 2.5MG TAB (ACTIVE)
      SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
Processing Status: Released locally on 01/08/08@08:55:32 (Window)
      Last Filled On: 01/08/08

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// n NO
Remote data not available - Only local order checks processed.

Press Return to Continue...

Nature of Order: WRITTEN//          W
WAS THE PATIENT COUNSELED: NO//
.
.
      OR

Do you want to Intervene? Y// ES
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention
for ASPIRIN 325MG EC TAB

PROVIDER:      OPPROVIDER,ONE      OPP      119
RECOMMENDATION:      NO CHANGE

See 'Pharmacy Intervention Menu' if you want to delete this
intervention or for more options.

Would you like to edit this intervention ? N// O
Nature of Order: WRITTEN//
.

```

Verifying an Order – Critical Drug Interaction

```

OP Medications (NON-VERIFIED) Feb 13, 2008@08:49:48      Page:      1 of      2
PSOPATIENT,TWO                                          <A>
  PID: 000-00-0000      Ht(cm): 167.64 (10/16/1993)
  DOB: JUL 1,1934 (73)      Wt(kg): 68.18 (10/16/1993)

      Rx #: 2528$
(1) *Orderable Item: AMINOPHYLLINE TAB
(2)      Drug: AMINOPHYLLINE 200MG TAB
(3)      *Dosage: 200 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: TABLET
      *Route: ORAL
      *Schedule: Q6H
(4) Pat Instructions:
      SIG: TAKE ONE TABLET BY MOUTH EVERY 6 HOURS
(5) Patient Status: OPT NSC
(6)      Issue Date: 02/13/08      (7) Fill Date: 02/13/08
      Last Fill Date: 02/13/08 (Window)
+      Enter ?? for more actions
DC Discontinue      PR (Partial)      RL (Release)
ED (Edit)      RF (Refill)      RN (Renew)
Select Action: Next Screen// VF VF

PSOPATIENT,TWO      ID#:000-00-0000 RX #2528

```


RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----NON-VERIFIED-----							
1 2528\$	AMINOPHYLLINE 200MG TAB	120	N	02-13	02-13	11	30
2 2529\$	ASPIRIN 325MG EC TAB	30	N	02-13	02-13	11	30
3 2527\$	CIMETIDINE 300MG TAB	30	N	02-13	02-13	11	30
4 2531\$	INDOMETHACIN 25MG CAP	90	N	02-13	02-13	11	30
5 2530\$	WARFARIN 2.5MG TAB	30	N	02-13	02-13	11	30

Press RETURN to Continue:

CRITICAL Drug Interaction with Prospective Drug:
AMINOPHYLLINE 200MG TAB and

Local RX#: 2527
Drug: CIMETIDINE 300MG (ACTIVE)
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
Processing Status: Released locally on 11/08/08@08:55:32 (Window)
Last Filled On: 11/08/08

Concurrent cimetidine and theophylline derivative therapy may result in elevated theophylline derivative concentration levels, prolonged elimination half-life, and decreased clearance.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// NO

Medication Profile Feb 13, 2008@08:50:04 Page: 1 of 1
PSOPATIENT,TWO <A>
PID: 000-00-0000 Ht(cm): 167.64 (10/16/1993)
DOB: JUL 1,1934 (73) Wt(kg): 68.18 (10/16/1993)
SEX: MALE
CrCL: <Not Found> BSA (m2): 1.77

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----NON-VERIFIED-----								
1	2528\$	AMINOPHYLLINE 200MG TAB	120	N	02-13	02-13	11	30
2	2529\$	ASPIRIN 325MG EC TAB	30	N	02-13	02-13	11	30
3	2527\$	CIMETIDINE 300MG TAB	30	N	02-13	02-13	11	30
4	2531\$	INDOMETHACIN 25MG CAP	90	N	02-13	02-13	11	30
5	2530\$	WARFARIN 2.5MG TAB	30	N	02-13	02-13	11	30

Enter ?? for more actions

ED (Edit) RF (Refill) RN (Renew)

.

OR

Do you want to Continue? Y// YES

Do you want to Process or Cancel medication?
Rx #2528 DRUG: AMINOPHYLLINE 200MG TAB: PROCESS//

Enter your Current Signature Code: SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for AMINOPHYLLINE 200MG TAB

PROVIDER: PSOPROVIDER,TWO TPP 119
RECOMMENDATION: NO CHANGE

See 'Pharmacy Intervention Menu' if you want to delete this intervention or for more options.

Would you like to edit this intervention ? N// O

RX: 2528 PATIENT: PSOPATIENT,TWO (000-00-0000)
 STATUS: Non-Verified CO-PAY STATUS
 DRUG: AMINOPHYLLINE 200MG TAB
 QTY: 120 30 DAY SUPPLY
 SIG: TAKE ONE TABLET BY MOUTH EVERY 6 HOURS
 LATEST: 02/13/2008 # OF REFILLS: 11 REMAINING: 11
 ISSUED: 02/13/08 PROVIDER:
 LOGGED: 02/13/08 CLINIC: NOT ON FILE
 EXPIRES: 02/13/09 DIVISION: HINES (499)
 CAP: SAFETY ROUTING: WINDOW
 ENTRY BY: PSOPHARMACIST,ONE VERIFIED BY:

LABEL LOG:

#	DATE	RX REF	PRINTED BY
=====			

1 02/13/08 ORIGINAL OPCLERK,ONE
 COMMENTS: From RX number 2528 Drug-Drug interaction
 PATIENT STATUS : OPT NSC COPIES : 1
 Now doing remote order checks. Please wait...
 Remote data not available - Only local order checks processed.

Press Return to Continue...

EDIT: (Y/N/P): N// O
 VERIFY FOR PSOPATIENT,TWO ? (Y/N/Delete/Quit): Y// ES
 .

Verifying an Order – Significant Drug Interaction

OP Medications (NON-VERIFIED) Feb 13, 2008@08:51:40 Page: 1 of 2
 PSOPATIENT,TWO <A>
 PID: 000-00-0000 Ht(cm): 167.64 (10/16/1993)
 DOB: JUL 1,1934 (73) Wt(kg): 68.18 (10/16/1993)

 Rx #: 2531\$
 (1) *Orderable Item: INDOMETHACIN CAP,ORAL
 (2) Drug: INDOMETHACIN 25MG CAP
 (3) *Dosage: 25 (MG)
 Verb: TAKE
 Dispense Units: 1
 Noun: CAPSULE
 *Route: ORAL
 *Schedule: TID
 (4)Pat Instructions:
 SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
 (5) Patient Status: OPT NSC
 (6) Issue Date: 02/13/08 (7) Fill Date: 02/13/08
 Last Fill Date: 02/13/08 (Window)
 + Enter ?? for more actions
 DC Discontinue PR (Partial) RL (Release)
 ED Edit RF (Refill) RN (Renew)
 Select Action: Next Screen// VF VF

PSOPATIENT,TWO ID#:000-00-0000 RX #2531

RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----ACTIVE-----							
1 2528\$	AMINOPHYLLINE 200MG TAB	120	A	02-13	02-13	11	30
2 2529\$	ASPIRIN 325MG EC TAB	30	A	02-13	02-13	11	30
-----NON-VERIFIED-----							
3 2527\$	CIMETIDINE 300MG TAB	30	N	02-13	02-13	11	30
4 2531\$	INDOMETHACIN 25MG CAP	90	N	02-13	02-13	11	30
5 2530\$	WARFARIN 2.5MG TAB	30	N	02-13	02-13	11	30

Press RETURN to Continue:

```

***SIGNIFICANT*** Drug Interaction with Prospective Drug:
                      INDOMETHACIN 25MG CAP and

      Local RX#: #2530
      DRUG: WARFARIN 2.5MG TAB (ACTIVE)
      SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
Processing Status: Released locally on 02/13/08@08:55:32 (Window)
      Last Filled On: 02/13/08

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// NO

RX: 2531          PATIENT: PSOPATIENT,TWO (000-00-0000)
STATUS: Non-Verified CO-PAY STATUS
      DRUG: INDOMETHACIN 25MG CAP
      QTY: 90      30 DAY SUPPLY
      SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
      LATEST: 02/13/2008      # OF REFILLS: 11  REMAINING: 11
      ISSUED: 02/13/08      PROVIDER:
      LOGGED: 02/13/08      CLINIC: NOT ON FILE
      EXPIRES: 02/13/09      DIVISION: HINES (499)
      CAP: SAFETY      ROUTING: WINDOW
      ENTRY BY: OPCLERK,ONE      VERIFIED BY:

PATIENT STATUS : OPT NSC      COPIES : 1
Now doing remote order checks. Please wait...
Remote data not available - Only local order checks processed.

Press Return to Continue...

EDIT: (Y/N/P): N// O
VERIFY FOR PSOPATIENT,TWO ? (Y/N/Delete/Quit): Y// NO
.
.
      OR

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for INDOMETHACIN 25MG CAP

PROVIDER: PSOPROVIDER,TWO      TPP      119
RECOMMENDATION: NO CHANGE

See 'Pharmacy Intervention Menu' if you want to delete this
intervention or for more options.

Would you like to edit this intervention ? N// O

RX: 2531          PATIENT: PSOPATIENT,TWO (000-00-0000)
STATUS: Non-Verified CO-PAY STATUS
      DRUG: INDOMETHACIN 25MG CAP
      QTY: 90      30 DAY SUPPLY
      SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
      LATEST: 02/13/2008      # OF REFILLS: 11  REMAINING: 11
      ISSUED: 02/13/08      PROVIDER:
      LOGGED: 02/13/08      CLINIC: NOT ON FILE
      EXPIRES: 02/13/09      DIVISION: HINES (499)
      CAP: SAFETY      ROUTING: WINDOW
      ENTRY BY: OPCLERK, ONE      VERIFIED BY:

PATIENT STATUS : OPT NSC      COPIES : 1
Now doing remote order checks. Please wait...
Remote data not available - Only local order checks processed.

```

Press Return to Continue...

EDIT: (Y/N/P): N// O

VERIFY FOR PSOPATIENT,TWO ? (Y/N/Delete/Quit): Y// YES

.

Reinstating A Discontinued Order – Critical Interaction

```
Rx #: 2473
(1) *Orderable Item: AMINOPHYLLINE TAB
(2) Drug: AMINOPHYLLINE 200MG TAB
(3) *Dosage: 200 (MG)
    Verb: TAKE
    Dispense Units: 1
    Noun: TABLET
    *Route: ORAL
    *Schedule: Q6H
(4) Pat Instructions:
    SIG: TAKE ONE TABLET BY MOUTH EVERY 6 HOURS
(5) Patient Status: SC LESS THAN 50%
(6) Issue Date: 06/25/07 (7) Fill Date: 06/25/07
    Last Fill Date: 02/12/08 (Window)
+ Enter ?? for more actions
DC Discontinue PR (Partial) RL Release
ED (Edit) RF (Refill) RN Renew
Select Action: Next Screen// DC Discontinue
Are you sure you want to Reinstate? NO// YES

Comments: TESTING
Nature of Order: SERVICE CORRECTION// S
=====

2473 AMINOPHYLLINE 200MG TAB
Now Processing Enhanced Order Checks! Please Wait...

***CRITICAL*** Drug Interaction with Prospective Drug:
AMINOPHYLLINE 200MG TAB and

    Local RX#: 2527
    Drug: CIMETIDINE 300MG (ACTIVE)
    SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
Processing Status: Released locally on 02/13/08@08:55:32 (Window)
    Last Filled On: 02/13/08

Concurrent cimetidine and theophylline derivative therapy may result in elevated
theophylline derivative concentration levels, prolonged elimination half-life, and
decreased clearance.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// NO

PI Patient Information SO Select Order
PU Patient Record Update NO New Order
PI Patient Information SO Select Order
Select Action: Quit// 5

Medication Profile Feb 14, 2008@11:43:17 Page: 1 of 1
PSOPATIENT, TEN <A>
    PID: 000-00-0000 Ht (cm): ( )
    DOB: JAN 1,1922 (86) Wt (kg): ( )
    SEX: MALE
    CrCL: <Not Found> BSA (m2):
    ISSUE LAST REF DAY
    QTY ST DATE FILL REM SUP
-----ACTIVE-----
1 2472 CIMETIDINE 300MG TAB 60 A 06-25 02-12 11 30
2 2526 INDINAVIR 400MG CAP 90 A 02-12 02-12 11 30
```

```

3 2469          RIFAMPIN 300MG CAP          120 A 06-25 02-12 11 30
4 2525          WARFARIN 5MG TAB            30 A 02-12 02-12 11 30
-----DISCONTINUED-----
5 2473          AMINOPHYLLINE 200MG TAB      120 DC 06-25 02-12 11 30
6 2533          AMIODARONE 200MG TAB        180 DC 02-14 02-14 11 30
7 2465          ASPIRIN 325MG EC TAB        30 DC 06-25 02-12 11 30
8 2471          CARBAMAZEPINE 200MG TAB     90 DC 06-25 02-12 11 30
9 2524          WARFARIN 2.5MG TAB          90 DC 02-12 02-12 11 30
      Enter ?? for more actions

ED   (Edit)                RF   (Refill)                RN   Renew
.
.
      Or

Do you want to Continue? Y// ES

Do you want to Process medication
AMINOPHYLLINE 200MG TAB: P// ROCESS

Enter your Current Signature Code:      SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for AMINOPHYLLINE 200MG TAB

PROVIDER:      OPPROVIDER, ELEVEN      EPP
RECOMMENDATION:      NO CHANGE

See 'Pharmacy Intervention Menu' if you want to delete this
intervention or for more options.

Would you like to edit this intervention ? N// O

Prescription #2473 REINSTATED!
Prescription #2473 Filled: JUN 25, 2007Printed: JUN 25, 2007Released:
** Do you want to print the label now? N// O

ED   (Edit)                RF   (Refill)                RN   Renew
.

```

Reinstating A Discontinued Order – Significant Interaction

```

Rx #: 2465
(1) *Orderable Item: ASPIRIN TAB,EC
(2)      Drug: ASPIRIN 325MG EC TAB <DIN>
(3)      *Dosage: 325 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: TABLET
      *Route: ORAL
      *Schedule: QAM
(4)Pat Instructions:
      SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
(5) Patient Status: SC LESS THAN 50%
(6)      Issue Date: 06/25/07      (7) Fill Date: 06/25/07
      Last Fill Date: 02/12/08 (Window)
+      Enter ?? for more actions
DC   Discontinue      PR   (Partial)      RL   Release
ED   (Edit)           RF   (Refill)       RN   Renew
Select Action: Next Screen// DC   Discontinue
Are you sure you want to Reinstate? NO// YES

Comments: TESTING
Nature of Order: SERVICE CORRECTION//      S
=====

2465 ASPIRIN 325MG EC TAB
Now Processing Enhanced Order Checks! Please Wait...

```

```

***SIGNIFICANT*** Drug Interaction with Prospective Drug:
                    ASPIRIN 325MG EC TAB and

        Local RX#: 2524
        Drug: WARFARIN 2.5MG TAB (ACTIVE)
        SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
        Processing Status: Released locally on 02/12/07@08:55:32 (Window)
        Last Filled On: 02/12/07

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// NO

Prescription #2465 REINSTATED!
  Prescription #2465 Filled: JUN 25, 2007Printed: JUN 25, 2007Released:
    ** Do you want to print the label now? N//
.
.
  OR

Do you want to Intervene? Y// YES

Do you want to Process medication
CARBAMAZEPINE 200MG TAB: P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for CARBAMAZEPINE 200MG TAB

PROVIDER:    OPPROVIDER, ELEVEN      EPP
RECOMMENDATION:    NO CHANGE

See 'Pharmacy Intervention Menu' if you want to delete this
intervention or for more options.

Would you like to edit this intervention ? N// O

Prescription #2471 REINSTATED!
  Prescription #2471 Filled: JUN 25, 2007Printed: JUN 25, 2007Released:
    ** Do you want to print the label now? N// O
.

```

Editing An Order – Creating a New Order – Critical Interaction

```

Medication Profile          Feb 14, 2008@12:26:38          Page:    1 of    2
OPPATIENT, ONE              <A>
  PID: 000-00-0000          Ht (cm) :          (      )
  DOB: JAN 1,1922 (86)      Wt (kg) :          (      )
  SEX: MALE
  CrCL: <Not Found>         BSA (m2) :
                                ISSUE  LAST REF DAY
                                QTY ST  DATE  FILL REM SUP
#  RX #          DRUG
-----ACTIVE-----
1  2473          AMINOPHYLLINE 200MG TAB          120 A  06-25 02-12  11  30
2  2537          ASPIRIN 325MG EC TAB            30 A  02-14 02-14  11  30
3  2471          CARBAMAZEPINE 200MG TAB          90 A  06-25 02-12  11  30
4  2472          CIMETIDINE 300MG TAB             60 A  06-25 02-12  11  30
5  2526          INDINAVIR 400MG CAP              90 A  02-12 02-12  11  30
6  2469          RIFAMPIN 300MG CAP              120 A  06-25 02-12  11  30
-----DISCONTINUED-----
7  2533          AMIODARONE 200MG TAB            180 DC 02-14 02-14  11  30
8  2536          DIPYRIDAMOLE 25MG TAB            30 DE 02-14 02-14  11  30
9  2524          WARFARIN 2.5MG TAB              90 DC 02-12 02-12  11  30
+      Enter ?? for more actions

```

Rx # 2559 03/04/08
OPPATIENT,ONE #90
TAKE ONE TABLET BY MOUTH EVERY EVENING

WARFARIN 5MG TAB
OERRPROVIDER,ONE PSOPHARMACIST,ONE
of Refills: 3

SC Percent: 80%
Disabilities: NONE STATED

Was treatment for a Service Connected condition? YES//
.

Pharmacist Verifying order with 2 drug interactions

OP Medications (NON-VERIFIED) Mar 04, 2008@11:55:21 Page: 1 of 2
OPPATIENT,ONE <A>
PID: 666-00-0000 Ht (cm) : _____ (_____)
DOB: JAN 1,1910 (98) Wt (kg) : _____ (_____)

Rx #: 2560
(1) *Orderable Item: WARFARIN TAB
(2) Drug: WARFARIN 5MG TAB
(3) *Dosage: 5 (MG)
Verb: TAKE
Dispense Units: 1
Noun: TABLET
*Route: ORAL
*Schedule: QPM
(4) Pat Instructions:
SIG: TAKE ONE TABLET BY MOUTH EVERY EVENING
(5) Patient Status: SC
(6) Issue Date: 03/04/08 (7) Fill Date: 03/04/08
Last Fill Date: 03/04/08 (Window)
+ Enter ?? for more actions
DC Discontinue PR (Partial) RL (Release)
ED Edit RF (Refill) RN (Renew)
Select Action: Next Screen// VF VF

OPPATIENT,ONE ID#:666-00-0000 RX #2560

RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF	DAY SUP
-----ACTIVE-----							
1 2550	IBUPROFEN 600MG TAB	270	A	03-03	03-04	3	90
-----NON-VERIFIED-----							
2 2560	WARFARIN 5MG TAB	90	N	03-04	03-04	3	90
-----PENDING-----							
3	FAMOTIDINE 20MG TAB	QTY: 180		ISDT: 03-04>	REF: 3		
4	INDOMETHACIN 25MG CAP	QTY: 270		ISDT: 03-04	REF: 3		
5	LOVASTATIN 10MG TAB	QTY: 90		ISDT: 03-03	REF: 3		
6	NIFEDIPINE 90MG SA TAB	QTY: 90		ISDT: 03-03	REF: 3		

-----Non-VA MEDS (Not dispensed by VA)-----
CIMETIDINE 300MG TAB 300MG TWICE A DAY Date Documented: 03/03/08
Press RETURN to Continue:

Critical Drug Interaction with Prospective Drug:
WARFARIN 5MG TAB and

Non-VA Med: CIMETIDINE 300MG TAB
Dosage: ONE TABLET Schedule: AT BEDTIME

The pharmacologic effects of warfarin may be increased resulting in severe bleeding.

Display Professional Interaction Monograph? No// No

SIGNIFICANT Drug Interaction with Prospective Drug:
WARFARIN 5MG TAB and

Local RX#: 2443
Drug: IBUPROFEN 600MG TAB (ACTIVE)
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY
Processing Status: Released locally on 11/08/07@08:55:32 (Window)
Last Filled On: 11/08/07

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// NO

RX: 2560 PATIENT: OPPATIENT,ONE (666-00-0000)
STATUS: Non-Verified
DRUG: WARFARIN 5MG TAB
QTY: 90 90 DAY SUPPLY
SIG: TAKE ONE TABLET BY MOUTH EVERY EVENING
LATEST: 03/04/2008 # OF REFILLS: 3 REMAINING: 3
ISSUED: 03/04/08 PROVIDER:
LOGGED: 03/04/08 CLINIC: BARB'S CLINIC
EXPIRES: 03/05/09 DIVISION: HINES (499)
CAP: SAFETY ROUTING: WINDOW
ENTRY BY: OERRPROVIDER,ONE VERIFIED BY:

ACTIVITY LOG:

#	DATE	REASON	RX REF	INITIATOR OF ACTIVITY
1	03/04/08	PATIENT INST.ORIGINAL		

COMMENTS: Patient Instructions Not Sent By Provider.
PATIENT STATUS : SC COPIES : 1
EDIT: (Y/N/P): N// NO
VERIFY FOR OPPATIENT,ONE ? (Y/N/Delete/Quit): Y// ES

PI Patient Information SO Select Order

Medication Profile Mar 04, 2008@11:55:31 Page: 1 of 1
OPPATIENT,ONE <A>
PID: 666-00-0000 Ht (cm): ()
DOB: JAN 1,1910 (98) Wt (kg): ()
SEX: FEMALE Non-VA Meds on File Last entry on 03/03/08
CrCL: <Not Found> BSA (m2):
ISSUE LAST REF DAY

#	RX #	DRUG	QTY	ST	DATE	FILL	REM	SUP
-----ACTIVE-----								
1	2550	IBUPROFEN 600MG TAB	270	A	03-03	03-04	3	90
2	2560	WARFARIN 5MG TAB	90	A	03-04	03-04	3	90
-----PENDING-----								
3		FAMOTIDINE 20MG TAB	QTY: 180		ISDT: 03-04	REF: 3		
4		INDOMETHACIN 25MG CAP	QTY: 270		ISDT: 03-04	REF: 3		
5		LOVASTATIN 10MG TAB	QTY: 90		ISDT: 03-03	REF: 3		
6		NIFEDIPINE 90MG SA TAB	QTY: 90		ISDT: 03-03	REF: 3		
-----Non-VA MEDS (Not dispensed by VA)-----								
		CIMETIDINE 300MG TAB 300MG TWICE A DAY			Date Documented: 03/03/08			

Enter ?? for more actions
PU Patient Record Update NO New Order
PI Patient Information SO Select Order
Select Action: Quit//
.

You entered 25MG is this correct? Yes// YES

VERB: TAKE// TAKE

DISPENSE UNITS PER DOSE(TABLET): 1// 1

Dosage Ordered: 25MG

NOUN: TABLET// TABLET

ROUTE: ORAL// ORAL

Schedule: QAM// tid (THREE TIMES A DAY)

LIMITED DURATION (IN MONTHS, WEEKS, DAYS, HOURS OR MINUTES):

CONJUNCTION:

New OP Order (ROUTINE)

Mar 12, 2008@10:58:24

Page: 1 of 2

PSOPATIENT,ONE

PID: 666-00-0000

Ht (cm): ()

DOB: JAN 1,1910 (98)

Wt (kg): ()

Orderable Item: DIPYRIDAMOLE TAB

(1) Drug: DIPYRIDAMOLE 25MG TAB

(2) Patient Status: SC

(3) Issue Date: MAR 12,2008

(4) Fill Date: MAR 12,2008

(5) Dosage Ordered: 25 (MG)

Verb: TAKE

Dispense Units: 1

Noun: TABLET

Route: ORAL

Schedule: TID

(6) Pat Instruction:

SIG: TAKE ONE TABLET BY MOUTH THREE TIMES A DAY

(7) Days Supply: 90

(8) QTY (TAB): 180

(9) # of Refills: 3

(10) Routing: WINDOW

+ This change will create a new prescription!

AC Accept

ED Edit

Select Action: Next Screen// ac Accept

Nature of Order: SERVICE CORRECTION//

S

WAS THE PATIENT COUNSELED: NO// NO

Do you want to enter a Progress Note? No// NO

Rx # 2595

03/12/08

PSOPATIENT,ONE

#180

TAKE ONE TABLET BY MOUTH THREE TIMES A DAY

DIPYRIDAMOLE 25MG TAB

PSOPROVIDER,ONE

PSOPHARMACIST,ONE

of Refills: 3

The Pharmacy Orderable Item has changed for this order. Please review any existing SC or Environmental Indicator defaults carefully for appropriateness.

SC Percent: 80%

Disabilities: NONE STATED

Was treatment for a Service Connected condition? YES//

Is this correct? YES// ...

.

Cancel drug in same class parameter set to No

```
PSOPATIENT,ONE                                     <A>
PID: 666-00-0000                                Ht(cm): _____ (_____)
DOB: JAN 1,1910 (98)                            Wt(kg): _____ (_____)
SEX: FEMALE                                     Non-VA Meds on File   Last entry on 03/03/08
CrCL: <Not Found>                               BSA (m2): _____
                                                ISSUE  LAST REF DAY
#  RX #      DRUG                                QTY ST  DATE  FILL REM SUP
-----ACTIVE-----
1 2562      AMINOPHYLLINE 200MG TAB              360 A   03-04 03-04   3  90
2 2567      CAPTOPRIL 12.5MG TAB                 180 A   03-06 03-06   3  90
3 2563      CISAPRIDE 10MG                      90 A    03-06 03-06   3  90
4 2568      DIGOXIN 0.125MG                     30 A    03-06 03-06   3  90
5 2550      IBUPROFEN 600MG TAB                 270 A   03-03 03-04   3  90
6 2560      WARFARIN 5MG TAB                    90 A    03-04 03-04   3  90
-----DISCONTINUED-----
7 2561      CIMETIDINE 300MG TAB                 90 DC   03-04 03-04   3  90
-----HOLD-----
+          Enter ?? for more actions
PU Patient Record Update                        NO New Order
PI Patient Information                          SO Select Order
Select Action: Next Screen// NO New Order

Eligibility: SERVICE CONNECTED 50% to 100%      SC%: 80
RX PATIENT STATUS: SC//
DRUG: NIZATIDINE
  Lookup: GENERIC NAME
NIZATIDINE 150MG CAP                          GA301
  ...OK? Yes// (Yes)

=====
*** THERAPEUTIC DUPLICATION(S) *** NIZATIDINE 150MG CAP with

  Local Rx #2561 (ACTIVE) for CIMETIDINE 300MG TAB

  Local Rx #2572 (PROVIDER HOLD) for SUCRALFATE 1MG TAB

  Remote Rx #2571 (DISCONTINUED) for RANITIDINE HCL 150MG TAB

  Pending Order FAMOTIDINE 20MG TAB

  Non-VA Med Order for CIMETIDINE 300MG TAB

Class(es) Involved in Therapeutic Duplication(s): PEPTIC ULCER AGENTS, HISTAMINE-2
RECEPTOR ANTAGONISTS (H2 ANTAGONISTS)
=====
VERB: TAKE
Available Dosage(s)
  1. 150MG
  2. 300MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list:
.
```

Entering a New Order – Not accepting order, duplicate therapy not discontinued

```
Select Action: Quit// NO New Order

Eligibility: NSC      SC%: 5
RX PATIENT STATUS: OPT NSC//
DRUG: FAMOTIDINE
  Lookup: GENERIC NAME
FAMOTIDINE 20MG TAB                          GA301
  ...OK? Yes// (Yes)

Restriction/Guideline(s) exist. Display? : (N/D/O/B): No// NO
Now doing allergy checks. Please wait...
```

Now Processing Enhanced Order Checks! Please wait...

*** THERAPEUTIC DUPLICATION(S) *** FAMOTIDINE 20MG TAB with

Local RX#: 2586A
Drug: CIMETIDINE 300MG TAB (DISCONTINUED)
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
QTY: 90 Days Supply: 30
Processing Status: Released locally on 3/12/08@08:55:32 (Window)
Last Filled On: 03/12/08

Press Return to Continue:

Local RX#: 2710
Drug: RANITIDINE HCL 150MG TAB (ACTIVE)
SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
QTY: 60 Days Supply: 30
Processing Status: Released locally on 6/1/09@08:55:32 (Window)
Last Filled On: 06/01/09

Press Return to Continue:

Class(es)Involved in Therapeutic Duplication(s): Peptic Ulcer Agents, Histamine-2
Receptor Antagonists (H2 Antagonists)

=====

Press Return to Continue:

Discontinue Rx #2710 for RANITIDINE HCL 150MG TAB Y/N ? YES

Duplicate Therapy RX #2710 RANITIDINE HCL 150MG TAB will be discontinued after the
acceptance of the new order.

=====

VERB: TAKE
Available Dosage(s)
1. 20MG
2. 40MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 20MG

You entered 20MG is this correct? Yes// YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 20MG

NOUN: TABLET
ROUTE: PO// ORAL PO MOUTH
Schedule: BID// QAM (EVERY MORNING)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES):
CONJUNCTION:
PATIENT INSTRUCTIONS:

(TAKE ONE TABLET BY MOUTH EVERY MORNING)

DAYS SUPPLY: (1-90): 30// ^
RX DELETED
Duplicate Therapy RX #2710 RANITIDINE HCL 150MG TAB NOT Discontinued.

Allergy/ADR Order Checks (PSO*7*251)

This section will detail the Allergy/ADR order check display within Outpatient Pharmacy.

Legacy Outpatient Pharmacy displays the same allergy/ADR warning twice if drug class(es) and drug ingredient(s) are defined for the allergy/ADR. The drug class is listed on one display and the drug ingredient on the other. The user is also prompted to intervene for both warnings. Local and remote Allergy/ADRs are combined.

If no Allergy Assessment has been documented for the patient for whom the medication order is being processed, an intervention dialog is available for each order. Only one warning will be displayed for an Allergy/ADR. If no intervention is chosen, the standard order entry dialog will resume.

See examples below:

Remote Allergy/ADR – New Order Entry Backdoor – Both Ingredient and Drug Class defined for Allergy/ADR

```
Select Action: Quit// NO    New Order

PATIENT STATUS: SC//
DRUG: DILTIAZEM
  Lookup: GENERIC NAME
    1  DILTIAZEM (DILACOR XR) 240MG SA CAP          CV200    N/F      This
drug will not be processed without Drug Request Form 10-7144
    2  DILTIAZEM (INWOOD) 120MG SA CAP              CV200
    3  DILTIAZEM (INWOOD) 180MG SA CAP              CV200
    4  DILTIAZEM (INWOOD) 240MG SA CAP              CV200
    5  DILTIAZEM (INWOOD) 300MG SA CAP              CV200
Press <RETURN> to see more, '^' to exit this list, '^'^' to exit all lists, OR
CHOOSE 1-5: 1  DILTIAZEM (DILACOR XR) 240MG SA CAP          CV200    N/F      This drug will
not be processed without Drug Request Form 10-7144

Now doing allergy checks.  Please wait...

A Drug-Allergy Reaction exists for this medication and/or class!

  Prospective Drug: DILTIAZEM (DILACOR XR) 240MG SA CAP
  Causative Agent: DILTIAZEM
  Historical/Observed: OBSERVED
  Severity: MODERATE
  Ingredients: DILTIAZEM (REMOTE(SITE(S))),
  Signs/Symptoms: ITCHING,WATERING EYES, ANOREXIA, NAUSEA,VOMITING,
                  ANXIETY, DROWSINESS, DRY MOUTH, DRY NOSE, RASH,
  Drug Class: CV200 CALCIUM CHANNEL BLOCKERS (REMOTE(SITE(S))),
  Provider Override Reason: N/A - Order Entered Through Vista

Do you want to Intervene? Y// NO

VERB: TAKE
Available Dosage(s)
    1. 240MG
    2. 480MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list:
.
.
OR
```

```

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for DILTIAZEM (DILACOR XR) 240MG SA CAP

PROVIDER:      PSOPROVIDER,THREE      TPP      119
RECOMMENDATION:      NO CHANGE

See 'Pharmacy Intervention Menu' if you want to delete this
intervention or for more options.

Would you like to edit this intervention ? N// O

VERB: TAKE
Available Dosage(s)
    1. 240MG
    2. 480MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list:

```

Local Allergy/ADR – New Order Entry Backdoor - Only Drug Class defined.

```

Another New Order for PSOPATIENT, TEN? YES//

Eligibility: NSC
RX PATIENT STATUS: OPT NSC//
DRUG: SEPTRA
    Lookup: GENERIC NAME
SEPTRA DS TAB      AM650
    ...OK? Yes//      (Yes)

Now doing allergy checks. Please wait...

A Drug-Allergy Reaction exists for this medication and/or class!

    Prospective Drug: SEPTRA DS TAB
    Causative Agent: SULFADIAZINE/SULFAMERAZINE/SULFAMETHAZINE
    Historical/Observed: HISTORICAL
    Severity: Not Entered
    Signs/Symptoms: ITCHING,WATERING EYES, ANOREXIA, NAUSEA,VOMITING,
        ANXIETY, DROWSINESS,
    Drug Class: AM650 SULFONAMIDE/RELATED ANTIMICROBIALS (LOCAL),
    Provider Override Reason: N/A - Order Entered Through VistA

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for SEPTRA DS TAB

PROVIDER:      PSOPROVIDER,FOUR      FPP      119
RECOMMENDATION:      NO CHANGE

See 'Pharmacy Intervention Menu' if you want to delete this
intervention or for more options.

Would you like to edit this intervention ? N// O
Available Dosage(s)
    1. 1 TABLET
    2. 2 TABLETS

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 1 TABLET

```

You entered 1 TABLET is this correct? Yes// YES
 VERB: TAKE
 ROUTE: PO// ORAL PO MOUTH
 Schedule: BID (TWICE A DAY)
 LIMITED DURATION (IN DAYS, HOURS OR MINUTES):
 .

Local & Remote Allergy/ADR – Multi-ingredients, Pending Order

```

ED  Edit                               FN  Finish
Select Item(s): Next Screen//      NEXT SCREEN

Pending OP Orders (ROUTINE)   Mar 24, 2008@21:56:03           Page:    2 of    3
PSOPATIENT,THREE                                     <A>
  PID: 000-00-0000                               Ht(cm): 167.64 (06/10/1993)
  DOB: FEB 2,1939 (69)                           Wt(kg): 68.18 (06/10/1993)
+

* (1) Orderable Item: SULFAMETHOXAZOLE/TRIMETHOPRIM TAB
  (2)      Drug: SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
          Verb: TAKE
  (3)      *Dosage: 1 TABLET
          *Route: ORAL
          *Schedule: Q12H
  (4) Pat Instruct:
  Provider Comments:
          Instructions: TAKE 1 TABLET PO Q12H
          SIG: TAKE 1 TABLET BY MOUTH EVERY 12 HOURS
  (5) Patient Status: OPT NSC
  (6)      Issue Date: MAR 24,2008      (7) Fill Date: MAR 24,2008
+
  Enter ?? for more actions
BY  Bypass                               DC  Discontinue
ED  Edit                               FN  Finish
Select Item(s): Next Screen// FN      Finish

Now doing allergy checks.  Please wait...

A Drug-Allergy Reaction exists for this medication and/or class!

  Prospective Drug: SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
  Causative Agent: SULFADIAZINE/SULFAMERAZINE/SULFAMETHAZINE
  Historical/Observed: HISTORICAL
  Severity: Not Entered
  Ingredients: SULFAMETHOXAZOLE (LOCAL), TRIMETHOPRIM (LOCAL AND
              REMOTE(S))
  Signs/Symptoms: ITCHING,WATERING EYES, ANOREXIA,
                  NAUSEA,VOMITING, ANXIETY, DROWSINESS,
  Drug Class: AM650 SULFONAMIDE/RELATED ANTIMICROBIALS
              (LOCAL AND REMOTE(S)),
  Provider Override Reason: N/A - Order Entered Through Vista

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB

PROVIDER:    PSOPROVIDER, 11      PP      119
RECOMMENDATION:    NO CHANGE

See 'Pharmacy Intervention Menu' if you want to delete this
intervention or for more options.

Would you like to edit this intervention ? N// O

Rx # 2611                03/24/08
PSOPATIENT,THREE                #20
TAKE 1 TABLET BY MOUTH EVERY 12 HOURS

```

SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
PSOPROVIDER, 11 PSOPHARMACIST, TWO
of Refills: 1
Are you sure you want to Accept this Order? NO// Y

(This page included for two-sided copying.)

Chapter 21: Processing a Prescription

This chapter describes the menu and options used in processing prescriptions.

Rx (Prescriptions)

[PSO RX]

The *Rx (Prescriptions)* menu allows the pharmacist to manipulate information that pertains to prescriptions. Actions are taken on prescriptions via this menu. Some previous options, such as renew, refill, edit, release, are now actions in the *Patient Prescription Processing* option found on this menu. Also, data now must be entered for the individual fields that are used to build a Sig.

Default values are also displayed for possible dosages, schedules, med routes, and patient instructions. When possible, default quantities are calculated using data entered into specific fields during medication order entry.

The following options are available on this menu:

- *Patient Prescription Processing*
- *Barcode Rx Menu ...*
- *Check Drug Interaction*
- *Complete Orders from OERR*
- *Discontinue Prescription(s)*
- *Edit Prescriptions*
- *ePharmacy Menu ...*
- *List One Patient's Archived Rx's*
- *Manual Print of Multi-Rx Forms*
- *Reprint an Outpatient Rx Label*
- *Signature Log Reprint*
- *View Prescriptions*

Patient Prescription Processing

[PSO LM BACKDOOR ORDERS]

This option is used to process outpatient medication through OERR V. 3.0. The *Patient Prescription Processing* option is found on the *Outpatient Pharmacy Manager Menu* and the *Pharmacist Menu* under the *Rx (Prescriptions)* option. This option uses List Manager features to allow the outpatient pharmacy manager and pharmacist to perform the following actions on a prescription without leaving this option.

- Enter a new Rx
- Discontinue
- Edit
- Refill
- Renew
- Hold
- Unhold
- Order a partial
- Release
- Reprint
- Copy
- Verify a prescription
- Show a profile
- View activity log
- Pull early from suspense

When a new drug order is processed (new, renewal, finish, verify, copy, or an edit that creates a new order), order checks are performed. These include checking for duplicate drug, duplicate drug class, drug-drug interaction, and drug-drug allergy.

With the introduction of enhanced Order checks, Outpatient Pharmacy generated order checks are displayed in this sequence:

- System Errors
- Duplicate Drug
- Clozapine
- Allergy/ADR (local & remote) or Non-Assessment
- CPRS checks generated backdoor (3 new checks)
- Drug Level Errors
- Local & Remote Critical Drug Interactions
- Local & Remote Significant Drug Interactions
- Order Level Error Messages – Drug Interactions
- Local & Remote Duplicate Therapy
- Order Level Error Messages – Duplicate Therapy

Additionally, the order check display sequence is applied to the following processes:

- Backdoor new order entry
- Finishing a pending order
- When renewing an outpatient medication order
- Creating a new order when editing an outpatient medication order
- Verifying an outpatient medication order.
- Copying an outpatient medication order
- Reinstating a discontinued outpatient medication order.

Entering a New Order

Actions display in the action area of the screen. Actions with parentheses () around them are invalid actions for that order. A double question mark (??) displays all the actions available, including the Outpatient Pharmacy actions described in the section "Using List Manager." If an invalid hidden action is selected, a message will display in the message window.

Example: Entering a New Order

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)

      Orders to be completed for all divisions: 14

Do you want an Order Summary? No// <Enter>
```

A summary list of the number of pending orders can be displayed by Division or by each Clinic within the Division where the user is signed on. This is helpful when completing batch orders. In this example, an individual patient name is entered.

```
Patient Prescription Processing
Barcode Rx Menu ...
Complete Orders from OERR
Discontinue Prescription(s)
Edit Prescriptions
List One Patient's Archived Rx's
Manual Print of Multi-Rx Forms
Reprint an Outpatient Rx Label
Signature Log Reprint
View Prescriptions

Select Rx (Prescriptions) Option: PATient Prescription Processing
Select PATIENT NAME: OPPPATIENT16  OPPATIENT16,ONE      04-03-41      000246802
YES      SC VETERAN
Patient is enrolled to receive ScripTalk 'talking' prescription labels.

Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED// <Enter>
```

If RDI is active and a patient has prescriptions at another location, when the user selects the patient to enter a new order from Patient Prescription Processing, the following message appears.

```
REMOTE PRESCRIPTIONS AVAILABLE!
Display Remote Data? N//
```

-----example continues-----

If the user responds **NO**, then the normal procedure occurs for entering prescriptions. If the user responds **YES**, the "Remote Facilities Visited" screen appears. See the Displaying a Patient's Remote Prescriptions section later in Entering a New Order for more details.

A detailed explanation of the different parts of the screen can be found under in Chapter 2: List Manager. The Patient Information screen is displayed on two screens; however, only the second screen is shown in this example.

Example: Entering a New Order (continued)

Patient Information		May 22, 2006 10:44:38		Page: 2 of 2	
OPPATIENT16,ONE					
PID: 000-24-6802		Ht (cm): 177.80 (02/08/2004)			
DOB: APR 3,1941 (60)		Wt (kg): 90.45 (02/08/2004)			
SEX: MALE					
+					
Allergies:					
Remote: ASPIRIN, NON-OPIOID ANALGESICS					
Adverse Reactions:					
Enter ?? for more actions					
EA	Enter/Edit Allergy/ADR Data	PU	Patient Record Update		
DD	Detailed Allergy/ADR List	EX	Exit Patient List		
Select Action: Quit// <Enter>					
-----example continues-----					

Although the default option is “Quit” at the “Select Action” prompt, pressing the Enter key here quits the Patient Information screen and displays the Medication Profile. This Medication Profile includes any Non-VA Med orders documented via the CPRS GUI application.

Medication Profile		May 22, 2006 10:44:56		Page: 1 of 1	
OPPATIENT16,ONE					
PID: 000-24-6802		Ht (cm): 177.80 (02/08/2004)			
DOB: APR 3,1941 (60)		Wt (kg): 90.45 (02/08/2004)			
AGE: 60		Non-VA Meds on File Last entry on 01/13/03			
CrCL: 102.4 (est.) (CREAT:1.0mg/dL 10/30/12)		BSA (m2): 2.09			
#	RX #	DRUG	QTY ST	ISSUE DATE	LAST REF DAY
				FILL	REM SUP
-----ACTIVE-----					
1	503902	ACETAMINOPHEN 500MG TAB	60 A>	05-22 05-22	3 30
2	503886\$	DIGOXIN (LANOXIN) 0.2MG CAP	60 A>	05-07 05-07	5 30
-----PENDING-----					
3	AMPICILLIN 250MG CAP	QTY: 40	ISDT: 05-29	REF: 0	
-----NON-VA MEDS (Not dispensed by VA)-----					
GINKO EXT 1 TAB ONCE A DAY BY MOUTH			Date Documented: 01/13/03		
IBUPROFEN 50MG TAB			Date Documented: 12/10/02		
TERFENADINE TAB 200 MILIGRAMS					
MIX ½ CUP PDR & 6 OZ WATER & DRINK 1 MIXED CUP			Date Documented: 03/17/02		
Enter ?? for more actions					
PU	Patient Record Update	NO	New Order		
PI	Patient Information	SO	Select Order		
Select Action: Quit//					
-----example continues-----					

If a double question mark (??) had been entered at the above “Select Action” prompt, the following hidden actions would display in the action area.

```

The following actions are also available:
RP  Reprint (OP)          DN  Down a Line          LS  Last Screen
RN  Renew (OP)           RD  Re Display Screen    FS  First Screen
DC  Discontinue (OP)     PT  Print List         GO  Go to Page
RL  Release (OP)         PS  Print Screen       +   Next Screen
RF  Refill (OP)          >  Shift View to Right -   Previous Screen
PP  Pull Rx (OP)         <  Shift View to Left  ADPL Auto Display(On/Off)
IP  Inpat. Profile (OP)  SL  Search List        CK  Check Interactions
RS  Reprint Sig Log      RDD Fill/Rel Date Disply IN  Intervention Menu
CM  Manual Queue to CMOP DR  Display Remote      UP  Up a Line
OTH Other OP Actions    QU  Quit
Select Action: Quit//
-----example continues-----

```

Typing in the letters **NO** creates a new order.

Example: Entering a New Order (continued)

```

Medication Profile          May 22, 2006 10:44:56          Page:    1 of    1
(Patient information is displayed here.)
:
:
Enter ?? for more actions
PU  Patient Record Update          NO  New Order
PI  Patient Information            SO  Select Order
Select Action: Quit// NO  New Order

Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED//  <Enter>
DRUG: ACETAMINOPHEN
  Lookup: GENERIC NAME
    1  ACETAMINOPHEN 1000MG TABLET          CN100
    2  ACETAMINOPHEN 160MG/5ML LIQUID        CN103
    3  ACETAMINOPHEN 325MG TABLET          CN103          INFECTIOUS DISEASE
  RESTRICTED TO
    4  ACETAMINOPHEN 650MG SUPPOS.          CN103
    5  ACETAMINOPHEN AND CODEINE 30MG        CN101
Press <RETURN> to see more, '^' to exit this list, '^ ^' to exit all lists, OR
CHOOSE 1-5: 1      1000MG TABLET          CN100

CHOOSE 1-5: 1  ACETAMINOPHEN 100MG/ML (SF) ORAL SUSP          CN103
Now doing allergy checks. Please wait...
Now Processing Enhanced Order Checks! Please wait...
Press Return to continue...:

*** THERAPEUTIC DUPLICATION *** ACETAMINOPHEN 100MG/ML (SF) ORAL SUSP with
Local Rx for ACETAMINOPHEN 500MG TAB
  RX: 500610
  Drug: ACETAMINOPHEN 500MG TAB
  SIG: TAKE TWO TABLETS BY MOUTH EVERY 6 HOURS AS NEEDED
  QTY: 240                      Refills remaining: 11
  Provider: PROGRAMMER,TWENTYEIGHT          Issued: 03/02/10
  Status: Active                      Last filled on: 03/02/10
  Processing Status: Not released locally (Window)
                                          Days Supply: 3
-----

```

```
Press Return to Continue:
Discontinue RX # 46309525? NO -Prescription was not discontinued...
```

The system checks the medication selected for any duplicate drugs or classes, interactions, or allergies that are noted in the patient's local and remote record. This also includes any local Non-VA Meds. See the following example of local and remote order checking.

Example: Entering a New Order (continued)

```
Now doing remote order checks. Please wait...

-----
*** SAME CLASS *** OF DRUG IN REMOTE RX FOR ASPIRIN 325MG BUFFERED TAB
>> CHEYENNE VAMROC
CLASS: CN103
      Rx #: 712996
      Status: ACTIVE                               Issued: 09/21/05
Processing Status: Released locally on 09/21/05@11:34:13 (Window)
      SIG: TAKE ONE TABLET BY MOUTH EVERY DAY
      QTY: 30
      Provider: PROVIDER, TWO                      Refills remaining: 11
                                                    Last filled on: 09/21/05
                                                    Days Supply: 30

Press Return to continue...<Enter>
Now doing drug interaction and allergy checks. Please wait...
```



If a patient does not have an allergy assessment, the user will have to create an intervention. If the patient already has a prescription for which an Intervention was created, the user will have the option to copy the existing Intervention. For more information about copying an existing Intervention, refer to the *Complete Orders from OERR* section.



If the new order is for Clozapine, there are additional restrictions for filling a prescription. See “Chapter 8: Controlling the Dispensing of Clozapine” for more information.

```
A Drug-Allergy Reaction exists for this medication and/or class!
Drug: ACETAMINOPHEN 325MG TAB
Drug Class: CN103 NON-OPIOID ANALGESICS (REMOTE SITE(S))
Do you want to Intervene? Y// NO
```

View of RX:

Medication Profile			Nov 02, 2005@07:33:29		Page: 1 of 1		
OPPATIENT, FOUR							
PID: 000-01-1322P			Ht (cm): _____ (_____)				
DOB: JAN 13,1922 (83)			Wt (kg): _____ (_____)				
SEX: MALE							
CrCL: <Not Found>			BSA (m2): _____				
#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST REF FILL	DAY REM SUP
-----ACTIVE-----							
1	100003840e	PREDNISONE 5MG TAB	30	A>	11-02	11-02	5 30
<div style="border: 1px solid black; padding: 5px; display: inline-block; margin-top: 10px;"> Denotes ePharmacy Rx </div>							
Enter ?? for more actions							
PU Patient Record Update		NO New Order					
PI Patient Information		SO Select Order					
Select Action: Quit//							

If a new order is rejected due to a Drug Utilization Review (DUR) or Refill Too Soon, the prescription will be marked as “REJECTED”, and the user will have the opportunity to resolve the reject before continuing.

The following example shows a sample ECME transmission rejection, and how to resolve the rejection.

Example: Handling a Rejected New Order for ePharmacy Billing

Prescription 999999 successfully submitted to ECME for claim generation.

Claim Status:

IN PROGRESS-Waiting to start
 IN PROGRESS-Waiting for packet build
 IN PROGRESS-Waiting for transmit
 IN PROGRESS-Transmitting
 E REJECTED

*** REJECT RECEIVED FROM THIRD PARTY PAYER ***

Division : ALBANY	NPI#: 39393939
Patient : OPPATIENT,FOUR(000-01-1322P) Sex: M	DOB: JAN 13,1922(83)
Prescription : 99999999/0 - TESTOSTERONE (ANDROD	ECME#: 000001234567
Reject Type : 88 - DUR REJECT received on FEB 27, 2006@10:58:25	
Payer Message: DUR Reject Error	
Reason : ER (OVERUSE PRECAUTION)	
DUR Text : ANDRODERM DIS 5MG/24HR	
Insurance : TEST INS	Contact: 800 555-5555
Group Name : RXINS	Group Number: 12454
Cardholder ID: 000011322P	

-----example continues-----

Example: Handling a Rejected New Order for ePharmacy Billing (continued)

```
Select one of the following:

      O          (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
      I          (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION
      Q          (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)verride, (I)gnore, (Q)uit: Q// ☐ OVERRIDE
```

When a claim is rejected, typically the Payer provides a “Reason for Service Code”, which displays on the reject as “Reason”. The user can use this reason to then select which code is entered for “Professional Service Code” and “Result of Service Code”. To see a list of service codes, enter ? at the specified prompt.

```
Reason for Service Code : ER - OVERUSE
Professional Service Code: RT          RECOMMENDED LABORATORY TEST
Result of Service Code   : 1G          FILLED, WITH PRESCRIBER APPROVAL

Reason for Service Code : ER - OVERUSE
Professional Service Code: RT - RECOMMENDED LABORATORY TEST
Result of Service Code   : 1G - FILLED, WITH PRESCRIBER APPROVAL

Confirm? ? YES// <Enter>

Prescription 99999999 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E PAYABLE
```

For Refill Too Soon rejects, the same choices apply.

Editing an ePharmacy Order

When editing fields preceded by an asterisk (*) in an ePharmacy order (or electronically third party billable prescription), upon acceptance of the edited order the original prescription will be discontinued and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription.

If the original claim was E Payable, and edits are made to any of these fields – Provider, Qty, Days Supply, Division, Fill Date, NDC, or DAW Code – then the original payable claim is reversed and a new claim is submitted to ECME. If the original claim was rejected, then a reversal is not necessary, and a new claim is submitted to ECME.

Medication Profile		Nov 03, 2005@12:33:29		Page: 1 of 1	
OPPATIENT, FOUR					
PID: 000-01-1322P		Ht (cm) : _____ (_____)			
DOB: JAN 13,1922 (83)		Wt (kg) : _____ (_____)			
SEX: MALE					
CrCL: <Not Found>		BSA (m2) : _____			
#	RX #	DRUG	QTY	ST	DATE
-----ACTIVE-----					
1	100003840e	PREDNISONE 5MG TAB	30	A>	11-02 11-02 5 30
Enter ?? for more actions					
PU	Patient Record Update		NO	New Order	
PI	Patient Information		SO	Select Order	
Select Action: Quit// 1					

Press <Enter> twice to scroll to page 3 of the Medication Profile. Notice that a new field displays on the profile: DAW Code. DAW stands for “Dispense as Written” and refers to a set of ten NCPDP codes (0-9) that tells third party payers why a brand or generic product was selected to fill a prescription. When a new prescription is entered for a specific drug, the DAW code from the drug is stored in the PRESCRIPTION file (#52) for each fill. This field is solely being used for electronic billing purposes. It communicates to the third party payer that a drug has a special characteristic, which may prevent the payer from rejecting the claim. The available codes include:

Code	Description
0	NO PRODUCT SELECTION INDICATED
1	SUBSTITUTION NOT ALLOWED BY PRESCRIBER
2	SUBSTITUTION ALLOWED-PATIENT REQUESTED PRODUCT DISPENSED
3	SUBSTITUTION ALLOWED-PHARMACIST SELECTED PRODUCT DISPENSED
4	SUBSTITUTION ALLOWED-GENERIC DRUG NOT IN STOCK
5	SUBSTITUTION ALLOWED-BRAND DRUG DISPENSED AS A GENERIC
6	OVERRIDE
7	SUBSTITUTION NOT ALLOWED-BRAND DRUG MANDATED BY LAW
8	SUBSTITUTION ALLOWED-GENERIC DRUG NOT AVAILABLE IN MARKETPLACE
9	OTHER

Using the Copy Action

If a double question mark (??) had been entered at the “Select Action:”prompt, the following hidden actions would display in the action area.

```
The following actions are also available:
AL  Activity Logs (OP)    REJ  View REJECT          FS  First Screen
VF  Verify (OP)          IN   Intervention Menu      GO  Go to Page
CO  Copy (OP)            DA   Display Drug AllergiesLS  Last Screen
RP  Reprint (OP)         DIN  Drug Restr/Guide (OP)PS  Print Screen
HD  Hold (OP)            +    Next Screen           PT  Print List
UH  Unhold (OP)          -    Previous Screen       QU  Quit
PI  Patient Information  <    Shift View to Left    RD  Re Display Screen
PP  Pull Rx (OP)        >    Shift View to Right   SL  Search List
IP  Inpat. Profile (OP) ADPL Auto Display(On/Off) UP  Up a Line
OTH Other OP Actions    DN   Down a Line
```

Copy is a hidden action used to copy an order and edit any field.

Example: Copying an Order

```
Medication Profile          Jun 04, 2006 15:49:09          Page: 1 of 1
OPPATIENT6,ONE
  PID: 000-13-5790          Ht(cm): 175.26 (08/10/2004)
  DOB: FEB 8,1922 (79)      Wt(kg): 75.45 (08/10/2004)
  CrCL: 102.4(est.) (CREAT:1.0mg/dL 10/30/12)  BSA (m2): 1.91
-----
#  RX #          DRUG          QTY ST  DATE  FILL REM SUP
-----
-----ACTIVE-----
1 503911$      AMPICILLIN 250MG CAP      80 A  05-25 06-01  0 10
2 503901      LISINOPRIL 10MG TAB      150 A> 05-17 05-17  2 30
-----
Enter ?? for more actions
PU Patient Record Update          NO New Order
PI Patient Information            SO Select Order
Select Action: Quit// SO Select Order [Or enter the order number here, e.g. 1]
Select Orders by number: (1-2): 1
```

-----example continues-----

Remember that actions in parentheses, like Refill in this example, are not available for the order.

Example: Copying an Order (continued)

OP Medications (ACTIVE)	Jun 04, 2006 15:50:49	Page: 1 of 3
OPPATIENT6, ONE		
PID: 000-13-5790	Ht (cm): 175.26 (08/10/2004)	
DOB: FEB 8, 1922 (79)	Wt (kg): 75.45 (08/10/2004)	
Rx #: 503911\$		
(1) *Orderable Item: AMPICILLIN CAP, ORAL *** (N/F) ***		
(2) Drug: AMPICILLIN 250MG CAP *** (N/F) ***		
(3) *Dosage: 500 (MG)		
Verb: TAKE		
Dispense Units: 2		
Noun: CAPSULES		
*Route: ORAL		
*Schedule: QID		
(4) Pat Instructions: Prov Comments		
Provider Comments: Prov Comments		
SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV COMMENTS		
(5) Patient Status: OUTPT NON-SC		
(6) Issue Date: 05/25/01		
(7) Fill Date: 06/01/01		
+ Enter ?? for more actions		
DC Discontinue	PR Partial	RL Release
ED Edit	RF (Refill)	RN Renew
Select Action: Next Screen//CO CO		

Once “Copy” is entered, the heading on the screen changes to “New OP Order (COPY)” and the available actions are limited to “Edit” or “Accept.”

New OP Order (COPY)	Jun 04, 2006 15:51:32	Page: 1 of 2
OPPATIENT6, ONE		
PID: 000-13-5790	Ht (cm): 175.26 (08/10/2004)	
DOB: FEB 8, 1922 (79)	Wt (kg): 75.45 (08/10/2004)	
Orderable Item: AMPICILLIN CAP, ORAL *** (N/F) ***		
(1) Drug: AMPICILLIN 250MG CAP *** (N/F) ***		
(2) Patient Status: OUTPT NON-SC		
(3) Issue Date: JUN 4, 2006		
(4) Fill Date: JUN 4, 2006		
(5) Dosage Ordered: 500 (MG)		
Verb: TAKE		
Dispense Units: 2		
Noun: CAPSULES		
Route: ORAL		
Schedule: QID		
(6) Pat Instruction: Prov Comments		
SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV COMMENTS		
(7) Days Supply: 10		
(8) QTY (CAP): 80		
+ Enter ?? for more actions		
AC Accept	ED Edit	
Select Action: Next Screen// AC Accept		

-----example continues-----

Once the copied order is accepted, the previous order information displays and the user is asked whether to discontinue the original order.

Example: Copying an Order (continued)

Medication Profile		Jun 04, 2006 16:03:55		Page: 1 of 1	
OPPATIENT6, ONE					
PID: 000-13-5790		Ht (cm): 175.26 (08/10/2004)			
DOB: FEB 8, 1922 (79)		Wt (kg): 75.45 (08/10/2004)			
CrCL: <Not Found>		BSA (m2): 1.91			

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----ACTIVE-----								
1	503913\$	AMPICILLIN 250MG CAP	80	A	06-04	06-04	0	10
2	503901	LISINOPRIL 10MG TAB	150	A>	05-17	05-17	2	30

Enter ?? for more actions

PU	Patient Record Update	NO	New Order
PI	Patient Information	SO	Select Order

Select Action: Quit// <Enter>

Label Printer: **TELNET**

LABEL: QUEUE/CHANGE PRINTER/HOLD/SUSPEND or '^' to bypass Q// <Enter>

LABEL(S) QUEUED TO PRINT

Select PATIENT NAME: <Enter>

The label displays the copay status of the prescription except for a partial fill.

Copying an ePharmacy Order

When copying an ePharmacy order, upon acceptance of the copied order the original prescription will be discontinued and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription.

Example: Copying an ePharmacy Order

Patient Information	Nov 04, 2005@09:19:26	Page:	1 of 1
---------------------	-----------------------	-------	--------

OPPATIENT, FOUR

PID: 000-01-1322P

DOB: JAN 13,1922 (83)

SEX: MALE

Ht (cm): _____ (_____)

Wt (kg): _____ (_____)

Eligibility: NSC, VA PENSION
RX PATIENT STATUS: PENSION NSC

Disabilities:

123 ANY STREET
BIRMINGHAM
ALABAMA
Prescription Mail Delivery: Regular Mail

HOME PHONE:
CELL PHONE:
WORK PHONE:

Allergies:

Adverse Reactions:

Enter ?? for more actions

EA Enter/Edit Allergy/ADR Data PU Patient Record Update
DD Detailed Allergy/ADR List EX Exit Patient List
Select Action: Quit// <Enter> QUIT

Medication Profile	Nov 04, 2005@09:23:47	Page:	1 of 1
--------------------	-----------------------	-------	--------

OPPATIENT, FOUR

PID: 000-01-1322P

DOB: JAN 13,1922 (83)

SEX: MALE

CrCL: <Not Found>

Ht (cm): _____ (_____)

Wt (kg): _____ (_____)

BSA (m2): _____

ISSUE LAST REF DAY

QTY ST DATE FILL REM SUP

-----ACTIVE-----

1 100003852e PREDNISONE 5MG TAB 30 A> 11-04 11-04 5 30

PU Patient Record Update NO New Order
PI Patient Information SO Select Order
Select Action: Quit// 1

-----example continues-----

Medication Profile		Nov 04, 2005@09:24:04		Page: 1 of 1	
OPPATIENT, FOUR					
PID: 000-01-1322P		Ht (cm): _____ (_____)			
DOB: JAN 13,1922 (83)		Wt (kg): _____ (_____)			
SEX: MALE					
CrCL: <Not Found>		BSA (m2): _____			
#	RX #	DRUG	QTY	ST	DATE
-----ACTIVE-----					
OP Medications (ACTIVE)		Nov 04, 2005@09:24:17		Page: 1 of 3	
OPPATIENT, FOUR					
PID: 000-01-1322P		Ht (cm): _____ (_____)			
DOB: JAN 13,1922 (83)		Wt (kg): _____ (_____)			
Rx #: 100003852e					
(1) *Orderable Item: PREDNISONE TAB					
(2) CMOP Drug: PREDNISONE 5MG TAB					
(3) *Dosage: 20 (MG)					
Verb: TAKE					
Dispense Units: 1					
Noun: TABLET					
*Route: ORAL					
*Schedule: QID					
*Duration: 30 (DAYS)					
(4) Pat Instructions: WITH FOOD AVOIDING DAIRY FOODS					
SIG: TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30 DAYS					
WITH FOOD AVOIDING DAIRY FOODS					
(5) Patient Status: OPT NSC					
Enter ?? for more actions					
DC	Discontinue	PR	Partial	RL	Release
ED	Edit	RF	Refill	RN	Renew
Select Action: Next Screen// CO CO					

Once “Copy” is entered, the heading on the screen changes to “New OP Order (COPY)” and the available actions are limited to “Edit” or “Accept.”

New OP Order (COPY)		Nov 04, 2005@09:24:17		Page: 1 of 2	
OPPATIENT, FOUR					
PID: 000-01-1322P		Ht (cm): _____ (_____)			
DOB: JAN 13,1922 (83)		Wt (kg): _____ (_____)			
Orderable Item: PREDNISONE TAB					
(1) CMOP Drug: PREDNISONE 5MG TAB					
(2) Patient Status: OPT NSC					
(3) Issue Date: NOV 4,2005		(4) Fill Date: NOV 4,2005			
(5) Dosage Ordered: 20 (MG)					
Verb: TAKE					
Dispense Units: 1					
Noun: TABLET					
Route: ORAL					
Schedule: QID					
*Duration: 30 (DAYS)					
(6) Pat Instruction: WITH FOOD AVOIDING DAIRY FOODS					
SIG: TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30					
DAYS WITH FOOD AVOIDING DAIRY FOODS					
+ Enter ?? for more actions					
AC	Accept	ED	Edit		
Select Action: Next Screen// AC Accept					

DUPLICATE DRUG PREDNISONE 5MG TAB in Prescription: 100003852

Status: Active Issued: 11/04/05
Processing Status: Released locally on 11/04/05@11:34:13 (Mail)
SIG: TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30
DAYS WITH FOOD AVOIDING DAIRY FOODS
QTY: 30 # of refills: 5
Provider: OPPROVIDER4,TWO Refills remaining: 5
Last filled on: 11/04/05
Days Supply: 30

Discontinue Rx # 100003852? **YES**

Duplicate Drug will be discontinued after the acceptance of the new order.

Now doing order checks. Please wait...

Nature of Order: WRITTEN// **<Enter>** W
WAS THE PATIENT COUNSELED: NO// **YES**
WAS COUNSELING UNDERSTOOD: NO// **YES**

Do you want to enter a Progress Note? No// **<Enter>** NO

Rx # 100003853 11/04/05
OPPATIENT,FOUR #30
TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30 DAYS WITH FOOD
AVOIDING DAIRY FOODS

PREDNISONE 5MG TAB
OPPROVIDER4,TWO OPPHARMACIST4,THREE
of Refills: 5

Is this correct? YES// **YES...**
Reversing prescription 100003852.

Claim Status:
Reversing and Rebilling a previously submitted claim...
Reversing...
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E REVERSAL ACCEPTED

-Rx 100003852 has been discontinued...

Prescription 100003853 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE

View of RX:

Medication Profile			Nov 04, 2005@09:25:14		Page: 1 of 1	
OPPATIENT, FOUR						
PID: 000-01-1322P			Ht (cm): _____		(_____)	
DOB: JAN 13, 1922 (83)			Wt (kg): _____		(_____)	
SEX: MALE						
CrCL: <Not Found>			BSA (m2): _____			
#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST REF DAY
						FILL REM SUP
-----ACTIVE-----						
1	100003853e	PREDNISONE 5MG TAB	30	A>	11-04	11-04 5 30
Enter ?? for more actions						
PU Patient Record Update		NO New Order				
PI Patient Information		SO Select Order				
Select Action: Quit//						

Holding and Unholding a Prescription

If a double question mark (??) is entered at the “Select Action” prompt, the hidden actions on the following page will display in the action area.

The following actions are also available:					
AL	Activity Logs (OP)	REJ	View REJECT	FS	First Screen
VF	Verify (OP)	IN	Intervention Menu	GO	Go to Page
CO	Copy (OP)	DA	Display Drug AllergiesLS		Last Screen
RP	Reprint (OP)	DIN	Drug Restr/Guide (OP)	PS	Print Screen
HD	Hold (OP)	+	Next Screen	PT	Print List
UH	Unhold (OP)	-	Previous Screen	QU	Quit
PI	Patient Information	<	Shift View to Left	RD	Re Display Screen
PP	Pull Rx (OP)	>	Shift View to Right	SL	Search List
IP	Inpat. Profile (OP)	ADPL	Auto Display(On/Off)	UP	Up a Line
OTH	Other OP Actions	DN	Down a Line		

Use the Hold (HD) action to put a prescription on hold. Use the Unhold (UH) action to remove a prescription from hold.

Only key holders of the PSORPH security key or the PSO TECH ADV security key can hold or unhold a prescription.

PSORPH security key holders are allowed to put a prescription on hold using the following HOLD reasons:

- 1 INSUFFICIENT QTY IN STOCK
- 2 DRUG-DRUG INTERACTION
- 4 PROVIDER TO BE CONTACTED
- 6 ADVERSE DRUG REACTION
- 7 BAD ADDRESS
- 8 PER PATIENT REQUEST
- 9 CONSULT/PRIOR APPROVAL NEEDED
- 98 OTHER/TECH (NON-CLINICAL)
- 99 OTHER/RPH (CLINICAL)

Note: HOLD reasons 98 and 99 require the user to enter a HOLD comment.

PSO TECH ADV security key holders are allowed to put a prescription on hold using the following HOLD reasons:

- 1 INSUFFICIENT QTY IN STOCK
- 7 BAD ADDRESS
- 8 PER PATIENT REQUEST
- 98 OTHER/TECH (NON-CLINICAL)

Note: HOLD reason 98 requires the user to enter a HOLD comment.

While PSORPH security key holders are allowed to remove a prescription from HOLD under any HOLD reason, PSO TECH ADV security key holders are only allowed to remove a prescription from hold under the above HOLD reasons (reasons 1,7, 8, and 98).

Flagging and Unflagging Pending Orders

Flagging a pending order allows you to prevent an order from processing and attach a note known as a flag to the pending order. Flag/Unflag functionality is only available for Pending new orders and Pending renewals; only holders of the PSORPH security key can flag or unflag an order.

The following provides examples of how to flag and unflag a pending order from a medication profile within *Patient Prescription Processing*.

If a pending order is flagged, the row number is highlighted on the Medication Profile screen (shown in the following example). Select the order to view the flag or to flag the new pending order.

Example: A Flagged Pending Order

```
Medication Profile          Mar 13, 2008@16:31:24          Page: 1 of 1
OPPATIENT16,ONE          <NO ALLERGY ASSESSMENT>
  PID: 000-24-6802          Ht (cm): 177.80 (02/08/2007)
  DOB: APR 3,1941 (66)      Wt (kg): 90.45 (02/08/2007)
  SEX: MALE
  CrCL: <Not Found>          BSA (m2): 2.08
                                ISSUE  LAST REF DAY
#  RX #          DRUG          QTY ST  DATE  FILL REM SUP
-----
1 100002518      PENICILLAMINE 250MG TAB          31 A  02-29 02-29  5 31
-----
2 ACETAMINOPHEN 500MG TAB          QTY: 60          ISDT: 03-13  REF:  3
Enter ?? for more actions
PU Patient Record Update          NO New Order
PI Patient Information          SO Select Order
Select Action: Quit// SO Select Order
Select Orders by number: (1-2): 2
```

From the Pending OP Orders screen, you can flag and unflag an order, as well as view the flagged reason. To flag the order, enter **FL** and then enter a “REASON FOR FLAG”, alert the proper individual that the flag has been added by pressing **<Enter>** to select the default name or entering a different user name and pressing **<Enter>**, and the flagging process is complete.

Example: Flagging an Order

```
REASON FOR FLAG: DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE
DISPENSING.
Send alert to: PSOUSER,ONE//          BIRMINGHAM          ALABAMA          OP
PHARMACIST
... order flagged.
```

When an order is flagged, “FL-” is placed in front of “Pending OP Orders” in the upper left corner, and the flagged reason is listed below the patient identifying information.

Example: A Flagged New Pending Order

FL-Pending OP Orders (ROUTINE)March 13, 2008 16:31:33		Page: 1 of 2
OPPATIENT16,ONE		<NO ALLERGY ASSESSMENT>
PID: 000-24-6802	Ht(cm): 177.80 (02/08/2007)	
DOB: APR 3,1941 (66)	Wt(kg): 90.45 (02/08/2007)	
Flagged by OPPHARM,TWO on 03/13/08@23:14: DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE DISPENSING.		
* (1) Orderable Item: ACETAMINOPHEN TAB (2) CMOP Drug: ACETAMINOPHEN 500MG TAB Drug Message: NATL FORM (3) *Dosage: 500 (MG) Verb: TAKE Dispense Units: 1 *Route: ORAL *Schedule: BID (4) Pat Instruct: Provider Comments: ProvComments SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY (5) Patient Status: SERVICE CONNECTED (6) Issue Date: MAR 13,2008 (7) Fill Date: MAR 13,2008 (8) Days Supply: 30 (9) QTY (TAB): 60		<i>* Editing starred fields will create a new order</i>
+ Enter ?? for more actions		
BY Bypass	DC Discontinue	FL Flag/Unflag
ED Edit	FN Finish	
Select Item(s): Next Screen// FL Flag/Unflag		

Example: A Flagged Renewal

FL-Prescription Renew		Jun 12, 2012@14:00:51	Page: 1 of 2
PAGPATNM,M		<A>	
PID: 666-00-0286	Ht(cm): _____ (_____)		
DOB: DEC 1,1900	Wt(kg): _____ (_____)		
Flagged by PHARMACY,USER on 6/12/12@14:00: test			
Rx#: 100001943A Orderable Item: ACETAMINOPHEN TAB CMOP Drug: THIORIDAZINE 30MG/ML CONC. Patient Status: OPT NSC (1) Issue Date: JUN 12,2012 (2) Fill Date: JUN 12,2012 Dosage: 20 (MG) Verb: TAKE Dispense Units: 2 Noun: TABLETS Route: ORAL (BY MOUTH) Schedule: BID-PRN			
+ Enter ?? for more actions			
AC Accept	DC Discontinue	FL Flag/Unflag	
BY Bypass	ED Edit		
Select Item(s): Next Screen//			

To unflag an order, enter **FL** at the “Select Item(s)” prompt, and then enter your “COMMENTS”. When you press <Enter>, the order is no longer flagged.

Flagging and Unflagging Pending Orders

Flagging a pending order allows you to prevent an order from being processed and attach a note known as a flag to the pending order. Flag/Unflag functionality is only available for Pending new orders and Pending renewals; only holders of the PSORPH security key can flag or unflag an order.

Flagged orders will not be processed. When you have flagged orders to process from the *Complete Orders from OERR* option, you should enter **FL** at the “Select By” prompt (shown in the following example). This ensures you will view all patients with flagged pending orders, allowing you to address their flagged orders; however, if you know which patients have flagged orders, you can access the flagged orders through the Medication Profile.

The following provides examples of how to flag and unflag pending orders from a medication profile within the *Complete Orders from OERR* option.

Example: Finishing an Order from OERR

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)

      Orders to be completed for all divisions: 16

Do you want an Order Summary? No//  <Enter> NO

      Patient Prescription Processing
      Barcode Rx Menu ...
      Complete Orders from OERR
      Discontinue Prescription(s)
      Edit Prescriptions
      ePharmacy Menu...
      List One Patient's Archived Rx's
      Manual Print of Multi-Rx Forms
      Reprint an Outpatient Rx Label
      Signature Log Reprint
      View Prescriptions

Select Rx (Prescriptions) Option: COMplete Orders from OERR

There are multiple Institutions associated with this Outpatient Site for
finishing orders entered through CPRS. Select the Institution for which to
finish orders from. Enter '?' to see all choices.

Select CPRS ORDERING INSTITUTION: ALBANY//  <Enter>  NY  VAMC  500

You have selected ALBANY.
After completing these orders, you may re-enter this option and select again.

      <There are 3 flagged orders for ALBANY>

Select By:  (PA/RT/PR/CL/FL/E): PATIENT//  FL <Enter>

Do you want to see Medication Profile? Yes//  <Enter>
```

After answering the “Medication Profile” prompt, a warning displays if no allergy assessment has been made. The patient’s eligibility and RX patient status also displays.

```

OPPATIENT16,ONE      4-3-41      000246802
YES      SC VETERAN
      No Allergy Assessment!

Press Return to continue: <Enter>
Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED// <Enter>

```

If a pending order is flagged, the row number is highlighted on the Medication Profile screen (shown in the following example). Select the order to view the flag or to flag the new pending order.

Example: A Flagged Pending Order

```

Medication Profile      Mar 13, 2008@16:31:24      Page:      1 of      1
OPPATIENT16,ONE      <NO ALLERGY ASSESSMENT>
  PID: 000-24-6802      Ht (cm): 177.80 (02/08/2007)
  DOB: APR 3,1941 (66)      Wt (kg): 90.45 (02/08/2007)
  SEX: MALE
  CrCL: <Not Found>      BSA (m2): 2.08
                                ISSUE      LAST REF DAY
#  RX #      DRUG      QTY ST      DATE      FILL REM SUP
-----
1 100002518      PENICILLAMINE 250MG TAB      31 A 02-29 02-29 5 31
-----
2 ACETAMINOPHEN 500MG TAB      QTY: 60      ISDT: 03-13 REF: 3
Enter ?? for more actions
PU Patient Record Update      NO New Order
PI Patient Information      SO Select Order
Select Action: Quit// SO Select Order
Select Orders by number: (1-2): 2

```

From the Pending OP Orders screen, you can flag and unflag an order, as well as view the flagged reason. To flag the order, enter **FL** and then enter a “REASON FOR FLAG”, alert the proper individual that the flag has been added, and the flagging process is complete.

Example: Flagging an Order

```

REASON FOR FLAG: DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE
DISPENSING.
Send alert to: PSOUSER,ONE//      BIRMINGHAM      ALABAMA      OP
PHARMACIST
... order flagged.

```

- **DATE RANGE:** Allows the user to select a date range.
- **SORT BY:** Allows the user to choose different fields to sort the report by. Any combination can be selected:
 - **PATIENT:** Allows the user to select a single, multiple or all patients
 - **DRUG:** Allows the user to select a single, multiple or all drugs.
 - **USER:** Allows the user to select a single, multiple or all users that have ignored third party rejects.

Example: Ignored Rejects Report

Select ePharmacy Menu Option: **IR** Ignored Rejects Report

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION: **^ALL**

BEGIN REJECT DATE: **030606** (MAR 06, 2006)

END REJECT DATE: **061407** (JUN 14, 2007)

Enter the SORT field(s) for this Report:

- 1 - PATIENT
- 2 - DRUG
- 3 - USER

Or any combination of the above, separated by comma,
as in these examples:

- 2,1 - BY PATIENT, THEN DRUG
- 3,1,2 - BY USER, THEN BY PATIENT, THEN BY DRUG

SORT BY: PATIENT// **1,2**

SORT BY PATIENT
THEN BY DRUG

You may select a single or multiple PATIENTS,
or enter ^ALL to select all PATIENTS.

PATIENT: **^ALL**

You may select a single or multiple DRUGS,
or enter ^ALL to select all DRUGS.

DRUG: **^ALL**

DEVICE: HOME// **[Select Printer Device]**

-----example continues-----

Ignored Rejects Report				Page: 1
Sorted by PATIENT, DRUG		Division: ALBANY		
Date Range: 03/06/2007 - 06/14/2007		Run Date: Jun 15, 2007@15:26:35		
Rx#	DRUG	PATIENT	IGNORE DT	IGNORED BY
1192029A	SODIUM CHLORIDE 0.9%	OPPATIENT,ONE(9999)	04/18/07	OPUSER,ONE
Comments: PATIENT WAS RUNNING OUT OF DRUG.				
Payer Message: NEXT RFL 041907,DAYS TO RFL 1, LAST FILL 112706 VIA MAIL, REFILL TOO SOON.				
2990211	ALENDRONATE 70MG/75M	OPPATIENT,TWO(0000)	05/20/07	OPUSER,ONE
Comments: NEXT POSSIBLE FILL WAS TOO FAR OUT.				
Payer Message: PLAN LIMIT EXCEEDED. NEXT POSSIBLE FILL: 05/29/2007				
TOTAL: 2 Patients.				

ePharmacy Medication Profile (View Only)

[PSO PMP]

Although the name indicates “ePharmacy Medication Profile”, this option can be used to list the medication profile for any patient on file. It will be used mostly by ePharmacy users for claims research purposes. This functionality is also available from the Reject Worklist through the Medication Profile (MP) action.

Example 1: Medication Profile with default view

Patient Medication Profile		Jun 04, 2007@19:22:16		Page: 1 of 1		
OPPATIENT,ONE				<A>		
PID: 000-12-5678		HEIGHT(cm): 175.26 (11/21/2006)				
DOB: NOV 28,1946 (60)		WEIGHT(kg): 108.18 (08/09/2007)				
SEX: MALE		EXP/CANCEL CUTOFF: 120 DAY				
CrCL: <Not Found>		BSA (m2): 2.23				
# Rx#	DRUG [^]	QTY ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
1 100004112e	ALBUTEROL INHALER	1 A	04-21-07	04-21-07	11	7
2 300483e	ALPRAZOLAM 0.25MG TABS	30 DC	06-14-07	06-14-07	11	30
3 100004113e	AMITRIPTYLINE 10MG TAB	60 A	04-21-07	04-21-07	11	30
4 100004075e	CABERGOLINE 0.5MG TAB	7 E	05-18-05	05-18-05	6	7
5 100004155	DESIPRAMINE 25MG	90 S	02-23-07	02-11-07	11	90
6 100004022\$e	DIGOXIN 0.05MG/ML ELIX (60CC)	30 A	02-01-07	02-20-07	10	90
7 100004081	METAPROTERENOL 5% SOLUTION 10ML	15 DC	06-02-07	06-03-07	11	15
8 100004082	METAPROTERENOL 5% SOLUTION 10ML	10 DC	06-02-07	06-03-07	11	10
9 100004083e	METAPROTERENOL 5% SOLUTION 10ML	15 A>	06-02-07	06-23-07	11	15
10 100004079e	NICOTINE 10MG/ML SOLN NASAL SPRAY	1 A>	06-02-07	06-23-07	11	15
11 100003298	SIMVASTATIN 20MG TAB	5 DC	05-28-05	04-27-07	3	30
12 100003298A	SODIUM CHLORIDE 0.9% NASAL SOLN(O	1 A	05-10-07	05-10-07	11	30
13 100004070e	VALSARTAN 80MG TAB	5 S	06-28-07	05-31-07	11	30
PENDING (2 order)						
14	ALBUTEROL INHALER	RF	06-03-07		2	30
15	AMITRIPTYLINE 10MG TAB	RN	06-02-07		3	10
Non-VA MEDS (Not dispensed by VA) (1 order)						
16	TAMOXIFEN CITRATE 10MG TABS	Date Documented: 06/04/07				
Enter ?? for more actions						
CV	Change View	PI	Patient Information	SIG	Show/Hide	SIG
GS	Group by Status	PU	Patient Record Update			
Select: Quit//						

The following options are available as Hidden Menu actions on this screen.

DR	- Sort by Drug	LF	- Sort by Last Fill
RX	- Sort by Prescription	ID	- Sort by Issue Date
RDD	- Switch between LAST FILL and LAST RELD (release date)		

After selecting a prescription on this screen, the *REJ* option is available on the “RX View” screen’s hidden menu. This action displays third party reject information for the prescriptions with third party rejects.

The *CV (Change View)* option allows the user to change some characteristics of the screen above. The user can also save and/or delete preferences, which will be used every time the user runs the *Medication Profile* option or invokes it from the Reject Worklist. The users can have one set of preferences for each Division defined.

Example 2: Change View action

Enter CV at the “Select:” prompt to change the view preferences.

```
OPPROVIDER,ONE's current default view (ALBANY):
-----
EXP/CANCEL CUTOFF   : 120 DAYS
SORT BY             : DRUG NAME
SORT ORDER          : ASCENDING
DISPLAY SIG         : NO
GROUP BY STATUS     : YES
DISPLAY ORDER COUNT : YES

Delete this default view? NO// <Enter>

EXP/CANCEL CUTOFF: 120// 120 DAYS
SORT BY: DR// DRUG NAME
SORT ORDER: ASCENDING// ASCENDING
DISPLAY SIG: OFF// OFF
GROUP BY STATUS: OFF// ON
DISPLAY ORDER COUNT: ON// OFF

Save as your default View? NO// YES

Saving...OK!
```

Example 3: Display SIG action

Enter SIG at the “Select:” prompt to toggle the Sig display on or off.

```
Patient Medication Profile      Jun 04, 2007@19:22:16      Page:      1 of      1
PID: 000-12-5678                HEIGHT(cm): 175.26 (11/21/2006)
DOB: NOV 28,1946 (60)           WEIGHT(kg): 108.18 (08/09/2007)
SEX: MALE                      EXP/CANCEL CUTOFF: 120 DAY
CrCL: <Not Found>              BSA (m2): 2.23

# Rx#          DRUG [^]          QTY ST DATE      FILL      DAY
1 100004112e    ALBUTEROL INHALER           1 A  04-21-07 04-21-07   7
  SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
2 300483e       ALPRAZOLAM 0.25MG TABS       30 DC 06-14-07 06-14-07  30
  SIG: TAKE 2 CAPSULES BY MOUTH TAKE
3 100004113e    AMITRIPTYLINE 10MG TAB       60 A  04-21-07 04-21-07  30
  SIG: TAKE TWO BY MOUTH EVERY DAY
4 100004075e    CEFOPERAZONE                 7 E  05-18-05 05-18-05   7
  SIG: TAKE 1 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
5 100004155     DESIPRAMINE 25MG             90 S  02-23-07 02-11-07  90
  SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
6 100004022$e   DIGOXIN 0.05MG/ML ELIX (60CC) 30 A  02-01-07 02-20-07  90
  SIG: 300 LB BY MOUTH EVERY FOUR HOURS
7 100004081     METAPROTERENOL 5% SOLUTION 10ML 15 DC 06-02-07 06-03-07  15
  SIG: TAKE 1 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
8 100004082     METAPROTERENOL 5% SOLUTION 10ML 10 DC 06-02-07 06-03-07  10
  SIG: TAKE 2 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
9 100004083e    METAPROTERENOL 5% SOLUTION 10ML 15 A  06-02-07 06-23-07  15
  SIG: TAKE 3 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED

Enter ?? for more actions
CV Change View      PI Patient Information  SIG Show/Hide SIG
GS Group by Status  PU Patient Record Update
Select: Quit//
```

Example: Resolving Other Rejects (continued)

```
Prescription 2055203 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Transmitting
E PAYABLE

Please wait...

Insurance Rejects-Worklist      Jul 30, 2008@14:38:38      Page:      2 of      3
Division : CHEYENNE VAM&ROC
Selection : ALL UNRESOLVED REJECTS
# Rx#      PATIENT(ID) [v]      DRUG      REASON
Payer Message:
13 2055202      OPPATIENT,FOUR(9987)      BACLOFEN 10MG TAB      79 :REFILL TOO SO
Payer Message:
14 2055155      OPPATIENT,FOUR(9987)      BENAZEPRIL HCL 40MG      79 :REFILL TOO SO
Payer Message:
OTHER REJECTS
15 2055134A      OPPATIENT,FOUR(9987)      CALCIUM GLUCONATE 65 22 :M/I Dispense
Payer Message:

+      Select the entry # to view or ?? for more actions
DR  Sort by Drug      RE  Sort by Reason      RX  Sort by Prescription
PA  Sort by Patient      RF  Screen Refresh      GI  Group by Insurance
Select: Next Screen//^
```

Below is taken from Patient Prescription Processing option for the Rx in this example:

```
Medication Profile      Jul 30, 2008@15:03:25      Page:      1 of      2
OPPATIENT,FOUR
PID: 666-55-9987      Ht(cm): _____ (_____)
DOB: OCT 20,1965 (42)      Wt(kg): _____ (_____)
SEX: MALE
CrCL: <Not Found>      BSA (m2): _____
ISSUE      LAST REF DAY
# RX #      DRUG      QTY ST DATE FILL REM SUP
-----REFILL TOO SOON/DUR REJECTS (Third Party)-----
1 2055202$e      BACLOFEN 10MG TAB      14 S> 07-08 12-12 11 3
2 2055155$e      BENAZEPRIL HCL 40MG TAB      1 S> 06-24 06-26 10 1
3 2055134A$e      CALCIUM GLUCONATE 650MG TAB      4 A> 06-16 07-30 10 2
-----ACTIVE-----
4 2055174$e      ACEBUTOLOL HCL 200MG CAP      1 S> 06-26 06-27 11 1
5 2055123$e      BACITRACIN 500 UNT/GM OPTHALMIC OINT      1 AT 06-13 06-14 10 30
6 2055203$e      DANAZOL 50MG CAP      6 S> 07-11 07-15 10 3
7 2055183$e      FAMCICLOVIR 125MG TAB      2 AT 06-26 06-26 11 2
8 2055215$      GABAPENTIN 100MG CAP      6 S> 07-30 07-30 11 3
9 2055186$e      HALOPERIDOL 0.5MG TAB      2 AT 06-26 06-26 11 4
+      Enter ?? for more actions
DC  Discontinue      PR  Partial      RL  Release
ED  Edit      RF  (Refill)      RN  RenewSelect Action: Next
```

-----example continues-----

Example: Resolving Other Rejects (continued)

```

Select Action: Next Screen// AL  AL
OP Medications (SUSPENDED)  Jul 30, 2008@15:03:25  Page: 1 of 3
OPPATIENT,FOUR
  PID: 666-55-9987  Ht (cm): _____ (_____)
  DOB: OCT 20,1965 (42)  Wt (kg): _____ (_____)

```

```

      Rx #: 2055203$e
(1) *Orderable Item: DANAZOL CAP,ORAL
(2)      CMOP Drug: DANAZOL 50MG CAP
(3)      *Dosage: 50 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: CAPSULE
      *Route: ORAL (BY MOUTH)
      *Schedule: BID
(4) Pat Instructions:
      SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
(5) Patient Status: OUTPT NON-SC
(6)      Issue Date: 07/11/08  (7) Fill Date: 07/11/08
      Last Fill Date: 07/15/08 (Window)
+      Enter ?? for more actions
DC  Discontinue      PR  Partial      RL  Release
ED  Edit            RF  (Refill)      RN  Renew
Select Action: Next Screen// AL  AL

```

```

Select Activity Log by number
1. Refill      2. Partial      3. Activity      4. Labels
5. Copay      6. ECME          7. CMOP Events  8. All Logs: (1-8): 8// 6

```

```

Rx #: 2055203  Original Fill Released:
Routing: Mail  Finished by: OPPHARM,ONE

```

```

ECME Log:
#  Date/Time      Rx Ref      Initiator Of Activity
=====
1  7/11/08@10:13:11  ORIGINAL    OPPHARM,ONE
Comments: ECME:PULLED FROM SUSPENSE(NDC:00024-0303-06)-E PAYABLE-pOPP INSURANCE
2  7/30/08@14:32:17  REFILL 1    OPPHARM,TWO
Comments: ECME:PULLED FROM SUSPENSE(NDC:00024-0303-06)-E REJECTED-pOPP INSURANCE
3  7/30/08@14:55:56  REFILL 1    OPPHARM,TWO
Comments: ECME:REJECT WORKLIST-E PAYABLE-pOPP INSURANCE

```

```

ECME REJECT Log:
#  Date/Time Rcvd  Rx Ref  Reject Type  STATUS  Date/Time Resolved
=====
1  7/30/08@14:32:16  REFILL 1  M/I Dispense As  RESOLVED  7/30/08@14:55:40
Comments: AUTOMATICALLY CLOSED (CLAIM RE-SUBMITTED)
2  7/30/08@14:32:16  REFILL 1  REFILL TOO SOON  RESOLVED  7/30/08@14:55:40
Comments: AUTOMATICALLY CLOSED (CLAIM RE-SUBMITTED)

```

```

      Enter ?? for more actions
Select Action:Quit//

```

Signature Log Reprint

[PSO SIGLOG REPRINT]

This option allows the user to reprint the Signature Log for a prescription. The system will prompt for a prescription number and printer device. The user will receive a system confirmation that this log has been queued to print.

Example: Reprinting a Signature Log

```
Select Rx (Prescriptions) Option: Signature Log Reprint
Reprint Signature Log for Prescription: 100002277A PREDNISONE 20MG S.T.
Select LABEL DEVICE: LEX2 LEX2$PRT Bay Pines
Signature Log Reprint queued
```

View Prescriptions

[PSO VIEW]

View the most complete information available for a specific prescription. The activity log lists the date, reason, prescription reference (Rx Ref), the initiator of the activity, and comments. The label log lists the date, prescription (Rx Ref), the person who printed it, and comments. Prescriptions with a deleted status cannot be viewed.

Chapter 22: ScripTalk® ‘Talking’ Prescription Labels

ScripTalk® is a registered trademark of En-Vision America.

The ScripTalk® software generates prescription labels with speech synthesized patient information. This project helps to increase a patient’s (individuals with visual impairments, dyslexia, and reading problems) ability to comply with their doctor’s orders. Audible prescription information also reduces prescription errors thereby reducing hospital/emergency room visits.

Using the ScripTalk® Talking Prescriptions involves the installation of a specialty printer that prints to microchip-embedded label stock. The label will have printed text on it, along with the microchip containing the contents of the label. Pharmacy or other designated staff will enroll patients to receive these labels and issue those patients a special reader. When the patient holds a ScripTalk® label near the reader and presses a button, the content of the label is read aloud.

If a patient is enrolled for ScripTalk® and a prescription is ordered under a division that has a ScripTalk® printer set-up for auto-print, then whenever a prescription is finished for that patient, a ScripTalk® bottle label is automatically queued to print at the same time as the VistA label. The VistA label (either the old format or the new laser label format) will have the drug name on the bottle label voided out with the text "XXXXXX SCRIPTALK RX XXXXXX" to alert the pharmacist to use the actual bottle label from the ScripTalk® printer.



The pharmacy should check each ScripTalk® label for accuracy by using the ScripTalk® reader to read the label aloud. The printer encodes the chip while printing the label, but nothing in or attached to VistA can see or tell if the label is valid.

ScripTalk Main Menu

[PSO SCRIPTALK MAIN MENU]

The options on this menu are used for the implementation as well as the maintenance of the various files for the ScripTalk® ‘talking’ software. These options allow the set up and testing of the ScripTalk® equipment, enter new patients or edit existing patients as receivers of the ‘talking’ prescription labels, and run various reports.

<i>PT</i>	<i>ScripTalk Patient Enter/Edit</i>
<i>QBAR</i>	<i>Queue ScripTalk Label by Barcode</i>
<i>QRX</i>	<i>Queue ScripTalk Label by Rx#</i>
<i>RPT</i>	<i>ScripTalk Reports...</i>
	<i>Reprint a non-voided Outpatient Rx Label</i>
<i>PARM</i>	<i>Set Up and Test ScripTalk Device...</i>

Non-Verified Counts

[PSO NVCNT]

This option allows the user to obtain a count of the number of prescriptions remaining in a status of non-verified.

Example: Total of Non-verified prescriptions

```
Select Verification Option: NON-Verified Counts
DEVICE: HOME//  [Select Print Device]

                                NON-VERIFIED PRESCRIPTION COUNTS
                                JUL 16,2007@14:57:34

TOTAL NUMBER OF NON-VERIFIED PRESCRIPTIONS : 12

NUMBER OF PATIENTS WITH ONE OR MORE NON-VERIFIED PRESCRIPTIONS : 9

(NOTE: Total number of patients listed here may not always equal the number at
the bottom, since some patients at the bottom may be counted more than once,
possibly having non-verified Rx's entered on different days.)

      # of          # of
      Date      Non-verified Rx's      Different Patients
      ----      -
07-27-98          1              1
05-18-99          2              1
06-22-00          2              2
TOTAL              5              4

Enter RETURN to continue or '^' to exit:
```

Rx Verification by Clerk

[PSO VR]

This option verifies prescriptions in the non-verified status by entering the clerk.

Verification through Patient Prescription Processing

Prescriptions can be verified through the *Patient Prescription Processing* option. The following screen shows that the patient has already been chosen and the Patient Information screen is displayed. Sequence **92** in the Non-Verified section is being chosen to be verified.

```
Medication Profile      Oct 26, 2004@15:54:11      Page: 9 of 9
OPPATIENT, ONE          <A>
  PID: 000-33-9521      Ht (cm): 175.26 (08/10/2004)
  DOB: OCT 10, 1970 (34) Wt (kg): 75.45 (08/10/2004)
  SEX: MALE
  CrCL: <Not Found>     BSA (m2): 1.91

                                ISSUE  LAST REF DAY
+
84 100476      PHENYTOIN 30MG CAP      180 DC 04-02 04-02 0 90
85 101064A$    POVIDONE IODINE SCRUB (OZ)      12 DC 07-09 08-03 0 15
86 101427      PREDNISONE 1MG TAB      180 DC 10-25 10-25 3 90
87 101152      PROBENECID 500MG TAB      180 DC 07-26 08-03 3 90
88 100307      QUININE SULFATE 200MG CAP      180 DC>02-22 02-22 3 90
89 100308      RIFAMPIN 300MG CAP      180 DC 02-22 02-22 3 90
90 100561      SYRINGE 5CC      90 DC 04-07 04-07 0 90
91 100626      VITAMIN A 25000 UNT CAP      180 DC>04-23 04-23 3 90
-----NON-VERIFIED-----
92 101435      CALCITRIOL 0.25MCG CAP      180 N> 10-26 10-26 3 90

+      Enter ?? for more actions
PU Patient Record Update      NO New Order
PI Patient Information      SO Select Order
Select Action: Quit// 92
```

The prescription information displays, and **VF** for Verification is entered to begin the verification process.

```
OP Medications (NON-VERIFIED) Oct 26, 2004@18:01:44      Page: 1 of 2
OPPATIENT, ONE          <A>
  PID: 000-33-9521      Ht (cm): 175.26 (08/10/2004)
  DOB: OCT 10, 1970 (34) Wt (kg): 75.45 (08/10/2004)

      Rx #: 101435
(1) *Orderable Item: MAGNESIUM CITRATE LIQUID, ORAL
(2)      CMOP Drug: CALCITRIOL 0.25MCG CAP
(3)      *Dosage: 0.25 (MCG)
      Verb: TAKE
      Dispense Units: 1
      Noun:
      *Route: INTRAVENOUS SUBCUTANEOUS INTRATHECAL
      *Schedule: BID
(4) Pat Instructions:
      SIG: TAKE ONE IV SC INTH TWICE A DAY
(5) Patient Status: SC LESS THAN 50%
(6)      Issue Date: 10/26/04      (7) Fill Date: 10/26/04
      Last Fill Date: 10/26/04 (Window)
+      Enter ?? for more actions
DC (Discontinue)      PR (Partial)      RL (Release)
ED (Edit)      RF (Refill)      RN (Renew)
Select Action: Next Screen// VF
```


Glossary

The following table provides definitions for common acronyms and terms used in this manual.

Acronym/Term	Definition
Action Profile	A list of all active and recently canceled or expired prescriptions for a patient sorted by classification. This profile also includes a signature line for each prescription to allow the physician to cancel or renew it.
Activity Log	A log, by date, of changes made to or actions taken on a prescription. An entry is made in this log each time the prescription is edited, canceled, reinstated after being canceled, or renewed. An entry will be made into this log each time a label is reprinted. A CMOP activity log will contain information related to CMOP dispensing activities.
ADD	Automated Dispensing Device
Allergy/ADR Information	Includes non-verified and verified allergy and/or adverse reaction information as defined in the Adverse Reaction Tracking (ART) package. The allergy data is sorted by type (DRUG, OTHER, FOOD). If no data is found for a category, the heading for that category is not displayed.
AMIS	Automated Management Information System
Answer Sheet	An entry in the DUE ANSWER SHEET file. It contains the questions and answers of a DUE questionnaire. This term is also used to refer to the hard copy representation of a DUE ANSWER SHEET entry.
API	Application Programming Interfaces
APSP	Originally Indian Health Service Pharmacy's name space now owned by the Outpatient Pharmacy software.
BSA	<p>Body Surface Area. The Dubois formula is used to calculate the Body Surface Area using the following formula:</p> $BSA (m^2) = 0.20247 \times \text{Height (m)}^{0.725} \times \text{Weight (kg)}^{0.425}$ <p>The equation is performed using the most recent patient height and weight values that are entered into the vitals package.</p> <p>The calculation is not intended to be a replacement for independent clinical judgement.</p>
Bypass	Take no action on a medication order.
CHAMPVA	CHAMPVA (Civilian Health and Medical Program of the Department of Veterans Affairs) is a cost-shared health benefits program established for the dependents and survivors of certain severely disabled and/or deceased veterans.
CMOP	Consolidated Mail Outpatient Pharmacy.

Acronym/Term	Definition
CPRS	Computerized Patient Record System. CPRS is an entry point in VistA that allows the user to enter all necessary orders for a patient in different packages (e.g., Outpatient Pharmacy, Inpatient Pharmacy, etc.) from a single entry point.
CrCL	<p>Creatinine Clearance. The CrCL value which displays in the pharmacy header is identical to the CrCL value calculated in CPRS. The formula approved by the CPRS Clinical Workgroup is the following:</p> <p>Modified Cockcroft-Gault equation using Adjusted Body Weight in kg (if ht > 60in)</p> <p>This calculation is not intended to be a replacement for independent clinical judgment.</p>
Critical	Interactions with severe consequences that require some type of action (finding facts, contacting prescribers) to prevent potential serious harm.
DATUP	Data Update (DATUP). Functionality that allows the Pharmacy Enterprise Customization System (PECS) to send out VA custom and standard commercial-off-the-shelf (COTS) vendor database changes to update the production and pre-production centralized MOCHA databases at Austin and Philadelphia.
DEA	Drug Enforcement Agency
DEA Special Handling	The Drug Enforcement Agency special Handling code used for drugs to designate if they are over-the counter, narcotics, bulk compounds, supply items, etc.
DHCP	See VistA.
DIF	Drug Information Framework
Dispense Drug	The Dispense Drug name has the strength attached to it (e.g., Acetaminophen 325 mg). The name alone without a strength attached is the Orderable Item name.
Dosage Ordered	After the user has selected the drug during order entry, the dosage ordered prompt is displayed.
Drug/Drug Interaction	The pharmacological or clinical response to the administration of a drug combination different from that anticipated from the known effects of the two agents when given alone.
DUE	Drug Usage Evaluation
Expiration/Stop	The date on which a prescription is no longer active. Typically, this date is 30 days after the issue date for narcotics, 365 days after the issue date for other medications and 365 days after the issue date for supplies.
FDB	First DataBank
Finish	Term used for completing orders from Order Entry/Results Reporting V. 3.0.
GUI	Acronym for Graphical User Interface.

Acronym/Term	Definition
Issue Date	The date on which the prescription was written. This date is usually, but not always, the same as the first fill date. This date cannot be later than the first fill date.
HFS	Host File Server.
Health Insurance Portability and Accountability Act of 1996 (HIPAA)	A Federal law that makes a number of changes that have the goal of allowing persons to qualify immediately for comparable health insurance coverage when they change their employment relationships. Title II, Subtitle F, of HIPAA gives HHS the authority to mandate the use of standards for the electronic exchange of health care data; to specify what medical and administrative code sets should be used within those standards; to require the use of national identification systems for health care patients, providers, payers (or plans), and employers (or sponsors); and to specify the types of measures required to protect the security and privacy of personally identifiable health care information. Also known as the Kennedy-Kassebaum Bill, the Kassebaum-Kennedy Bill, K2, or Public Law 104-191.
JCAHO	Acronym for Joint Commission on Accreditation of Healthcare Organizations
Label/Profile Monitor	A file for each printer which records, in the order in which they were printed, the last 1000 labels or profiles printed on that printer. This allows a rapid reprint of a series of labels or profiles that were damaged by a printer malfunction or other event.
Local Possible Dosages	Free text dosages that are associated with drugs that do not meet all of the criteria for Possible Dosages.
Medication Instruction File	The MEDICATION INSTRUCTION file is used by Unit Dose and Outpatient Pharmacy. It contains the medication instruction name, expansion and intended use.
Medication Order	A prescription.
Medication Profile	A list of all active or recently canceled or expired prescriptions for a patient sorted either by date, drug, or classification. Unlike the action profile, this profile is for information only and does not provide a signature line for a physician to indicate action to be taken on the prescription.
Medication Routes File	The MEDICATION ROUTES file contains medication route names. The user can enter an abbreviation for each route to be used at the local site. The abbreviation will most likely be the Latin abbreviation for the term.
Med Route	The method in which the prescription is to be administered (e.g., oral, injection).
NCCC	Acronym for National Clozapine Coordinating Center.
Non-Formulary Drugs	The medications, which are defined as commercially available drug products not included in the VA National Formulary.
Non-VA Meds	Term that encompasses any Over-the-Counter (OTC) medications, Herbal supplements, Veterans Health Administration (VHA) prescribed medications but purchased by the patient at an outside pharmacy, and medications

Acronym/Term	Definition
	prescribed by providers outside VHA. All Non-VA Meds must be documented in patients' medical records.
OPAI	Outpatient Pharmacy Automated Interface
Order	Request for medication.
Orderable Item	An Orderable Item name has no strength attached to it (e.g., Acetaminophen). The name with a strength attached to it is the Dispense drug name (e.g., Acetaminophen 325mg).
Partial Prescription	A prescription that has been filled for a quantity smaller than requested. A possible reason for a partial fill is that a patient is to return to the clinic in ten days but the prescription calls for a thirty-day supply. Partial prescriptions do count as workload but do not count against the total number of refills for a prescription.
Payer	In health care, an entity that assumes the risk of paying for medical treatments. This can be an uninsured patient, a self-insured employer, or a health care plan or Health Maintenance Organization (HMO).
Pending Order	A pending order is one that has been entered by a provider through CPRS without Pharmacy finishing the order. Once Pharmacy has finished the order, it will become active.
Pharmacy Narrative	OUTPATIENT NARRATIVE field that may be used by pharmacy staff to display information specific to the patient.
Polypharmacy	The administration of many drugs together.
POE	Acronym for Pharmacy Ordering Enhancements (POE) project. Patch PSO*7*46 contains all the related changes for Outpatient Pharmacy.
Possible Dosages	Dosages that have a numeric dosage and numeric dispense units per dose appropriate for administration. For a drug to have possible dosages, it must be a single ingredient product that is matched to the DRUG file. The DRUG file entry must have a numeric strength and the dosage form/unit combination must be such that a numeric strength combined with the unit can be an appropriate dosage selection.
Prescription	This term is now referred to throughout the software as medication orders.
Prescription Status	<p>A prescription can have one of the following statuses.</p> <p>Active - A prescription with this status can be filled or refilled.</p> <p>Canceled - This term is now referred to throughout the software as Discontinued. (See Discontinued.)</p> <p>Discontinued - This status is used when a prescription was made inactive either by a new prescription or by the request of a physician.</p> <p>Discontinued (Edit) - Discontinued (Edit) is the status used when a medication order has been edited and causes a new order to be created due to the editing of certain data elements.</p> <p>Deleted - This status is used when a prescription is deleted. Prescriptions are no longer physically deleted from the system, but marked as deleted. Once a prescription is marked deleted no access is allowed other than view.</p>

Acronym/Term	Definition
	<p>Expired - This status indicates the expiration date has passed.</p> <p>*Note: A prescription that was canceled or has expired more recently than the date specified by the cutoff date, typically 120 days in the past, can still be acted upon.</p> <p>Hold - A prescription that was placed on hold due to reasons determined by the pharmacist.</p> <p>Non-verified - There are two types of non-verified statuses. Depending on a site parameter, prescriptions entered by a technician do not become active until a pharmacist reviews them. Until such review, they remain non-verified and cannot be printed, canceled or edited except through the <i>Verification</i> menu.</p> <p>The second non-verified status is given to prescriptions when a drug/drug interaction is encountered during the new order entry or editing of a prescription.</p> <p>Pending - A prescription that has been entered through OERR.</p> <p>Refill - A second or subsequent filling authorized by the provider.</p> <p>Suspended - A prescription that will be filled at some future date.</p>
Progress Notes	A component of Text Integration Utilities (TIU) that can function as part of CPRS.
Provider	The person who authorized an order. Only users identified as providers who are authorized to write medication orders may be selected.
Reprinted Label	Unlike a partial prescription, a reprint does not count as workload.
Questionnaire	An entry in the DUE QUESTIONNAIRE file. This file entry contains the set of questions related to a DUE as well as the drugs being evaluated.
Schedule	The frequency by which the doses are to be administered, such as Q8H, BID, NOW, etc.
Sig	The instructions printed on the label.
Significant	The potential for harm is either rare or generally known so that it is reasonable to expect that all prescribers have taken this information into account.
Speed Actions	See Actions.
Suspense	A prescription may not be able to be filled on the day it was requested. When the prescription is entered, a label is not printed. Rather, the prescription is put in the RX SUSPENSE file to be printed at a later date.
Third (3rd) Party Claims	Health care insurance claims submitted to an entity for reimbursement of health care bills.
Time In	This is the time that the patient's name was entered in the computer.
Time Out	This is the time that the patient's name was entered on the bingo board monitor.
TIU	Text Integration Utilities; a package for document handling, that includes Consults, Discharge summary, and Progress Notes, and will later add other document types such as surgical pathology reports. TIU components can be

Acronym/Term	Definition
	accessed for individual patients through the CPRS, or for multiple patients through the TIU interface.
TRICARE	<p>TRICARE is the uniformed service health care program for:</p> <ul style="list-style-type: none"> • active duty service members and their families • retired service members and their families • members of the National Guard and Reserves and their families • survivors, and others who are eligible <p>There are differences in how prescriptions for TRICARE beneficiaries are processed versus how prescriptions are processed for Veterans.</p>
Units per Dose	The number of Units (tablets, capsules, etc.) to be dispensed as a Dose for an order. Fractional numbers will be accepted for medications that can be split.
VistA	Acronym for Veterans Health Information Systems and Technology Architecture, the new name for Decentralized Hospital Computer Program (DHCP).
Wait Time	This is the amount of time it took to fill the prescription. It is the difference between Time In and Time Out. For orders with more than one prescription, the wait time is the same for each.

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