

# **Outpatient Pharmacy (PSO)**

## **Pharmacist's User Manual**



**Version 7.0**

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## Revision History

When updates occur, the Title Page lists the new revised date and this page describes the changes. Bookmarks link the described content changes to its place within manual. There are no bookmarks for format updates. Page numbers change with each update; therefore, they are not included as a reference in the Revision History.

Date	Patch	Description
08/2018	PSO*7*505	<a href="#">Titration and Maintenance blocked for CS prescriptions</a> <a href="#">Complete Orders from OERR, added sort selections</a> <a href="#">Complete Orders from OERR, added secondary filter</a> <a href="#">Edit CS prescription enhancements</a> (Eileen Cook, TW)
04/2018	PSO*7*519	<a href="#">Updates to OneVa Pharmacy Prompt</a> <a href="#">Updates to Continuity of Operations</a> (C. Heffernan, SQA)
04/2018	PSO*7*502	Updates for ScripTalk enhancement <a href="#">Included ScripTalk Mapping Error Message</a> 508 & OIT Compliance update throughout (H. Chipman, SQA)
02/2018	PSO*7*402	Updated title page to reflect month/year of revision Updated Patient Demographic Header Displays: <a href="#">4-5</a> , <a href="#">7</a> , <a href="#">32</a> , <a href="#">38</a> , <a href="#">40-43</a> , <a href="#">57</a> , <a href="#">60</a> , <a href="#">81</a> , <a href="#">84</a> , <a href="#">85-86</a> , <a href="#">88</a> , <a href="#">90</a> , <a href="#">92-94</a> , <a href="#">97</a> , <a href="#">100</a> , <a href="#">101</a> , <a href="#">102</a> , <a href="#">108</a> , <a href="#">110</a> , <a href="#">115</a> , <a href="#">124</a> , <a href="#">132-133</a> , <a href="#">162</a> , <a href="#">171</a> , <a href="#">174</a> , <a href="#">177</a> , <a href="#">179</a> , <a href="#">185</a> , <a href="#">190</a> , <a href="#">193</a> , <a href="#">195</a> , <a href="#">196-198</a> , <a href="#">206</a> , <a href="#">211</a> , <a href="#">218</a> , <a href="#">221-222</a> , <a href="#">226</a> , <a href="#">227</a> , <a href="#">228-230</a> , <a href="#">232</a> , <a href="#">234</a> , <a href="#">236</a> , <a href="#">238</a> , <a href="#">240-243</a> , <a href="#">247</a> , <a href="#">251-252</a> , <a href="#">254</a> , <a href="#">260-263</a> , <a href="#">315</a> , <a href="#">330</a> Updated Available Dosage List displays: <a href="#">70</a> , <a href="#">72</a> , <a href="#">74-77</a> , <a href="#">79</a> , <a href="#">103</a> , <a href="#">106</a> , <a href="#">115</a> , <a href="#">116</a> , <a href="#">122</a> , <a href="#">132</a> , <a href="#">133-135</a> , <a href="#">159</a> , <a href="#">169</a> , <a href="#">174</a> , <a href="#">177-178</a> , <a href="#">188-190</a> , <a href="#">193</a> , <a href="#">196</a> , <a href="#">202</a> , <a href="#">206-207</a> , <a href="#">222</a> Updated Schedule Displays: <a href="#">115</a> , <a href="#">124</a> , <a href="#">133</a> , <a href="#">135</a> , <a href="#">159</a> , <a href="#">174</a> , <a href="#">179</a> , <a href="#">190</a> , <a href="#">196</a> , <a href="#">203</a> Updated text for Schedule changes: <a href="#">206-207</a> , <a href="#">222</a> <a href="#">Updated text for Available Dosage List Changes</a> <a href="#">Updated Chapter 18 – Dosing Checks</a> Updated Error Information table: <a href="#">159</a> , <a href="#">344</a> (S. Soldan, PM; L. Bertuzis, BA; B. Hyde, TW)
01/2018	PSO*7*497	Update with OneVA Pharmacy Medication Permissions and Dispensing Upgrades (J. McGovern)
11/2017	PSO*7*478	Update title page, Reject Information screen and add Print action to VER (C. Fawcett, Analyst)
09/2017	PSO*7*422	Removed “Do You want to Edit the SIG?” (C. Heffernan, SQA)
05/2017	PSO*7*479	Modifies the prompt to the user when printing a OneVA Pharmacy label.

Date	Patch	Description
		(B. Thomas, TW)
12/2016	PSO*7*460	Updated title page to reflect December as new month to release. (P. Crossman, Developer)
11/2016	PSO*7*460	Updated copay activity log for Fixed Medication Copayment Tiers (FMCT) Updated Title Page to current OI&T Standards Updated Revision History Updated Table of Contents Updated footer date to March 2014 per business request. (S. Pelchar PM; P. Crossman, Developer)
08/2016	PSO*7*448	Updated Title Page to current OI&T Standards Updated Revision History Updated Table of Contents Updated Using the Copy Action section Updated Holding and Unholding a Prescription section Updated examples to read "Veteran Prescription" Updated [PSO LM BACKDOOR ORDERS] Updated [BPS RPT VIEW ECME RX] Updated [PSO EPHARMACY MENU] Updated [PSO IGNORED REJECTS REPORT] Updated [POS REJECTS VIEW/PROCESS]
06/2016	PSO*7*444	Added Ex. 5 re Medication Profile list item with Bad Address Indicator Max Day Supply has been added and now Days Supply can be entered from 1-365 for a drug. Added table comparing MAXIMUM DAYS SUPPLY values in files 50.68 and 50. Displaying the effect on the days supply. (A. Zak, T. Nixon, L. Ramos, TW)
01/2016	PSO*7*427	Updated cover page. pg 223-224: added DC 9Discontinued RX0 hidden action; added available actions to Resolving open Rejects screen Pg 226: added screenshot of Resolve Open Rejects Responded/updated NDC numbers to match sample prescriptions as well as other customer comments throughout. Updated View Prescription, Edit Prescription, Screens, Medication Profile, Open/Unresolved Bulletin, View/Process Third Party Reject, and Third Party Rejects Worklist in accordance with new functionality associated with PSO*7*427. (T. Tarleton, PM; V Dunie, Technical Writer)

Date	Patch	Description
04/2016	PSO*7*411	<p>Updated Revision History</p> <p>Updated Table of Contents</p> <p>Added Allergy Order Checks section</p> <p>Updated Allergy Display Screens</p> <p>Added Clinical Reminder Order Checks section</p> <p>Updated Screen Captures</p> <p>Updated Glossary and Index</p> <p>(H. Cross, PM; Regina Lule, TW)</p>
03/2015	PSO*7*438	<p>Updated help text for patient lookup.</p> <p>T. Downing, PM; R. Sutton, Technical Writer</p>
03/2014	PSO*7*421 PSO*7*433	<p>Renumbered pages throughout entire document.</p> <p>Changed November 2010 footer dates to December 1997 per client instructions.</p> <p>Renumbered pages throughout entire document.</p> <p>Modified Revision History.</p> <p>Print from Suspense File</p> <p>Entering a New Order – ePharmacy (Third Party Billable)</p> <p>ePharmacy Menu</p> <p>NDC Validation</p> <p>Third Party Payer Rejects – View/Process</p> <p>Third Party Payer Rejects – Worklist (Discontinued TRICARE and CHAMPVA prescriptions no longer appear on the Third Party Payer Rejects - Worklist [PSO REJECTS WORKLIST]).</p> <p>Reject Resolution Required Rejects</p> <p>Added material throughout relating to new Reject</p> <p>Security Keys</p> <p><b>PSO EPHARMACY SITE MANAGER</b></p> <p>Access to the EPHARMACY SITE PARAMETERS [PSO ePHARM SITE PARAMETERS] option requires the new PSO EPHARMACY SITE MANAGER security key.</p> <p>Revised table showing Site Parameter actions and screen-shot showing related dialog.</p> <p>Added option names throughout.</p> <p>Added revised ePharmacy Site Parameters Screen and related subscreen sections; removed discontinued functionality.</p> <p>Added additional index references.</p> <p>Added Lookup National Clean-Up Utility Data</p> <p>(C. Powell, PM; K. Kapple, TW)</p>
09/2013	PSO*7*372 PSO*7*416	<p>Added two new documents to Related Documentation section</p> <p>Added Order Check information to Chapter 14</p> <p>Changed Chapter 14 heading to Processing Order Checks</p> <p>Updated screen captures with new checking messages</p>

Date	Patch	Description
		<p>Added Chapter 14.5: Dosing Order Checks            Added references to the <i>Dosing Order Check User Manual</i>            Updated Index            (D. McCance, PM; G. Tucker, PM; G. Scorca/D. Hoff, TWs)</p>
05/2013	PSO*7*391	<p>Updated Revision History            Updated Table of Contents  <b>New security key named "PSDRPH" introduced.</b>  <b>Updated Changes to OERR.</b>  <b>Added Changes to Processing a Prescription section.</b>  <b>Added Hash Counts and DEA Certification section.</b>  <b>Added two System Error messages.</b>  <b>Updates to Index</b>            (Niha Goyal, PM; John Owczarzak, TW).</p>
01/2013	PSO*7*390	<p>Added Check Drug Interaction            Added Creatinine Clearance (CrCl) and Body Surface Area (BSA) to the Patient and Medication Profile displays.            Added drug allergy changes            Added Clinic Order section            Updated Glossary            Updated Index            (D. McCance, PM; G. Tucker, PM; G. Scorca, TW)</p>
09/2012	PSO*7*386	<p>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, TW)</p>
03/2012	PSO*7*367	<p>To add functionality to Outpatient Pharmacy for the printing and storing of FDA Medication Guides.            Updates to Index            (N. Goyal, PM; B. Thomas, TW)</p>
03/2012	PSO*7*354	<p>Update to TOC            Automated Dispensing Device (ADD) enhancement            ADD, DNS, OPAI added to Glossary.            (Niha Goyal, PM; John Owczarzak, TW)</p>
02/2012	PSO*7*385	<p>Removed incorrect listing of View Additional Reject Info (ARI) action            Added signature alerts            Updated wording for <math>\frac{3}{4}</math> Days Supply Hold            Added rounding functionality for <math>\frac{3}{4}</math> Days Supply Hold            Added new actions Submit Multiple Actions (SMA) and Suspense Date Calculation (SMA)            Added new option View ePharmacy Rx (VER)</p>

<b>Date</b>	<b>Patch</b>	<b>Description</b>
		<p>Corrected earlier formatting errors</p> <p>Corrected typos</p> <p>Updated Service Code values</p> <p>Updated changed security key names</p> <p>Added TRICARE and CHAMPVA examples of rejects on a new order</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>Added CHAMPVA to Glossary (S. Spence, PM; C. Smith, TW)</p>
10/2011	PSO*7*359	<p>Added new action View Additional Reject Info (ARI)</p> <p>Expanded ECME Numbers to twelve digits</p> <p>Updated screen shots related to patch changes</p> <p>Added TRICARE to Glossary</p> <p>Corrected typos</p> <p>Corrected formatting errors from 11/10 reissue</p> <p>(S. Spence, PM; C. Smith, TW)</p>
09/2011	PSO*7*382	<p>Added information regarding the new [PSO HRC PROFILE/REFILL] option.</p> <p>(N. Goyal, PM; J. Owczarzak, TW)</p>
04/2011	PSO*7*343	<p>To add functionality to Outpatient Pharmacy for the On-Demand Displaying of FDA Medication Guides.</p> <p>Display FDA Medication Guide [MG] added to Other OP Actions [OTH]</p> <p>Updates to Index</p> <p>(T. Leggett, PM; B. Thomas, TW)</p>
04/2011	PSO*7*251	<p>The following changes are included in this patch:</p> <ul style="list-style-type: none"> <li>- Outpatient List Manager Screen Views</li> <li>- Added HP and H to Hold Status</li> <li>- Removed DC code; Added DF,DE,DP,DD and DA</li> <li>- Added to Hidden Action List: IN</li> <li>- Removed DC code; Added DF,DE,DP,DD and DA, and</li> <li>- Added HP and H to Hold Status</li> <li>- Replaced Medication Short Profile</li> <li>- Inserted enhanced Order checks, Outpatient Pharmacy generated order checks</li> <li>- Added IN to Screen Scrape</li> <li>- Modified New Order Screen Scrape</li> <li>- Inserted Drug Allergy Screens</li> <li>-Updated Glossary and Index to start on odd pages</li> </ul>

<b>Date</b>	<b>Patch</b>	<b>Description</b>
		(G. Tucker, PM; G. Scorca, TW)
11/2010	PSO*7*358	<p>Added information regarding TRICARE Active Duty Bypass/Override details</p> <p>(S. Spence, PM; G. Johnson, TW)</p>

## **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).

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# **Chapter 1: Introduction**

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The Outpatient Pharmacy (OP) software provides a way to manage the medication regimen of veterans seen in the outpatient clinics and to monitor and manage the workload and costs in the Outpatient Pharmacy. The Pharmacy Ordering Enhancements (POE) project (patch PSO\*7\*46 for Outpatient Pharmacy) improves the flow of orders between Inpatient and Outpatient Pharmacy as well as between Computerized Patient Record System (CPRS) and backdoor pharmacy.

The primary benefits to the veteran are the assurance that he or she is receiving the proper medication and the convenience of obtaining refills easily. The clinicians and pharmacists responsible for patient care benefit from a complete, accurate, and current medication profile available at any time to permit professional evaluation of treatment plans. Utilization, cost, and workload reports provide management cost controlling tools while maintaining the highest level of patient care.

The OneVA Pharmacy project (patch PSO\*7\*454 - December 2016) provided Pharmacists the capability to dispense prescriptions that originated in other VistA host sites. The OneVA Pharmacy User Manual and Installation Guide describe the site parameter required to use this functionality.

The OneVA Pharmacy patch, PSO\*7\*479, provided Pharmacists the ability to request a reprint of the label when no error messages is returned when retrieving the label information from the host system.

The OneVA Pharmacy patch PSO\*7\*497 provides Pharmacists new functionality to fix the auto-suspend defect, remedy current OneVA Pharmacy functionality to limit refill permissions to only those personnel who have the correct key(s), block prescriptions that contain a trade name in the "TRADE NAME", identify titration prescriptions at the host site and to disallow refills of such titration prescriptions at the dispensing site.

The OneVA Pharmacy patch, PSO\*7\*479 requires the patch PSS\*1\*212 which delivers the 'ONEVA PHARMACY FLAG (#101)' in the 'off' state. When this flag is in the 'off' state, the HDR/CDS Repository is not queried for external prescriptions and other VistA instances will not be able to refill prescriptions that belong to the VistA instance with the flag set to the 'off' state. When in the 'on' state, all prescription queries and actions may be taken for remote queries, refills, and partial fills. In order to process prescriptions from another VistA instance, that instance will also need to have its 'ONEVA PHARMACY FLAG (#101)' set to the 'on' state.

The OneVA pharmacy flag can be turned on/off using the Pharmacy System Parameters Edit [PSS SYS EDIT] option:

Select OPTION NAME: PSS SYS EDIT  
Pharmacy System Parameters Edit

Pharmacy System Parameters Edit

PMIS PRINTER: PP8//  
PMIS LANGUAGE: English//  
WARNING LABEL SOURCE: NEW//  
CMOP WARNING LABEL SOURCE: NEW//  
OPAI WARNING LABEL SOURCE: NEW//  
AUTOMATE CPRS REFILL:

ONEVA PHARMACY FLAG: ON// <- The flag can be turned on/off here.

## Documentation Conventions

This *Outpatient Pharmacy V. 7.0 Manager's User Manual* includes documentation conventions, also known as notations, which are used consistently throughout this manual. Each convention is outlined below.

Convention	Example
Menu option text is italicized.	There are eight options on the <i>Archiving</i> menu.
Screen prompts are denoted with quotation marks around them.	The "Dosage:" prompt displays next.
Responses in bold face indicate user input.	Select Orders by number: (1-6): <b>5</b>
<Enter> indicates that the Enter key (or Return key on some keyboards) must be pressed. <Tab> indicates that the Tab key must be pressed.	Type <b>Y</b> for Yes or <b>N</b> for No and press <Enter>. Press <Tab> to move the cursor to the next field.
 Indicates especially important or helpful information.	 Up to four of the last LAB results can be displayed in the message.
 Indicates that options are locked with a particular security key. The user must hold the particular security key to be able to perform the menu option.	 This option requires the security key PSOLOCKCLOZ.

## **Getting Help**

**?, ??, ???** One, two or three question marks can be entered at any of the prompts for online help. One question mark elicits a brief statement of what information is appropriate for the prompt. Two question marks provide more help, plus the hidden actions, and three question marks will provide more detailed help, including a list of possible answers, if appropriate.

## **Related Manuals**

The following manuals are located on the VistA Documentation Library (VDL) at:  
<http://www.va.gov/vdl>.

### **Main Package Documentation:**

- *Outpatient Pharmacy V. 7.0 Release Notes*
- *Outpatient Pharmacy V. 7.0 Manager's User Manual*
- *Outpatient Pharmacy V. 7.0 Pharmacist's User Manual*
- *Outpatient Pharmacy V. 7.0 Technician's User Manual*
- *Outpatient Pharmacy V. 7.0 User Manual – Supplemental*
- *Outpatient Pharmacy V. 7.0 Technical Manual/Security Guide*
- *Dosing Order Check User Manual*
- *VistA to MOCHA Interface Document*
- *Installation Guide – OneVA Pharmacy*
- *Release Notes – OneVA Pharmacy*
- *User Manual – OneVA Pharmacy*

### **Additional Documentation:**

Additional documentation related to specific projects is also located on the VDL. For example, there may be several different Release Notes documents, which apply to specific projects. Also, there may be several sets of “Change Page” documents, which apply to changes made only for a specific package patch.

## **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**

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

- Screen Title:** Patient Information
- Header Area:** OPPATIENT17, ONE  
PID: 000-12-3456  
DOB: AUG 30, 1948 (52)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m<sup>2</sup>): 2.23  
+  
Eligibility: SERVICE CONNECTED 50% to 100% SC%: 70  
RX PATIENT STATUS: SC LESS THAN 50%
- List Area (Scrolling region):** Disabilities:  
1313 TWIN OAKS LANE  
ANYVILLE  
ALABAMA 12345  
Prescription Mail Delivery: Regular Mail
- Message Window:** HOME PHONE: 555-555-8361  
CELL PHONE:  
WORK PHONE:
- Action Area:** Allergies  
Verified: PEANUTS,  
+ 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//
- Allergy Indicator:** A small arrow points to the 'A' in the 'Allergy' indicator area.

- 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	
<b>Copay Indicator</b>	Medication Profile OPPATIENT16,ONE PID: 000-24-6802 DOB: APR 3,1941 (65) SEX: MALE CrCL: <Not Found> (CREAT: Not Found)		May 22, 2006 10:44:56 Non-VA Meds on File Last entry on 01/13/01		Page: 1 of 1 <A> Ht (cm): 177.80 (02/08/2004) Wt (kg): 90.45 (02/08/2004) BSA (m <sup>2</sup> ): 2.11
	# RX #	DRUG	QTY ST	ISSUE DATE	
					<b>Return To Stock Indicator</b>

<b>ePharmacy Indicator</b> <b>Pending Orders</b> <b>Flagged Order</b> <b>Non-VA Meds Orders</b>	<table border="0" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="7" style="text-align: center;">ACTIVE</th> </tr> </thead> <tbody> <tr> <td style="width: 10%;">1</td><td>503902</td><td>ACETAMINOPHEN 500MG TAB</td><td>60 AT 05-22 05-22</td><td>3</td><td>30</td><td></td></tr> <tr> <td>2</td><td>503886\$</td><td>DIGOXIN (LANOXIN) 0.2MG CAP</td><td>60 A&gt; 05-07 05-07</td><td>5</td><td>30</td><td>←</td></tr> <tr> <td>3</td><td>503871\$</td><td>HISTOPLASMIN 1ML</td><td>1 A 03-14 03-14R</td><td>5</td><td>30</td><td></td></tr> <tr> <td>4</td><td>100002042\$e</td><td>NALBUPHINE HCL INJ 10MG/ML</td><td>1 A 03-14 03-14</td><td>5</td><td>30</td><td></td></tr> <tr> <td>5</td><td>100002040\$</td><td>SALICYLIC ACID 40% OINT (OZ)</td><td>1 S 03-14 03-17</td><td>5</td><td>30</td><td></td></tr> </tbody> </table> <table border="0" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="7" style="text-align: center;">DISCONTINUED</th> </tr> </thead> <tbody> <tr> <td>6</td><td>503881</td><td>BACLOFEN 10MG TABS</td><td>30 DC 04-07 05-01</td><td>2</td><td>30</td><td></td></tr> <tr> <td>7</td><td>100002020A\$</td><td>TIMOLOL 0.25% OPHTH SOL 10ML</td><td>1 DE 02-03 02-03</td><td>5</td><td>30</td><td></td></tr> </tbody> </table> <table border="0" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="7" style="text-align: center;">HOLD</th> </tr> </thead> <tbody> <tr> <td>8</td><td>100001942</td><td>ABDOMINAL PAD 7 1/2 X 8 STERILE</td><td>1 H 09-28 09-28</td><td>5</td><td>30</td><td></td></tr> </tbody> </table> <table border="0" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="7" style="text-align: center;">NON-VERIFIED</th> </tr> </thead> <tbody> <tr> <td>9</td><td>100002039\$</td><td>BACLOFEN 10MG TABS</td><td>30 N 03-14 03-14</td><td>5</td><td>30</td><td></td></tr> </tbody> </table> <table border="0" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="7" style="text-align: center;">PENDING</th> </tr> </thead> <tbody> <tr> <td>10</td><td>AMPICILLIN 250MG CAP</td><td>QTY: 40</td><td>ISDT: 05-29</td><td>REF: 0</td><td></td><td></td></tr> <tr> <td>11</td><td>SIMETHICONE 40MG TAB</td><td>QTY: 30</td><td>ISDT: 05-30</td><td>REF: 3</td><td></td><td></td></tr> </tbody> </table> <table border="0" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="7" style="text-align: center;">NON-VA MEDS (Not dispensed by VA)</th> </tr> </thead> <tbody> <tr> <td>GINKO EXT 1 TAB ONCE A DAY BY MOUTH</td><td></td><td></td><td>Date Documented:</td><td colspan="3">01/13/01</td></tr> <tr> <td>IBUPROFEN 50MG TAB</td><td></td><td></td><td>Date Documented:</td><td colspan="3">12/10/00</td></tr> </tbody> </table> <p style="text-align: center; margin-top: 10px;">     Enter ?? for more actions      PU Patient Record Update      NO New Order      PI Patient Information      SO Select Order      Select Action: Quit//    </p>	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% OPHTH 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		
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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
- DA Auto discontinued due to admission
- DP Discontinued by provider through CPRS

The Status column may also reflect the type of Discontinue action performed on the order:

- DF Discontinued due to edit by a provider through CPRS
- DE Discontinued due to edit via backdoor Pharmacy
- DC Discontinued via backdoor Pharmacy
- DD Discontinued due to death



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 CPRS, or another outside source, that have not been finished by Outpatient Pharmacy.
Non-VA Meds:	Any over the counter (OTC) medications, herbal supplements, medications.
Orders:	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: <Not Found> (CREAT: Not Found)			BSA (m2): 2.11		
# RX #	DRUG		ISSUE QTY	LAST ST DATE	REF DAY
				FILL REM	SUP
<hr/> -----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
<hr/> -----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
<hr/> -----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 [<]	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.
Go to Page [GO]	Move to any selected page in the list.

Re Display Screen [RD]	Redisplays 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.
IN	Intervention Menu
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' Statuses [DO] Non-VA Meds Report [NV] Display FDA Medication Guide [MG] Reprint FDA Medication Guide [RM]]
Patient Information [PI]	Shows patient information, allergies, adverse reactions, and pending clinic appointments.
Pull Rx [PP]	Action taken to pull prescription(s) early from suspense.
Reprint [RP]	Reprints the label.
View Reject [REJ]	Allows the user to view and resolve the Refill Too Soon or Drug Utilization Review returned by the third party payer for a specific prescription/fill claim.
Unhold [UH]	Removes an order from a hold status.
Verify [VF]	Allows the pharmacist to verify an order a pharmacy technician has entered.

The PSO HIDDEN ACTIONS Protocol in PROTOCOL File (#101) includes two hidden actions, PSO LM BACKDOOR MARK AS TITRATION and PSO LM BACKDOOR TITRATION RX REFILL, which are both added to the PROTOCOL File (#101).

\*\*\*\*\* IMPORTANT \*\*\*\*\*  
The enhancements related to Titration/Maintenance dose Rx are made only for Outpatient Pharmacy package. The corresponding changes to CPRS package are not included at this time. Therefore, the CPRS Order Copy and Order Change functionalities will continue to function as is. Furthermore, there will be no indication of a Titration/Maintenance order in the CPRS application.  
\*\*\*\*\*

There is also a hidden action, TR (Convert Titration Rx), in the Patient Prescription Processing [PSO LM BACKDOOR TITRATION RX REFILL] option. This action populates the MAINTENANCE DOSE RX (#45.2) field in the PRESCRIPTION File (#52). When a titration to maintenance prescription needs to be refilled so the patient can continue on the Maintenance Dose, this option allows the users to create a new prescription with the maintenance dose only. This process works similar to copying an existing prescription; however, it can only be used on prescriptions with the following characteristics:

- Rx is a complex order with a THEN conjunction

- Rx is released
- Rx status is ACTIVE
- Rx does not have refills previously ordered
- Rx # Of Refills is greater than 0 (zero)

Before the new Maintenance Rx can be accepted, the user is prompted to validate the QTY field for the new Rx, which may or may not be automatically re-calculated. Only the last dose from the original prescription is carried over to the new Maintenance Rx, and the # of Refills field is decreased by 1 because the new Maintenance Rx counts as a fill.

Once a user verifies the information for the Maintenance Rx is accurate, they can accept the Maintenance Rx. This action triggers a Duplicate Drug check against the original complex order, which must be discontinued before the new Maintenance Rx can be accepted. After the new Maintenance Rx is accepted, it will have the new indicator 'm' on the right side of the Rx # in the patient's Medication Profile.

#	RX #	DRUG	ISSUE QTY	LAST ST	REF DATE	DAY
			FILL	REM	SUP	
-----ACTIVE-----						
1	100005436m	AMOXAPINE 50MG TAB	30	S	09-26	09-26
2	100005022	AMOXICILLIN 250MG CAP	30	A	08-18	08-18
3	100005035	KALETRA	3	A	09-29	09-29

## Speed Actions

These Outpatient Pharmacy actions are referred to as “speed actions” and appear on the Medication Profile screen. These actions can be applied to one or more orders at a time.

Action	Description
Reprint [RP]	Reprints the label.
Renew [RN]	A continuation of a medication authorized by the provider.
Refill [RF]	A second or subsequent filling authorized by the provider.
Reprint Signature [RS]	Reprints the signature log.
Discontinue [DC]	Status used when an order was made inactive either by a new order or by the request of a physician.
Release [RL]	Action taken at the time the order is filled and

	ready to be given to the patient.
Pull Rx [PP]	Action taken to pull prescription(s) early from suspense.
Inpat. Profile [IP]	Action taken to view an Inpatient Profile.
CM	Action taken to manually queue to CMOP.
Fill/Rel Date Dispaly [RDD]	Switch between displaying the FILL DATE column and the LAST RELD column.
Display Remote [DR]	Action taken to display a patient's remote prescriptions.

### **Other Outpatient Pharmacy ListMan Actions**

Action	Description
Exit [EX]	Exit processing pending orders.
AC	Accept.
BY	Bypass.
ED	Edit.
FN	Finish.

### **Other Screen Actions**

Action	Description
Edit/Enter Allergy/ADR Data [EA]	Provides access to the Adverse Reaction Tracking package to allow entry and/or edit of allergy adverse reaction data for the patient. See the Adverse Reaction Tracking package documentation for more information on allergy/ADR processing.
Detailed Allergy Display [DA]	Displays a detailed listing of the selected item from the patient's allergy/ADR list. Entry to the Edit Allergy/ADR Data action is provided with this list also.
Patient Record Update [PU]	Allows editing of patient data such as SSN, birth date, address, phone, and outpatient narrative. Patient data can also be updated using the <i>Update Patient Record</i> menu option. If implementing Other Language Modifications, either can be used to set a patient's other language preference.

New Order [NO]	Allows new orders to be entered for the patient.
Exit Patient List [EX]	Exit patient's Patient Information screen so that a new patient can be selected.
Refill Rx from Another VA Pharmacy (RF)	OneVA Pharmacy (patch PSO*7*454) introduced the RF action item on the new 'REMOTE OP Medications' profile. The RF action item allows the Pharmacist to refill a prescription order that originated from another VA Pharmacy location.
Partial from Another VA Pharmacy (PR)	OneVA Pharmacy (patch PSO*7*454) introduced the PR action item on the new 'REMOTE OP Medications' profile. The PR action item allows the Pharmacist to partial a prescription order that originated from another VA Pharmacy location.



Note: For additional information regarding OneVA Pharmacy RF processing, please see Appendix A, OneVA Pharmacy User Manual.



Note: For additional information regarding OneVA Pharmacy PR processing, please see Appendix A, OneVA Pharmacy User Manual.

(This page included for two-sided copying.)

# **Chapter 3: Using the Pharmacist Menu**

---

The options on the *Pharmacist Menu* are intended for use by pharmacists.

## **Example: Accessing the Pharmacist Menu**

Select OPTION NAME: PSO USER1      Pharmacist Menu  
Outpatient Pharmacy software - Version 7.0

The following options are available on the *Pharmacist Menu*:

- *Bingo Board User ...*
- *Change Label Printer*
- *Change Suspense Date*
- *Check Drug Interaction*
- *DUE Supervisor ...*
- *Enter/Edit Clinic Sort Groups*
- *External Interface Menu ...*
- *Medication Profile*
- *Pharmacy Intervention Menu ...*
- *Print from Suspense File*
- *Process Drug/Drug Interactions*
- *Pull Early from Suspense*
- *Queue CMOP Prescription*
- *Release Medication*
- *Return Medication to Stock*
- *Rx (Prescriptions) ...*
- *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.

- *Bingo Board User ... [PSO BINGO USER]*
- *Medication Profile [PSO P]*
- *Rx (Prescriptions) ... [PSO RX]*
- *Update Patient Record [PSO PAT]*

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 -  
Enter the universal Member ID number from the patient's VHIC Card  
or wand the barcode of the VHIC card  
- 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 4: Using the Bingo Board**

---

This chapter describes the options available on the *Bingo Board User* menu.

### **Bingo Board User**

#### **[PSO BINGO USER]**

The *Bingo Board User* menu enables use of the bingo board display. The options on this menu allow a patient's name or a number to be displayed, entered, or removed from the bingo board display located in the pharmacy area.

When the routing for an order is set to "Window", the entering of prescription orders stores information in the bingo board PATIENT NOTIFICATION (Rx READY) file. For new, renew, pull early from suspense, refill orders, barcode refill/renew, and finish process for orders entered via CPRS, the date and time is captured when the order is stored in this file. The same occurs for partials, except the time is captured when a prescription number is entered.

Releasing the prescription places the name or ticket number of the patient on the bingo board monitor if a display group exists and stores data in the WAITING TIME file. The options on this menu are used to manually enter, display, or remove a patients name or number from the monitor.

The following options are available on the *Bingo Board User* menu:

- *Enter New Patient*
- *Display Patient's Name on Monitor*
- *Remove Patient's Name from Monitor*
- *Status of Patient's Order*

#### **Enter New Patient**

#### **[PSO BINGO NEW PATIENT]**

Use this option to manually enter the name of a new patient on the bingo board. Each prescription number for the patient's order must also be entered.

A "Ticket #" prompt displays if ticket number was chosen as the method of display in the *Enter/Edit Display* option on the *Bingo Board Manager* menu. Enter the ticket number and at the next prompt enter each of the prescription numbers for that patient.

#### **Display Patient's Name on Monitor**

#### **[PSO BINGO DISPLAY PATIENT]**

Use this option to begin displaying the name or number of a patient whose prescription is ready. The message, "PRESCRIPTIONS ARE READY FOR:" appears as fixed text on the display screen. This option displays the following reminder for ECME billable prescriptions: "\*\*\* This Pharmacy Rx requires a patient signature! \*\*\*"

### **Remove Patient's Name from Monitor [PSO BINGO DELETE PATIENT]**

After the patient picks up the prescription, remove the name or ticket number from the display either manually or through the barcode reader.



It is recommended that a patient's name be removed from the monitor as soon as the prescription is picked up.

### **Status of Patient's Order [PSO BINGO STATUS]**

This option enables checking of the number of prescriptions a patient has ready, the division, time in/time out, and the prescription number(s). There are four possible statuses:

Status	Description
Pending	Active order input via CPRS that is in the PENDING OUTPATIENT ORDERS file.
Being Processed	Order that is in the PATIENT NOTIFICATION (Rx READY) file, but not displayed.
Ready For Pickup	Order that is in the PATIENT NOTIFICATION (Rx READY) file and is being displayed.
Picked Up	Order that has been picked up.

#### **Example: Status of Patient's Order**

```
Select Bingo Board User Option: status of Patient's Order
Enter Patient Name: OPPATIENT17,ONE          08-30-48    000123456    NO    NSC VETERAN
OPPATIENT17,ONE has the following orders for 10/31/06
Being Processed: ***Entered on OCT 31, 2006***
Division: GENERAL HOSPITAL      Time In: 10:27      Time Out:
Rx #: 500416,
Pending:
Orderable Item: ACETAMINOPHEN           Provider: OPPROVIDER24, TWO
```

Entered By: OPCLERK28, FOUR Drug: ACETAMINOPHEN 325MG TAB UD	Time In: 10/31/06@06:46 Routing: MAIL
Ready For Pickup: Division: GENERAL HOSPITAL Rx #: 1022731,	Time In: 10:36 Time Out: 10:46
Enter Patient Name: <Enter>	

## ScripTalk Mapping Error Messages

This is a list of the error messages that will be displayed on the screen for a site using the Bingo Board in the event of a mapping issue with the ScripTalk device when ScripTalk labels are printed.

Error Level	Error Message	Why is this Message Being Displayed?
System	Please review ScripTalk mapped device setup.	The system has detected that there is a printer in the PRINTER TO BE MAPPED field, but no device has been selected.
System	NO SCRIPTALK PRINTER DEFINED FOR THIS DIVISION!	The system cannot find a division printer defined. However, there is a properly defined printer in the PRINTER TO BE MAPPED field.
System	There is no mapped printer and the division printer is set for manual.	There is no PRINTER TO BE MAPPED and the Division printer is set for manual. No ScripTalk label will print.
System	NO SCRIPTALK PRINTER DEFINED FRO THIS DIVISION! No mapped printer defined. No ScripTalk label will print.	No printers are defined so no label will print.

# **Chapter 4: Changing the Label Printer**

This chapter describes the *Change Label Printer* option.

## **Change Label Printer**

### **[PSO CHANGE PRINTER]**

This option allows the user to change the printer to which labels are printed.

```
Select Outpatient Pharmacy Manager Option: Change Label Printer
Select LABEL PRINTER: LABELPRT2// <Enter> LABELPRT2

OK to assume label alignment is correct? YES//<Enter>

ALBANY's FDA Medication Guide Printer(s) on file:

    BIRM1$PRT
    L8150$PRT

Select FDA MED GUIDE PRINTER: HOME// SUP

    1 SUPPORT LEXMARK LASERJET    SUP HALLWAY - LINE 111
    2 SUPPORT LINE PRINTER    ROOM 273
    3 SUPPORT TEST PRINTER    ROOM 269
Choose 1-3> 1 SUPPORT LEXMARK LASERJET    SUP HALLWAY - LINE 111    Right Margin:
    96// 

This device cannot be used for printing FDA Medication Guides.
Please, contact your IRM and ask them to update the Windows
Network Printer Name for this device.

Select FDA MED GUIDE PRINTER: HOME// L8150$PRT
```

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# **Chapter 5: Changing the Suspense Date**

---

This chapter describes the *Change Suspense Date* option.

## **Change Suspense Date**

**[PSO PNDCHG]**

This option allows the suspense date to be changed for a specific prescription or all prescriptions for a patient. The new suspense date will become the fill/refill date automatically. The opportunity is also given to delete a specific prescription, or all prescriptions for a patient, from suspense while in this option. If a refill is deleted from suspense that has not yet been printed, the refill information will be deleted from the prescription, and the various fill dates will be adjusted accordingly. This option does not produce a label.



When processing a drug/drug interaction, the profile will list the status of the interacting drugs as pending (P).

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# **Chapter 6: Check Drug Interaction**

---

This chapter describes the Check Drug Interaction option shown on 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 Pharmacist Menu Option: CHECK Drug Interaction
Drug 1:    WARFARIN 2MG TAB          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*** Drug Interaction with
SIMVASTATIN 40MG TAB and
WARFARIN 2MG TAB

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 TAB
  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 TAB

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 indandione 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 TAB

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 hyperlipoproteinemia. 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 TAB

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

Copyright 2012 First DataBank, Inc.

---

Enter RETURN to continue or '^' to exit:

Display Professional Interaction monograph? N// O

# **Chapter 7: Evaluating Drug Usage**

---

This chapter describes the options on the *DUE Supervisor* menu.

## **DUE Supervisor**

**[PSOD SUPERVISOR]**

This menu provides options to create a questionnaire based on the criteria of a Drug Usage Evaluation. An answer sheet can also be printed for the provider's use in answering the questionnaire. The answer sheet can be distributed to the clinic so that the provider may complete it when ordering a medication being evaluated. An answer sheet can also be generated (optional) when a patient's Action Profile prints, if the profile contains a medication being evaluated. The provider's responses can be entered into the DUE ANSWER SHEET file.

The following options are available on the *DUE Supervisor* menu:

- *Enter a New Answer sheet*
- *Edit an Existing Answer Sheet*
- *Create/Edit a Questionnaire*
- *Batch Print Questionnaires*
- *DUE Report*

### **Enter a New Answer Sheet**

**[PSOD CREATE ANSWER SHEET]**

In this option the user enters answers to a DUE Questionnaire. This creates an answer sheet entry in the DUE ANSWER SHEET file. These answer sheets can be kept online for statistical and/or compliance studies. Answer sheets are stored in the file using a sequence number. This number is automatically generated by the computer and should be written on the hard copy of the answer sheet immediately so that it can be used later in editing or deleting the entry.

### **Edit an Existing Answer Sheet**

**[PSOD EDIT ANSWER SHEET]**

Edit a DUE Answer Sheet entry using this option. Ordinarily, the sequence number is available when editing the Answer Sheet; however, the file can be searched if the provider, drug, or questionnaire is known by typing ^S at the "SEQUENCE NUMBER" prompt. The search displays all of the entries containing the combination of provider, drug, or questionnaire used in the search.

## **Create/Edit a Questionnaire**

### **[PSOD DUE BUILD QUESTIONNAIRE]**

To create a questionnaire, first select one or more drugs being evaluated. After selecting the drugs, create a set of questions to be used on the questionnaire. These questions do not have to be added to the DUE QUESTION file since they are being added through this option. The questionnaire must be marked as “Active” and “Active for Profiles” for the Answer Sheet to automatically print with the Action Profiles. A summary can be printed for the questionnaire using the *DUE Report* option. For this reason, when creating a questionnaire, the user should strive to make each question a yes, no, or unknown type question. Questions having a free text or numeric type answer are ignored in the summary.



The PRINT DUE QUESTIONNAIRE site parameter needs to be set to “YES” for the questionnaire to print with the Action Profile.

## **Batch Print Questionnaires**

### **[PSOD BATCH PRINT QUESTIONNAIRE]**

To print a blank form of a selected questionnaire, enter the number of copies and a printer device. These questionnaire answer sheets can be distributed to providers to complete when ordering medications being evaluated.

## **DUE Report**

### **[PSOD DUE SORT AND PRINT]**

This report displays entries from the DUE ANSWER SHEET file. A summary of this report, showing the number of answer sheets, number of questionnaires, and a breakdown of all yes/no/unknown type questions is available. This breakdown shows each question number and the number of times it was answered yes/no/unknown, or unanswered. For this reason, when creating a questionnaire, the user should strive to make each question a yes, no, or unknown type question. Questions having a free text or numeric type answer are ignored in the summary.

# **Chapter 8: Enter/Edit Clinic Sort Groups**

This chapter describes the *Enter/Edit Clinic Sort Groups* option.

## **Enter/Edit Clinic Sort Groups**

### **[PSO SETUP CLINIC GROUPS]**

This option enables a group of clinics to be identified that will print together for the action/informational profiles.

#### **Example: Enter/Edit Clinic Sort Groups**

```
Select Pharmacist Menu Option: ENTER/Edit Clinic Sort Groups  
  
Select Clinic Sort Group: ?  
Answer with OUTPATIENT CLINIC SORT GROUP NAME  
Choose from:  
    CLINIC 1  
    Clinic 2  
  
    You may enter a new OUTPATIENT CLINIC SORT GROUP, if you wish  
    Answer must be 3-30 characters in length.  
Select Clinic Sort Group: CLINIC 3  
Are you adding 'CLINIC 3' as  
    a new OUTPATIENT CLINIC SORT GROUP (the 6TH)? Y <Enter> (Yes)  
NAME: CLINIC 3// <Enter>  
Select SORT GROUPS: ?  
Answer with SORT GROUP SORT GROUPS  
    You may enter a new SORT GROUP, if you wish  
    Enter name of clinic to be included in the sort group.  
Answer with HOSPITAL LOCATION NAME, or ABBREVIATION  
Do you want the entire 122-Entry HOSPITAL LOCATION List? N (No)  
Select SORT GROUPS: 2 EAST  
Are you adding '2 EAST' as a new SORT GROUP (the 1ST for this OUTPATIENT CLINIC SORT  
GROUP)? Y (Yes)  
Select SORT GROUPS: <Enter>
```

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# **Chapter 9: Using the Interface Menu**

---

This chapter describes the options on the *External Interface Menu*.



This menu is locked with the PSOINTERFACE lock. The PSOINTERFACE key should be assigned to all persons responsible for performing these functions.

## **External Interface Menu**

### **[PSO EXTERNAL INTERFACE]**

This menu contains the following options for using an external interface device.

- *Purge External Batches*
- *Reprint External Batches*
- *View External Batches*

### **Purge External Batches**

#### **[PSO INTERFACE PURGE]**

This option purges entries from the PHARMACY EXTERNAL INTERFACE file.

#### **Example: Purge External Batches**

```
Select External Interface Menu Option: Purge External Batches
Enter cutoff date for purge of External Interface file: 022807 (FEB 28, 2007)

Purge entries that were not successfully processed? NO// <Enter>

Purge queued to run in background.

Select External Interface Menu Option:
```

### **Reprint External Batches**

#### **[PSO INTERFACE REPRINT]**

This option enables the reprinting of labels for batches of prescriptions that have been sent to the external interface.

#### **Example: Reprint External Batches**

```
Select External Interface Menu Option: Reprint External Batches
Enter a date/time range to see all batches sent to the External Interface.

Start date/time: 022807 (FEB 28, 2007)
End date/time: 030707 (MAR 07, 2007)

Gathering batches, please wait...
```

BATCH	QUEUED TO PRINT ON:	PATIENT:
1	FEB 28,2007@08:06:14	OPPATIENT12,ONE
2	FEB 28,2007@08:10:56	OPPATIENT12,ONE
3	FEB 28,2007@08:19:20	OPPATIENT22,ONE
4	FEB 28,2007@08:38:17	OPPATIENT28,ONE
5	FEB 28,2007@08:50:32	OPPATIENT9,ONE
6	FEB 28,2007@09:15:35	OPPATIENT9,ONE
7	FEB 28,2007@09:33:48	OPPATIENT18,ONE
8	FEB 28,2007@09:39:31	OPPATIENT1,ONE
9	FEB 28,2007@10:36:51	OPPATIENT10,ONE
10	FEB 28,2007@13:37:24	OPPATIENT4,ONE
11	FEB 28,2007@13:46:07	OPPATIENT8,ONE

Select Batch(s) to reprint: (1-11): **5,6**

Batches selected for Reprint are:

Batch 5 Queued for FEB 28,2007@08:50:32 by OPPHARMACIST4,THREE  
 Batch 6 Queued for FEB 28,2007@09:15:35 by OPPHARMACIST4,THREE

Reprint the FDA Medication Guide? No// YES

Before Reprinting, would you like a list of these prescriptions? N// <Enter> 0

Are you sure you want to Reprint labels? Y// <Enter> YES..

Select LABEL DEVICE: [Select Print Device]

LABEL(S) QUEUED TO PRINT!

Select External Interface Menu Option:

## **View External Batches**

### [PSO INTERFACE VIEW]

With this option, batches of prescriptions that have printed from the external interface can be viewed.

#### **Example: View External Batches**

Select External Interface Menu Option: **View External Batches**

Enter a date/time range to see all batches sent to the External Interface.

Start date/time: **022807** (FEB 28, 2007)

End date/time: **030707** (MAR 07, 2007)

Gathering batches, please wait...

BATCH	QUEUED TO PRINT ON:	PATIENT:
1	FEB 28,2007@08:06:14	OPPATIENT12,ONE
2	FEB 28,2007@08:10:56	OPPATIENT12,ONE
3	FEB 28,2007@08:19:20	OPPATIENT22,ONE
4	FEB 28,2007@08:38:17	OPPATIENT28,ONE
5	FEB 28,2007@08:50:32	OPPATIENT9,ONE
6	FEB 28,2007@09:15:35	OPPATIENT9,ONE
7	FEB 28,2007@09:33:48	OPPATIENT18,ONE
8	FEB 28,2007@09:39:31	OPPATIENT1,ONE

```
9      FEB 28,2007@10:36:51      OPPATIENT10,ONE  
10     FEB 28,2007@13:37:24      OPPATIENT4,ONE  
11     FEB 28,2007@13:46:07      OPPATIENT8,ONE
```

Select Batch(s) to reprint: (1-11): **5,6**

Batches selected for Viewing are:

Batch 5 Queued for FEB 28,2007@08:50:32 by OPPHARMACIST4,THREE  
Batch 6 Queued for FEB 28,2007@09:15:35 by OPPHARMACIST4,THREE

Print list to the screen or to a printer: (S/P): Screen// <**Enter**>

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

RX #	NAME -> OPPATIENT9,ONE	BATCH 5
------	------------------------	---------

---

2820	NADOLOL 40MG TAB	ACTIVE
------	------------------	--------

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

RX #	NAME -> OPPATIENT9,ONE	BATCH 6
------	------------------------	---------

---

2821	MICONAZOLE NITRATE 2% LOT 60ML	ACTIVE
------	--------------------------------	--------

END OF LIST

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# **Chapter 10: Using the Medication Profile**

---

This chapter describes the Medication Profile, its different formats, and how it can be used in patient care.

## **Medication Profile**

**[PSO P]**

The Medication Profile displays a profile of all prescriptions on file for a particular patient. The profile display includes ‘local’ and all Non-VA Med orders. Effective with the OneVA Pharmacy (patch PSO\*7\*454 – December 2016), the Medication Profile displays all active medications from other facilities. The medications are retrieved from the Health Data Repository/Clinical Data Service (HDR/CDS) Repository and are displayed below the ‘local’ or ‘Non-VA Med’ orders and are sorted/grouped by facility. The prescriptions originating from other VA Pharmacy locations display under a divider header line showing the site name, site number, and status. The user may view this information directly on the screen or request it to be printed. The medication profile is available in two formats: short or long.

### **Medication Profile: Short Format**

The short format displays the following information:

- patient name
- eligibility
- reactions
- prescription number
- Sig
- quantity
- last fill date
- address
- DOB
- narrative
- prescriptions
- drug name
- Status
- issue date
- refills remaining.

The short report format of the fields for Non-VA Med orders include the drug name or orderable item name, dosage, schedule and date documented.

The short format displays the status in an abbreviated form. The following is an explanation of the codes:

Code    Status/Description

A       Active

B       Bad Address Indicated

DF      Discontinued due to edit by a provider through CPRS

- DE Discontinued due to edit via backdoor Pharmacy
- DP Discontinued by provider through CPRS
- DC Discontinued
- DD Discontinued due to death
- DA Auto discontinued due to admission
- E Expired
- HP Placed on hold by provider through CPRS
- H Placed on hold via backdoor Pharmacy
- N Non Verified
- P Pending due to drug interactions
- S Suspended
- \$ Copay eligible
- E Third-party electronically billable
- R Returned to stock prescription (next to last fill date)



For the *Patient Prescription Processing, Complete Orders from OERR, and Action Profile (132 COLUMN PRINTOUT)* options, if a temporary address has no end date, the following text is displayed in the Status column: "(Temp address from XXX 99,999 till (no end date))".

### **Example: Medication Profile – Short Format**

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 - Last entry on 1-20-05			
CrCL: <Not Found> (CREAT: Not Found)			BSA (m2):		
# RX #	DRUG	QTY	ST	ISSUE DATE	LAST REF FILL DAY REM SUP
<hr/> -----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
<hr/> -----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
<hr/> -----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
-----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) -----								
GINKO 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//								
Order #4 is highlighted (reverse video) to indicate that it has recently expired.								
Orders #5,7,10 are highlighted (reverse video) to indicate that they were recently discontinued.								
<b>Hold Type</b> display codes are shown in <b>red</b> .								
<b>Discontinue Type</b> display codes are shown in <b>red</b> .								

## OneVA Pharmacy and Medication Profile

Effective with the OneVA Pharmacy patch PSO\*7\*454 – December 2016, the Medication Profile displays all active medications from other facilities. The medications are retrieved from the Health Data Repository/Clinical Data Service (HDR/CDS) Repository and are displayed below the ‘local’ or ‘Non-VA Med’ orders and are sorted/grouped by facility. The prescriptions originating from other VA Pharmacy locations display under a divider header line showing the site name, site number, and status.



**Note:** For additional information regarding OneVA Pharmacy processing, please see Appendix A, OneVA Pharmacy User Manual.

The example shown below displays three pages of a test patient’s Medication Profile, displaying the ‘local’ prescription orders followed by prescription orders that originated at other facilities.

Medication Profile		Jul 28, 2016@05:20:23			Page: 1 of 3		
PSOPATIENT,SIX		<NO ALLERGY ASSESSMENT>					
PID: 666-01-2136		Ht (cm): _____ (_____)					
DOB: FEB 13, 1961 (55)		Wt (kg): _____ (_____)					
SEX: FEMALE							
CrCl: <Not Found>		BSA (m2) : _____			ISSUE LAST REF DAY		
# RX #	DRUG				QTY ST DATE FILL REM SUP		
-----ACTIVE-----							
1 10000126	FLUTICAS 100/SALMETEROL 50 INHL DISK 60	E>	06-01	02-02	11	45	Qty: 2
2 10000128	NIACIN 250MG TAB	S>	06-08	08-27	2	90	
3 10000122	RAMIPRIL 5MG CAP	A>	05-31	05-31	8	30	

-----DISCONTINUED-----  
 4 10000125 HYDROCHLOROTHIAZIDE 25MG TAB 60 DC>02-01 02-02 5 60  
 -----HOLD-----  
 5 10000127 LISINOPRIL 2.5MG TAB 90 H> 03-10 - 3 90  
 -----DAYTON (552) ACTIVE-----

+ Enter ?? for more actions

PU Patient Record Update

NO New Order

PI Patient Information

SO Select Order

Select Action: Next Screen//

**Medication Profile** Jul 28, 2016@05:20:46 Page: 2 of 3

PSOPATIENT,SIX

<NO ALLERGY ASSESSMENT>

PID: 666-01-2136

Ht (cm): \_\_\_\_\_ (\_\_\_\_\_)

DOB: FEB 13,1961 (55)

Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)

SEX: FEMALE

CrCL: <Not Found>

BSA (m2): \_\_\_\_\_

ISSUE	LAST	REF	DAY		
QTY	ST	DATE	FILL	REM	SUP

# RX # DRUG

6 2718399	IBUPROFEN 800MG TAB	30 A	06-09	07-19	0	10
7 2718383	OMEPRAZOLE 10MG SA CAP	30 A	02-02	06-10	11	30
8 2718397	VERAPAMIL HCL 120MG TAB	60 A	06-15	06-15	5	60

-----DAYTON (552) DISCONTINUED-----

9 2718398	ASPIRIN 325MG BUFFERED TAB	300 DC	03-15	03-15	2	90
-----------	----------------------------	--------	-------	-------	---	----

-----DAYTON (552) HOLD-----

10 2718400	ALBUTEROL 0.5% INHL SOLN	2 H	06-09	-	1	14
------------	--------------------------	-----	-------	---	---	----

-----DAYTON (552) SUSPENDED-----

11 2718401	CALCIUM GLUCONATE 500MG TAB	30 S	05-25	07-14	3	30
------------	-----------------------------	------	-------	-------	---	----

-----DAYTSHR TEST LAB (984) ACTIVE-----

+ Enter ?? for more actions

PU Patient Record Update

NO New Order

PI Patient Information

SO Select Order

Select Action: Next Screen//

**Medication Profile** Jul 28, 2016@05:16:31 Page: 3 of 3

PSOPATIENT,SIX

<NO ALLERGY ASSESSMENT>

PID: 666-01-2136

Ht (cm): \_\_\_\_\_ (\_\_\_\_\_)

DOB: FEB 13,1961 (55)

Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)

SEX: FEMALE

CrCL: <Not Found>

BSA (m2): \_\_\_\_\_

ISSUE	LAST	REF	DAY		
QTY	ST	DATE	FILL	REM	SUP

# RX # DRUG

12 2718902	BANDAGE, GAUZE, ROLLER 2 IN X 6 YD	3 A	04-19	04-19	9	29
13 2718744	OMEPRAZOLE 10MG SA CAP	60 A	05-03	05-03	5	60

-----DAYTSHR TEST LAB (984) DISCONTINUED-----

14 2718745	QUINAPRIL 20MG TAB	30 DC	03-04	03-04	11	30
------------	--------------------	-------	-------	-------	----	----

-----DAYTSHR TEST LAB (984) EXPIRED-----

15 2718746	AMOXICILLIN 250MG CAP	30 E	06-01	05-04	0	10
------------	-----------------------	------	-------	-------	---	----

-----DAYTSHR TEST LAB (984) HOLD-----

16 2718747	CETIRIZINE HCL 10MG TAB	45 H	04-23	-	4	45
------------	-------------------------	------	-------	---	---	----

-----DAYTSHR TEST LAB (984) SUSPENDED-----

17 2718748	TRAZODONE HCL 50MG TAB	90 S	04-05	06-24	2	90
------------	------------------------	------	-------	-------	---	----

Enter ?? for more actions

PU Patient Record Update

NO New Order

PI Patient Information

SO Select Order

Select Action: Quit//

The OneVA Pharmacy patch PSO\*7\*454 – December 2016 introduces the new view, ‘REMOTE OP Medications’, which displays the details of the remote prescription order. When selecting a

OneVA Pharmacy prescription order from the Medication Profile screen, the new ‘REMOTE OP Medications’ page display as shown in the example below.

The OneVA Pharmacy patch PSO\*7\*497 updates the ‘REMOTE OP Medications’ display and introduces the new view for prescription orders that originated from other VA Pharmacy locations, the dispensing Pharmacy only has two actions available. They are:

- RF Refill Rx from Another VA Pharmacy
- PR Partial Fill Rx from Another VA Pharmacy

REMOTE OP Medications (ACTIVE) Jul 27, 2016@10:12:37		Page: 1 of 1
PSOPATIENT,SIX	<NO ALLERGY ASSESSMENT>	
PID: 666-01-2136	Ht (cm) :	(_____)
DOB: FEB 13,1961 (55)	Wt (kg) :	(_____)
SEX: FEFEMALE	BSA (m <sup>2</sup> ) : _____	
CrCL: <Not Found>		
Site #: 984 (DAYTSHR TEST LAB)		
Rx #: 2718862		
Drug Name: IBUPROFEN 800MG TAB		
Days Supply: 30		
Quantity: 60		
Refills: 11		
Expiration Date: 06/01/17		
Issue Date: 05/31/16		
Stop Date: 06/01/17		
Last Fill Date: 05/31/16		
Sig: TAKE ONE TABLET BY MOUTH TWICE A DAY AS NEEDED --TAKE WITH FOOD IF GI UPSET OCCURS/DO NOT CRUSH OR CHEW--		
Enter ?? for more actions		
RF Refill Rx from Another VA Pharmacy		
PR Partial Fill Rx from Another VA Pharmacy		
Select Action:Quit//		

Users with PSORPH key will be able to use the above Remote OP Medications option. For users without the PSORPH key the system will display the following message for remote fill.

**>>> Refill Rx from Another VA Pharmacy may not be selected at this point.**

For users without the PSORPH key the system will display the following message for partial fill.

**>>> Partial Fill Rx from Another VA Pharmacy may not be selected at this point.**

## **OneVA Pharmacy Exception Messages**

The OneVA Pharmacy patch contains specific business rules to prevent refill and/or partial orders that originated at other VA Pharmacy locations from being processed. They include the following list:

- Patient's prescription that originated from another VA Pharmacy location cannot be refilled before the next refill date.

**Unable to complete transaction.**

**Cannot refill Rx# xxxxxxx. Next possible fill date is MM/DD/YYYY**

- Patient's prescription that originated from another VA Pharmacy location is not fully or partially dispensed when the prescription status is 'discontinued', 'expired', is on 'hold', or 'suspended'.

**Only 'ACTIVE' remote prescriptions may be refilled at this time.**

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refilled) when there are zero remaining refills. Note: Partial fills are allowed.

**Unable to complete transaction. Cannot refill Rx # xxxxxxx. No refills left.**

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when the drug is classified as a controlled substance on the dispensing site.

**This is a controlled substance. Cannot refill Rx # xxxxxxx.**

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when the drug is classified as a controlled substance on the host site.

**Unable to complete transaction. Rx #xxxxxxxx cannot be refilled.**

**The associated drug is considered a controlled substance at the host facility.**

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when the drug is inactive on the dispensing site.

**Matched Drug <DRUG NAME> is inactive. Cannot refill.**

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when the drug has no dispensing site match.

**No local match could be found for <DRUG NAME>**

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when no drug on the dispensing site has a matching VA Product ID.

**Missing VA Product ID. Rx #xxxxxxxx cannot be refilled.**

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refilled or partial fill) when the prescription has a trade name.

**This prescription cannot be refilled or partial filled because it has a value entered in the Rx trade name field. Please follow local policy for obtaining a new prescription.**

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refilled or partial fill) when the prescription type is Titration.

**Cannot refill prescription - type is Titration. You may request a partial fill.**

- Patient's prescription that originated from another VA Pharmacy location will deny the request for a prescription refill to be completed if it is requested "too soon" after the last refill so that prescriptions are not over-distributed.

**Unable to complete transaction.**

**Cannot refill Rx# 763026. Next possible fill date is 11/9/2017**

OneVa Pharmacy patch PSO\*7\*479 modifies routine PSORRX2 to add the following text if no error message is returned when retrieving the label information from the host system. The following text is displayed just prior to the Label Device: ‘ prompt:

For a refill:

```
TRANSACTION SUCCESSFUL... The refill for RX #763002 has been recorded on
the prescription at the host system.

Select a printer to generate the label or '^' to bypass printing.

QUEUE TO PRINT ON
DEVICE:
```

For a partial fill:

```
TRANSACTION SUCCESSFUL... The partial for RX #763002 has been recorded on
the prescription at the host system.
```

Select a printer to generate the label or '^' to bypass printing.

QUEUE TO PRINT ON  
DEVICE:



**Note:** For additional information regarding OneVA Pharmacy processing, please see Appendix A, OneVA Pharmacy User.

## 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> (CREAT: 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
-----
Non-VA MEDS (Not Dispensed by VA)

GINKO 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 “Using The Pharmacy Intervention Menu” for more details. 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)			
CrCL: 78.1 (est.) (CREAT:1.0mg/dL 2/19/99)	BSA (m2): 2.29		
SEX: MALE	EXP/CANCEL CUTOFF: 120 DAY		
# 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			
<b>PENDING (2 order)</b>			
14 ALBUTEROL INHALER		RF 06-03-07	2
30			
15 AMITRIPTYLINE 10MG TAB		RN 06-02-07	3
10			
<b>Non-VA MEDS (Not dispensed by VA) (1 order)</b>			
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
CrCL: <Not Found> (CREAT: Not Found) BSA (m2):
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> (CREAT: Not Found)		BSA (m2): 2.29			
# 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  
SIG: TAKE 2 TABLET(S) PO FOUR TIMES A DAY

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 5: Medication Profile list item with Bad Address Indicator:**

The Outpatient Pharmacy Medication Profile has a display problem for a prescription with the following characteristics:

1. 2-letter status (e.g., DC)
  2. Drug marked for Consolidated Mailout Outpatient Pharmacy (CMOP)
  3. Bad Address Indicator

When a prescription with all three features is displayed the DAY SUP column value is being truncated as illustrated below where the Day Supply value is actually 90 and it displays as 9.

#	RX #	DRUG	DISCONTINUED	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
1	100005604\$	TOBRAMYCIN 80MG/2ML INJ	100 DC>B01-21	01-21	0	9	<<Truncated		

To resolve this issue, the BAD ADDRESS INDICATOR is now displayed on a separate line.

Medication Profile Sep 22, 2015@09:16:37 Page: 1 of 2  
 OUTPATIENT, DELBERT <NO ALLERGY ASSESSMENT>  
 PID: 666-06-1944 Ht (cm): \_\_\_\_\_ (\_\_\_\_\_)  
 DOB: JUN 15, 1944 (71) Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found) BSA (m2): \_\_\_\_\_  
 # RX # DRUG ISSUE LAST REF DAY  
 QTY ST DATE FILL REM SUP  
 -----ACTIVE-----  
 1 301278A ALBUTEROL INHALER 66 A 09-02 09-02 1 40  
    \*\*\* Bad Address \*\*\*  
 2 301276 INSULIN NPH U-100 INJ (PORK) 59 S 08-28 12-14 3 59  
    \*\*\* Bad Address \*\*\*  
 3 301282\$ LOMUSTINE 10MG CAP 30 A 09-09 09-09 5 60  
    \*\*\* Bad Address \*\*\*  
 4 100003059A PARALDEHYDE ORAL LIQUID (OZ) 1 A 08-28 09-09 0 90  
    \*\*\* Bad Address \*\*\*  
 5 301277 PIMOZIDE 2MG 91 A 08-28 08-28 3 91  
 Enter ?? for more actions  
 PU Patient Record Update NO New Order  
 PI Patient Information SO Select Order  
 Select Action: Next Screen//

#### **Example 6: 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> (CREAT: Not Found)		BSA (m2): 2.29			
# Rx#	DRUG [^]	QTY ST	ISSUE DATE	LAST FILL	REF DAY
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 7: 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.

# **Chapter 11: Using the Medication Reconciliation Tools**

This chapter describes the tools available to perform Medication Reconciliation functions via the CPRS Reports tab and CPRS Notes tab.

## **Medication Reconciliation**

The Medication Reconciliation functions may be performed via the use of four tools. The tools utilize Health Summary components and Text Integrated Utility (TIU) data objects to create a list of current medications. These Medication Reconciliation tools also leverage the Remote Data Interoperability (RDI) software to include medication data from other sites.

Tool 1 is a Medication Reconciliation Profile health summary component. This report creates an alphabetical list of outpatient prescriptions, unit dose medications, documented non-VA medications, and remote VA medications. This summary can be used at transition points in a patient's care, (admission, discharge, etc.) to identify medications that need to be continued, new items to be ordered, old items to be discontinued, or orders that need to be changed.

Tool 2 is a Medication Worksheet component. This report provides a grid-formatted list of active and pending medications suitable for giving to a patient at a clinic visit or upon discharge from the hospital.

Tool 3 is a TIU data object provided as an alternative to the Medication Chart health summary process. The unique aspect of this object is that the list, generated for the patient, includes recently expired medications but not recently discontinued medications.

Tool 4 is a series of TIU data objects and health summary components that retrieve remote active medications and remote allergy/ADR data.

For a complete list of functionality, please refer to Medication Reconciliation Tools Implementation Guide. Upon completion of the steps listed in the Implementation Guide, users will be able to retrieve reports useful for Medication Reconciliation by selecting the newly created Health Summaries on the CPRS Reports tab or by using the newly created TIU templates and objects from the CPRS Notes Tab's Templates Drawer and/or any progress note titles in which they have been embedded.

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# **Chapter 12: Using the Pharmacy Intervention Menu**

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This chapter describes the options in the *Pharmacy Intervention Menu*.

 This menu is locked with the PSORPH key.

## **Pharmacy Intervention Menu**

**[PSO INTERVENTION MENU]**

The *Pharmacy Intervention Menu* enables the user to enter, edit, print, delete, or view interventions in the APSP INTERVENTION file.

The following options are available on this menu:

- *Enter Pharmacy Intervention*
- *Edit Pharmacy Intervention*
- *Print Pharmacy Intervention*
- *Delete Intervention*
- *View Intervention*

### **Enter Pharmacy Intervention**

**[PSO INTERVENTION NEW ENTRY]**

When it is necessary to interrupt the filling of a prescription to contact the provider in order to change, clarify, or cancel the prescription, use this option to add a new intervention entry into the APSP INTERVENTION file.

### **Edit Pharmacy Intervention**

**[PSO INTERVENTION EDIT]**

Using this option, an already existing entry in the APSP INTERVENTION file can be edited.

### **Print Pharmacy Intervention**

**[PSO INTERVENTION PRINTOUT]**

Print a captioned printout of pharmacy interventions for a certain date range with this option. The report prints out on normal width paper and can be queued to print at a later time.

The subtotal on this report represents the number of interventions for a specific type of intervention where the recommendation for the intervention was accepted. The total is the sum of all interventions in which the recommendation was accepted.

The sub count on this report is the number of interventions for a specific type of intervention over the specific date range. The count is the total number of all interventions over the specific date range.

## **Delete Intervention**

### **[PSO INTERVENTION DELETE]**

This option can be used to delete an intervention from the APSP INTERVENTION file. An intervention can be deleted only on the same day that it was entered.

## **View Intervention**

### **[PSO INTERVENTION VIEW]**

This option displays pharmacy interventions in a captioned format on the screen. More than one intervention can be viewed at a time.

# **Chapter 13: Print from Suspense File**

---

This chapter describes the *Print from Suspense File* option used for printing suspended prescriptions.

## **Print from Suspense File**

**[PSO PNLBL]**

This option allows the user to print labels from the RX SUSPENSE file. First, enter the “Print Through” date. Any prescriptions with a suspense date on or before the date entered will print. Additionally, if a patient has at least one prescription on or before the date entered, any other prescriptions for that patient that are in suspense will be printed for the site parameter specified number of days to be pulled from suspense.

For example, if today’s date is entered and Patient A has a prescription to be printed through the that date, all of Patient A’s prescriptions between the date entered plus the number of days set in the local site parameter will be printed. If there are no prescriptions for Patient A through the date entered, no labels will print.

Labels can be sorted by the patient name, the SSN, or the DEA Special Handling code. If sorted by DEA, the labels must then sort by patient name or SSN. Sorting by DEA will send the labels to the printer in three groups:

**First group** – will contain all the prescriptions with drugs that contain an “A” (narcotics and alcoholics) or a “C” (controlled substances-non narcotic) in the DEA Special Handling field.

**Second group** – will contain all the prescriptions with drugs containing an “S” (supply) in the DEA Special Handling field.

**Third group** – will contain all others. If a patient has prescriptions in suspense that fall in all three categories, that patient’s labels will be printed three times, once in each group.

Only one job is tasked for all of the prescriptions in the batch; therefore, if the job is queued by mistake, only one tasked job must be undone. Any prescription that is put in suspense for the “Print Through Date” between the times the job was queued until the time it actually runs will be included in the job.

Labels for each job printed from suspense will be part of a batch. Each batch is identified by the Division, the user who queued the batch, and the date/time that the job was queued to begin.



A label will not print if the Label Log shows that the label has already printed unless the suspense queue indicates that a user has requested a reprint of the suspended prescription.



Prescriptions pulled early from suspense will not be part of a batch, so they will not be able to be reprinted through the *Reprint Batches from Suspense* option.



Prescriptions with an FDA Medication Guide associated will automatically print along with the labels (if one is available). In order to ensure that the documents are sent to an actual printer users will be required to enter a valid printer for printing the FDA Medication Guides at this option if one has not been selected when they logged on to the Outpatient Pharmacy Division.

A short profile for every patient for whom a label for a new prescription is being printed will also be printed if the local Profile with New Prescriptions site parameter is set to Yes.



If a patient has partial prescriptions with regular fills, only one set of trailing documents will print for that patient. (In V. 6.0 trailer documents were printed after each partial.)

If a prescription is determined to be an ePharmacy prescription (e.g., third party electronically billable), an electronic claim will be sent by the Electronic Claims Management Engine (ECME) to the third party payer. TRICARE and CHAMPVA prescriptions are exceptions, as noted in the TRICARE and CHAMPVA section. The communication events between Outpatient Pharmacy and ECME are recorded in the ECME Log section of each prescription. The ECME log can be viewed in the patient Medication Profile screen (Activity Log option - AL) and also from the View Prescriptions option. If the claim submission returns a Refill Too Soon (79) or Drug Utilization Review (88) reject, the label is not printed for the prescription and it is moved to the Refill Too Soon/DUR section of the patient Medication Profile screen until the user resolves the reject. The prescription will also display on the Third Party Payer Reject Worklist. If the claim submission returns a Reject Resolution Required reject, the label is not printed for the prescription and it is moved to the Reject Resolution Required section of the Third Party Payer Reject – Worklist.

### **¾ Days Supply Hold**

Because of the great number of refill-too-soon third party claim rejections that can occur due to prescriptions being filled too early, the system verifies that  $\frac{3}{4}$  of the days supply has elapsed on the previous fill before the ePharmacy prescription may be refilled. To reduce refill-too-soon third party claim rejections for new prescriptions, prior prescriptions are checked for the same

patient and product to verify that ¾ of the days supply has elapsed on the prior prescriptions before the new prescriptions may be filled. The following list describes this functionality.

- ePharmacy prescriptions are delayed from being sent to CMOP and printed for local mail until ¾ of the days supply has elapsed. For CMOP suspense and local mail suspense, a partial day will be rounded up (ex.: ¾ of 30 days will be 23 days). With the release of PSO\*7\*367, this rounding functionality will also be available for local mail suspense.
- When checking a prior prescription for the same patient and product, the prior prescription cannot be in a non-verified status, the prior prescription must have a release date, and the prior prescription must have an expiration date no earlier than 120 days prior to the current date. The ¾ days' supply change applies to prescriptions that are renewed, locally suspended, suspended via CMOP or modified using the SDC - Suspense Date Calc action.
- An activity log entry will state the date/time that the Rx will be allowed to be removed from suspense. The activity log will be defined on the initial evaluation. The following is an example of the log entry:

4	06/18/08	SUSPENSE	REFILL 2	OPHARM, ONE
Comments: 3/4 of Days Supply SUSPENSE HOLD until 6/20/08.				

- To fill the prescription earlier, users may pull these types of prescriptions early from suspense.

## **Host Errors**

Prescriptions (ePharmacy only) will be prevented from being filled/sent to CMOP when a host processing error occurs as a claim is submitted through ECME. Host processing errors are identified by reject codes M6, M8, NN, and 99 which are returned by the third party payer. The following conditions apply when this scenario occurs.

- The transmission of the prescription fill will be delayed 1 day in hopes that the host processing issues will be resolved by the third party payer.
- An activity log entry will state the date/time along with a comment stating that the Rx/fill was left in suspense hold due to a host processing error. The following is an example of the log entry:

2	06/25/08	SUSPENSE	ORIGINAL	OPPHARM,TWO
Comments: SUSPENSE HOLD until 6/26/08 due to host reject error.				
- The Pull Early from Suspense function is not impacted by this added functionality. Users may pull these type prescriptions early from suspense.

There is no user interaction for this function. It initiates when the Print from Suspense [PSO PNLBL] option is initiated for CMOP prescriptions.

## **TRICARE and CHAMPVA**

If there is an override or bypass for a TRICARE or CHAMPVA prescription and there are no open claim rejections for that prescription, then an electronic claim is not generated from suspense, and the label will be printed when the prescription is processed from suspense. This

exception applies to TRICARE and CHAMPVA ePharmacy billable prescriptions and non-billable prescriptions.

If a claim is submitted from suspense for a TRICARE or CHAMPVA prescription, the prescription will be displayed on the Third Party Payer Reject worklist if the claim submission returns any type of reject. Also, non-billable TRICARE and CHAMPVA prescriptions will be displayed on the Third Party Payer Reject worklist. A user must resolve the reject or submit an override before the prescription can be processed through suspense.

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## **Chapter 14: Allergy Order Checks**

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This chapter describes the display of Allergy Order Checks functionality that appear prior to Clinical Reminder Order Checks (CROCs) and Enhanced Order Checks.

The following changes have been made to the existing allergy order checks:

1. In Backdoor Pharmacy, the system will require the pharmacist to complete an Intervention if the severity value equals ‘Severe’ before allowing the pharmacist to continue with the order. The intervention functionality will be similar to the Critical Drug-Drug Interactions in backdoor pharmacy today.



**Note:** Severity for an allergy can ONLY be entered for (O)bserved and NOT (H)istorical Allergy/Adverse Reactions. The user MUST HOLD the GMRA-ALLERGY VERIFY key and complete an observed reaction report to enter MECHANISM and SEVERITY for Observed Allergies/Adverse Reactions.

2. For a Severe Allergy the user is required to enter an intervention and their electronic signature
3. For allergies/adverse reactions with Severity of Mild, Moderate, or Not Entered, the system will continue the same as it does today with the option that allows the pharmacist to enter an intervention at their discretion.
4. All Allergies/adverse reactions are captured and stored with the order number in the ORDER CHECK INSTANCES file (#100.05),, regardless of whether or not an intervention was entered. The information can be viewed from the prescription screen using the hidden action – DA Display Drug Allergies .
5. Remote/HDR allergy Signs/Symptoms are now displayed when doing Allergy/ADR Order Checks.
6. Modified Allergy/ADR Order Check to display actual Station Name in lieu of Local or Remote terminology

## Examples of Allergy/Adverse Reaction Order Checks:

### Mild:

Now doing allergy checks. Please wait...  
A Drug-Allergy Reaction exists for this medication and/or class!  
Prospective Drug: ASPIRIN 81MG EC TAB  
Causative Agent: ASPIRIN (ALBANY - 01/14/16)  
Historical/Observed: OBSERVED  
Severity: MILD  
Ingredients: ASPIRIN  
Signs/Symptoms: DRY MOUTH, HIVES  
Drug Class: CN103 NON-OPIOID ANALGESICS  
Provider Override Reason: N/A - Order Check Not Evaluated by Provider  
Do you want to Intervene? YES// n NO

### Moderate:

A Drug-Allergy Reaction exists for this medication and/or class!  
Prospective Drug: MINOXIDIL 2.5MG TAB  
Causative Agent: MINOXIDIL (ALBANY - 09/22/15)  
Historical/Observed: OBSERVED  
Severity: MODERATE  
Ingredients: MINOXIDIL  
Signs/Symptoms: HYPOTENSION  
Drug Class: CV490 ANTIHYPERTENSIVES, OTHER  
Provider Override Reason: N/A - Order Check Not Evaluated by Provider  
Do you want to Intervene? YES// n NO

### Historical-Severity Not Entered:

Now doing allergy checks. Please wait...  
A Drug-Allergy Reaction exists for this medication and/or class!  
Prospective Drug: AMPICILLIN 250MG  
Causative Agent: AMPICILLIN (ALBANY - 01/14/16)  
Historical/Observed: HISTORICAL  
Severity: Not Entered  
Ingredients: AMPICILLIN  
Signs/Symptoms: DRY MOUTH, HIVES  
Drug Class: AM111 PENICILLINS,AMINO DERIVATIVES  
Provider Override Reason: N/A - Order Check Not Evaluated by Provider  
Do you want to Intervene? YES// NO

### **Severe without Intervention:**

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

Prospective Drug: ACETAMINOPHEN 325MG TAB  
Causative Agent: ACETAMINOPHEN/ ASPIRIN/ CAFFEINE (CHEYENNE VAMC - 02/09/15)

Historical/Observed: OBSERVED

Severity: SEVERE

Ingredients: ACETAMINOPHEN

Signs/Symptoms: DIARRHEA, NAUSEA AND VOMITING, RASH

Drug Class: CN103 NON-OPIOID ANALGESICS

Provider Override Reason: N/A - Order Check Not Evaluated by Provider

Do you want to Intervene? YES// n NO

With a SEVERE reaction, an intervention is required!



Note: "With a severe reaction, an intervention is required"

### **Severe with Intervention:**

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

Prospective Drug: ACETAMINOPHEN 325MG TAB  
Causative Agent: ACETAMINOPHEN/ ASPIRIN/ CAFFEINE (CHEYENNE VAMC - 02/09/15)

Historical/Observed: OBSERVED

Severity: SEVERE

Ingredients: ACETAMINOPHEN

Signs/Symptoms: DIARRHEA, NAUSEA AND VOMITING, RASH

Provider Override Reason: N/A - Order Check Not Evaluated by Provider

Do you want to Intervene? YES//

Enter your Current Signature Code: SIGNATURE VERIFIED

Now creating Pharmacy Intervention  
For ACETAMINOPHEN 325MG TAB

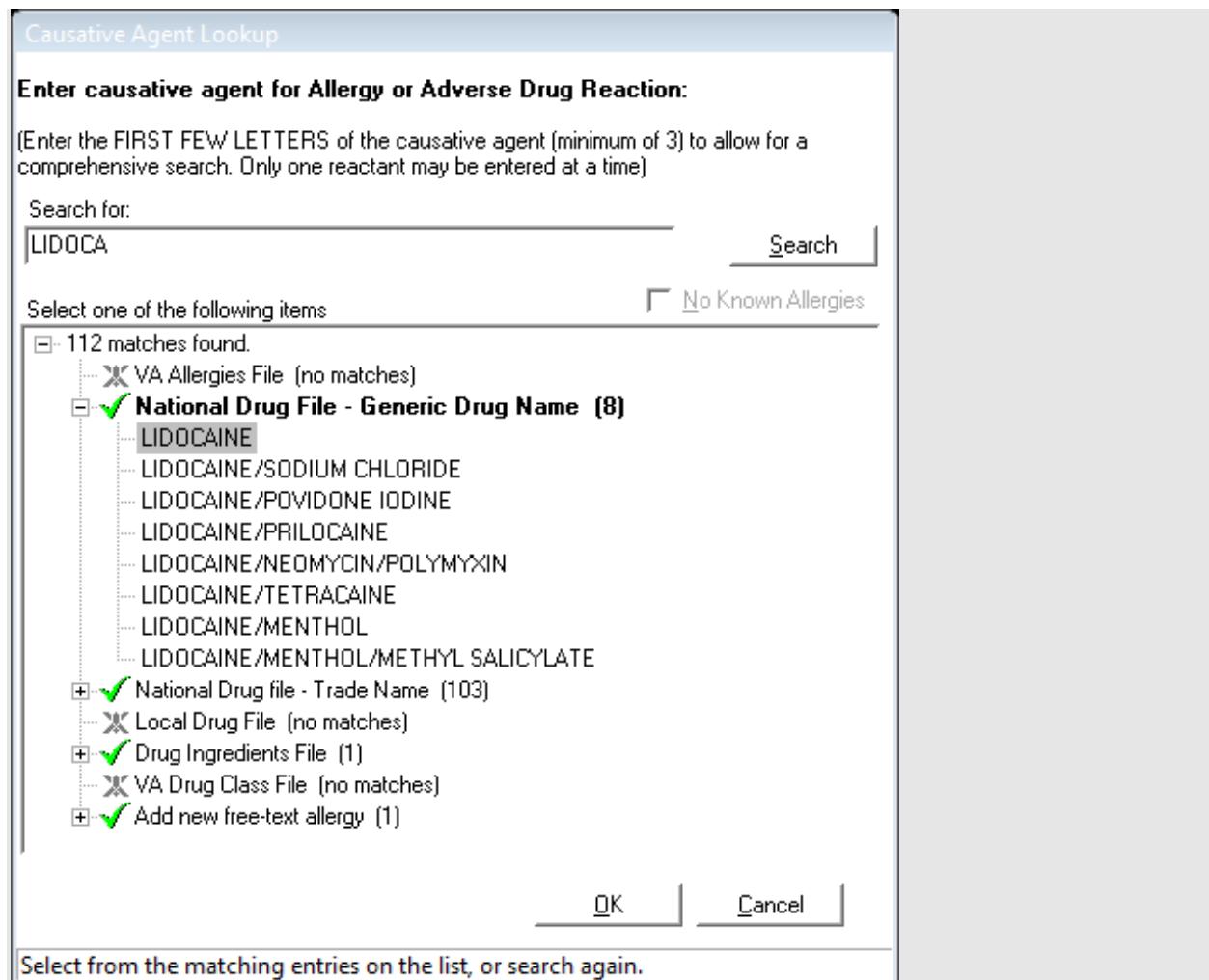
PROVIDER: pears PEARSON, HOLLY HP 192 SYSTEMS ANALYST  
RECOMMENDATION: 8 NO CHANGE

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

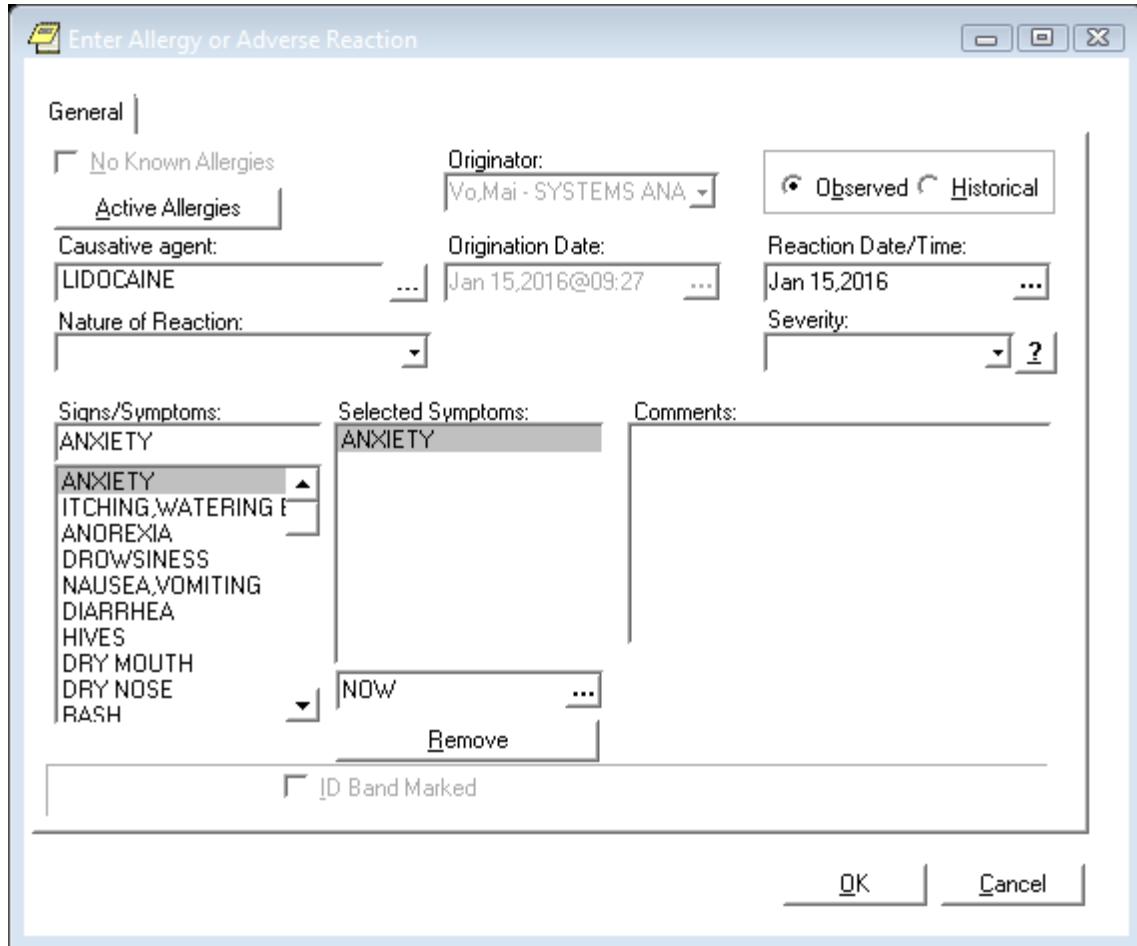
## **CPRS Allergy/Adverse Reaction Entry Process**

From the Order tab, enter a new allergy using the Allergies Dialog:

**Figure 1: Allergies Dialog**



**Figure 2: Example of Observed Allergy**



## VistA Outpatient Allergy/Adverse Reaction Entry Process

### Observed Allergy example:

<b>Patient Information</b>	Jan 20, 2016@16:50:39	Page: 2 of <A>
ROWPATNM, BOAT	Ht (cm) : _____ ( _____ )	
PID: 666-00-0363	Wt (kg) : _____ ( _____ )	
DOB: MAR 4, 1950 (65)	BSA (m <sup>2</sup> ) : _____	
SEX: FEMALE		
CrCL: <Not Found> (CREAT: Not Found)		
+ Non-Verified: PENICILLIN,		
Remote:		
Adverse Reactions		
Verified: ASPIRIN,		

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// EA Enter/Edit Allergy/ADR Data

REACTANT	VER.	MECH.	OBS/	TYPE
PENICILLIN	NO	UNKNOWN	OBS	DRUG
ASPIRIN	YES	PHARM	OBS	DRUG
CHOCOLATE (FLAVOR)	AUTO	UNKNOWN	HIST	DRUG
Reactions: ANXIETY				FOOD

Enter Causative Agent: GENTAMICIN

Checking existing PATIENT ALLERGIES (#120.8) file for matches...

Now checking GMR ALLERGIES (#120.82) file for matches...

Now checking the National Drug File - Generic Names (#50.6)

1	GENTAMICIN
2	GENTAMICIN/PREDNISOLONE
3	GENTAMICIN/SODIUM CHLORIDE

CHOOSE 1-3: 1 GENTAMICIN  
GENTAMICIN OK? Yes// (Yes)

(O)bserve or (H)istorical Allergy/Adverse Reaction: O OBSERVED  
 Select date reaction was OBSERVED (Time Optional): T-15 (JAN 05, 2016) JAN 05, 2016 (JAN 05, 2016)  
 Are you adding 'JAN 05, 2016' as a new ADVERSE REACTION REPORTING? No// Y (Yes)

No signs/symptoms have been specified. Please add some now.

The following are the top ten most common signs/symptoms:

1. ANXIETY	7. HIVES
2. ITCHING, WATERING EYES	8. DRY MOUTH
3. ANOREXIA	9. DRY NOSE
4. DROWSINESS	10. RASH
5. NAUSEA, VOMITING	11. OTHER SIGN/SYMPTOM
6. DIARRHEA	

Enter from the list above : 7,10

Date (Time Optional) of appearance of Sign/Symptom(s): Jan 05, 2016// (JAN 05, 2016)

The following is the list of reported signs/symptoms for this reaction:

Signs/Symptoms	Date Observed
1 HIVES	Jan 05, 2016
2 RASH	Jan 05, 2016

Select Action (A) DD, (D) ELETE OR <RET>:

Choose one of the following:

A - ALLERGY  
P - PHARMACOLOGICAL  
U - UNKNOWN

MECHANISM: UNKNOWN// A ALLERGY

COMMENTS:

No existing text  
Edit? NO//

COMMENTS ARE REQUIRED.

Press RETURN to continue

Complete the observed reaction report? Yes// (Yes)

DATE/TIME OF EVENT: MAR 7,2016// 1/5/2016 (JAN 05, 2016) (JAN 05, 2016)

OBSERVER: SEBURN,CINDY// PEARSON,HOLLY HP 192 BAY PINES TES

T LAB

SEVERITY: ?

- MILD - Requires minimal therapeutic intervention such as discontinuation of drug(s).
- MODERATE - Requires active treatment of adverse reaction, or further testing or evaluation to assess extent of non-serious outcome (see SEVERE for definition of serious).
- SEVERE - Includes any serious outcome, resulting in life or organ threatening situation or death, significant or permanent disability, requiring intervention to prevent permanent impairment or damage, or requiring/prolonging hospitalization.

Choose from:

- 1 MILD
- 2 MODERATE
- 3 SEVERE

SEVERITY: 3 SEVERE

DATE MD NOTIFIED: Mar 7,2016// (MAR 07, 2016)

Complete the FDA data? Yes// N (No)

Enter another Causative Agent? YES// NO

Causative Agent Data edited this Session:

ADVERSE REACTION

-----

GENTAMICIN

Obs/Hist: OBSERVED

Obs d/t: Jan 05, 2016

Signs/Symptoms: HIVES (1/5/16)

RASH (1/5/16)

Causative Agent Data edited this Session:

ADVERSE REACTION

-----

GENTAMICIN

Obs/Hist: OBSERVED

Obs d/t: Jan 05, 2016

Signs/Symptoms: RASH (1/5/16)

URTICARIA (1/5/16)

ORIGINATOR

COMMENTS:

Date: Feb 26, 2016@10:52

User: PEARSON, HOLLY

Title: SYSTEMS ANALYST

This is a required comment

Is this correct? NO//

Is this correct? NO// YES

This session you have CHOSEN:

GENTAMICIN

## Historical Allergy example:

### Patient Information

Jan 20, 2016@17:02:40

Page: 1 of 2

<A>

OPHEPPAT, ONE

PID: 666-03-1990

Ht(cm): \_\_\_\_\_ (\_\_\_\_\_)

DOB: MAR 19, 1990 (25)

Wt(kg): \_\_\_\_\_ (\_\_\_\_\_)

SEX: MALE

Non-VA Meds on File - Last entry on 08/04/15

CrCL: <Not Found> (CREAT: Not Found)

BSA (m2): \_\_\_\_\_

Eligibility:

RX PATIENT STATUS: OTHER FEDERAL

Disabilities:

HOME PHONE:

CELL PHONE:

WORK PHONE:

Prescription Mail Delivery: Regular Mail

### Allergies

Verified: METFORMIN, PENICILLIN, ASPIRIN,

+ 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: Next Screen// ea Enter/Edit Allergy/ADR Data

REACTANT	VER.	MECH.	OBS/	TYPE
-----	----	-----	----	----
METFORMIN (METFORMIN HYDROCHLORIDE)	AUTO	ALLERGY	OBS	DRUG
Reactions: ANXIETY, HIVES, ITCHING, WATERING EYES				
OXYCODONE	NO	ALLERGY	OBS	DRUG
Reactions: COMA, SHORTNESS OF BREATH				
PENICILLIN	AUTO	ALLERGY	OBS	DRUG
Reactions: ANAPHYLAXIS, RASH, NAUSEA, VOMITING, BELCHING				
ASPIRIN	AUTO	ALLERGY	OBS	DRUG
Reactions: DIARRHEA, NAUSEA, VOMITING, HIVES				FOOD

Enter Causative Agent: Gentamicin

Checking existing PATIENT ALLERGIES (#120.8) file for matches...

Now checking GMR ALLERGIES (#120.82) file for matches...

Now checking the National Drug File - Generic Names (#50.6)

1 GENTAMICIN  
2 GENTAMICIN/PREDNISOLONE  
3 GENTAMICIN/SODIUM CHLORIDE  
CHOOSE 1-3: 1 GENTAMICIN  
GENTAMICIN OK? Yes// (Yes)

(O)bserve or (H)istorical Allergy/Adverse Reaction: h HISTORICAL

No signs/symptoms have been specified. Please add some now.

The following are the top ten most common signs/symptoms:

- |                           |                         |
|---------------------------|-------------------------|
| 1. ANXIETY                | 7. HIVES                |
| 2. ITCHING, WATERING EYES | 8. DRY MOUTH            |
| 3. ANOREXIA               | 9. DRY NOSE             |
| 4. DROWSINESS             | 10. RASH                |
| 5. NAUSEA, VOMITING       | 11. OTHER SIGN/SYMPOTOM |
| 6. DIARRHEA               |                         |

Enter from the list above : 7,10

Date (Time Optional) of appearance of Sign/Symptom(s): t (JAN 20, 2016)

The following is the list of reported signs/symptoms for this reaction:

Signs/Symptoms	Date Observed
1 HIVES	Jan 20, 2016
2 RASH	Jan 20, 2016

Select Action (A)DD, (D)ELETE OR <RET>:

COMMENTS:

No existing text  
Edit? NO//

Enter another Causative Agent? YES// n NO

Causative Agent Data edited this Session:

ADVERSE REACTION

-----

GENTAMICIN

Obs/Hist: HISTORICAL  
Signs/Symptoms: HIVES (1/20/16)  
RASH (1/20/16)

Is this correct? NO// y YES

This session you have CHOSEN:

GENTAMICIN

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## **Chapter 16: Clinical Reminder Order Checks**

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This chapter describes the display of Clinical Reminder Order Checks that appear prior to Enhanced Order Checks. Patch PSO\*7\*411 brings in new Clinical Reminder Order Checks functionality.

Order Checks now include the ability to view Clinical Reminders (prior to the display of Enhanced Drug-Drug interactions). Reminders are used to aid physicians in performing tasks to fulfill Clinical Practice Guidelines and periodic procedures or education as needed for veteran patients.

```
Now processing Clinical Reminder Order Checks. Please wait ...  
=====*** Clinical Reminder Order Check | Severity: SEVERE ***  
Potentially Teratogenic Medication (FDA Category D or C)  
Concern has been raised about use of this medication during pregnancy.  
1) Pregnancy status should be determined. Discuss use of this medication on the  
context of risks to the mother and child of untreated disease. Potential  
benefits may warrant use of the drug in pregnant women despite risks.  
2) The patient must be provided contraceptive counseling on potential risk vs.  
benefit of taking this medication if she were to become pregnant.  
*****  
Press Return to Continue...:  
  
The 'Teratogenic Medications' Order Check will display for female patients  
between the ages of 12 and 50, except those with a known exclusion criterion  
(e.g., hysterectomy), or those with a documented IUD placement that is more  
recent than a documented IUD removal.
```

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# **Chapter 17: Processing Order Checks**

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This chapter describes the option used for processing order checks.

## **Processing Order Checks**

### **[PSO ORDER CHECKS VERIFY]**

Using this option, information for medications that have been marked as a drug/drug interaction or a dosing order check warning can be processed. This allows prescriptions with drug/drug interactions or a dosing order check warning to be processed, deleted, or bypassed. An assigned signature code, which will not appear on the screen, must be entered to complete any of these actions. The pharmacist will then be given the option to Verify, Delete, Quit the process, or leave the prescription in a Non-Verified status. The *Electronic Signature code Edit* option can be found under the *User's Toolbox* menu in Kernel V. 8.0.



When processing a drug/drug interaction or dosing order check warning, the profile will list the status of the interacting drug orders to be processed as non-verified (N).

This section describes the Drug/Drug Interaction enhancements made to the Outpatient Pharmacy application included in PSO\*7\*251 and Maximum Single Dose Check enhancement in PSO\*7\*372.

Legacy VistA Drug/Drug Interactions have been enhanced to utilize First DataBank's (FDB) Drug Information Framework (DIF) business rules, APIs and database to provide more clinically relevant Drug Interaction information. No changes have been made to the existing user actions for critical or significant Drug Interactions. The pharmacist will have to log an intervention for local, pending and remote critical interactions and have the option of logging an intervention for local and remote significant interactions. No action is required for Non-VA medications orders.

FDB custom Drug Interaction tables will be used to store custom changes to FDB standard reference Drug Interaction tables. FDB Drug Interactions that are designated as critical in VistA will have their severity level modified to '1'. All FDB Drug Interactions that are designated as significant in VistA will have their severity level modified to '2'. Any Drug Interaction in VistA that is not in FDB will be added to the FDB custom tables. For these interactions a custom monograph will be created with a clinical effects section.

The following Outpatient Pharmacy order entry processes have been enhanced:

- Entering a new order via backdoor pharmacy options
- Finishing a pending order
- Renewing an order
- Editing an order which results in a new order being created.
- Verifying an order
- Copying an order
- Reinstating a discontinued order

If a dispense drug is associated with an active Non-VA med order, that dispense drug will be used for the Drug Interaction order check. If no dispense drug is associated with an active Non-VA med order, the first active dispense drug marked for Non-VA med use associated with the Orderable Item will be used for the Drug Interaction order check.

If there are no active dispense drugs marked for Non-VA med use that are associated with the Orderable Item, then the first active dispense drug marked for Outpatient use associated with the Orderable item will be used.

If there are no active dispense drugs marked for Outpatient use associated with the Orderable Item, the first active dispense drugs associated with the Orderable Item will be used.

If there are no active dispense drugs associated with the Orderable Item for the Non-VA med order, no Drug Interaction order check will be performed.

Drug interaction order checks will be performed against pending orders.

The software will display to a non-pharmacist (does not hold PSORPH key) when entering a new order via pharmacy backdoor options or when finishing an order entered through CPRS the same Drug Interaction warning information as shown to a pharmacist.

See examples below:

#### **Example: Critical Drug Interaction with Local Rx**

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

Local Rx#: 2443  
Drug: AMIODARONE 200MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY  
Processing Status: Released locally on 11/08/06@08:55:32 (Window)  
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.

### **Example: Significant Drug Interaction with Local Rx**

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

Local RX#: 2443  
Drug: ASPIRIN 325MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY  
Processing Status: Released locally on 11/08/06@08:55:32 (Window)  
Last Filled On: 11/08/06

\*\*\* REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

### **Example: 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

### **Example: 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.

### **Example: Critical Drug Interaction with Non-VA Med Order**

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

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

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

### **Example: Significant Drug Interaction with Non-VA Med Order**

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

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

\*\*\* REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

### **Example: 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.

### **Example: 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

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:**

- 1.Quick AJ, Clesceri L. Influence of acetylsalicylic acid and salicylamide on the coagulation of blood. *J Pharmacol Exp Ther* 1960;128:95-8.
- 2.Watson RM, Pierson RN, Jr. Effect of anticoagulant therapy upon aspirin-induced gastrointestinal bleeding. *Circulation* 1961 Sep;24:613-6.
- 3.Barrow MV, Quick DT, Cunningham RW. Salicylate hypoprothrombinemia in rheumatoid arthritis with liver disease. Report of two cases. *Arch Intern Med* 1967 Nov;120(5):620-4.
- 4.Weiss HJ, Aledort LM, Kochwa S. The effect of salicylates on the hemostatic properties of platelets in man. *J Clin Invest* 1968 Sep; 47(9):2169-80.
- 5.Udall JA. Drug interference with warfarin therapy. *Clin Med* 1970 Aug; 77:20-5.
- 6.Fausa O. Salicylate-induced hypoprothrombinemia. A report of four cases. *Acta Med Scand* 1970 Nov;188(5):403-8.
- 7.Zucker MB, Peterson J. Effect of acetylsalicylic acid, other nonsteroidal anti-inflammatory agents, and dipyridamole on human blood platelets. *J Lab Clin Med* 1970 Jul;76(1):66-75.
- 8.O'Reilly RA, Sahud MA, Aggeler PM. Impact of aspirin and chlorthalidone on the pharmacodynamics of oral anticoagulant drugs in man. *Ann N Y Acad Sci* 1971 Jul 6;179:173-86.
- 9.Dale J, Myhre E, Loew D. Bleeding during acetylsalicylic acid and anticoagulant therapy in patients with reduced platelet reactivity after aortic valve replacement. *Am Heart J* 1980 Jun;99(6):746-52.
- 10.Donaldson DR, Sreeharan N, Crow MJ, Rajah SM. Assessment of the interaction of warfarin with aspirin and dipyridamole. *Thromb Haemost* 1982 Feb 26;47(1):77.
- 11.Chesebro JH, Fuster V, Elveback LR, McGoon DC, Pluth JR, Puga FJ, Wallace RB, Danielson GK, Orszulak TA, Piehler JM, Schaff HV. Trial of combined warfarin plus dipyridamole or aspirin therapy in prosthetic heart valve replacement: danger of aspirin compared with dipyridamole. *Am J Cardiol* 1983 May 15;51(9):1537-41.
- 12.Chow WH, Cheung KL, Ling HM, See T. Potentiation of warfarin anticoagulation by topical methylsalicylate ointment. *J R Soc Med* 1989 Aug;82(8):501-2.
- 13.Meade TW, Roderick PJ, Brennan PJ, Wilkes HC, Kelleher CC. Extra-cranial bleeding and other symptoms due to low dose aspirin and low intensity oral anticoagulation. *Thromb Haemost* 1992 Jul 6;68(1):1-6.

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Following the drug interaction monograph prompts, when a critical or significant drug interaction is generated with a local, pending, Non-VA med or remote medication order, users not holding a PSORPH key shall be presented with the next prompt in the current order entry dialog. They shall not be shown any intervention prompts or dialog.

Following the Drug Interaction monograph prompts, when a significant Drug Interaction is generated with a local, pending, or remote medication order, the user will be presented with 'Do you want to intervene?' prompt for the following processes:

- New order entry via backdoor pharmacy options
- Finishing a pending order
- Renewing an order
- Copying an order
- Editing an order which results in creation of a new order
- Verifying an order
- Reinstating an order

**Example: Critical Drug Interaction with Local Rx – No Monograph –Backdoor New Order Entry**

```
***CRITICAL*** Drug Interaction with Prospective Drug:  
INDINAVIR 400MG CAP and  
  
Local RX#: 2443  
Drug: AMIODARONE 200MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY  
Processing Status: Released locally on 11/08/06@08:55:32 (Window)  
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.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// n NO  
RX DELETED

Or

Do you want to Continue? Y// ES

Do you want to Process medication  
INDINAVIR 400MG CAP: P// ROCESS

Enter your Current Signature Code: SIGNATURE VERIFIED  
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention  
for INDINAVIR 400MG CAP

PROVIDER: OPPROVIDER, ONE  
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

There are 2 Available Dosage(s):

1. 400MG

2. 800MG

Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list: 1 400MG

You entered 400MG is this correct? Yes// YES

VERB: TAKE

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

Dosage Ordered: 400MG

NOUN: CAPSULE

ROUTE: ORAL// ORAL

### **Example: Significant Drug Interaction with Local Rx – With Monograph – Backdoor New Order Entry**

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

Local RX#: 2411

Drug: ASPIRIN 325MG EC TAB (ACTIVE)

SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING

Processing Status: Released locally on 11/08/06@08:55:32 (Window)

Last Filled On: 11/08/06

\*\*\* REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// Yes

Device: Home// <Home would print to screen, or a specific device could be specified>

Professional Monograph

Drug Interaction with WARFARIN and ASPIRIN

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:

- 1.Quick AJ, Clesceri L. Influence of acetylsalicylic acid and salicylamide on the coagulation of blood. J Pharmacol Exp Ther 1960;128:95-8.
- 2.Watson RM, Pierson RN, Jr. Effect of anticoagulant therapy upon aspirin-induced gastrointestinal bleeding. Circulation 1961 Sep;24:613-6.
- 3.Barrow MV, Quick DT, Cunningham RW. Salicylate hypoprothrombinemia in rheumatoid arthritis with liver disease. Report of two cases. Arch Intern Med 1967 Nov;120(5):620-4.
- 4.Weiss HJ, Aledort LM, Kochwa S. The effect of salicylates on the hemostatic properties of platelets in man. J Clin Invest 1968 Sep; 47(9):2169-80.
- 5.Udall JA. Drug interference with warfarin therapy. Clin Med 1970 Aug; 77:20-5.
- 6.Fausa O. Salicylate-induced hypoprothrombinemia. A report of four cases. Acta Med Scand 1970 Nov;188(5):403-8.
- 7.Zucker MB, Peterson J. Effect of acetylsalicylic acid, other nonsteroidal anti-inflammatory agents, and dipyridamole on human blood platelets. J Lab Clin Med 1970 Jul;76(1):66-75.
- 8.O'Reilly RA, Sahud MA, Aggeler PM. Impact of aspirin and chlorthalidone on the pharmacodynamics of oral anticoagulant drugs in man. Ann N Y Acad Sci 1971 Jul 6;179:173-86.
- 9.Dale J, Myhre E, Loew D. Bleeding during acetylsalicylic acid and anticoagulant therapy in patients with reduced platelet reactivity after aortic valve replacement. Am Heart J 1980 Jun;99(6):746-52.
- 10.Donaldson DR, Sreeharan N, Crow MJ, Rajah SM. Assessment of the interaction of warfarin with aspirin and dipyridamole. Thromb Haemost 1982 Feb 26;47(1):77.
- 11.Chesebro JH, Fuster V, Elveback LR, McGoon DC, Pluth JR, Puga FJ, Wallace RB, Danielson GK, Orszulak TA, Piehler JM, Schaff HV. Trial of combined warfarin plus dipyridamole or aspirin therapy in prosthetic heart valve replacement: danger of aspirin compared with dipyridamole. Am J Cardiol 1983 May 15;51(9):1537-41.
- 12.Chow WH, Cheung KL, Ling HM, See T. Potentiation of warfarin anticoagulation by topical methylsalicylate ointment. J R Soc Med 1989 Aug;82(8):501-2.
- 13.Meade TW, Roderick PJ, Brennan PJ, Wilkes HC, Kelleher CC. Extra-cranial bleeding and other symptoms due to low dose aspirin and low intensity oral anticoagulation. Thromb Haemost 1992 Jul 6;68(1):1-6.

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Do you want to Intervene? Y// NO

Remote data not available - Only local order checks processed.

Press Return to Continue...

VERB: TAKE

There are 2 Available Dosage(s):

1. 5MG
2. 10MG

.

.

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 WARFARIN 5MG 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

VERB: TAKE

There are 2 Available Dosage(s):

1. 5MG
2. 10MG

Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list: 1 5MG

You entered 5MG is this correct? Yes// YES

VERB: TAKE

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

Dosage Ordered: 5MG

NOUN: TABLET

ROUTE: PO// ORAL                   PO MOUTH

### **Example: Significant Drug Interaction with Remote Rx - With Monograph –Backdoor New Order Entry**

\*\*\* 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

Display Professional Interaction Monograph? No// Yes

Device: Home// <Home would print to screen, or a specific device could be specified>

Professional Monograph  
Drug Interaction with WARFARIN and ASPIRIN

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:**

- 1.Quick AJ, Clesceri L. Influence of acetylsalicylic acid and salicylamide on the coagulation of blood. *J Pharmacol Exp Ther* 1960;128:95-8.
- 2.Watson RM, Pierson RN, Jr. Effect of anticoagulant therapy upon aspirin-induced gastrointestinal bleeding. *Circulation* 1961 Sep;24:613-6.
- 3.Barrow MV, Quick DT, Cunningham RW. Salicylate hypoprothrombinemia in rheumatoid arthritis with liver disease. Report of two cases. *Arch Intern Med* 1967 Nov;120(5):620-4.
- 4.Weiss HJ, Aledort LM, Kochwa S. The effect of salicylates on the hemostatic properties of platelets in man. *J Clin Invest* 1968 Sep; 47(9):2169-80.
- 5.Udall JA. Drug interference with warfarin therapy. *Clin Med* 1970 Aug; 77:20-5.
- 6.Fausa O. Salicylate-induced hypoprothrombinemia. A report of four cases. *Acta Med Scand* 1970 Nov;188(5):403-8.
- 7.Zucker MB, Peterson J. Effect of acetylsalicylic acid, other nonsteroidal anti-inflammatory agents, and dipyridamole on human blood platelets. *J Lab Clin Med* 1970 Jul;76(1):66-75.
- 8.O'Reilly RA, Sahud MA, Aggeler PM. Impact of aspirin and chlorthalidone on the pharmacodynamics of oral anticoagulant drugs in man. *Ann N Y Acad Sci* 1971 Jul 6;179:173-86.
- 9.Dale J, Myhre E, Loew D. Bleeding during acetylsalicylic acid and anticoagulant therapy in patients with reduced platelet reactivity after aortic valve replacement. *Am Heart J* 1980 Jun;99(6):746-52.
- 10.Donaldson DR, Sreeharan N, Crow MJ, Rajah SM. Assessment of the interaction of warfarin with aspirin and dipyridamole. *Thromb Haemost* 1982 Feb 26;47(1):77.
- 11.Chesebro JH, Fuster V, Elveback LR, McGoon DC, Pluth JR, Puga FJ, Wallace RB, Danielson GK, Orszulak TA, Piehler JM, Schaff HV. Trial of combined warfarin plus dipyridamole or aspirin therapy in prosthetic heart valve replacement: danger of aspirin compared with dipyridamole. *Am J Cardiol* 1983 May 15;51(9):1537-41.
- 12.Chow WH, Cheung KL, Ling HM, See T. Potentiation of warfarin anticoagulation by topical methylsalicylate ointment. *J R Soc Med* 1989 Aug;82(8):501-2.

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Do you want to Intervene? Y// NO

Press Return to Continue...

VERB: TAKE

There are 2 Available Dosage(s):

1. 5MG
2. 10MG

.

OR

Do you want to Intervene? Y// ES

Press Return to Continue...

Now creating Pharmacy Intervention  
for WARFARIN 5MG 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

VERB: TAKE

There are 2 Available Dosage(s):

1. 5MG
2. 10MG

Select from list of Available Dosages (1-2), Enter Free Text Dose  
or Enter a Question Mark (?) to view list: 1 5MG

You entered 5MG is this correct? Yes// YES

VERB: TAKE

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

Dosage Ordered: 5MG

NOUN: TABLET

ROUTE: PO// ORAL            PO MOUTH

### **Example: Critical Drug Interaction with Remote Rx - No Monograph – Backdoor New Order Entry**

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

LOCATION: <VA or DOD facility>      Remote RX#: 2543789

Drug: AMIODARONE 200MG TAB (ACTIVE)

SIG: TAKE ONE TABLET BY MOUTH EVERY 8 HOURS

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.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// n    NO  
RX DELETED

OR

Do you want to Continue? Y// ES

Do you want to Process medication  
INDINAVIR 400MG CAP: P// ROCESS

Enter your Current Signature Code:      SIGNATURE VERIFIED

Press Return to Continue...

Now creating Pharmacy Intervention  
for INDINAVIR 400MG CAP

PROVIDER: OPPROVIDER, ONE  
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  
There are 2 Available Dosage(s):  
1. 400MG  
2. 800MG

Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list: 1 400MG

You entered 400MG is this correct? Yes// YES  
VERB: TAKE  
DISPENSE UNITS PER DOSE(CAPSULE): 1// 1  
Dosage Ordered: 400MG

NOUN: CAPSULE  
ROUTE: ORAL// ORAL

### **Example: Critical Drug Interaction with Non-VA Medication Order – Backdoor New Order Entry – No Monograph**

Select Action: Quit// NO    New Order  
  
Eligibility: SC LESS THAN 50%    SC%: 40  
RX PATIENT STATUS: SC LESS THAN 50%//  
DRUG: WARFARIN  
    Lookup: GENERIC NAME  
        1    WARFARIN 2.5MG TAB                 BL110  
        2    WARFARIN 5MG TAB                 BL110  
CHOOSE 1-2: 2    WARFARIN 5MG TAB                 BL110

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

---

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

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

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

Display Professional Interaction Monograph? No// No

VERB: TAKE  
There are 2 Available Dosage(s):  
1. 5MG  
2. 10MG

Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list: 1 5MG

You entered 5MG is this correct? Yes//

### **Example: Critical Drug Interaction with Pending Order – No Monograph –Backdoor New Order Entry**

\*\*\*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.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// n NO  
RX DELETED

Or

Do you want to Continue? Y// ES

Do you want to Process medication  
INDINAVIR 400MG CAP: P// ROCESS

Enter your Current Signature Code: SIGNATURE VERIFIED  
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention  
for INDINAVIR 400MG CAP

PROVIDER: OPPROVIDER, ONE  
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

There are 2 Available Dosage(s):  
1. 400MG  
2. 800MG

Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list: 1 400MG

You entered 400MG is this correct? Yes// YES

VERB: TAKE

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

Dosage Ordered: 400MG

NOUN: CAPSULE  
ROUTE: ORAL// ORAL

**Example: Significant Drug Interaction with Pending Rx – With Monograph – Backdoor New Order Entry**

\*\*\* Significant \*\*\* Drug Interaction with Prospective Drug  
WARFARIN 5MG TAB and

Pending Drug: ASPIRIN 325MG EC TAB  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING

\*\*\* REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// Yes

Device: Home// <Home would print to screen, or a specific device could be specified>

Professional Monograph  
Drug Interaction with WARFARIN and ASPIRIN

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:

- 1.Quick AJ, Clesceri L. Influence of acetylsalicylic acid and salicylamide on the coagulation of blood. J Pharmacol Exp Ther 1960;128:95-8.
- 2.Watson RM, Pierson RN, Jr. Effect of anticoagulant therapy upon aspirin-induced gastrointestinal bleeding. Circulation 1961 Sep;24:613-6.
- 3.Barrow MV, Quick DT, Cunningham RW. Salicylate hypoprothrombinemia in rheumatoid arthritis with liver disease. Report of two cases. Arch Intern Med 1967 Nov;120(5):620-4.

4.Weiss HJ, Aledort LM, Kochwa S. The effect of salicylates on the hemostatic properties of platelets in man. J Clin Invest 1968 Sep; 47(9):2169-80.  
5.Udall JA. Drug interference with warfarin therapy. Clin Med 1970 Aug; 77:20-5.  
6.Fausa O. Salicylate-induced hypoprothrombinemia. A report of four cases. Acta Med Scand 1970 Nov;188(5):403-8.  
7.Zucker MB, Peterson J. Effect of acetylsalicylic acid, other nonsteroidal anti-inflammatory agents, and dipyridamole on human blood platelets. J Lab Clin Med 1970 Jul;76(1):66-75.  
8.O'Reilly RA, Sahud MA, Aggeler PM. Impact of aspirin and chlorthalidone on the pharmacodynamics of oral anticoagulant drugs in man. Ann N Y Acad Sci 1971 Jul 6;179:173-86.  
9.Dale J, Myhre E, Loew D. Bleeding during acetylsalicylic acid and anticoagulant therapy in patients with reduced platelet reactivity after aortic valve replacement. Am Heart J 1980 Jun;99(6):746-52.  
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11.Chesbro JH, Fuster V, Elveback LR, McGoon DC, Pluth JR, Puga FJ, Wallace RB, Danielson GK, Orszulak TA, Piehler JM, Schaff HV. Trial of combined warfarin plus dipyridamole or aspirin therapy in prosthetic heart valve replacement: danger of aspirin compared with dipyridamole. Am J Cardiol 1983 May 15;51(9):1537-41.  
12.Chow WH, Cheung KL, Ling HM, See T. Potentiation of warfarin anticoagulation by topical methylsalicylate ointment. J R Soc Med 1989 Aug;82(8):501-2.  
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Do you want to Intervene? Y// NO  
Remote data not available - Only local order checks processed.

Press Return to Continue...

VERB: TAKE  
There are 2 Available Dosage(s):  
1. 5MG  
2. 10MG  
. . .  
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 WARFARIN 5MG 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  
VERB: TAKE  
There are 2 Available Dosage(s):  
1. 5MG

2. 10MG

Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list: 1 5MG

You entered 5MG is this correct? Yes// YES

VERB: TAKE

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

Dosage Ordered: 5MG

NOUN: TABLET

ROUTE: PO// ORAL PO MOUTH

### **Example: Significant Drug Interaction with Local Rx – Finishing Pending Order – No Monograph**

+ Enter ?? for more actions  
BY Bypass DC Discontinue  
ED Edit FN Finish  
Select Item(s): Next Screen// FN Finish

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

---

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

Local RX#: 2498  
Drug: ASPIRIN 325MG EC TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
Processing Status: Released locally on 11/08/06@08:55:32 (Window)  
Last Filled On: 11/08/06

\*\*\* REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS  
Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// NO

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//

.

.

.

OR

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention  
for WARFARIN 5MG TAB

PROVIDER: OERRPROVIDER, ONE  
RECOMMENDATION: NO CHANGE

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

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

Rx # 2500 10/19/07  
OPPATIENT, ONE #30  
TAKE ONE TABLET BY MOUTH AT BEDTIME

WARFARIN 5MG TAB  
OERRPROVIDER, ONE OPPHARMACIST, ONE  
# of Refills: 11

SC Percent: 40%  
Disabilities: NONE STATED

This Rx has been flagged by the provider as: NO COPAY

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//

### **Example: Critical Drug Interaction with Local Rx – Finishing Pending Order – No Monograph**

+ Enter ?? for more actions  
BY Bypass DC Discontinue  
ED Edit FN Finish  
Select Item(s): Next Screen// FN Finish

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

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

Local RX#: 2443  
Drug: AMIODARONE 200MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY  
Processing Status: Released locally on 11/08/06@08:55:32 (Window)  
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.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// n NO

Pending OP Orders (ROUTINE) Oct 19, 2007@08:55:12

Page: 1 of 4

OPPATIENT, ONE  
PID: 666-45-6754 Ht(cm): 187.96 (07/05/1994)  
DOB: JAN 1,1945 (62) Wt(kg): 77.27 (07/05/1994)  
SEX: MALE Non-VA Meds on File Last entry on 06/17/15  
CrCL: <Not Found> (CREAT: Not Found) BSA (m<sup>2</sup>): 2.07  
<A>

CPRS Order Checks:

SIGNIFICANT drug-drug interaction: ASPIRIN & IBUPROFEN (ASPIRIN TAB, EC  
325MG  
TAKE ONE TABLET BY MOUTH EVERY MORNING [ACTIVE])  
Overriding Provider: OERRPROVIDER, ONE  
Overriding Reason: TESTING

SIGNIFICANT drug-drug interaction: IBUPROFEN & WARFARIN (WARFARIN TAB 5MG  
TAKE ONE TABLET BY MOUTH AT BEDTIME [PENDING])  
Overriding Provider: OERRPROVIDER, ONE  
Overriding Reason:

SIGNIFICANT drug-drug interaction: IBUPROFEN & METHOTREXATE (METHOTREXATE  
TAB 2.5MG TAKE ONE TABLET BY MOUTH TWICE A DAY [PENDING])  
Overriding Provider: OERRPROVIDER, ONE

+ Enter ?? for more actions  
AC Accept ED Edit DC Discontinue  
Select Item(s): Next Screen//.  
. .  
OR

Do you want to Continue? Y// YES

Do you want to Process medication  
IBUPROFEN 600MG TAB : P// ROCESS

Enter your Current Signature Code: SIGNATURE VERIFIED

Now creating Pharmacy Intervention  
for IBUPROFEN 600MG TAB

PROVIDER: OERRPROVIDER, ONE  
RECOMMENDATION: NO CHANGE

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

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

Rx # 2501 10/19/07  
OPPATIENT, ONE #90  
TAKE ONE TABLET BY MOUTH THREE TIMES A DAY WITH FOOD OR MILK  
  
IBUPROFEN 600MG TAB  
OERRPROVIDER, ONE OPPHARMACIST, ONE  
# of Refills: 11

SC Percent: 40%  
Disabilities: NONE STATED

This Rx has been flagged by the provider as: NO COPAY

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//

Example: Significant Drug Interaction with Pending Order - Finishing Pending Order

- No Monograph

+ Enter ?? for more actions

BY Bypass

DC Discontinue

ED Edit

FN Finish

Select Item(s): Next Screen// FN Finish

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

---

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

Pending Drug: ASPIRIN 325MG EC TAB  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING

\*\*\* REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// NO

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//

.

.

.

OR

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention  
for WARFARIN 5MG TAB

PROVIDER: OERRPROVIDER, ONE

RECOMMENDATION: NO CHANGE

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

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

Rx # 2500 10/19/07  
OPPATIENT, ONE #30  
TAKE ONE TABLET BY MOUTH AT BEDTIME

WARFARIN 5MG TAB  
OERRPROVIDER, ONE OPPHARMACIST, ONE

# of Refills: 11

SC Percent: 40%  
Disabilities: NONE STATED

This Rx has been flagged by the provider as: NO COPAY

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//

### **Example: Critical Drug Interaction with Pending Order – Finishing Pending Order – No Monograph**

```
+           Enter ?? for more actions  
BY  Bypass          DC  Discontinue  
ED  Edit            FN  Finish  
Select Item(s): Next Screen// FN  Finish
```

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

---

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

Local RX#: 2443  
Drug: AMIODARONE 200MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY  
Processing Status: Released locally on 11/08/06@08:55:32 (Window)  
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.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// n NO

Pending OP Orders (ROUTINE) Oct 19, 2007@08:55:12 Page: 1 of 4  
OPPATIENT, ONE <A>  
PID: 666-45-6754 Ht(cm): 187.96 (07/05/1994)  
DOB: JAN 1, 1945 (62) Wt(kg): 77.27 (07/05/1994)  
SEX: MALE Non-VA Meds on File Last entry on 06/17/15  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 2.07

CPRS Order Checks:  
SIGNIFICANT drug-drug interaction: ASPIRIN & IBUPROFEN (ASPIRIN TAB, EC 325MG)  
TAKE ONE TABLET BY MOUTH EVERY MORNING [ACTIVE])  
Overriding Provider: OERRPROVIDER, ONE  
Overriding Reason: TESTING

SIGNIFICANT drug-drug interaction: IBUPROFEN & WARFARIN (WARFARIN TAB 5MG TAKE ONE TABLET BY MOUTH AT BEDTIME [PENDING])  
Overriding Provider: OERRPROVIDER, ONE  
Overriding Reason:

SIGNIFICANT drug-drug interaction: IBUPROFEN & METHOTREXATE (METHOTREXATE TAB 2.5MG TAKE ONE TABLET BY MOUTH TWICE A DAY [PENDING])  
Overriding Provider: OERRPROVIDER, ONE

+ Enter ?? for more actions  
AC Accept ED Edit DC Discontinue  
Select Item(s): Next Screen//

OR

Do you want to Continue? Y// YES  
Do you want to Process medication  
IBUPROFEN 600MG TAB : P// ROCESS

Enter your Current Signature Code: SIGNATURE VERIFIED

Now creating Pharmacy Intervention  
for IBUPROFEN 600MG TAB

PROVIDER: OERRPROVIDER, ONE  
RECOMMENDATION: NO CHANGE

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

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

Rx # 2501 10/19/07  
OPPATIENT, ONE #90  
TAKE ONE TABLET BY MOUTH THREE TIMES A DAY WITH FOOD OR MILK

IBUPROFEN 600MG TAB  
OERRPROVIDER, ONE OPPHARMACIST, ONE  
# of Refills: 11

SC Percent: 40%  
Disabilities: NONE STATED

This Rx has been flagged by the provider as: NO COPAY

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//

### **Example: Critical Interaction –Renewing an Order**

OP Medications (ACTIVE)	Feb 14, 2008@07:25:28	Page: 1 of 3
OPPATIENT, THREE		<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	Non-VA Meds on File	Last entry on 06/17/15
CrCL: <Not Found> (CREAT: Not Found)	BSA (m2): _____	
Rx #: 2530\$		
(1) *Orderable Item: WARFARIN TAB		

(2) Drug: WARFARIN 2.5MG TAB  
NDC: 51672-4029-01  
(3) \*Dosage: 2.5 (MG)  
Verb: TAKE  
Dispense Units: 1  
Noun: TABLET  
\*Route: ORAL  
\*Schedule: QHS  
(4) Pat Instructions:  
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
+ Enter ?? for more actions  
DC Discontinue PR Partial RL Release  
ED Edit RF Refill RN Renew  
Select Action: Next Screen// RN Renew  
FILL DATE: (2/14/2008 - 2/14/2009): TODAY// (FEB 14, 2008)  
MAIL/WINDOW: WINDOW// WINDOW  
METHOD OF PICK-UP:  
Nature of Order: WRITTEN// W  
WAS THE PATIENT COUNSELED: NO// NO

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

Now Renewing Rx # 2530 Drug: WARFARIN 2.5MG TAB

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

---

\*\*\*CRITICAL\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN 2.5MG TAB and

Local RX#: #2527  
Drug: CIMETIDINE 300MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
Processing Status: Released locally on 09/08/07@08:55:32 (Window)  
Last Filled On: 09/08/07

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

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// NO

RENEWED RX DELETED

OR

Do you want to Continue? Y// ES

Do you want to Process medication  
WARFARIN 2.5MG TAB: P// ROCESS

Enter your Current Signature Code: SIGNATURE VERIFIED

Now creating Pharmacy Intervention  
for WARFARIN 2.5MG TAB

PROVIDER: OPPROVIDER, 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

2530A WARFARIN 2.5MG TAB QTY: 30  
# OF REFILLS: 11 ISSUED: 02-14-08  
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
FILLED: 03-04-08  
ROUTING: WINDOW PHYS: OPPROVIDER, FOUR

Edit renewed Rx ? Y//

### **Example: Significant Interaction – Renewing an Order**

OP Medications (ACTIVE) Feb 14, 2008@07:15:31 Page: 1 of 3  
OPPATIENT, THREE <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> (CREAT: Not Found) BSA (m2): 1.95

Rx #: 2531\$  
(1) \*Orderable Item: INDOMETHACIN CAP, ORAL  
(2) Drug: INDOMETHACIN 25MG CAP  
NDC: 0378-0143-01  
(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// RN Renew  
FILL DATE: (2/14/2008 - 2/14/2009): TODAY// (FEB 14, 2008)  
MAIL/WINDOW: WINDOW// WINDOW  
METHOD OF PICK-UP:  
Nature of Order: WRITTEN// W  
WAS THE PATIENT COUNSELED: NO// NO

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

Now Renewing Rx # 2531 Drug: INDOMETHACIN 25MG CAP

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

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

Local RX#: 2530  
DRUG: WARFARIN 2.5MG TAB  
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// ES  
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention  
for INDOMETHACIN 25MG CAP

PROVIDER: OPPROVIDER,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

2531A INDOMETHACIN 25MG CAP QTY: 90  
# OF REFILLS: 11 ISSUED: 02-14-08  
SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY  
FILLED: 03-04-08  
ROUTING: WINDOW PHYS: OPPROVIDER,FOUR

Edit renewed Rx ? Y//

.

.

OR

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

Press Return to Continue...

2531A INDOMETHACIN 25MG CAP QTY: 90  
# OF REFILLS: 11 ISSUED: 02-14-08  
SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY  
FILLED: 03-04-08  
ROUTING: WINDOW PHYS: OPPROVIDER,FOUR

Edit renewed Rx ? Y//

### **Example: Copying An Order – Critical Interaction**

OP Medications (ACTIVE)	Feb 14, 2008@09:20:04	Page: 1 of 3
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> (CREAT: Not Found) BSA (m2): 1.95

Rx #: 2530\$  
 (1) \*Orderable Item: WARFARIN TAB  
 (2) Drug: WARFARIN 2.5MG TAB  
     NDC: 51672-4029-01  
 (3) \*Dosage: 2.5 (MG)  
     Verb: TAKE  
     Dispense Units: 1  
     Noun: TABLET  
     \*Route: ORAL  
     \*Schedule: QHS  
 (4) Pat Instructions:  
     SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
 + Enter ?? for more actions

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@09:20:04 Page: 1 of 2  
 OPPATIENT, TWO  
     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> (CREAT: Not Found) BSA (m2): 1.78

Orderable Item: WARFARIN TAB  
 (1) Drug: WARFARIN 2.5MG TAB  
 (2) Patient Status: OPT NSC  
 (3) Issue Date: FEB 14, 2008 (4) Fill Date: FEB 14, 2008  
 (5) Dosage Ordered: 2.5 (MG)  
     Verb: TAKE  
     Dispense Units: 1  
     Noun: TABLET  
     Route: ORAL  
     Schedule: QHS  
 (6) Pat Instruction:  
     SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
 (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 #: 2530  
 Drug: WARFARIN 2.5MG TAB  
 SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
 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 #2530 WARFARIN 2.5MG TAB? Y/N YES

Rx #2530 WARFARIN 2.5MG TAB will be discontinued after the acceptance of the new order.

Now doing remote order checks. Please wait...  
Now doing allergy checks. Please wait...  
Now processing Clinical Reminder Order Checks. Please wait ...  
Now Processing Enhanced Order Checks! Please Wait...

---

\*\*\*CRITICAL\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN 2.5MG TAB and

Local RX#: 2443  
Drug: AMIODARONE 200MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY  
Processing Status: Released locally on 02/18/06@08:55:32 (Window)  
Last Filled On: 02/18/08

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

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// ES

Do you want to Process medication  
WARFARIN 2.5MG TAB: P// ROCESS

Enter your Current Signature Code: SIGNATURE VERIFIED  
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention  
for WARFARIN 2.5MG 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//

.

OR

Do you want to Continue? Y// NO  
Duplicate Drug Rx #2530 WARFARIN 2.5MG TAB was NOT Discontinued.

### Example: Copying an Order – Significant Interaction

Medication Profile OPPATIENT, TWO PID: 666-33-3333	Feb 14, 2008@08:56:40	Page: 1 of 1 <A> Ht (cm): 167.64 (10/16/1993)
--	-----------------------	---

DOB: JUL 1,1934 (73)	Wt(kg): 68.18 (10/16/1993)
SEX: MALE	
CrCL: <Not Found> (CREAT: Not Found)	BSA (m2): 1.78
# RX # DRUG	ISSUE QTY ST LAST DATE REF FILL REM DAY SUP
<b>-----ACTIVE-----</b>	
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)

SEX: MALE

CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.78

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 doing allergy checks. Please wait...

Now processing Clinical Reminder 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//

### **Example: 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)
SEX: MALE	
CrCL: <Not Found> (CREAT: Not Found)	BSA (m <sup>2</sup> ): 1.95

Rx #: 2528\$  
(1) \*Orderable Item: AMINOPHYLLINE TAB  
(2) Drug: AMINOPHYLLINE 200MG TAB  
NDC: 00143-1025  
(3) \*Dosage: 200 (MG)  
Verb: TAKE  
Dispense Units: 1  
Noun: TABLET  
\*Route: ORAL  
\*Scheduled: Q6H  
(4) Pat Instructions:  
SIG: TAKE ONE TABLET BY MOUTH EVERY 6 HOURS  
+ 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	ISSUE LAST REF DAY						
		QTY	ST	DATE	FILL	REM	SUP	
<hr/> -----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> (CREAT: Not Found) BSA (m2): 1.78

#	RX #	DRUG	ISSUE LAST REF DAY						
			QTY	ST	DATE	FILL	REM	SUP	
<hr/> -----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.

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

Press Return to Continue...

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

### Example: 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)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95  
  
Rx #: 2531\$  
(1) \*Orderable Item: INDOMETHACIN CAP,ORAL  
(2) Drug: INDOMETHACIN 25MG CAP  
NDC: 0378-0143-01  
(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	ISSUE QTY	ST	LAST DATE	REF FILL	DAY 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
-----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:

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

-----  
\*\*\*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
```

### **Example: Reinstating A Discontinued Order – Critical Interaction**

```
Rx #: 2473
(1) *Orderable Item: AMINOPHYLLINE TAB
(2) Drug: AMINOPHYLLINE 200MG TAB
      NDC: 00143-1025
(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 doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

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

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  
C:SI (Not Found) (CRENT - Not Found) RGA (m2)

#	RX #	DRUG	ISSUE QTY	ST	LAST DATE	REF FILL	DAY 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

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

•

•

Or

Do you want to Continue? Y// E

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, 2007 Printed: JUN 25, 2007 Released:

\*\* Do you want to print the label now? N// O

ED (Edit) RF (Refill) RN Renew

Rx #: 2465  
(1) \*Orderable Item: ASPTRTN TAB.EG

(2) Drug: ASPIRIN 325MG EC TAB <DIN>  
NDC: 33261-0153-14  
(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: REINSTATING  
Nature of Order: SERVICE CORRECTION// S

=====

2465 ASPIRIN 325MG EC TAB

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

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 #2524 REINSTATED!

Prescription #2524 Filled: FEB 12, 2007Printed: Released:  
Either print the label using the reprint option  
or check later to see if the label has been printed.

.

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, 2007 Printed: JUN 25, 2007 Released:  
\*\* Do you want to print the label now? N// O

### **Example: Creating a New Order – Editing the Orderable Item – Duplicate Drug**

Medication Profile		Feb 14, 2008@12:26:38	Page:	1 of	2
			<A>		
OPPATIENT, ONE			Ht (cm):	(_____)	
PID: 000-00-0000			Wt (kg):	(_____)	
DOB: JAN 1,1922 (86)					
SEX: MALE			BSA (m2):	(_____)	
CrCL: <Not Found> (CREAT: Not Found)					
# RX #	DRUG		QTY ST	ISSUE DATE	LAST REFILL
				DAY	
<hr/> -----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
<hr/> -----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					
PU Patient Record Update		NO New Order			
PI Patient Information		SO Select Order	Select Action:	Next	
Screen// 2					

OP Medications (ACTIVE)		Feb 14, 2008@12:26:38	Page:	1 of	2
			<A>		
OPPATIENT, ONE			Ht (cm):	(_____)	
PID: 000-00-0000			Wt (kg):	(_____)	
DOB: JAN 1,1922 (86)					
SEX: MALE			BSA (m2):	(_____)	
CrCL: <Not Found> (CREAT: Not Found)					
Rx #: 2537					
(1) *Orderable Item: ASPIRIN TAB,EC					
(2) Drug: ASPIRIN 325MG EC TAB <DIN>					
NDC: 00056-0176-75					
(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: 02/14/08 (7) Fill Date: 02/14/08

Last Fill Date: 02/14/08 (Window)

+ Enter ?? for more actions

DC Discontinue PR Partial RL Release

ED Edit RF Refill RN Renew

Select Action: Next Screen// 1

Current Orderable Item: ASPIRIN TAB,EC

Select PHARMACY ORDERABLE ITEM NAME: ASPIRIN// AMIODARONE AMIODARONE TAB

New Orderable Item selected. This edit will create a new prescription!

Press Return to Continue...

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

---

Duplicate Drug in Local Rx:

Rx #: 2533

Drug: AMIODARONE 200MG TAB

SIG: TAKE TWO TABLETS BY MOUTH THREE TIMES A DAY

QTY: 180 Refills remaining: 11

Provider: OPPROVIDER,TEN Issued: 02/14/08

Status: Discontinued Last filled on: 02/14/08

Processing Status: Released locally on 02/14/08@08:55:32 (Window)

Days Supply: 30

---

Discontinue RX #2533 AMIODARONE 200MG TAB? Y/N NO -Prescription was not discontinued...

---

\*\*\*CRITICAL\*\*\* Drug Interaction with Prospective Drug:  
AMIODARONE 200MG TAB and

Local RX#: 2526

Drug: INDINAVIR 400MG CAP (ACTIVE)

SIG: TAKE ONE CAPSULES EVERY 8 HOURS

Processing Status: Released locally on 02/12/08@08:55:32 (Window)

Last Filled On: 02/12/08

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.

Display Professional Interaction Monograph? N//No

Do you want to Continue? Y// NO

OP Medications (ACTIVE) Feb 14, 2008@12:27:09 Page: 1 of  
OPPATIENT, ONE <A>  
PID: 000-00-0000 Ht (cm): \_\_\_\_\_ (\_\_\_\_\_)  
DOB: JAN 1, 1922 (86) Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): \_\_\_\_\_  
Rx #: 2537  
(1) \*Orderable Item: ASPIRIN TAB,EC  
(2) Drug: ASPIRIN 325MG EC TAB <DIN>  
NDC: 00056-0176-75  
(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: 02/14/08 (7) Fill Date: 02/14/08  
Last Fill Date: 02/14/08 (Window)  
+ Enter ?? for more actions  
DC Discontinue PR Partial RL Release  
ED Edit RF Refill RN Renew  
Select Action: Next Screen//  
. .  
OR  
Do you want to Continue? Y// ES  
  
Do you want to Process medication  
AMIODARONE 200MG TAB: P// ROCESS  
  
Enter your Current Signature Code: SIGNATURE VERIFIED  
  
Now creating Pharmacy Intervention  
for AMIODARONE 200MG TAB  
  
PROVIDER: PSOPROVIDER, THREE TPP  
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

## **Example: Editing An Order – Creating a New Order – Significant Interaction**

OP Medications (ACTIVE) Feb 14, 2008@12:27:09 Page: 1 of 2  
OPPATIENT, TWO <A>  
PID: 000-00-0000 Ht (cm): \_\_\_\_\_ (\_\_\_\_\_)  
DOB: JAN 1, 1922 (86) Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): \_\_\_\_\_  
  
Rx #: 2537  
(1) \*Orderable Item: ASPIRIN TAB-EC

(2) Drug: ASPIRIN 325MG EC TAB <DIN>  
NDC: 33261-0153-14  
(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: 02/14/08 (7) Fill Date: 02/14/08  
Last Fill Date: 02/14/08 (Window)  
+ Enter ?? for more actions

DC Discontinue PR Partial RL Release  
ED Edit RF Refill RN Renew  
Select Action: Next Screen// EDIT Edit  
Select fields by number: (1-19): 1

Current Orderable Item: ASPIRIN TAB,EC  
Select PHARMACY ORDERABLE ITEM NAME: ASPIRIN// AMIODARONE AMIODARONE TAB

New Orderable Item selected. This edit will create a new prescription!

Enter RETURN to continue or '^' to exit:

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

---

Duplicate Drug in Local Rx:

Rx #: 2533  
Drug: AMIODARONE 200MG TAB  
SIG: TAKE TWO TABLETS BY MOUTH THREE TIMES A DAY  
QTY: 180 Refills remaining: 11  
Provider: OPPROVIDER,TEN Issued: 02/14/08  
Status: Discontinued Last filled on: 02/14/08  
Processing Status: Released locally on 02/14/08@08:55:32 (Window)  
Days Supply: 30

---

Press Return to Continue:

---

\*\*\*SIGNIFICANT\*\*\* Drug Interaction with Prospective Drug:  
AMIODARONE 200MG TAB and

Local RX#: 2469  
Drug: CIPROFLOXACIN 750MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET EVERY 12 HOURS  
Processing Status: Released locally on 02/12/08@08:55:32 (Window)  
Last Filled On: 02/12/08

\*\*\* REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? N//No

```
Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for AMIODARONE 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
.

.

OR
Do you want to Intervene? Y// NO

You have changed the Orderable Item from
ASPIRIN to AMIODARONE.
There are 2 Available Dosage(s):
1. 200MG
2. 400MG

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 200MG

You entered 200MG is this correct? Yes// YES
VERB: TAKE// TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
```

### **Example: Backdoor New Order Entry by Non-Pharmacist – Critical Interaction with Non-VA Med plus Significant Interaction with Local Rx**

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

Eligibility: SERVICE CONNECTED 50% to 100%      SC%: 80
RX PATIENT STATUS: SC///
DRUG: WARFAR
Lookup: GENERIC NAME
1  WARFARIN 2.5MG TAB          BL110
2  WARFARIN 5MG TAB           BL110
CHOOSE 1-2: 2  WARFARIN 5MG TAB       BL110

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...
-----
***Critical*** Drug Interaction with Prospective Drug:
WARFARIN 5MG TAB and
```

Non-VA Med: CIMETIDINE 300MG TAB  
SIG: 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// Yes

Device: Home// <Home would print to screen, or a specific device could be specified>

Professional Monograph  
Drug Interaction with WARFARIN and IBUPROFEN

MONOGRAPH TITLE: Anticoagulants/NSAIDs

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

MECHANISM OF ACTION: The exact mechanism is unknown. Some NSAIDs may displace anticoagulants from plasma protein binding sites. NSAIDs also have the potential to produce gastrointestinal ulceration and bleeding. Some NSAIDs may impair platelet function and prolong bleeding times.

CLINICAL EFFECTS: In some patients, NSAIDs have been associated with an increase in the hypoprothrombinemic effect to anticoagulants.

PREDISPOSING FACTORS: None determined.

PATIENT MANAGEMENT: If concurrent therapy with anticoagulants and NSAIDs is warranted, patients should be monitored for an increased hypoprothrombinemic response when NSAIDs are added to the patient's drug regimen. In addition to routine monitoring of INR values, the patient should be observed for signs of increased effect, including bruising or bleeding. The time of highest risk for a coumarin-type drug interaction is when the precipitant drug is initiated or discontinued. Consult with the prescriber before initiating, altering the dose of, or discontinuing either drug.

DISCUSSION: The effects of NSAIDs on the hypoprothrombinemic response to anticoagulants appears to vary between patients as well as with different NSAIDs. Documentation is frequently contradictory - while studies have shown several NSAIDs to have no effect on the pharmacokinetics of warfarin, case reports have documented increased effects with and without bleeding when these same NSAIDs were administered concurrently with warfarin. While celecoxib has been shown not to affect platelet aggregation or bleeding times and had no effects on the anticoagulant effect of warfarin in healthy subjects, increased prothrombin times and bleeding episodes, some of which were fatal, have been reported, predominantly in the elderly, in patients receiving concurrent therapy with celecoxib and warfarin. Rofecoxib has been shown to increase prothrombin times in subjects who

received concurrent warfarin therapy. If concurrent therapy with anticoagulants and NSAIDs is warranted, it would be prudent to monitor patients closely for increased anticoagulant effects.

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Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention

for WARFARIN 5MG 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

.

OR

Do you want to Intervene? Y// NO

VERB: TAKE

There are 2 Available Dosage(s):

1. 5MG
2. 10MG

Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list:

### **Example: Finishing a Pending Order by Non-Pharmacist**

---

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

Non-VA Med: CIMETIDINE 300MG TAB  
SIG: 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// ES

Now creating Pharmacy Intervention  
for WARFARIN 5MG 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

•

OR  
Do you want to Intervene? Y// N

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//

## Example: Pharmacist Verifying Order with Two 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): \_\_\_\_\_ (\_\_\_\_\_)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): \_\_\_\_\_  
  
Rx #: 2560  
(1) \*Orderable Item: WARFARIN TAB  
(2) Drug: WARFARIN 5MG TAB  
    NDC: 00056-0176-75  
(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  
  
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:

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

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 NIFEDIPIINE 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:

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

-----  
\*\*\*Critical\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN 5MG TAB and

Non-VA Med: CIMETIDINE 300MG TAB  
SIG: 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				

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> (CREAT: Not Found) BSA (m2): \_\_\_\_\_

#	RX #	DRUG	ISSUE QTY	LAST ST	REF DATE	DAY 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//

For orders with multiple drug interactions, the user is presented with a drug interaction monograph display prompt and intervention prompt after each drug interaction warning is displayed.

### Example: Multiple Drug Interactions

Another New Order for OPPATIENT,ONE? YES//  
 Eligibility: SERVICE CONNECTED 50% to 100% SC%: 60  
 PRISONER OF WAR  
 RX PATIENT STATUS: SC//  
 DRUG: WARFAR

Lookup: GENERIC NAME  
1 WARFARIN (COUMADIN) NA 2.5MG TAB BL110  
2 WARFARIN 5MG TAB BL110  
CHOOSE 1-2: 1 WARFARIN (COUMADIN) NA 2.5MG TAB BL110

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

---

\*\*\*Critical\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN 2.5MG TAB and

Local RX#: 2376  
Drug: CIMETIDINE 300MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
Processing Status: Released locally on 11/08/07@08:55:32 (Window)  
Last Filled On: 11/08/07

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 2.5MG TAB and

Local RX#: 2378  
Drug: ASPIRIN 325MG EC TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
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 Continue? Y// YES

Do you want to Process medication  
CIMETIDINE 300MG TAB P// ROCESS

Enter your Current Signature Code: SIGNATURE VERIFIED  
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention  
for CIMETIDINE 300MG TAB

PROVIDER: OPPROVIDER, ONE  
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

.

.

.

Now Processing Enhanced Order Checks! Please wait...

---

\*\*\*Critical\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN (C0UMADIN) NA 5MG TAB and

Local Rx#: 509974

Drug: AMIODARONE 200MG TAB (SUSPENDED)

SIG: TAKE ONE TABLET BY MOUTH THREE TIMES A DAY

Processing Status: Not released locally (Window)

Last Filled On: 11/08/06

Pending Drug: AMIODARONE HCL (PACERONE) 200MG TAB

SIG: TAKE ONE TABLET BY MOUTH EVERY 8 HOURS

The concurrent administration of amiodarone and an anticoagulant may result in an increase in the clinical effects of the anticoagulant and an increased risk of bleeding.(1-22) It may take several weeks of concurrent therapy before the full effects of this interaction are noted. The effect of amiodarone on anticoagulant levels may continue for several months after amiodarone is discontinued.

---

Display Interaction Monograph? No// NO

---

\*\*\*Critical\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN (C0UMADIN) NA 5MG TAB

Local Rx#: 502214

Drug: KETOCONAZOLE 200MG TAB (ACTIVE)

SIG: TAKE ONE TABLET BY MOUTH THREE TIMES A DAY

Processing Status: Not released locally (Window)

Last Filled On: 11/08/06

The anticoagulant effect of warfarin may be increased.

---

Display Interaction Monograph? No// NO

---

\*\*\*Critical\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN (C0UMADIN) NA 5MG TAB and

Non-VA Med: CIMETIDINE 300MG TAB

SIG: 300MG Schedule: TWICE A DAY

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

---

Display Interaction Monograph? No// NO

---

\*\*\*Significant\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN (C0UMADIN) NA 5MG TAB and

Location: <Remote facility name> Remote Rx#: 502211  
Drug: ASPIRIN 325MG EC TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
Last Filled On: 11/08/06

Non-VA Med: ASPIRIN 325MG EC TAB  
SIG: 325MG Schedule: EVERY MORNING

\*\*\* REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL

Display Interaction Monograph? No// NO

Do you want to Continue? Y// ES

Do you want to Process medication  
WARFARIN (COUMADIN) NA 5MG TAB: P// ROCESS

Enter your Current Signature Code: SIGNATURE VERIFIED

Now creating Pharmacy Intervention  
for WARFARIN (COUMADIN) NA 5MG TAB

PROVIDER:

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

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

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

Outpatient Pharmacy displays the same Allergy/ADR warning only once if both a drug class(es) and drug ingredient(s) are defined for the Allergy/ADR. The drug class and drug ingredient will be listed on the single display. The user is prompted to intervene once. If no intervention is chosen, the standard order entry dialog will resume. 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, the user will be forced to log an intervention for every medication order entered until the allergy assessment is resolved.

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 remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order 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 (SITE REPORTING ALLERGY - DATE REPORTED)

Historical/Observed: OBSERVED

Severity: MODERATE

Ingredients: DILTIAZEM

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

There are 2 Available Dosage(s):

1. 240MG
2. 480MG

Select from list of Available Dosages (1-2), 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

There are 2 Available Dosage(s) :

1. 240MG
2. 480MG

Select from list of Available Dosages (1-2), 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 remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

---

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

    Prospective Drug: SEPTRA DS TAB  
    Causative Agent: SULFADIAZINE/SULFAMERAZINE/SULFAMETHAZINE (SITE REPORTING  
ALLERGY - DATE REPORTED)

    Historical/Observed: HISTORICAL

        Severity: Not Entered

        Signs/Symptoms: ITCHING, WATERING EYES, ANOREXIA, NAUSEA, VOMITING,  
                          ANXIETY, DROWSINESS,

        Drug Class: AM650 SULFONAMIDE/RELATED ANTIMICROBIALS

        Provider Override Reason: N/A - Order Check Not Evaluated by Provider

Do you want to Intervene? YES//

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

There are 2 Available Dosage(s) :

1. 1 TABLET

2. 2 TABLETS

Select from list of Available Dosages (1-2), 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

Now searching ADMINISTRATION SCHEDULE (#51.1) file...

BID BID TWICE A DAY

...OK? Yes// (Yes)

(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)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m<sup>2</sup>): 1.95  
+  
\*(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, 200  
+ Enter ?? for more actions  
BY Bypass DC Discontinue  
ED Edit FN Finish  
Select Item(s): Next Screen// FN Finish

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order 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 (SITE REPORTING  
ALLERGY - DATE REPORTED)  
Historical/Observed: HISTORICAL  
Severity: Not Entered  
Ingredients: SULFAMETHOXAZOLE, TRIMETHOPRIM

Signs/Symptoms: ITCHING, WATERING EYES, ANOREXIA,  
NAUSEA, VOMITING, ANXIETY, DROWSINESS,  
Drug Class: AM650 SULFONAMIDE/RELATED ANTIMICROBIALS

Provider Override Reason: Patient says has taken before

Do you want to Intervene? YES//

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

## Therapeutic Duplication

This section describes enhancements to the existing VistA Duplicate Class order checks.

The current VistA Duplicate Class checks have been enhanced using the FDB business rules and database, as well as the FDB Enhanced Therapeutic Classification (ETC) system. The Duplicate Class check will now be referred to as the Duplicate Therapy order check. This order check will continue to be performed against active, pending, non-verified orders on hold (initiated through pharmacy or CPRS), expired and discontinued orders. The timeframe for inclusion of expired orders is determined by the display rules on the medication profile. The timeframe for inclusion of locally discontinued orders is determined by the following formula: Discontinued Date (Cancel Date) + Days Supply + 7. This check will be performed on active Non-VA Medication orders.

No changes have been made to the existing user actions for Duplicate Therapy order checks. Users will continue to have the ability to discontinue the order. The existing order will only be discontinued upon acceptance of the order being processed. No discontinue actions can be performed on remote outpatient orders, Non-VA medications, discontinued, and expired orders or orders placed on provider hold through CPRS. If the CANCEL DRUG IN SAME CLASS outpatient site parameter is set to 'No', no discontinue action is allowed on any duplicate class order.

Any remote Outpatient order (from another VAMC or Department of Defense (DoD) facility) using data from Health Data Repository Historical (HDR-Hx) or Health Data Repository-Interim Messaging Solution (HDR-IMS) that has been expired for 120 days or less will be included in the list of medications to be checked.

FDB custom tables will be used to store custom changes to the duplication allowance for a FDB therapeutic classification. Each duplicate therapy class is assigned a duplication allowance. The duplication allowance for a therapeutic allowance determines whether or not the therapeutic duplication warning will be displayed to the user.

The Vendor's (currently FDB) Enhanced Therapeutic Classification (ETC) System is now used in place of the VA Drug Class for the Duplicate Therapy (formerly duplicate class) order checks.

Duplicate Therapy order checks will no longer be processed in pairs. Each duplicate therapy warning includes as many outpatient medication orders as it applies to.

A duplicate therapy warning is only displayed if the number of duplicate therapy matches exceeds the duplication allowance specified for the FDB duplicate therapy class.

The following processes use the enhanced functionality:

- Entering a new outpatient medication order through pharmacy options
- Finishing a pending outpatient medication order
- Renewing an outpatient medication order
- When a new outpatient medication order is created via an edit
- Verification of an outpatient medication order entered or finished by a non-pharmacist
- Copy of an outpatient medication order
- Reinstatement of an outpatient medication order

See illustrations below:

### **Example: Local RX**

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

Local Rx#: 2561  
Drug: CIMETIDINE 300MG TAB (DISCONTINUED)  
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
QTY: 30 Days Supply: 30  
Processing Status: Released locally on 3/4/08@08:55:32 (Window)  
Last Filled On: 11/08/06

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

### **Example: Remote Rx**

=====  
\*\*\* THERAPEUTIC DUPLICATION(S) \*\*\* SUCRALFATE 1GM TAB with  
  
LOCATION: <VA OR DOD FACILITY> Remote Rx#: 65343  
Drug: RANITIDINE HCL 150MG TAB (EXPIRED)  
SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY  
QTY: 180 Days Supply: 90  
Last Filled On: 11/08/06

Class(es) Involved in Therapeutic Duplication(s): Peptic Ulcer Agents

### **Example: Pending Order**

=====  
\*\*\* THERAPEUTIC DUPLICATION(S) \*\*\* NIZATIDINE 150MG CAP with  
  
Pending Drug: FAMOTIDINE 20MG TAB  
SIG: TAKE ONE TABLET BY TWICE DAILY

Class(es) Involved in Therapeutic Duplication(s): Peptic Ulcer Agents

### **Example: Non-VA Med Order**

=====  
\*\*\* THERAPEUTIC DUPLICATION(S) \*\*\* FAMOTIDINE 20MG TAB with  
  
Non-VA Med: CIMETIDINE 300MG TAB  
SIG: 300MG Schedule: TWICE A DAY

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

If the CANCEL DRUG IN SAME CLASS outpatient site parameter is set to 'No', the following information is shown for the duplicate therapy warning:

=====  
\*\*\* 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 for 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)
=====
```

If there is more than one remote, local, pending or Non-VA med order involved in the therapeutic duplication, the order details will be displayed one after the other.

If the same drugs are involved in multiple therapeutic duplications, a single therapeutic duplication warning will be displayed and multiple therapeutic classes will be listed.

If the CANCEL DRUG IN SAME CLASS outpatient site parameter is set to 'No', no discontinue action prompt will be presented.

After all the therapeutic duplication warnings are displayed and if the CANCEL DRUG IN SAME CLASS outpatient site parameter is set to 'Yes', the user will be asked if they want to discontinue any of the orders.

See Examples:

```
Discontinue RX #2580A SUCRALFATE 1GM TAB? Y/N
Discontinue Pending Order SUCRALFATE 1GM TAB? Y/N
```

The system will only allow a discontinuation action on active, pending, non-verified and orders placed on hold by pharmacy.

The system will display the following information for the numbered list of orders:

- Prescription number (if applicable)
- Dispense Drug (Orderable item if dispense drug not assigned to order)
- Indicate if the order is pending (with text 'Pending Order')

See example below:

```
1. Pending order AMLODIPINE 5MG/ATORVASTATIN 10MG  
2. RX #2426 LOVASTATIN 40MG TAB
```

The discontinuation of selected orders by the system will occur at the time the user accepts the order that is being processed.

```
Discontinue order(s)? Y/N Y es  
  
1. RX #2577 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB  
2. RX #2581 CHOLESTYRAMINE 9GM PACKETS  
  
Select (1-2): 1 Duplicate Therapy RX #2577 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB  
will be discontinued after the acceptance of the new order.  
Discontinue order(s)? Y/N Y es  
  
1. RX #2577 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB  
2. Pending Order CHOLESTYRAMINE 9GM PACKETS  
  
Select (1-2): 2 Duplicate Therapy Pending Order CHOLESTYRAMINE 9GM PACKETS will  
be discontinued after the acceptance of the new order.
```

If the user fails to accept the order that is being processed or exits before accepting the order, the system shall not discontinue the order(s) selected.

The message displayed to the user shall contain:

- Indicate that discontinuance was for Duplicate Therapy
- The prescription number or text ‘Pending order’ if order status is pending.
- Dispense Drug (Orderable item if dispense drug not assigned to order)
- Ending with text ‘NOT Discontinued.’

See examples below:

```
Duplicate Therapy RX #2710 CIMETIDINE 300MG TAB NOT Discontinued.
```

```
Duplicate Therapy Pending Order RANITIDINE 150MG TAB NOT Discontinued.
```

Once the order being processed is accepted and there were orders selected for discontinuation, the system shall inform the user when the discontinuation occurs.

The message displayed to the user shall contain:

- Indicate that discontinuance was for Duplicate Therapy
- The prescription number or text ‘Pending order’ if order status is pending.
- Dispense Drug (Orderable item if dispense drug not assigned to order)
- Ending with text ‘has been discontinued.’

See examples below:

Duplicate Therapy RX #2549 CIMETIDINE 300MG TAB has been discontinued...

Duplicate Therapy Pending Order RANITIDINE 150MG TAB has been discontinued...

See Therapeutic Duplication examples below:

**Example: Finishing pending order – Therapeutic Duplication with Non-VA med and discontinued order -No discontinue action allowed.**

```
* (1) Orderable Item: FAMOTIDINE TAB *** (N/F) *** <DIN>
(2) CMOP Drug: FAMOTIDINE 20MG TAB *** (N/F) *** <DIN>
      NDC: 000172-5728-70
(3) *Dosage: 20 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: TABLET
      *Route: ORAL
+      Enter ?? for more actions
BY Bypass                      DC Discontinue
ED Edit                         FN Finish
Select Item(s): Next Screen// FN Finish

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

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

      Local Rx#: 2561
      Drug: CIMETIDINE 300MG TAB (DISCONTINUED)
      SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
      QTY: 30          Days Supply: 30
      Processing Status: Released locally on 3/4/08@08:55:32 (Window)
      Last Filled On: 11/08/06
-----
      Non-VA Med: CIMETIDINE 300MG TAB
      SIG: 300MG     Schedule: TWICE A DAY
```

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

=====

Press Return to Continue:

Rx # 2570                    03/07/08  
PSOPATIENT, ONE                #180  
TAKE ONE TABLET BY MOUTH TWICE A DAY

FAMOTIDINE 20MG TAB  
PSOPROVIDER, ONE                PSOPHARMACIST, ONE  
# of Refills: 3

SC Percent: 80%  
Disabilities: NONE STATED

Was treatment for a Service Connected condition? YES//  
Are you sure you want to Accept this Order? NO//

**Example: New Order Entry Backdoor – Therapeutic Duplication with pending and active order. Discontinue action shown.**

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

Eligibility: SERVICE CONNECTED 50% to 100%            SC%: 80  
RX PATIENT STATUS: SC//  
DRUG: Nizatidine  
    Lookup: DRUG GENERIC NAME  
NIZATIDINE 150MG CAP                        GA302  
    ...OK? Yes//    (Yes)

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

=====

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

Local Rx#: 2549  
Drug: CIMETIDINE 300MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
QTY: 30    Days Supply: 30  
Processing Status: Released locally on 3/4/09@08:55:32 (Window)  
Last Filled On: 11/08/06

Pending Drug: FAMOTIDINE 20MG TAB  
SIG: TAKE ONE TABLET BY TWICE DAILY

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

=====

Discontinue order(s)? Y/N No

Press Return to Continue...

There are 2 Available Dosage(s):

1. 150MG
2. 300MG

Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list:

.

OR

Discontinue order(s)? Y/N Y es

1. Pending Order FAMOTIDINE 20MG TAB
2. RX #2549 CIMETIDINE 300MG TAB

Select (1-2): 2 RX #2549 CIMETIDINE 300MG TAB will be discontinued after the acceptance of the new order.

There are 2 Available Dosage(s):

1. 150MG
2. 300MG

Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list: 1 150MG

You entered 150MG is this correct? Yes// YES

VERB: TAKE

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

Dosage Ordered: 150MG

NOUN: TABLET

ROUTE: PO// ORAL PO MOUTH

Schedule:

This is a required response. Enter '^' to exit

Schedule: BID

Now searching ADMINISTRATION SCHEDULE (#51.1) file...

BID BID TWICE A DAY

...OK? Yes// (Yes)

(TWICE A DAY)

LIMITED DURATION (IN DAYS, HOURS OR MINUTES):

CONJUNCTION:

PATIENT INSTRUCTIONS:

(TAKE ONE TABLET BY MOUTH TWO TIMES A DAY)

DAYS SUPPLY: (1-90): 60//

QTY ( ) : 360// 180

COPIES: 1// 1

# OF REFILLS: (0-3): 3//

PROVIDER: PSOPROVIDER,ONE

CLINIC: BARB'S CLINIC 2

MAIL/WINDOW: WINDOW// WINDOW

METHOD OF PICK-UP:

REMARKS:

ISSUE DATE: TODAY// (MAR 12, 2008)

FILL DATE: (3/12/2008 - 3/13/2009): TODAY// (MAR 12, 2008)

Nature of Order: WRITTEN// W

WAS THE PATIENT COUNSELED: NO// NO

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

Rx # 2580 03/12/08

PSOPATIENT,ONE #180

TAKE ONE TABLET BY MOUTH TWO TIMES A DAY

NIZATIDINE 150MG CAP  
PSOPROVIDER,ONE                    PSOPHARMACIST,ONE  
# of Refills: 3

SC Percent: 80%  
Disabilities: NONE STATED

Was treatment for a Service Connected condition?  
This is a required response. Enter '^' to exit  
Was treatment for a Service Connected condition? NO  
Is this correct? YES//

-Duplicate Therapy RX #2549 CIMETIDINE 300MG TAB has been discontinued...

Another New Order for PSOPATIENT,ONE? YES//

**Example: Finishing Pending Order – Therapeutic Duplication with Non-Verified and Active orders. One drug is involved in both therapeutic duplications. One duplication allowance value is greater than '0'.**

-----ACTIVE-----								
1	2577	AMLODIPINE 5MG/ATORVASTATIN 10MG TAB	90	A	03-07	03-07	3	90
2	2578	ITRACONAZOLE 100MG CAP	60	A	03-07	03-07	0	30
3	2576	SUCRALFATE 1MG TAB	120	A	03-07	03-07	0	30
-----NON-VERIFIED-----								
4	2581	CHOLESTYRAMINE 9GM PACKETS	60	N	03-12	03-12	11	30
-----PENDING-----								
5	SIMVASTATIN 20MG TAB		QTY: 30		ISDT: 03-12	REF: 6		

Enter ?? for more actions

ED Edit	FN Finish	
Pending OP Orders (ROUTINE)	Mar 12, 2008@07:54:21	Page: 1 of 3
OPPATIENT, THREE	<A>	
PID: 666-44-4444	Ht (cm): _____	(_____)
DOB: JUL 3, 1949 (58)	Wt (kg): 51.36	(10/01/1996)
SEX: MALE	BSA (m2): _____	
CrCL: <Not Found> (CREAT: Not Found)		

CPRS Order Checks:

CRITICAL drug-drug interaction: ITRACONAZOLE & SIMVASTATIN  
(ITRACONAZOLE CAP,ORAL 100MG TAKE ONE CAPSULE BY MOUTH EVERY 12 HOURS  
[ACTIVE])  
Overriding Provider: PSOPROVIDER,ONE  
Overriding Reason: TESTING

CRITICAL drug-drug interaction: ITRACONAZOLE & SIMVASTATIN  
ITRACONAZOLE CAP,ORAL 100MG PO BID [ACTIVE])  
Overriding Provider: PSOPROVIDER,ONE  
Overriding Reason: TESTING

Duplicate drug class order: ANTIHYPERTENSIVE AGENTS (CHOLESTYRAMINE 9GM  
PACKETS TAKE ONE PACKET BY MOUTH TWICE A DAY DISSOLVE IN WATER OR  
JUICE. [PENDING])

+ Enter ?? for more actions	
BY Bypass	DC Discontinue
ED Edit	FN Finish

Select Item(s): Next Screen// FN Finish

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

=====  
THERAPEUTIC DUPLICATION(S) \*\*\* SIMVASTATIN 20MG TAB with

Local Rx#: 2577

Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB (ACTIVE)

SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING

QTY: 90 Days Supply: 90

Processing Status: Released locally on 3/7/08@08:55:32 (Window)

Last Filled On: 03/07/08

---

Local Rx#: 2581

Drug: CHOLESTYRAMINE 9GM PACKETS (NON-VERIFIED)

SIG: TAKE ONE PACKET BY MOUTH TWICE A DAY DISSOLVE IN WATER  
OR JUICE.

QTY: 60 Days Supply: 30

Processing Status: Not released locally (Window)

Last Filled On: 11/08/06

Class(es) Involved in Therapeutic Duplication(s): HMGCo-A Reductase Inhibitors,  
Antihyperlipidemics

---

Discontinue order(s)? Y/N Y es

1. RX #2577 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
2. RX #2581 CHOLESTYRAMINE 9GM PACKETS

Select (1-2): 1 RX #2577 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB will be discontinued after the acceptance of the new order.

Rx # 2582 03/12/08  
TEST,D #30  
TAKE ONE TABLET BY MOUTH EVERY EVENING

SIMVASTATIN 20MG TAB  
PSOPROVIDER,ONE PSOPHARMACIST,ONE  
# of Refills: 6

This Rx has been flagged by the provider as: NO COPAY

Was treatment related to Agent Orange exposure? YES//

Are you sure you want to Accept this Order? NO// YES

METHOD OF PICK-UP:

WAS THE PATIENT COUNSELED: NO// NO

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

-Duplicate Therapy RX #2577 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB has been discontinued...

Press Return to Continue:

**Example: Renewing an order –Therapeutic Duplication involving 5 drugs, one therapy class and only one order can be discontinued.**

```
+      Enter ?? for more actions
DC  Discontinue          PR  Partial           RL  Release
ED  Edit                 RF  Refill           RN  Renew
Select Action: Next Screen// rn  Renew
FILL DATE: (3/12/2008 - 3/13/2009): TODAY// (MAR 12, 2008)
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
Nature of Order: WRITTEN//          W
WAS THE PATIENT COUNSELED: NO// NO

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

Now Renewing Rx # 2580    Drug: SUCRALFATE 1GM TAB

Now doing remote order checks. Please wait...

Now doing allergy checks.  Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks!  Please wait...

=====
*** THERAPEUTIC DUPLICATION(S) *** SUCRALFATE 1GM TAB with

Local Rx#: 2574
Drug: CIMETIDINE 300MG TAB (DISCONTINUED)
SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
QTY: 180          Days Supply: 90
Processing Status: Released locally on 3/7/08@08:55:32 (Window)
Last Filled On: 03/07/08
-----
Local Rx#: 2573
Drug: NIZATIDINE 150MG CAP (HOLD)
SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
QTY: 180          Days Supply: 90
Processing Status: Released locally on 3/7/08@08:55:32 (Window)
Last Filled On: 03/07/08
-----
LOCATION: <VA OR DOD FACILITY>  Remote Rx#: 65343
Drug: RANITIDINE HCL 150MG TAB (EXPIRED)
SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
QTY: 180          Days Supply: 90

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

=====
Discontinue RX #2573 NIZATIDINE 150MG CAP? Y/N  No

Press Return to Continue:

2580A          SUCRALFATE 1MG TAB          QTY: 360
```

# OF REFILLS: 3 ISSUED: 03-12-08  
SIG: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY  
FILLED: 03-12-08  
ROUTING: WINDOW PHYS: PSOPROVIDER,ONE

Edit renewed Rx ? Y// n NO

SC Percent: 80%  
Disabilities: NONE STATED

Was treatment for a Service Connected condition? NO//

### **Example: Verification of Non-Verified Order**

OP Medications (NON-VERIFIED) Dec 20, 2011@14:45:54 Page: 1 of 2  
PSOPATIENT,ONE  
PID: 666-00-0000 Ht (cm): \_\_\_\_\_ (\_\_\_\_\_)  
DOB: JAN 1, 1945 (66) Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): \_\_\_\_\_

Rx #: 2382\$  
(1) \*Orderable Item: NIZATIDINE CAP,ORAL  
(2) Drug: NIZATIDINE 150MG CAP  
NDC: 0378-5150-91  
(3) \*Dosage: 150 (MG)  
Verb: TAKE  
Dispense Units: 1  
Noun: CAPSULE  
\*Route: ORAL  
\*Schedule: BID  
(4) Pat Instructions:  
SIG: TAKE ONE CAPSULE BY BY MOUTH TWICE A DAY  
(5) Patient Status: OPT NSC  
(6) Issue Date: 12/20/11 (7) Fill Date: 12/20/11  
Last Fill Date: 12/20/11 (Window)  
+ Enter ?? for more actions  
DC Discontinue PR (Partial) RL (Release)  
ED Edit RF (Refill) RN (Renew)  
Select Action: Next Screen// VF VF

RX: 2382 PATIENT: PSOPATIENT,ONE (666-00-0000)  
STATUS: Non-Verified CO-PAY STATUS  
DRUG: NIZATIDINE 150MG CAP  
QTY: 180 90 DAY SUPPLY  
SIG: TAKE ONE CAPSULE BY BY MOUTH TWICE A DAY  
LATEST: 12/20/2011 # OF REFILLS: 3 REMAINING: 3  
ISSUED: 12/20/11 PROVIDER:  
LOGGED: 12/20/11 CLINIC: NOT ON FILE  
EXPIRES: 12/20/12 DIVISION: HINES (499)  
CAP: SAFETY ROUTING: WINDOW  
ENTRY BY: PSTECH,ONE VERIFIED BY:

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

PSOPATIENT,ONE ID#:666-00-0000 RX#: 2382

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

RX #	DRUG	QTY	ST	ISSUE DATE	LAST REFILL	DAY REM	SUP
-----ACTIVE-----							
2380\$	ACETAMINOPHEN 325MG TAB U.D.	540	A	12-20	12-20	3	90
2379\$	WARFARIN 2.5MG TABS	90	A	12-20	12-20	3	90
-----DISCONTINUED-----							
2378\$	INDOMETHACIN 25MG CAP	270	DC	12-20	12-20	3	90
2377\$	WARFARIN 10MG TABS	2160	DC	12-20	12-20	3	90
-----NON-VERIFIED-----							
2382\$	NIZATIDINE 150MG CAP	180	N	12-20	12-20	3	90
2381\$	SUCRALFATE 1 GM TAB	360	N	12-20	12-20	3	90

Press Return to continue:

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

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

Local RX#: 2381  
Drug: SUCRALFATE 1 GM TAB (Non-Verified)  
SIG: TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY  
QTY: 360 Days Supply: 90  
Processing Status: Not released locally (Window)  
Last Filled On: 12/20/11

Class(es) Involved in Therapeutic Duplication(s): Peptic Ulcer Agents

Press Return to continue:

Discontinue Rx #2381 SUCRALFATE 1 GM TAB Y/N ? NO

PSOPATIENT,ONE ID#:666-00-0000 RX#: 2382  
NIZATIDINE 150MG CAP

VERIFY FOR PSOPATIENT,ONE ? (Y/N/Delete/Quit): Y// ES

### **Example: Copying an Existing Order**

New OP Order (COPY)	Mar 12, 2008@09:15:48	Page: 1 of 2
PSOPATIENT, TWO		<A>
PID: 000-00-0000	Ht(cm): 182.88 (04/13/2005)	
DOB: JAN 1, 1945 (63)	Wt(kg): 77.27 (04/13/2005)	
SEX: MALE		
CrCL: <Not Found> (CREAT: Not Found)	BSA (m <sup>2</sup> ): 1.95	
Orderable Item: AMLODIPINE/ATORVASTATIN TAB		
(1) Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB		
(2) Patient Status: OPT NSC		

(3) Issue Date: MAR 12,2008 (4) Fill Date: MAR 12,2008  
Verb: TAKE  
(5) Dosage Ordered: ONE TABLET  
Route: ORAL  
Schedule: QAM  
(6) Pat Instruction:  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
(7) Days Supply: 30 (8) QTY ( ): 30  
(9) # of Refills: 11 (10) Routing: WINDOW  
(11) Clinic:  
(12) Provider: PSOPROVIDER,ONE (13) Copies: 1  
+ Enter ?? for more actions  
AC Accept ED Edit  
Select Action: Next Screen// AC Accept

---

Duplicate Drug in Local Rx:

Rx #: 2584  
Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
QTY: 30 Refills remaining: 11  
Provider: OPPROVIDER, ONE Issued: 03/12/07  
Status: ACTIVE Last filled on: 03/12/07  
Processing Status: Released locally on 03/12/07@08:55:32 (Window)  
Days Supply: 30

---

Discontinue Rx #2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB? Y/N YES

Rx #2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB will be discontinued after the acceptance of the new order.

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

---

\*\*\* THERAPEUTIC DUPLICATION(S) \*\*\* AMLODIPINE 5MG/ATORVASTATIN 10MG TAB with

Pending Drug: LOVASTATIN 20MG TAB  
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME FOR HIGH CHOLESTEROL  
Pending Drug: NIFEDIPINE 10MG CAP  
SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY

Class(es) Involved in Therapeutic Duplication(s): Calcium Channel Blockers, HMGCo-A Reductase Inhibitors

---

Discontinue order(s)? Y/N Y es

1. Pending Order NIFEDIPINE 10MG CAP
2. Pending Order LOVASTATIN 20MG TAB

Select (1-2): 1-2 Pending Order NIFEDIPINE 10MG CAP will be discontinued after the acceptance of the new order.

Pending Order LOVASTATIN 20MG TAB will be discontinued after the acceptance of the new order.

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

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

Rx # 2585 03/12/08  
PSOPATIENT, TWO T #30  
TAKE ONE TABLET BY MOUTH EVERY MORNING

AMLODIPINE 5MG/ATORVASTATIN 10MG TAB  
PSOPROVIDER, ONE PSOPHARMACIST, ONE  
# of Refills: 11

SC Percent: 40%  
Disabilities: NONE STATED  
Was treatment for Service Connected condition? NO//

Is this correct? YES// ...

Duplicate Drug Rx 2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB has been discontinued...  
Duplicate Therapy Pending Order NIFEDIPINE 10MG CAP has been discontinued...  
Duplicate Therapy Pending Order LOVASTATIN 20MG TAB has been discontinued...

### **Example: Reinstating a Discontinued Order**

Rx #: 2586  
(1) \*Orderable Item: CIMETIDINE TAB  
(2) Drug: CIMETIDINE 300MG TAB  
NDC: 0378-0317-01  
(3) \*Dosage: 300 (MG)  
Verb: TAKE  
Dispense Units: 1  
Noun: TABLET  
\*Route: ORAL  
\*Schedule: QHS  
(4) Pat Instructions:  
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
(5) Patient Status: OPT NSC  
(6) Issue Date: 03/12/08 (7) Fill Date: 03/12/08  
Last Fill Date: 03/12/08 (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// y YES

Comments: testing duplicate therapy check  
Nature of Order: SERVICE CORRECTION// S

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

=====\*\*\* THERAPEUTIC DUPLICATION(S) \*\*\* CIMETIDINE 300MG TAB with

Local Rx#: 2576  
Drug: SUCRALFATE 1GM TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY  
QTY: 1200 Days Supply: 30  
cessing Status: Released locally on 3/7/08@08:55:32 (Window)  
Filled On: 03/07/08

Class(es) Involved in Therapeutic Duplication(s): Peptic Ulcer Agents

Discontinue RX # 2576 SUCRALFATE 1GM TAB? Y/N NO - Prescription was not discontinued...

Prescription #2586 REINSTATED!

Prescription #2586 Filled: MAR 12, 2008 Printed: Released:  
Either print the label using the reprint option  
or check later to see if the label has been printed.

## **Example: Creating a New Order – Editing the Orderable Item**

Rx #: 2594  
(1) \*Orderable Item: ENALAPRIL TAB \*\*\* (N/F) \*\*\*  
(2) Drug: ENALAPRIL 5MG TAB \*\*\* (N/F) \*\*\*  
      NDC: 00093-0027-01  
(3) \*Dosage: 5 (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  
(6) Issue Date: 03/12/08  
      Last Fill Date: 03/12/08 (Window)  
(7) Fill Date: 03/12/08  
+ Enter ?? for more actions  
DC Discontinue PR Partial RL Release  
ED Edit RF Refill RN Renew  
Select Action: Next Screen// 1

Current Orderable Item: ENALAPRIL TAB

Select PHARMACY ORDERABLE ITEM NAME: ENALAPRIL// dip  
1 DIPHENHYDRAMINE CREAM, TOP  
2 DIPHENHYDRAMINE CAP, ORAL  
3 DIPYRIDAMOLE TAB  
CHOOSE 1-3: 3 DIPYRIDAMOLE TAB

New Orderable Item selected. This edit will create a new prescription!

Press Return to Continue...

**DRUG NAME REQUIRED!**

### Instructions:

The following Drug(s) are available for selection:

- THE FOLLOWING DRUG(S) ARE PRESCRIBED:

Select Drug by number: (1-2): 1

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

\*\*\* THERAPEUTIC DUPLICATION(S) \*\*\* DIPYRIDAMOLE 25MG TAB with

Local Rx#: 2560  
Drug: WAFFARIN 5MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH EVERY EVENING  
QTY: 90 Days Supply: 90  
Processing Status: Released locally on 3/4/08@08:55:32 (Window)  
Last Filled On: 03/04/08

Class(es) Involved in Therapeutic Duplication(s): Antiplatelet Drugs, Antithrombotic Drugs

=====

Discontinue RX # 2560 WAFFARIN 5MG TAB? Y/N NO -Prescription was not discontinued...

You have changed the Orderable Item from ENALAPRIL to DIPYRIDAMOLE.

There are 2 Available Dosage(s):  
1. 25MG  
2. 50MG

Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list: 1 25MG

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  
Now searching ADMINISTRATION SCHEDULE (#51.1) file...  
TID TID THREE TIMES A DAY  
...OK? Yes// (Yes)  
(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): \_\_\_\_\_ (\_\_\_\_\_)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): \_\_\_\_\_

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!

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, O  
# 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// ...

### **Example: 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> (CREAT: Not Found) BSA (m2): \_\_\_\_\_

#	RX #	DRUG	QTY	ST	DATE	ISSUE	LAST	REF	DAY
<b>ACTIVE</b>									
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	
<b>DISCONTINUED</b>									
7	2561	CIMETIDINE 300MG TAB	90	DC	03-04	03-04	3	90	
<b>HOLD</b>									
+ 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)

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

=====

\*\*\* 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 ANTAGOINSTS (H2 ANTAGONISTS)

=====

VERB: TAKE  
There are 2 Available Dosage(s):  
    1. 150MG  
    2. 300MG

Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list:

### **Example: 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 remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order 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

There are 2 Available Dosage(s):  
1. 20MG  
2. 40MG

Select from list of Available Dosages (1-2), 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

Now searching ADMINISTRATION SCHEDULE (#51.1) file...

QAM QAM EVERY MORNING

...OK? Yes// (Yes)

(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.

## **Chapter 18: Dosing Order Checks**

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MOCHA v2.0 implements the first increment of dosage checks and introduces the Maximum Single Dose Check for simple and complex orders for both Outpatient Pharmacy and Inpatient Medications applications. MOCHA v2.1b implements the second increment of dosage checks and introduces the Max Daily Dose Check for simple orders for both Outpatient Pharmacy and Inpatient Medications applications. MOCHA v2.0 and MOCHA v2.1b use the same interface to First Databank (FDB) as MOCHA v1.0.



**NOTE:** Please refer to the Dosing Order Checks User Manual for a detailed description of dosing order checks.

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# **Chapter 19: Pull Early from Suspense**

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This chapter describes the option for pulling prescriptions early from the SUSPENSE file.

## **Pull Early from Suspense**

### **[PSO PNDRX]**

This option is used to pull a specific prescription or all prescriptions for a patient early. If a prescription is pulled early using this option, it will not be associated with any printed batch. A label cannot be reprinted with the *Reprint Batches from Suspense* option if the prescription has been pulled early suspense. In addition, Method of Pickup can be edited. Also, there is no longer a "DELETE FROM SUSPENSE PROMPT." That prompt has been changed to "Pull Rx(s) and delete from Suspense." Yes must be answered to this prompt to pull the prescriptions, and they will always be deleted from suspense. Since prescriptions that are pulled early from suspense do not belong to any printed batch and cannot be reprinted from suspense, there is no reason to leave them in suspense.

If the Label Log indicates that a Label has already printed for this prescription and fill, then the user is asked whether to continue. If the user chooses "No", the label will not print. In addition, the prescription shall be removed from Suspense unless the suspense queue indicates that a user has previously requested a reprint of the suspended prescription. If the user chooses "Yes", the prescription shall continue and will print the label. In the example below, the label will not print but the Prescription will be left on Suspense.

```
Label for Rx#104872 Fill#0 has already been printed  
Do you want to continue? No// NO  
Reprint Flag is on. Prescription left on suspense.
```



If the prescription being pulled from suspense has an FDA Medication Guide associated, the user will be required to enter a valid FDA Medication Guide printer.



If the routing is changed to "Window" when pulling from suspense early, and the bingo board is being used, those prescriptions will be sent to the bingo board.



If the patient has remote prescriptions, then the text "THIS PATIENT HAS PRESCRIPTIONS AT OTHER FACILITIES" will appear on the report as shown in the following example.

```
PREScription PROFILE AS OF 12/30/2008
```

```
NAME: PSOPATIENT, ONE
```

THIS PATIENT HAS PRESCRIPTIONS AT OTHER FACILITIES

PHARMACIST: \_\_\_\_\_ DATE: \_\_\_\_\_

If a prescription is determined to be an ePharmacy prescription (e.g., third party electronically billable), an electronic claim will be sent by ECME to the third party payer. The communication events between Outpatient Pharmacy and ECME are recorded in the ECME Log section of each prescription. The ECME log can be viewed in the patient Medication Profile screen (Activity Log option - AL) and also from the *View Prescriptions* option. If the claim submission returns a Refill Too Soon (79) or Drug Utilization Review (88) reject, the label is not printed for the prescription and it is moved to the Refill Too Soon/DUR section of the patient Medication Profile screen until the user resolves the reject. The prescription will also display on the Third Party Payer Reject worklist.

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## **Chapter 20: Queue CMOP Prescription**

This chapter describes the option for suspending prescriptions for mail-routed CMOP drugs.

### **QUEUE CMOP Prescription [PSO RX QUEUE CMOP]**

The *Queue CMOP* Prescription option allows the users (including pharmacy technicians) to put mail-routed prescription(s) for CMOP drugs on suspense for CMOP.

#### **Example: Queue CMOP Prescription**

Select Suspense Functions Option: **QUEUE** CMOP Prescription  
Enter the Rx # to queue to CMOP: **300486**

If the prescription does not have a routing of Mail, has already been released, or is not for a CMOP drug, and does not pass all the other normal checks for CMOP, it will not be put on suspense for CMOP.

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# **Chapter 21: Releasing Medication**

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This chapter describes the option used for releasing medications.

## **Release Medication**

### **[PSO RELEASE]**

The *Release Medication* option is used at the time the prescription is filled and ready to be given to the patient. Inventory is decreased, certain fields in the file are updated, and a copay is generated if the action is applicable to the prescription. With this option, prescriptions can be batch processed. Communication is made with the Integrated Funds Control, Accounting and Procurement (IFCAP) and Integrated Billing (IB) software to generate copay charges. IFCAP and IB software handle patient billing, tracking of charges, and payment received.

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. The actions that may result at the time a fill is released are described below.

1. **No action is taken.** No changes to the criteria that determine copay status of a prescription have occurred.
2. **The copay status of the prescription is automatically reset and an entry is placed in the copay activity log.**

Example: The drug for which the prescription is written is no longer marked for investigational use. The copay status of the prescription is reset from No Copayment to Copay.

3. **The copay status of the prescription is automatically reset, an entry is placed in the copay activity log, and a MailMan message is generated detailing missing information required for user follow up.**

Example: The drug for which the prescription is written is no longer marked for investigational use. The copay status of the prescription is reset from No Copayment to Copay. The patient has been documented as being exposed to Southwest Asia Conditions during Persian Gulf War service since the last fill. A MailMan message will be generated informing the user that the ‘Is this Rx for treatment related to service in SW Asia?’ question must be addressed and documented using the *Reset Copay Status/Cancel Charges* option.

**4. A MailMan message is generated detailing missing information required for user follow-up.**

Example: A veteran is documented as having Agent Orange exposure. Refill #2 for a prescription entered into the system before the new medication copay exemptions took effect on January 1, 2002 is released. The prescription is copay eligible. A MailMan message will be generated informing recipients that the 'Is this Rx for treatment of Vietnam-Era Herbicide (Agent Orange) exposure?' question must be addressed. The copay status of the Rx may change based on the response entered using the *Reset Copay Status/Cancel Charges* option.

If a MailMan message is generated at the time a prescription fill is released, the recipients of the message will be the provider of record, the pharmacy user who finished the order, and holders of the PSO COPAY key. The message lists the patient name, prescription number, and medication ordered, current copay status, and applicable copay exemption questions that need addressing to determine the prescription's copay status. The *Reset Copay Status/Cancel Charges* option must be used to enter the responses to the medication copay exemption questions listed in the MailMan message. If responses are not entered for the applicable medication copay exemption questions, any subsequent refills when released for this prescription and possibly other prescriptions for this patient will continue to generate the same MailMan message.

**Example: MailMan Message**

```
Subj: PRESCRIPTION QUESTIONS REVIEW NEEDED (500) [#30364] 10/11/05@19:56
35 lines
From: OUTPATIENT PHARMACY PACKAGE In 'IN' basket. Page 1
-----
```

```
OPPATIENT29,ONE (6543P) CHEYENNE VAM&ROC
Eligibility: SC LESS THAN 50% SC%: 20
REIMBURSABLE INSURANCE
```

```
Disabilities: ARTHRITIS-10%(SC), FOREARM CONDITION-5%(NSC),
FOREARM CONDITION-4%(NSC), BENIGN EYE GROWTH-0%(NSC),
LOSS OF FIELD OF VISION-20%(SC),
```

```
Rx# 102006 (1) COPAY
ALBUTEROL SO4 0.083% INHL 3ML
```

Due to a change in criteria, additional information listed below is needed to determine the final VA copay and/or insurance billable status for this Rx so that appropriate action can be taken by pharmacy personnel.

Is this Rx for a Service Connected Condition?

Is this Rx for treatment related to service in SW Asia?

This message has been sent to the provider of record, the pharmacist who finished the prescription order, and all holders of the PSO COPAY key.

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

### **Example: MailMan Message (continued)**

Subj: PRESCRIPTION QUESTIONS REVIEW NEEDED (500) [#30364] Page 2

**Providers:**

Please respond with your answer to the question(s) as a reply to this message. The prescription will be updated by the appropriate staff.

**Staff assigned to update the Prescription responses:**

Please use the RESET COPAY STATUS/CANCEL CHARGES option to enter the responses to the questions above, which may result in a Rx copay status change and/or the need to remove VA copay charges or may result in a charge to the patient's insurance carrier.

Note: The SC question is now asked for Veterans who are SC>49% in order to determine if the Rx can be billed to a third party insurance. These Veterans will NOT be charged a VA copay.

Supply, nutritional and investigational drugs are not charged a VA copay but could be reimbursable by third party insurance.

Enter message action (in IN basket): Ignore//

An annual copayment cap is applied to patients in specific priority enrollment groups. Once a patient reaches the annual copayment cap, no further medication copay charges will be billed for the calendar year. An entry to that effect is made to the Copay Activity Log. The '\$' indicator remains next to the prescription number to indicate that the prescription is still copay eligible.

Integrated Billing software keeps track of all prescription fills not billed due to the annual cap.

### **Example: Copay Activity Log When Annual Cap Reached**

Copay Activity Log:				
#	Date	Reason	Rx Ref	Initiator Of Activity
1	10/23/01	ANNUAL CAP REACHED	ORIGINAL	OPPHARMACIST11, THREE
Comment: NO BILLING FOR THIS FILL				

If for whatever reason (e.g. prescription fill is returned to stock and copay charges cancelled), a patient falls below the annual copayment cap, the Integrated Billing package can initiate copay charges to bring the patient back up to the annual copayment cap. Integrated billing software will go back and bill a copay charge for those fills previously not charged due to the annual cap, bringing the patient's total copayment up to the cap. Whenever this occurs an entry will be placed in the copay activity log.

### **Example: Copay Activity Log With IB-Initiated Charge**

Copay Activity Log:				
#	Date	Reason	Rx Ref	Initiator Of Activity
1	10/23/01	ANNUAL CAP REACHED	ORIGINAL	OPPHARMACIST11, THREE
Comment: NO BILLING FOR THIS FILL				

2	10/23/01	IB-INITIATED COPAY	ORIGINAL	OPPHARMACIST11, THREE
Comment: PARTIAL CHARGE				

If a prescription is not in a releasable status, the user will be given an error message, such as:

- Prescription has a status of (status) and is not eligible for release.
- Prescription was deleted.
- Improper barcode format.
- Non-existent prescription.

Copay is not charged for a partial fill.



**Important:** This is a mandatory function that must be used by the pharmacy.

## Fixed Medication Copayment Tiers (FMCT)

Patch PSO\*7\*460 introduces copay tiers for drugs. The Chief Business Office (CBO) requests updating IT systems to conform with changes to qualified prescription medications within VistA and VA National and Local Drug Files, to establish fixed copayment amounts depending on the class of medication (Tier 1, Tier 2, or Tier 3) while still maintaining the utility of the \$700 copayment cap per calendar year for PG 2-8, as applicable, on an individual Veteran basis. The PBM is requesting the addition of Tier 0 for excluded and exempt products with no copayment. Changes to Outpatient Pharmacy will be seen in the copay activity log.

Rx #: 100002266	Original Fill Released: 08/23/16
Routing: Window	Finished by: CROSSMAN, PAMELA
Copay Activity Log:	
# Date Reason	Rx Ref Initiator Of Activity
=====	=====
1 08/23/16 COPAY RESET	ORIGINAL CROSSMAN, PAMELA
Comment: Copay Tier 1 Old value=No Copay New value=Copay	

## Changes to Releasing Orders function - Digitally Signed Orders Only

The release function in the *Patient Prescription Processing* option has been modified with patch PSO\*7\*131 to require that all digitally signed orders for Schedule II controlled substances (CSII orders) be released through the *Outpatient Rx* option in the *Controlled Substances* (CS) menu. If DEA/PKI is activated and an order is digitally signed, the user will be advised that the order must be released through the *Outpatient Rx* option in the *Controlled Substances* (CS) menu. The same message will display if a user attempts to release a digitally signed CSII order during Speed Release or when using the *Release Medications* option.

A new security key named "PSDRPH", was introduced by the Controlled Substances patch PSD\*3\*76 that authorizes pharmacists to finish/verify digitally signed Schedule II-V CS orders placed via CPRS.

When processing a digitally signed pending order, the integrity of the original order placed in CPRS is now being checked to ensure that the data fields listed below are not altered from the time the order is signed in CPRS and later selected for processing in backdoor pharmacy. This is done by passing the data elements listed below to a Kernel Application Programming Interface (API), Integration Control Registration (ICR) #3539 along with the CPRS hash count provided by ICR #5709. The Kernel API compares these two hash values and returns an "OK" if the pending order is unaltered; otherwise, a "-1^error code^error message" is returned.

Example: "-1^89802016^Mismatched digital signature hash values."

The following fields are used in the hash check:

- Date of Issuance
- Full Name and Address of the Patient
- Drug Name
- Quantity Prescribed
- Directions for Use
- Prescriber Name
- Prescriber Address (site address)
- Prescriber DEA / VA Registration Number
- Order Number (CPRS)

The Kernel API will also check for the validity of the DEA certificate. If the certificate is revoked or expired, the API will return the appropriate error code. If the error code is related to hash mismatch, or the DEA certificate is revoked, the following events will be triggered during pending order processing:

- The order will be auto discontinued.
- First line of the pending order screen will have the message "Digital Signature Failed: Corrupted (Hash mismatch)" or "Certificate revoked" concatenated with "Order Auto Discontinued", and the message will be highlighted.

- The status bar of the screen will have the message "Signature Failed: Corrupted (Hash mismatch)" or Certificate revoked."

A mail message will be generated to the holders of the PSDMGR key notifying that the order has been auto-discontinued (similar to the example listed below). If the discontinuation is due to a hash mismatch as a result of altering one of the fields listed above, the mail message will show the altered fields with the discrepancies as shown in the following example.

#### **Example: Mail Message of Discontinuation Due to Hash Mismatch**

Subj:	DIGITALLY SIGNED NEW ORDER AUTO DISCONTINUED [#196353]	
	03/20/12@17:1024 lines	
From:	POSTMASTER In 'IN' basket. Page 1 *New*	
<hr/>		
Following order was auto discontinued when finishing a pending order due to Corrupted (Hash mismatch) - 89802016		
Division : GREELEY CLINIC		
CPRS Order # : 5587651		
Issue Date : MAR 7,2012		
Patient : TEST, PATIENT (0908)		
Address : P.O. BOX 31 LAPORTE, CA 95981		
Drug : CODEINE SULFATE 60MG TAB		
Dosage Ordered: 120 (MG)		
Dosage Form : TABLETS		
Quantity : 54		
Provider : TEST, PROVIDER		
DEA# : TA1234563		
Site Address : 2360 E PERSHING BLVD 2360 East Pershing Boulevard CHEYENNE		
Differences in CPRS and Pharmacy Pending File		
Data Name	CPRS File	Pharmacy Pending File
-----	-----	-----
QTY PRESCRIBED	15	30

If the error code is related to 'certificate expired', the pending order will be processed (will not be auto-discontinued), and a notification will be sent to the provider with the message "DEA certificate expired. Renew your certificate."

The following changes have been made for finishing a CS order:

- When finishing a pending CS order, if the user does not hold the new PSDRPH security key, the order will be marked as 'Non-Verified'. To verify a 'Non-Verified' CS order, the PSDRPH security key is now required. To discontinue a pending CS order, the PSDRPH security key is now required.

- The pending order screen will now display the provider's DEA/VA #, the DETOX# (if available), and the site address.
- When finishing a new pending CS order, the dosage, provider name, or the number of refills will not be allowed editing; however, the user will be allowed to select other possible dosages for the same drug if available. If the changes to the dispense drug results in creating a new order, the user will be notified by the message " Digitally Signed Order - No such changes allowed." If pharmacy wants to make such changes, then they have to discontinue (DC) the pending order and start a new order. However, the user will be allowed to select other possible dosages for the same drug that does not change the prescribed dosage.
- When finishing a new pending CS order, the day supply or the quantity will not be allowed to increase but can be decreased. If the day supply is decreased, the number of refills will also be adjusted accordingly depending on the drug setup (maximum refills, not refillable, etc). The quantity may be auto-calculated to a higher quantity by the system only when the dosage remains the same, but the dispense drug strength is changed – i.e. 2mg tablets #30 is changed to 1mg tablets, the Sig is updated, and the system changes the quantity to 60. A manual change to a higher quantity is not allowed.
- When finishing a pending CS order or verifying a CS order by the PSDRPH key holder, any edit to some of the key fields, such as dispense drug, dosage, dispense units, issue date, day's supply, quantity or number of refills, will now be captured and stored in the activity log.



In patch PSO\*7\*99, a change was made for pending orders not to recalculate the quantity for CS drugs on selecting a different strength of the same drug and resulting in the same prescribed dosage. This change is removed in patch PSO\*7\*391.

## **Changes to Releasing Orders function - ScripTalk®**

The release function in the *Patient Prescription Processing* option has been modified to display a message to the user when the site is using a Bingo Board and when the patient is enrolled in ScripTalk®. This message will alert the user that the patient is enrolled in ScripTalk® and may need to have a verbal announcement that the prescription(s) is ready, instead of a visual announcement.

### **Example: Releasing Medication to a ScripTalk® Patient**

```
Prescription Number 400693 Released
No Refill(s) to be Released
No Partial(s) to be Released
```

```
OPPATIENT16,ONE added to the WAITING display.
This patient is enrolled in ScripTalk and may benefit from
a non-visual announcement that prescriptions are ready.
```

```
Press Return to Continue:
```

## **Changes to Releasing Orders Function – Signature Alert**

With Patch PSO\*7\*385, the release function in the *Patient Prescription Processing* option has been modified to display a message to the user when an ECME-billable prescription is being released as a window fill. This message will alert the user that the patient's signature must be obtained. The user is not required to press <Enter> to continue or respond to the alert in any other manner.

### **Example: Releasing an ePharmacy Window Fill**

Prescription Number 100003853 Released  
No Refill(s) to be Released  
No Partial(s) to be Released

## **Changes to Releasing Orders function – HIPAA NCPDP Global**

The release function has been modified with patch PSO\*7\*148 to perform National Drug Code (NDC) validation for ePharmacy prescriptions. These changes also affect the Controlled Substance prescription release, which is performed through the Controlled Substances package.

The user releasing the third-party electronically billable prescription will be prompted for the NDC for the drug being dispensed to the patient. The NDC code previously retrieved when the prescription was finished will be presented as the current (default) NDC for the prescription. The other possible values that the user will be able to choose from are:

- NDC field value in the DRUG file, if valid and different than the current prescription NDC.
- LAST LOCAL NDC field value in NDC BY OUTPATIENT SITE sub-file in the DRUG file for the division filling the prescription, if valid and different than the current prescription NDC.
- NDC CODE field values in the SYNONYM sub-file in the DRUG file, if valid and different than the current prescription NDC.

If the NDC dispensed is not on the list to select, the user must contact the ADPAC or other designated person to add the NDC in a synonym multiple for that drug in file 50.

If the NDC code selected matches the current NDC in the prescription no further NDC processing is required. However, if the user selects a different NDC, the following steps will occur:

1. Outpatient Pharmacy V. 7.0 will instruct ECME to reverse the previous claim for the previous NDC code and submit a new claim for the newly selected NDC code.
2. The newly selected NDC code will be saved in the LAST LOCAL NDC field in NDC BY OUTPATIENT SITE sub-file in the DRUG file for the division filling the prescription.

The following examples show the new prompt for NDC validation during the release process.

#### **Example: Releasing an ePharmacy Order – Selecting Default NDC**

```
Select Outpatient Pharmacy Manager Option: RELEASE Medication
Enter PHARMACIST: OPPHARMACIST4, THREE
Enter/Wand PRESCRIPTION number: 100003853
NDC: 00580-0277-10// ?

Select one of the following valid NDC code(s) below:
  1 - 00580-0277-10
NDC: 00580-0277-10// <Enter> 00580-0277-10
  Prescription Number 100003853 Released
  No Refill(s) to be Released
  No Partial(s) to be Released
```

#### **Example: Releasing an ePharmacy Order – Selecting Different NDC**

```
Select Outpatient Pharmacy Manager Option: RELEASE Medication
Enter PHARMACIST: OPPHARMACIST4, THREE
Enter/Wand PRESCRIPTION number: 100003853
NDC: 00580-0277-10// ?

Select one of the following valid NDC code(s) below:
  1 - 00580-0277-10
  2 - 00580-0277-14
NDC: 00580-0277-10// 2 00580-0277-14

Veteran Prescription 100003853 successfully submitted to ECME for claim generation.

Claim Status:
Reversing and Rebilling a previously submitted claim...
Reversing...
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
Resubmitting...
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E PAYABLE
```

Prescription Number 100003853 Released  
No Refill(s) to be Released  
No Partial(s) to be Released

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# **Chapter 22: Returning Medication to Stock**

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This chapter describes the option used for returning medication to stock.

## **Return Medication to Stock**

### **[PSO RETURNED STOCK]**

This option is used when a prescription has been released, but has been refused, not picked up, or not given to the patient for some reason. Comments can be entered to explain why the medication was returned to stock.

A prescription can only be returned to stock if the prescription status is Active, Discontinued, or Expired. If the prescription is not released, there is no need to return it to stock. This function increases the inventory so that a more current level is maintained by the Outpatient Pharmacy package and removes the copay charge if it is applicable to the prescription. It is highly recommended that this option be used.

When an ePharmacy prescription is returned to stock, the software checks if the it has a PAYABLE claim, if so, a request is sent to ECME to electronically reverse the claim with the third party payer. Also, if the prescription contains any unresolved DUR or REFILL TOO SOON reject, it will be marked resolved with the reason 'Prescription Returned To Stock'.

If a copay charge is removed by returning a prescription fill to stock, an entry will be placed in the copay activity log documenting the action.

### **Example: Returning Medication to Stock**

Copay Activity Log:				
#	Date	Reason	Rx Ref	Initiator Of Activity
1	11/21/01	REMOVE COPAY CHARGE	REFILL 1	OPPHARMACIST9, THREE
Comment: RX REFUSED Returned to stock				

If an **original fill** is returned to stock and reprinted, it can be released again. If a **refill** is returned to stock, the refill is deleted so the patient will not lose it.

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# **Chapter 23: Ordering/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 display 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*
- *OneVA Pharmacy Prescription Report*
- *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, Maximum Single Dose, Duplicate Drug Therapy, Drug-Drug Interaction, and Drug-Drug Allergy.

With the introduction of enhanced Order checks (PSO\*7\*251) , 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
- Local & Remote 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.

There are three levels of error messages associated with Enhanced Order Checking (Drug Interactions, Duplicate Therapy, and Dosing):

1. System - When such an error occurs, no Drug Interaction, Duplicate Therapy, or Dosing order checks will be performed. Other order checks that do not use the COTS database (FDB) will still be performed such as allergy/ADRs, duplicate drug (for outpatient only), and new CPRS order checks, etc.
2. Drug - The second error level is for the drug and no Drug Interaction, Duplicate Therapy, or Dosing order checks will be performed for a specific drug. Drug level errors can occur for the prospective drug (drug being processed) or the profile drug. If a drug level error occurs on the prospective drug, no profile drug errors will be displayed. The only exception to this is when you are processing an IV order with multiple prospective drugs (i.e. multiple IV Additives). Profile drug level errors will only be shown once per patient session.
3. There are two reasons that a drug level error is generated; the drug is not matched to NDF or the drug is matched to NDF, but the VA Product to which it is matched does not have a GCNSEQNO assigned or the GCNSEQNO assigned does not match up to the GCNSEQNO in the COTS database. The latter (GCNSEQNO mismatch) is rare.
4. Order - The third error level is for the order. Order level errors will only occur with dosing order checks. Please see the *Dosing Order Check User Manual* for more information.

See table below for an explanation of the errors:

Error Level	Error Message	Reason	Why message is being displayed.
-------------	---------------	--------	---------------------------------

Error Level	Error Message	Reason	Why message is being displayed.
System	No Enhanced Order Checks can be performed.	Vendor Database cannot be reached.	The connectivity to the vendor database has gone down. A MailMan message is sent to the G. PSS ORDER CHECKS mail group when the link goes down and when it comes back up.
System	No Enhanced Order Checks can be performed.	The connection to the vendor database has been disabled.	A user has executed the Enable/Disable Vendor Database Link [PSS ENABLE/DISABLE DB LINK] option and disabled the interface.
System	No Enhanced Order Checks can be performed.	Vendor database updates are being processed	The vendor database (custom and standard data) is being updated using the DATUP (Data Update) process.
System	No Enhanced Order Checks can be performed.	An unexpected error has occurred.	There is a system network problem and the vendor database cannot be reached or a software interface issue.
System	No Dosing Order Checks can be performed	Dosing Order Checks are disabled	A user has executed the <i>Enable/Disable Dosing Order Checks</i> [PSS Dosing Order Checks] option.
Drug	Enhanced Order Checks cannot be performed for Local or Local Outpatient Drug: <DRUG NAME>	Drug not matched to NDF.	The local drug being ordered/ or on profile has not been matched to NDF. Matching the drug to a VA Product will eliminate this message.
Drug	Order Checks could not be done for Remote Drug: <DRUG NAME>, please complete a manual check for Drug Interactions and Duplicate Therapy. Remote order indicator		If this error message is displayed, it means that the VA product that the local or remote drug being ordered/or on the local or remote profile does not have a GCNSEQNO or in rare cases, the GCNSEQNO assigned to the VA Product does not match up with a GCNSEQNO in the vendor database.
Drug	Enhanced Order Checks cannot be performed for Orderable Item: <OI NAME>	No active Dispense Drug found.	Highly unlikely that this error would be seen. At the time the order check was being performed the orderable item did not have an active dispense drug associated.

See Examples below to illustrate error sequences.

#### Example: New Order Entry – System Level Error

Select Action: Quit// NO      New Order

Eligibility: SC LESS THAN 50%      SC%: 40  
RX PATIENT STATUS: SC LESS THAN 50%//  
DRUG: AMLOD

Lookup: GENERIC NAME

1	AMLODIPINE 10MG/BENAZAPRIL 20MG TAB	CV400
2	AMLODIPINE 5MG/ATORVASTATIN 10MG TAB	CV200

CHOOSE 1-2: 1 AMLODIPINE 10MG/BENAZAPRIL 20MG TAB      CV400

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

No Enhanced Order Checks can be performed.

Reason: Vendor database cannot be reached.

Press Return to Continue...

There are 2 Available Dosage(s) :

1. 1 TABLET
2. 2 TABLETS

Select from list of Available Dosages (1-2), 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//

- |   |    |                 |    |
|---|----|-----------------|----|
| 1 | PO | ORAL (BY MOUTH) | PO |
| 2 | PO | ORAL            | PO |

CHOOSE 1-2: 1 ORAL (BY MOUTH)      PO MOUTH

Schedule: Q4H

Now searching ADMINISTRATION SCHEDULE (#51.1) file...

Q4H Q4H EVERY 4 HOURS  
...OK? Yes// (Yes)  
(EVERY 4 HOURS)

LIMITED DURATION (IN DAYS, HOURS OR MINUTES):

CONJUNCTION:

### **Example: Drug Error Message – Finishing Pending Outpatient Order**

+      Enter ?? for more actions  
BY Bypass    DC Discontinue  
ED Edit    FN Finish  
Select Item(s): Next Screen// FN Finish

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

Enhanced Order Checks cannot be performed for Local Drug: WARFARIN 5MG TAB  
Reason: Drug not matched to NDF

Press Return to Continue...

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//

### **Example: Renewing an Order – Therapeutic Duplication – Drug Level Error**

```
+      Enter ?? for more actions
DC  Discontinue          PR  Partial          RL  Release
ED  Edit                  RF  Refill          RN  Renew
Select Action: Next Screen// rn  Renew
FILL DATE: (3/12/2008 - 3/13/2009): TODAY// (MAR 12, 2008)
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
Nature of Order: WRITTEN//      W
WAS THE PATIENT COUNSELED: NO// NO

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

Now Renewing Rx # 2580    Drug: SUCRALFATE 1GM TAB

Press Return to Continue...

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

Order Checks could not be done for Drug: RANITIDINE 150MG TAB, please complete a
manual check for Drug Interactions and Duplicate Therapy.

=====
*** THERAPEUTIC DUPLICATION(S) *** SUCRALFATE 1GM TAB with

      Local Rx#: 2574
      Drug: CIMETIDINE 300MG TAB (DISCONTINUED)
            SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
            QTY: 180          Days Supply: 90
      Processing Status: Released locally on 03/07/08@08:55:32 (Window)
      Last Filled On: 11/08/06

-----
      Local Rx#: 2573
      Drug: NIZATIDINE 150MG CAP (ACTIVE)
            SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
            QTY: 180          Days Supply: 90
      Processing Status: Released locally on 03/07/08@08:55:32 (Window)
      Last Filled On: 11/08/06

-----
      Local Rx#: 2599
      Drug: FAMOTIDINE 20MG TAB (PROVIDER HOLD)
            SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
            QTY: 180          Days Supply: 90
      Processing Status: Released locally on 03/07/08@08:55:32 (Window)
      Last Filled On: 11/08/06

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

=====

Discontinue RX #2573 NIZATIDINE 150MG CAP? Y/N No

Press Return to Continue:

2580A            SUCRALFATE 1GM TAB            QTY: 360  
# OF REFILLS: 3    ISSUED: 03-12-08  
SIG: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY  
FILLED: 03-12-08  
ROUTING: WINDOW        PHYS: PSOPROVIDER,ONE

Edit renewed Rx ? Y// n NO

SC Percent: 80%  
Disabilities: NONE STATED

Was treatment for a Service Connected condition? NO//

## OneVA Pharmacy Processing within Patient Prescription Processing



**Note:** For information regarding OneVA Pharmacy processing, please see Appendix A, OneVA Pharmacy User Manual.

OneVA Pharmacy patch PSO\*7\*454 introduces new messaging to query the Health Data Repository/Clinical Data Services (HDR/CDS) Repository for prescriptions from other VA Pharmacy locations and displays them in the Medications Profile view. The new query will only execute if the patient has been treated at more than one VA Medical Center. The query retrieves all prescriptions associated with the patient from the repository, which requires additional time. To execute the HDR/CDS Repository query, the user must answer ‘YES’ to the ‘Would you like to query prescriptions from other OneVA Pharmacy locations?’ prompt. When the user responds ‘YES’ to the OneVA Pharmacy prompt, the system displays the OneVA Pharmacy Query Message.



The OneVA Pharmacy’s feature to query the HDR/CDS Repository will not execute if the patient has only one entry in the ‘TREATING FACILITY LIST file (#391.91)’.



The system identifies and queries the HDR/CDS Repository for all the prescriptions that are active, suspended, on hold, expired (within 120 days), or discontinued (within 120 days).



If the query connection to the HDR/CDS Repository fails, a message will display stating ‘The system is down or not responding. Could not query prescriptions at other VA Pharmacy locations. The user should press return to continue and contact local support if this problem persists.



When the system is down message displays, the VistA session will continue to display the local/dispensing sites prescriptions on the Medication Profile view. There will be no indication if a patient is registered or has prescriptions on other sites (i.e., remote site/OneVA Pharmacy prescriptions will not display on the Medication Profile view.)



If the patient does not have any prescription records from other VA Pharmacy locations, matching the search criteria, a message will display stating the “Patient found with no prescription records matching search criteria.”

### **Example: OneVA Pharmacy Processing**

```
Select PATIENT NAME: PSOPATIENT,SIX          2-13-61      666012136      NO
NSC VETERAN

No Patient Warnings on file for PSOPATIENT,SIX.

Press RETURN to continue...

PSOPATIENT,SIX (666-01-2136)
No Allergy Assessment!

Press Return to continue:

Would you like to query prescriptions from other OneVA Pharmacy
locations? //NO

Please wait. Checking for prescriptions at other VA Pharmacy locations. This may
take a moment...

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

Eligibility:
RX PATIENT STATUS: OUTPT NON-SC//
```

**OneVA Pharmacy Refill Example**

Medication Profile		Jul 27, 2016@10:11:28	Page:	1 of 1	
<NO ALLERGY ASSESSMENT>					
PSOPATIENT,SIX					
PID: 666-01-2136					
DOB: FEB 13,1961 (55)					
SEX: FEFEMALE					
CrCL: <Not Found> (CREAT: Not Found)					
Ht(cm) : _____ (_____)					
Wt(kg) : _____ (_____)					
BSA (m2) : _____					
#	RX #	DRUG	ISSUE QTY	LAST ST DATE REF	DAY FILL REM SUP
<No local prescriptions found.>					
-----DAYTSRH TEST LAB (984) ACTIVE-----					
1	2718861	CETIRIZINE HCL 10MG TAB	30	A 05-21 07-07	7 30
2	2718863	HYDRAZALAZINE HCL 25MG TAB	60	A 05-11 05-11	5 60
3	2718862	IBUPROFEN 800MG TAB	60	A 05-31 05-31	11 30

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

Select Action: Quit// SO Select Order  
Select Orders by number: (1-3): 3

REMOTE OP Medications (ACTIVE) Jul 27, 2016@10:12:37                    Page: 1 of 1  
PSOPATIENT,SIX                                <NO ALLERGY ASSESSMENT>  
PID: 666-01-2136                              Ht(cm): \_\_\_\_\_ (\_\_\_\_\_)  
DOB: FEB 13,1961 (55)                      Wt(kg): \_\_\_\_\_ (\_\_\_\_\_)  
SEX: FEFEMALE  
CrCL: <Not Found>                            BSA (m2): \_\_\_\_\_  
  
Site #: 984(DAYTSHR TEST LAB)  
Rx #: 2718862  
Drug Name: IBUPROFEN 800MG TAB  
Days Supply: 30  
Quantity: 60  
Refills: 11  
Expiration Date: 06/01/17  
Issue Date: 05/31/16  
Stop Date: 06/01/17  
Last Fill Date: 05/31/16  
Sig: TAKE ONE TABLET BY MOUTH TWICE A DAY AS NEEDED --TAKE WITH  
FOOD IF GI UPSET OCCURS/DO NOT CRUSH OR CHEW--

Enter ?? for more actions  
RF Refill Rx from Another VA Pharmacy PR Partial  
Select Action:Quit//  
  
Select Action:Quit// RF  
  
Select Action:Quit// RF Refill Rx from Another VA Pharmacy  
  
Remote site drug name: IBUPROFEN 800MG TAB  
Matching Drug Found for Dispensing: IBUPROFEN 800MG TAB  
Would you like to use the system matched drug for this  
refill/partial fill? NO//  
  
refill/partial fill? NO// YES

Processing refill request. Please be patient as it may take a moment  
for the host site to respond and generate your label data...

MESSAGE SENT TO TARGET VISTA; TIMED OUT AWAITING REPLY  
Press RETURN to continue:

Processing refill request. Please be patient as it may take a moment  
for the host site to respond and generate your label data...

Select LABEL DEVICE:

Select LABEL DEVICE: 0 DEC Windows

VAMC DAYTON, OH 45428-0415  
5 (REPRINT)

VAMC DAYTON, OH 45428-041

984 937-267-5325 (35783/ ) / ) 984 (35783/ ) JUL 27,2016@10:14:57	984 937-267-5325 (35783 Rx# 2718862 JUL 27,2016 Fill 2 of 12 Rx# 2718862 JUL 27,2016	
Rx# 2718862 JUL 27,2016 Fill 2 of 12 Rx# 2718862 JUL 27,2016 Fill 2 of 12	PSOPATIENT,SIX	
PSOPATIENT,SIX	PSOPATIENT,SIX	
TAKE ONE TABLET BY MOUTH TWICE A DAY AS NEEDED WICE A DAY AS NEEDED TAKE ONE TABLET BY MOUTH TWICE A DAY AS NEEDED		
--TAKE WITH FOOD IF GI UPSET OCCURS/DO NOT ET OCCURS/DO NOT --TAKE WITH FOOD IF GI UPSET OCCURS/DO NOT		
CRUSH OR CHEW-- CRUSH OR CHEW--		
GUIGLIA,MARY C	GUIGLIA,MARY C	
Qty: 60 TAB	Qty: 60 TAB	
IBUPROFEN 800MG TAB	IBUPROFEN 800MG TAB	
JUN 1,2017	Mfg _____ Lot# _____	10 Refills remain prior to
PO BOX 415	Tech _____ RPh _____	COPAY Days Supply: 30
DAYTON, OH 45428-0415		

**ADDRESS SERVICE REQUESTED**

Read FDA Med Guide

**\*\*\*DO NOT MAIL\*\*\***

Routing: WINDOW

Days supply: 30 Cap: SAFETY

PSOPATIENT,SIX  
n back of this form

Isd: MAY 31,2016 Exp: JUN 1,2017

\*Indicate address change o

Last Fill: 05/31/2016

[ ] Permanent

Pat. Stat ONSC Clinic: CINCI

[ ] Temporary until \_\_\_/\_\_\_/

DRUG WARNING 8,10,19

Signature \_\_\_\_\_

PSOPATIENT,SIX

PSOPATIENT,SIX

Rx# 2718862

IBUPROFEN 800MG TAB

Verified Allergies

DRUG WARNING:

ERAGES

DO NOT DRINK ALCOHOLIC BEV

n.

Non-Verified Allergies

when taking this medicatio

n you

size Verified Adverse Reactions

TAKE WITH FOOD OR MILK.

This is the same medicatio

size

have been getting. Color,

or shape may appear differ

ent.

-----  
Non-Verified Adverse Reactions  
-----

PSOPATIENT,SIX JUL 27, 20

16

Pharmacy Service (119)  
DAYTON  
P.O. BOX 415  
DAYTON, OH 45428-0415

Use the label above to mail the computer copies back to us. Apply enough postage to your envelope to ensure delivery.

The VA Notice of Privacy Practices, IB 10-163, which outlines your privacy rights, is available online at <http://www1.va.gov/Health/> or you may obtain a copy by writing the VHA Privacy Office (19F2), 810 Vermont Avenue NW, Washington, DC 20420.

Rx # 2718862 refilled.  
Press RETURN to continue:

Updating prescription order list...

OneVA Pharmacy Partial Example

Medication Profile		Jul 27, 2016@10:26:23	Page:	1 of 1
PSOPATIENT,SIX		<NO ALLERGY ASSESSMENT>		
PID:	666-01-2136	Ht(cm):	( )	
DOB:	FEB 13, 1961 (55)	Wt(kg):	( )	
SEX:	FEFEMALE	BSA (m2):		
CrCL:	<Not Found>		ISSUE	LAST REF DAY
#	RX #	DRUG	QTY	ST DATE FILL REM SUP
<No local prescriptions found.>				
-----DAYTSHR TEST LAB (984) ACTIVE-----				
1	2718861	CETIRIZINE HCL 10MG TAB	30	A 05-21 07-07 7 30
2	2718863	HYDRALAZINE HCL 25MG TAB	60	A 05-11 05-11 5 60
3	2718862	IBUPROFEN 800MG TAB	60	A 05-31 07-27 10 30

Enter ?? for more actions

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

**Select Action:Quit// PR Partial**

Remote site drug name: CETIRIZINE HCL 10MG TAB  
 Matching Drug Found for Dispensing: CETIRIZINE HCL 10MG TAB  
 Would you like to use the system matched drug for this  
 refill/partial fill? NO// YES  
 Enter Quantity: 10  
 DAYS SUPPLY: 10  
 Select PHARMACIST Name: COPE, THOMAS J// TJC 192 BAY PINES TEST LA  
 B  
 REMARKS: last refill lost

Processing partial fill request. Please be patient as it may take a moment  
 for the host site to respond and generate your label data...

Select LABEL DEVICE:

Select LABEL DEVICE: 0 DEC Windows

VAMC DAYTON, OH 45428-0415 5 (REPRINT) (PARTIAL) 984 937-267-5325 (35783/ ) / ) 984 (35783/ ) JUL 27, 2016@10:29:20 Rx# 2718861 JUL 27, 2016 Fill 2 of 9 Fill 2 of 9 Rx# 2718861 JUL 27, 2016 Fill 2 of 9 PSOPATIENT,SIX PSOPATIENT,SIX PSOPATIENT,SIX TAKE ONE TABLET BY MOUTH DAILY AILY TAKE ONE TABLET BY MOUTH DAILY	VAMC DAYTON, OH 45428-041 984 937-267-5325 (35783 Rx# 2718861 JUL 27, 2016 PSOPATIENT,SIX PSOPATIENT,SIX TAKE ONE TABLET BY MOUTH D AILY TAKE ONE TABLET BY MOUTH DAILY
--	---

GUIGLIA,MARY C Qty: 10 TAB CETIRIZINE HCL 10MG TAB MAY 22, 2017 PO BOX 415 DAYTON, OH 45428-0415	GUIGLIA,MARY C Qty: 10 TAB CETIRIZINE HCL 10MG TAB Mfg _____ Lot# _____ Tech _____ RPh _____	GUIGLIA,MARY C Qty: 10 TAB CETIRIZINE HCL 10MG TAB 7 Refills remain prior to Days Supply: 10
---	--	--

ADDRESS SERVICE REQUESTED

\*\*\*DO NOT MAIL\*\*\*

Routing: WINDOW

Days supply: 10 Cap: SAFETY

Isd: MAY 21, 2016 Exp: MAY 22, 2017

PSOPATIENT,SIX \*Indicate address change o  
 n back of this form Last Fill: 05/23/2016

Pat. Stat ONSC Clinic: CINCI  
DRUG WARNING 1,8

[ ] Permanent  
[ ] Temporary until \_\_\_/\_\_\_/

Signature \_\_\_\_\_

PSOPATIENT,SIX

PSOPATIENT,SIX

Rx# 2718861

Verified Allergies

CETIRIZINE HCL 10MG TAB

DRUG WARNING:

-MAY CAUSE DROWSINESS-

effect. Non-Verified Allergies

Alcohol may intensify this

-----  
USE CARE when driving or

achinery.

ERAGES Verified Adverse Reactions

when operating dangerous m

n.

DO NOT DRINK ALCOHOLIC BEV

when taking this medicatio

Non-Verified Adverse Reactions

-----  
PSOPATIENT,SIX JUL 27, 20

16

Pharmacy Service (119)  
DAYTON  
P.O. BOX 415  
DAYTON, OH 45428-0415

Use the label above to mail the computer  
copies back to us. Apply enough postage  
to your envelope to ensure delivery.

The VA Notice of Privacy Practices, IB 10-163, which outlines your privacy  
rights, is available online at <http://www1.va.gov/Health/> or you may obtain  
a copy by writing the VHA Privacy Office (19F2), 810 Vermont Avenue NW,  
Washington, DC 20420.

Partial complete for RX #2718861.  
Press RETURN to continue:

Updating prescription order list...

Medication Profile Jul 27, 2016@10:31:11 Page: 1 of 1  
PSOPATIENT,SIX <NO ALLERGY ASSESSMENT>  
PID: 666-01-2136 Ht(cm): \_\_\_\_\_ (\_\_\_\_\_)  
DOB: FEB 13,1961 (55) Wt(kg): \_\_\_\_\_ (\_\_\_\_\_)  
SEX: FEFEMALE  
CrCL: <Not Found> BSA (m2): \_\_\_\_\_  
# RX # DRUG ISSUE LAST REF DAY  
QTY ST DATE FILL REM SUP  
<No local prescriptions found.>  
-----DAYTSRH TEST LAB (984) ACTIVE-----  
1 2718861 CETIRIZINE HCL 10MG TAB 30 A 05-21 07-07 7 30  
2 2718863 HYDRALAZINE HCL 25MG TAB 60 A 05-11 05-11 5 60  
3 2718862 IBUPROFEN 800MG TAB 60 A 05-31 07-27 10 30

Enter ?? for more actions  
PU Patient Record Update NO New Order  
PI Patient Information SO Select Order  
Select Action: Quit//  
Medication Profile Jul 28, 2016@05:20:23 Page: 1 of 3  
PSOPATIENT,SIX <NO ALLERGY ASSESSMENT>  
PID: 666-01-2136 Ht(cm): \_\_\_\_\_ (\_\_\_\_\_)  
DOB: FEB 13,1961 (55) Wt(kg): \_\_\_\_\_ (\_\_\_\_\_)  
SEX: FEMALE  
CrCL: <Not Found> BSA (m2): \_\_\_\_\_  
# RX # DRUG ISSUE LAST REF DAY  
QTY ST DATE FILL REM SUP  
-----ACTIVE-----  
1 10000126 FLUTICAS 100/SALMETEROL 50 INHL DISK 60 E> 06-01 02-02 11 45  
Qty: 2  
2 10000128 NIACIN 250MG TAB 270 S> 06-08 08-27 2 90  
3 10000122 RAMIPRIL 5MG CAP 30 A> 05-31 05-31 8 30  
-----DISCONTINUED-----  
4 10000125 HYDROCHLOROTHIAZIDE 25MG TAB 60 DC>02-01 02-02 5 60  
-----HOLD-----  
5 10000127 LISINOPRIL 2.5MG TAB 90 H> 03-10 - 3 90  
-----DAYTON (552) ACTIVE-----  
+ Enter ?? for more actions  
PU Patient Record Update NO New Order  
PI Patient Information SO Select Order



**Note:** Patient's prescription that originated from another VA Pharmacy location will deny the request for a prescription refill to be completed if it is requested "too soon" after the last refill so that prescriptions are not over-distributed.

**Unable to complete transaction.**

**Cannot refill Rx# 763026. Next possible fill date is 11/9/2017**

## Duplicate Drug Order Check

The Duplicate Drug warning displays the following information for a local or remote outpatient medication order:

### Example: Local Rx

Duplicate Drug in Local Rx:

Rx #: 2608  
Drug: ASPIRIN 81MG EC TAB  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
QTY: 30 Refills remaining: 11  
Provider: PSOPROVIDER,TEN Issued: 03/24/08  
Status: Active Last filled on: 03/24/08  
Processing Status: Released locally on 3/24/08@08:55:32 (Window)  
Days Supply: 30

### Example: Remote Rx

Duplicate Drug in Remote Rx:

LOCATION NAME: <NAME OF FACILITY>  
Rx #: 2608  
Drug: ASPIRIN 81MG EC TAB  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
QTY: 30 Refills remaining: 11  
Provider: PSOPROVIDER,TEN Issued: 03/24/08  
Status: Active Last filled on: 03/24/08  
Days Supply: 30

## Duplicate Drug Order Check for Pending Orders:

### Example: Pending Order

DUPLICATE DRUG in a Pending Order for:

Drug: ALLOPURINOL 300MG TAB  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
QTY: 180 # of Refills: 3  
Provider: PSOPROVIDER,TEN Issue Date: 03/24/08@14:44:15  
Provider Comments: <only if data present>

## Duplicate Drug order check for Non-VA Medications

### Example: Non-VA Med Order

Duplicate Drug in a Non-VA Med Order for

Drug: Cimetidine 300MG TAB  
SIG: 300MG

Schedule: AT BEDTIME  
Medication Route: MOUTH  
Start Date: <NOT ENTERED> CPRS Order #: 13554  
Documented By: PSOPROVIDER,TEN on Mar 24, 2008@14:44:15

### Duplicate Drug Order Check business rules:

- If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO, the system will not prompt a clerk (no PSORPH key) to discontinue the order when a Duplicate Drug order check occurs.
- If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO, and a new order is being entered by a clerk (no PSORPH key) via the pharmacy backdoor, the order being processed will be deleted by the system immediately after the duplicate drug warning is displayed.
- If the duplicate drug is a remote order, the system will allow the clerk to process the new order after the display of the duplicate drug warning.
- If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO, and a clerk (no PSORPH key) is finishing a pending order:
  - When the VERIFICATION outpatient site parameter is set to YES and the duplicate drug is a local order, the system will return the user back to the detailed order ListMan display with the available actions of Accept/Edit/Discontinue.
  - When the VERIFICATION outpatient site parameter is set to YES and the duplicate drug is a remote order
    - A duplicate drug warning will be displayed
    - The clerk will be allowed to finish the order
    - The finished order will have a status of non-verified
  - When the VERIFICATION outpatient site parameter is set to NO, the clerk will not be allowed to finish the order,
  - If the DRUG CHECK FOR CLERK outpatient site parameter is set to Yes, a clerk (no PSORPH key) will see the same discontinue prompts as a pharmacist,
- If the VERIFICATION outpatient site parameter is set to YES when reinstating an order, no duplicate message will be displayed and the reinstated order will have a non-verified status.
- No discontinuation prompt will be displayed for a duplicate Non-VA medication order in any situation.

After the Duplicate Drug warning is displayed, the system will ask the user if they wish to discontinue the order.

### Active Order

Discontinue RX #2580A SUCRALFATE 1GM TAB? Y/N

## **Pending Order**

Discontinue Pending Order for ALLOPURINOL 300MG? Y/N

If the user chooses not to discontinue the displayed order when entering a new order via the pharmacy backdoor, the system will delete the order being entered (prospective drug).

If the user chooses not to discontinue the displayed order when finishing a pending order, the system will redisplay the pending order and prompt them to accept, edit or discontinue the order.

If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO, and if the clerk (no PSORPH key) is copying an order, the system will return them back to the detailed order ListMan display where the copy action was initiated.

If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO and the VERIFICATION outpatient site parameter is set to YES when a clerk (no PSORPH key) is reinstating a discontinued order for a medication for which an active local order exists, the system will delete the active order and reinstate the discontinued order.

If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO and the VERIFICATION outpatient site parameter is set to NO when a clerk is reinstating a discontinued order for a medication for which an active local order exists, the system will display a duplicate drug warning, but the order will not be reinstated.

If the DRUG CHECK FOR CLERK outpatient site parameter is set to YES or NO and the VERIFICATION outpatient site parameter is set to NO when a clerk is reinstating a discontinued order for a medication for which a remote order exists, the system will display a duplicate drug warning and the reinstated order will be assigned an active status.

If the DRUG CHECK FOR CLERK outpatient site parameter is set to YES or NO and the VERIFICATION outpatient site parameter is set to YES when a clerk is reinstating a discontinued order, the system will not display a duplicate drug warning and the reinstated order will be assigned a non-verified status.

If a duplicate drug warning is displayed for a medication order, it will not be included in a duplicate therapy order check.

The following examples illustrate the conditions described above.

### **Example: Duplicate Pending Order**

```
Pending OP Orders (ROUTINE) Mar 24, 2008@13:52:04 Page: 1 of 2
PSOPATIENT, FOUR <NO ALLERGY ASSESSMENT>
PID: 000-00-0000 Ht (cm): 168.91 (04/11/2006)
DOB: MAY 20, 1966 (41) Wt (kg): 68.18 (09/06/2006)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95

Order Checks:
  Duplicate drug order: ASPIRIN TAB,EC 325MG TAKE ONE TABLET BY MOUTH EVERY
  MORNING [ACTIVE]
  Overriding Provider: PSOPROVIDER,TEN
  Overriding Reason: TESTING DUPLICATE THERAPY FUNCTIONALITY

*(1) Orderable Item: ASPIRIN TAB,EC
(2) Drug: ASPIRIN 325MG EC TAB <DIN>
      NDC: 33261-0153-14
(3) *Dosage: 325 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: TABLET
      *Route: ORAL
      *Schedule: QAM
+ Enter ?? for more actions
BY Bypass DC Discontinue
ED Edit FN Finish
Select Item(s): Next Screen// FN Finish
```

---

Duplicate Drug in Local Rx:

```
RX #: 2603
Drug: ASPIRIN 325MG EC TAB
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
QTY: 30 Refills remaining: 11
Provider: PSOPROVIDER,TEN Issued: 03/24/08
Status: Active Last filled on: 03/24/08
Processing Status: Released locally on 3/24/08@08:55:32 (Window)
Days Supply: 30
```

---

Discontinue RX #2603 ASPIRIN 325MG EC TAB? Y/N NO -Prescription was not discontinued...

```
Pending OP Orders (ROUTINE) Mar 24, 2008@13:52:45 Page: 1 of 2
PSOPATIENT, FOUR <NO ALLERGY ASSESSMENT>
PID: 000-00-0000 Ht (cm): 168.91 (04/11/2006)
DOB: MAY 20, 1966 (41) Wt (kg): 68.18 (09/06/2006)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95

Order Checks:
  Duplicate drug order: ASPIRIN TAB,EC 325MG TAKE ONE TABLET BY MOUTH EVERY
```

```

MORNING [ACTIVE]
Overriding Provider: PSOPROVIDER,TEN
Overriding Reason: TESTING DUPLICATE THERAPY FUNCTIONALITY

*(1) Orderable Item: ASPIRIN TAB,EC
(2) Drug: ASPIRIN 325MG EC TAB <DIN>
      NDC:33261-0153-14
(3) *Dosage: 325 (MG)
      Verb: TAKE
Dispense Units: 1
      NOUN: TABLET
      *Route: ORAL
      *Schedule: QAM
+ Enter ?? for more actions
AC Accept          ED Edit          DC Discontinue
Select Item(s): Next Screen//  

.  

OR

Discontinue RX #2603 ASPIRIN 325MG EC TAB? Y/N YES

RX #2603 ASPIRIN 325MG EC TAB will be discontinued after the acceptance of the new
order.

Rx # 2604          03/24/08
PSOPATIENT,FOUR          #30
TAKE ONE TABLET BY MOUTH EVERY MORNING

ASPIRIN 325MG EC TAB          PSOPHARMACIST,ONE
PSOPROVIDER,TEN
# of Refills: 11

SC Percent: 100%
Disabilities: NONE STATED

Was treatment for a Service Connected condition? YES// YES
Are you sure you want to Accept this Order? NO// YES
WAS THE PATIENT COUNSELED: NO// NO

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

-Duplicate Drug Rx #2603 ASPIRIN 325MG EC TAB has been discontinued...

Press Return to Continue:

```

### **Example: New Order Entry Backdoor – Duplicate Drug**

```

Eligibility: SERVICE CONNECTED 50% to 100%      SC%: 100
RX PATIENT STATUS: OPT NSC//  

DRUG: aspirin
  Lookup: DRUG  GENERIC NAME
    1  ASPIRIN 325MG EC TAB      CN103
    2  ASPIRIN 325MG SUPPOSITORY      CN103
    3  ASPIRIN 325MG TAB      CN103
    4  ASPIRIN 650MG/BUTALBITAL 50MG TAB      CN103
    5  ASPIRIN 81MG EC TAB      CN103
Press <RETURN> to see more, '^' to exit this list, '^^' to exit all lists, OR
CHOOSE 1-5: 1  ASPIRIN 325MG EC TAB      CN103
  Restriction/Guideline(s) exist.  Display? : (N/D): No// NO
-----
Duplicate Drug in Local Rx:

```

RX #: 2604  
Drug: ASPIRIN 325MG EC TAB  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
QTY: 30 Refills remaining: 11  
Provider: PSOPROVIDER,TEN Issued: 03/24/08  
Status: Active Last filled on: 03/24/08  
Processing Status: Released locally on 3/24/08@08:55:32 (Window)  
Days Supply: 30

---

Discontinue RX #2604 ASPIRIN 325MG EC TAB? Y/N NO -Prescription was not discontinued...

RX DELETED

OR

Discontinue RX #2604 ASPIRIN 325MG EC TAB? Y/N YES

RX #2604 ASPIRIN 325MG EC TAB will be discontinued after the acceptance of the new order.

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

VERB: TAKE

There are 2 Available Dosage(s):

1. 325MG
2. 650MG

Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list: 1 325MG

You entered 325MG is this correct? Yes// YES

VERB: TAKE

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

Dosage Ordered: 325MG

NOUN: TABLET

ROUTE: PO// ORAL PO MOUTH

Schedule: BID

Now searching ADMINISTRATION SCHEDULE (#51.1) file...

BID BID TWICE A DAY  
...OK? Yes// (Yes)

(TWICE A DAY)

LIMITED DURATION (IN DAYS, HOURS OR MINUTES):

CONJUNCTION:

PATIENT INSTRUCTIONS:

(TAKE ONE TABLET BY MOUTH TWICE A DAY)

DAYS SUPPLY: (1-90): 30//

QTY ( TAB ) : 60// 60

COPIES: 1// 1

# OF REFILLS: (0-11): 11//

PROVIDER: PSOPROVIDER,TEN

CLINIC:

MAIL/WINDOW: WINDOW// WINDOW

METHOD OF PICK-UP:  
REMARKS:  
ISSUE DATE: TODAY// (MAR 24, 2008)  
FILL DATE: (3/24/2008 - 3/25/2009): TODAY// (MAR 24, 2008)  
Nature of Order: WRITTEN// W  
WAS THE PATIENT COUNSELED: NO// NO

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

Rx # 2605 03/24/08  
PSOPATIENT, FOUR #60  
TAKE ONE TABLET BY MOUTH TWICE A DAY

ASPIRIN 325MG EC TAB  
PSOPROVIDER, TEN PSOPHARMACIST, ONE  
# of Refills: 11

SC Percent: 100%  
Disabilities: NONE STATED

Was treatment for a Service Connected condition? n NO  
Is this correct? YES//

-Duplicate Drug RX #2604 ASPIRIN 325MG EC TAB has been discontinued...

Another New Order for PSOPATIENT, FOUR? YES//

### **Example: Clerk Entering New Order via Backdoor – Drug Check for Clerk Parameter set to No**

PI Patient Information SO Select Order  
Select Action: Quit// NO New Order

Eligibility: SERVICE CONNECTED 50% to 100% SC%: 100  
RX PATIENT STATUS: OPT NSC//  
DRUG: ASPIRIN 81  
Lookup: GENERIC NAME  
ASPIRIN 81MG EC TAB CN103  
...OK? Yes// (Yes)

Duplicate Drug in Local Rx:

Rx #: 2608  
Drug: ASPIRIN 81MG EC TAB  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
QTY: 30 Refills remaining: 11  
Provider: PSOPROVIDER, TEN Issued: 03/24/08  
Status: Active Last filled on: 03/24/08  
Processing Status: Released locally on 3/24/08@08:55:32 (Window)  
Days Supply: 30

RX DELETED

Another New Order for PSOPATIENT, FOUR? YES//

### **Example: Clerk Entering New Order via Backdoor – Drug Check for Clerk Parameter set to No – Duplicate Drug – Discontinued Status**

Eligibility: SERVICE CONNECTED 50% to 100% SC%: 100  
 RX PATIENT STATUS: OPT NSC//  
 DRUG: ASPIRIN  
 Lookup: GENERIC NAME  
 1 ASPIRIN 325MG EC TAB CN103  
 2 ASPIRIN 325MG SUPPOSITORY CN103  
 3 ASPIRIN 325MG TAB CN103  
 4 ASPIRIN 650MG/BUTALBITAL 50MG TAB CN103  
 5 ASPIRIN 81MG EC TAB CN103  
 Press <RETURN> to see more, '^' to exit this list, '^^' to exit all lists, OR  
 CHOOSE 1-5: 1 ASPIRIN 325MG EC TAB CN103  
 Restriction/Guideline(s) exist. Display? : (N/D): No// NO

---

Duplicate Drug in Local Rx:

Rx #: 2605A  
 Drug: ASPIRIN 325MG EC TAB  
 SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY  
 QTY: 60 Refills remaining: 11  
 Provider: PSOPROVIDER,TEN Issued: 03/24/08  
 Status: Discontinued (Edit) Last filled on: 03/24/08  
 Processing Status: Released locally on 3/24/08@08:55:32 (Window)  
 Days Supply: 30

---

Press Return to Continue: .

### **Example: Clerk Finishing Pending Order – Drug Check for Clerk parameter set to No**

ED (Edit) FN Finish  
 Pending OP Orders (ROUTINE) Mar 24, 2008@14:35:21 Page: 1 of 3  
 PSOPATIENT,FOUR <NO ALLERGY ASSESSMENT>  
 PID: 000-00-0000 Ht(cm): 168.91 (04/11/2006)  
 DOB: MAY 20,1966 (41) Wt(kg): 68.18 (09/06/2006)  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95  
  
 CPRS Order Checks:  
 Duplicate drug order: ASPIRIN TAB,EC 81MG TAKE ONE TABLET BY MOUTH EVERY MORNING [ACTIVE]  
 Overriding Provider: PSOPROVIDER,TEN  
 Overriding Reason: TESTING  
  
 Duplicate drug class order:(ASPIRIN TAB,EC 325MG TAKE ONE TABLET BY MOUTH EVERY MORNING [UNRELEASED])  
 Overriding Provider: PSOPROVIDER,TEN  
 Overriding Reason: TESTING  
  
 \*(1) Orderable Item: ASPIRIN TAB,EC  
 (2) Drug: ASPIRIN 81MG EC TAB  
 NDC: 33261-0153-14  
 (3) \*Dosage: 81 (MG)  
 + Enter ?? for more actions  
 BY Bypass DC (Discontinue)  
 ED (Edit) FN Finish  
 Select Item(s): Next Screen// FN Finish

---

Duplicate Drug in Local Rx:

Rx #: 2608  
 Drug: ASPIRIN 81MG EC TAB  
 SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING

QTY: 30 Refills remaining: 11  
 Provider: PSOPROVIDER,TEN Issued: 03/24/08  
 Status: Active Last filled on: 03/24/08  
 Processing Status: Released locally on 3/24/08@08:55:32 (Window)  
 Days Supply: 30

---

Pending OP Orders (ROUTINE) Mar 24, 2008@14:35:25 Page: 1 of 3  
 PSOPATIENT, FOUR <NO ALLERGY ASSESSMENT>  
 PID: 000-00-0000 Ht (cm): 168.91 (04/11/2006)  
 DOB: MAY 20, 1966 (41) Wt (kg): 68.18 (09/06/2006)  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95

CPRS Order Checks:

Duplicate drug order: ASPIRIN TAB,EC 81MG TAKE ONE TABLET BY MOUTH EVERY MORNING [ACTIVE]  
 Overriding Provider: PSOPROVIDER,TEN  
 Overriding Reason: TESTING

Duplicate drug class order: NON-OPIOID ANALGESICS (ASPIRIN TAB,EC 325MG TAKE ONE TABLET BY MOUTH EVERY MORNING [UNRELEASED])  
 Overriding Provider: PSOPROVIDER,TEN  
 Overriding Reason: TESTING

\*(1) Orderable Item: ASPIRIN TAB,EC  
 (2) Drug: ASPIRIN 81MG EC TAB  
 NDC: 00056-0176-75  
 (3) \*Dosage: 81 (MG)  
 + Enter ?? for more actions  
 AC Accept ED Edit DC Discontinue  
 Select Item(s): Next Screen// DC Discontinue

Nature of Order: SERVICE CORRECTION// S

Requesting PROVIDER: PSOPROVIDER,TEN// LBB 119  
 Comments: Per Pharmacy Request Replace

Press Return to :

PI Patient Information SO Select Order

PU Patient Record Update NO New Order  
 PI Patient Information SO Select Order  
 Select Action: Quit// 2

Medication Profile Mar 24, 2008@14:36:28 Page: 1 of 1  
 PSOPATIENT, FOUR <NO ALLERGY ASSESSMENT>  
 PID: 000-00-0000 Ht (cm): 168.91 (04/11/2006)  
 DOB: MAY 20, 1966 (41) Wt (kg): 68.18 (09/06/2006)  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95

# RX #	DRUG	ISSUE QTY	LAST ST	REF DATE	DAY FILL	REM SUP
-----ACTIVE-----						
1 2608	ASPIRIN 81MG EC TAB	30	A	03-24	03-24	11 30
-----NON-VERIFIED-----						
2 2609	ASPIRIN 325MG EC TAB	30	N	03-24	03-24	5 30

### **Example: Duplicate with Non-VA Med – No Action Required**

```
DRUG: CIMETIDINE
  Lookup: GENERIC NAME
    1  CIMETIDINE 100MG TAB      GA301
    2  CIMETIDINE 200MG TAB      GA301
    3  CIMETIDINE 300MG TAB      GA301      90 DAY SUPPLY
    4  CIMETIDINE 400MG TAB      GA301
    5  CIMETIDINE 800MG TAB      GA301
CHOOSE 1-5: 3  CIMETIDINE 300MG TAB      GA301      90 DAY SUPPLY
```

Duplicate Drug in a Non-VA Med Order for

```
Drug: CIMETIDINE 300MG TAB
SIG: 300MG
Schedule: AT BEDTIME
Medication Route: MOUTH
Start Date:          CPRS Order #: 13554
Documented By: PSOPROVIDER,TEN on Mar 24, 2008@14:44:15
```

Press Return to Continue:

VERB: TAKE  
There are 2 Available Dosage(s):  
1. 300MG  
2. 600MG

Select from list of Available Dosages (1-2), Enter Free Text Dose  
or Enter a Question Mark (?) to view list: 1 300MG

You entered 300MG is this correct? Yes//

### **Example: Duplicate Drug with Pending Order**

```
Another New Order for PSOPATIENT,FOUR? YES//
```

Eligibility: SERVICE CONNECTED 50% to 100% SC%: 100

RX PATIENT STATUS: OPT NSC//

DRUG: ALLOPURINOL

```
  Lookup: GENERIC NAME
    1  ALLOPURINOL 100MG TAB      MS400
    2  ALLOPURINOL 300MG TAB      MS400
CHOOSE 1-2: 2  ALLOPURINOL 300MG TAB      MS400
```

DUPLICATE DRUG in a Pending Order for:

```
Drug: ALLOPURINOL 300MG TAB
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
QTY: 180          # of Refills: 3
Provider: PSOPROVIDER,TEN      Issue Date: 03/24/08@14:44:15
```

Discontinue Pending Order for ALLOPURINOL 300MG? Y/N YES

Pending Order for ALLOPURINOL 300MG will be discontinued after the acceptance of  
the new order.

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

VERB: TAKE

There are 2 Available Dosage(s):

1. 300MG
2. 600MG

Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list: 1 300MG

You entered 300MG is this correct? Yes// YES

VERB: TAKE

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

Dosage Ordered: 300MG

NOUN: TABLET

ROUTE: PO// ORAL PO MOUTH

Schedule: QAM

Now searching ADMINISTRATION SCHEDULE (#51.1) file...

QAM QAM EVERY MORNING

...OK? Yes// (Yes)

(EVERY MORNING)

LIMITED DURATION (IN DAYS, HOURS OR MINUTES):

CONJUNCTION:

PATIENT INSTRUCTIONS:

(TAKE ONE TABLET BY MOUTH EVERY MORNING)

DAYS SUPPLY: (1-90): 30//

QTY ( TAB ) : 30// 30

COPIES: 1// 1

# OF REFILLS: (0-11): 11//

PROVIDER: PSOPROVIDER,TEN

CLINIC:

MAIL/WINDOW: WINDOW// WINDOW

METHOD OF PICK-UP:

REMARKS:

ISSUE DATE: TODAY// (MAR 24, 2008)

FILL DATE: (3/24/2008 - 3/25/2009): TODAY// (MAR 24, 2008)

Nature of Order: WRITTEN// W

Rx # 2610 03/24/08

PSOPATIENT,FOUR #30

TAKE ONE TABLET BY MOUTH EVERY MORNING

ALLOPURINOL 300MG TAB

PSOPROVIDER,TEN PSOPHARMACIST,ONE

# of Refills: 11

SC Percent: 100%

Disabilities: NONE STATED

Was treatment for a Service Connected condition? y YES

Is this correct? YES//

- Duplicate Drug Pending Order for ALLOPURINOL 300MG has been discontinued...

### **Example: Copying an Existing Order**

RN Renew

Select Action: Next Screen// CO CO

OP Medications (ACTIVE) Mar 12, 2008@09:15:48 Page: 1 of 2  
PSOPATIENT, TWO  
PID: 000-00-0000 Ht(cm): 182.88 (04/13/2005)  
DOB: JAN 1,1945 (63) Wt(kg): 77.27 (04/13/2005)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95

Rx #: 2584\$  
(1) \*Orderable Item: AMLODIPINE/ATORVASTATIN TAB  
(2) Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB  
NDC: 00056-0176-75  
Verb: TAKE  
(3) \*Dosage: ONE TABLET  
\*Route: ORAL  
\*Schedule: QAM  
(4) Pat Instructions:  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
+ Enter ?? for more actions

AC Accept ED Edit

New OP Order (COPY) Mar 12, 2008@09:15:48 Page: 1 of 2  
PSOPATIENT, TWO  
PID: 000-00-0000 Ht(cm): 182.88 (04/13/2005)  
DOB: JAN 1,1945 (63) Wt(kg): 77.27 (04/13/2005)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95

Orderable Item: AMLODIPINE/ATORVASTATIN TAB  
(1) Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB  
(2) Patient Status: OPT NSC  
(3) Issue Date: MAR 12,2008 (4) Fill Date: MAR 12,2008  
Verb: TAKE  
(5) Dosage Ordered: ONE TABLET  
Route: ORAL  
Schedule: QAM  
(6) Pat Instruction:  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
(7) Days Supply: 30 (8) QTY ( ): 30  
(9) # of Refills: 11 (10) Routing: WINDOW  
(11) Clinic:  
(12) Provider: PSOPROVIDER,ONE (13) Copies: 1  
+ Enter ?? for more actions

AC Accept ED Edit

Select Action: Next Screen// AC Accept

Duplicate Drug in Local RX:

Rx #: 2584  
Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
QTY: 30 Refills remaining: 11  
Provider: OPPROVIDER, ONE Issued: 03/12/07  
Status: ACTIVE Last filled on: 03/12/07  
Processing Status: Released locally on 3/12/07@08:55:32 (Window)  
Days Supply: 30

Discontinue Rx #2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB? Y/N YES

Rx #2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB will be discontinued after the acceptance of the new order.

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

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

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

Rx # 2585 03/12/08 PSOPATIENT, TWO T #30  
TAKE ONE TABLET BY MOUTH EVERY MORNING

AMLODIPINE 5MG/ATORVASTATIN 10MG TAB  
PSOPROVIDER, ONE PSOPHARMACIST, ONE  
# of Refills: 11

SC Percent: 40%  
Disabilities: NONE STATED

Was treatment for Service Connected condition? NO//

Is this correct? YES// ...

Duplicate Drug Rx #2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB has been discontinued...

The CPRS Auto Refill field can be updated using the *Pharmacy Systems Parameter Edit* [PSS MGR] option. This parameter works in conjunction with the PSOUATRF security key.

- When the CPRS Auto Refill field is set to YES and the PSOAUTRF security key has been assigned to at least one user, all refills placed in CPRS by the provider are processed and suspended with the next fill date and all routing is set to Mail automatically.
- When the CPRS Auto Refill field is set to NO or if the PSOAUTRF security key is not assigned, the manual refill process is required.

If the auto refill process fails, the order will not be processed and will require manual refilling. A MailMan message will be sent to the holders of the PSOAUTRF key describing the reason for not filling the auto refill. All of the refill activity, manual or automatic, is recorded in the Activity Log entry notes.

With Patch PSO\*7\*233, when a name is selected, if the patient's address is flagged with a Bad Address Indicator, a warning message is displayed. If the user has proper authorization (i.e., the PSO SITE parameter "EDIT PATIENT DATA" is set to Yes or the user holds the new PSO ADDRESS UPDATE security key), a prompt appears asking if the user wants to update the address. Also, for the *Patient Prescription Processing, Complete Orders from OERR, and Action*

*Profile (132 COLUMN PRINTOUT)* options, if a temporary address has no end date, the following text is now displayed: "(Temp address from XXX 99,999 till (no end date))".

Following the installation of patches PSO\*7\*207 and OR\*3\*238 (Remote Data Interoperability (RDI) trigger patch), order checks will be made using additional data from the Health Data Repository Interim Messaging Solution (HDR-IMS) and the HDR-Historical (HDR-Hx). This will contain both Outpatient orders from other VAMCs as well as from Department of Defense (DoD) facilities, if available. All remote prescription statuses will be included in order checking for a new order being processed from within backdoor outpatient pharmacy and for new orders being placed by CPRS or by Inpatient Medications. Any remote Outpatient order that has been expired or discontinued for 30 days or less will be included in the list of medications to be checked.

The check for remote data availability is performed upon entering the patient's profile, rather than on each order, to ensure that both remote data and local data are used for order checking.



Once the above patches have been installed, a new comment for remote order checks, "Now doing remote order checks. Please wait..." has been added to the screen. The previous comment, "Now doing order checks. Please wait..." is replaced by: "Now doing drug interaction and allergy checks. Please wait..."

The following will not be included in order checks (after patch PSO\*7\*243):

- Prescriptions with a status of "DELETED" in the STATUS field in the PRESCRIPTION file from a remote facility.
- Prescriptions with a missing expiration date, unless the ISSUE DATE field of the PRESCRIPTION file is within the past year.

Remote order checking added (after patch PSO\*7\*243):

- For drug class when orders are placed for locally defined drugs.
- Allergy Analgesic class order checks only match against the specific 5-character class if the class begins with "CN10".

If for any reason remote order checks cannot be performed, the following message displays:

Remote data not available - Only local order checks processed.



For remote order checking, if the remote order does not have a VA PRODUCT file VUID, then it will not be included in drug-drug order checks. However, future patches

are planned to send/receive the drug class to the HDR, and then it will be possible to use non-standardized remote orders for duplicate drug class checks.

When an order is an ePharmacy order (determined to be third party billable), the billing data is sent to the Electronic Claims Management Engine (ECME) when an order is finished. ECME sends a message back to Outpatient Pharmacy displaying the status of the claim. This message displays for new, edited, copied, and renewed ePharmacy orders.

```
Is this correct? YES// <Enter>
-Rx 100003869A has been discontinued...

Veteran Prescription 100003919 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
E PAYABLE
```

## Titration

Introduced in PSO\*7\*313, the user has the ability to mark prescriptions as 'Titration to Maintenance' when finishing prescriptions from CPRS as well as via the Patient Prescription Processing [PSO LM BACKDOOR ORDERS] option by invoking the new hidden action 'TM' - Mark Rx as Titration. This action will result in preventing the following actions to be taken on the prescription: Refill, Renewal (including via CPRS), and Copy and editing of any field that requires a new Rx to be created. This action will also set the new field TITRATION RX FLAG (#45.3) in the PRESCRIPTION File (#52) as well as the new field TITRATION DOSE RX (#45.1) in the PRESCRIPTION File (#52). Prescriptions that are marked as Titration/Maintenance will have the letter 't' postfix to the RX # as seen below (entry #1):

#	RX #	DRUG	ISSUE QTY	LAST ST	REF DATE	DAY FILL	REM	DAY SUP
-----ACTIVE-----								
1	100005024t	AMOXAPINE 50MG TAB	30	S	09-26	09-26	2	30
2	100005022	AMOXICILLIN 250MG CAP	30	A	08-18	08-18	11	30
3	100005035	KALETRA	3	A	09-29	09-29	0	3



Note: A prescription can be unmarked as Titration/Maintenance by invoking the same TM action on an already marked prescription.



**Note:** With the release of PSO\*7\*505, the 'Titration and Maintenance' functionality is blocked for all controlled substance prescriptions.

There is also a new hidden action in the Patient Prescription Processing [PSO LM BACKDOOR ORDERS] option called TR (Convert Titration Rx). This action populates the MAINTENANCE DOSE RX (#45.2) field in the PRESCRIPTION File (#52). When a titration to maintenance prescription needs to be refilled so the patient can continue on the Maintenance Dose, this option allows users to create a new prescription with the maintenance dose only. The process works similar to copying an existing prescription; however, it can only be used on prescriptions with the following characteristics:

- Rx is a complex order with a THEN conjunction
- Rx is released
- Rx status is ACTIVE
- Rx does not have refills previously ordered
- Rx # Of Refills is greater than 0 (zero)

Before the new Maintenance Rx can be accepted, the user is prompted to validate the QTY field for the new Rx, which may or may not be automatically re-calculated. Only the last dose from the original prescription is carried over to the new Maintenance Rx, and the # of Refills field is decreased by 1 because the new Maintenance Rx counts as a fill. Once the user verifies the information for the Maintenance Rx is accurate, they can accept the Maintenance Rx. This action will trigger a Duplicate Drug check against the original complex order, which must be discontinued before the new Maintenance Rx can be accepted.

After the new Maintenance Rx is accepted, it will have the new indicator 'm' on the right side of the Rx # in the patient's Medication Profile as seen below (entry #1):

#	RX #	DRUG	ISSUE LAST REF DAY					
			QTY	ST	DATE	FILL	REM	SUP
-----ACTIVE-----								
1	100005436m	AMOXAPINE 50MG TAB	30	S	09-26	09-26	1	30
2	100005022	AMOXICILLIN 250MG CAP	30	A	08-18	08-18	11	30
3	100005035	KALETRA	3	A	09-29	09-29	0	3
:								

## 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 one of the hidden actions is selected and it is invalid, a message will display in the message window.

### **Example: Entering a New Order**

```
Select Option: RX (Prescriptions)

Orders to be completed for all divisions: 14

Do you want an Order Summary? No//
```

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 ...
Check Drug Interaction
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: OPPATIENT16,ONE OPPATIENT16,ONE 4-3-41 000246802
YES SC VETERAN
Patient is enrolled to receive ScripTalk 'talking' prescription labels.

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

A detailed explanation of the different parts of the screen can be found under "List Manager Options" at the beginning of this manual. The Patient Information screen displays the information on two pages. Only the second screen is shown in this example.

### **Example: Entering a New Order (continued)**

```
Patient Information      May 22, 2001 10:44:38      Page: 2 of 2
OPPATIENT16,ONE
PID: 000-24-6802          Ht (cm): 177.80 (02/08/1999)
DOB: APR 3,1941 (60)      Wt (kg): 90.45 (02/08/1999)
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>
```

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, 2001 10:44:56 Page: 1 of 1  
 OPPATIENT16, ONE  
 PID: 000-24-6802 Ht (cm): 177.80 (02/08/1999)  
 DOB: APR 3, 1941 (60) Wt (kg): 90.45 (02/08/1999)  
 CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 2.11

#	RX #	DRUG	ISSUE DATE	LAST FILL	REF	DAY 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	

Enter ?? for more actions

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

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

The following actions are also available:

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

Select Action: Quit// OTH OTH  
 --- Other OP Actions ---

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

### Example: Entering a New Order (continued)

Medication Profile Mar 29, 2011@14:34:27 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:

RX PATIENT STATUS: SC LESS THAN 50%//  
 DRUG: ACETAMINOPHEN  
 Lookup: GENERIC NAME  
 1 ACETAMINOPHEN 160MG/5ML LIQUID CN103 NATL FORM; 480 M  
 L/B/T (NDC)  
 2 ACETAMINOPHEN 325MG TAB CN103 NATL FORM; DU: INCREMEN

```

TS OF 100 ONLY *** AUTOMED & SCRIPTPRO ***
    3 ACETAMINOPHEN 325MG/BUTALBITAL 50MG TAB           CN103      N/F      N
ATL N/F
    4 ACETAMINOPHEN 500MG TAB             CN103      NATL FORM; DU: INCREMEN
TS OF 100 ONLY*** AUTOMED & SCRIPTPRO ***
    5 ACETAMINOPHEN 650MG RTL SUPP          CN103      NATL FORM (IEN)

CHOOSE 1-5: 5 ACETAMINOPHEN 650MG RTL SUPP           CN103      NATL FORM (IEN)
)

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...
=====
*** THERAPEUTIC DUPLICATION(S) *** ACETAMINOPHEN 650MG RTL SUPP with

    Local RX#: 2054930
    Drug: ACETAMINOPHEN 500MG TAB (Active)
    SIG: TAKE ONE TABLET BY MOUTH EVERY FOUR HOURS AS NEEDED
    QTY: 180                                Days Supply: 30
    Processing Status: Not released locally (Window)
    Last Filled On: 03/29/11

Class(es) Involved in Therapeutic Duplication(s): Non-Narcotic
Analgesic/Antipyretic, Non-Salicylate
=====

Press Return to continue:
Discontinue Rx #2054930 ACETAMINOPHEN 500MG TAB Y/N ?

```

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.



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.



**Note:** More than one ingredient and more than one VA Drug Class may be associated with an Allergy/ADR.

See output below:

```

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

Prospective Drug: DILTIAZEM 120MG SA CAP
Causative Agent: DILTIAZEM (LOCAL or REMOTE SITE - 12/23/13)
Historical/Observed: OBSERVED
Severity: MODERATE

```

Ingredients: DILTIAZEM  
Signs/Symptoms: ITCHING, WATERING EYES, ANOREXIA, NAUSEA, VOMITING,  
ANXIETY, DROWSINESS, DRY MOUTH, DRY NOSE, RASH,  
Drug Class: CV200 CALCIUM CHANNEL BLOCKERS

Provider Override Reason: N/A - Order Entered Through VistA

After the Allergy/ADR warning is displayed, the system ask the user if they want to intervene.

If the user chooses to intervene after the Allergy/ADR warning is displayed, the intervention dialog will launch.

If the user chooses not to intervene after the Allergy/ADR warning is displayed, the order entry dialog will start.



Note: If the Severity is 'Severe', an intervention is REQUIRED.

**Example: 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 remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

---

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

Prospective Drug: DILTIAZEM 120MG SA CAP  
Causative Agent: DILTIAZEM (LOCAL or REMOTE SITE - 12/23/13)  
Historical/Observed: OBSERVED  
Severity: MODERATE

Ingredients: DILTIAZEM  
Signs/Symptoms: ITCHING, WATERING EYES, ANOREXIA, NAUSEA, VOMITING,  
ANXIETY, DROWSINESS, DRY MOUTH, DRY NOSE, RASH,  
Drug Class: CV200 CALCIUM CHANNEL BLOCKERS

Provider Override Reason: N/A - Order Entered Through VistA

Do you want to Intervene? Y// NO

VERB: TAKE

There are 2 Available Dosage(s):

1. 240MG
2. 480MG

Select from list of Available Dosages (1-2), 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

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

VERB: TAKE

There are 2 Available Dosage(s):

1. 240MG
2. 480MG

Select from list of Available Dosages (1-2), Enter Free Text Dose  
or Enter a Question Mark (?) to view list:

### **Example: 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 remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

---

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

Prospective Drug: SEPTRA DS TAB  
Causative Agent: SULFADIAZINE/SULFAMERAZINE/SULFAMETHAZINE (SITE REPORTING ALLERGY - DATE REPORTED)  
Historical/Observed: HISTORICAL  
Severity: Not Entered  
Signs/Symptoms: ITCHING, WATERING EYES, ANOREXIA, NAUSEA, VOMITING, ANXIETY, DROWSINESS  
Drug Class: AM650 SULFONAMIDE/RELATED ANTIMICROBIALS

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

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

There are 2 Available Dosage(s):  
1. 1 TABLET  
2. 2 TABLETS

Select from list of Available Dosages (1-2), 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

Now searching ADMINISTRATION SCHEDULE (#51.1) file...

BID BID TWICE A DAY

...OK? Yes// (Yes)

(TWICE A DAY)

LIMITED DURATION (IN DAYS, HOURS OR MINUTES):.

## **Example: 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)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95
+
*(1) Orderable Item: SULFAMETHOXAZOLE/TRIMETHOPRIM TAB
(2) Drug: SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
    NDC: 00056-0176-75
    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 remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...
-----
A Drug-Allergy Reaction exists for this medication and/or class!

Prospective Drug: SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
Causative Agent: SULFDIAZINE/SULFAMERAZINE/SULFAMETHAZINE (SITE REPORTING
ALLERGY - DATE REPORTED)

Historical/Observed: HISTORICAL
Severity: Not Entered
Ingredients: SULFAMETHOXAZOLE TRIMETHOPRIM
Signs/Symptoms: ITCHING, WATERING EYES, ANOREXIA,
NAUSEA, VOMITING, ANXIETY, DROWSINESS,
Drug Class: AM650 SULFONAMIDE/RELATED ANTIMICROBIALS

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

## CPRS Order Checks

Three CPRS order checks have been added to the list of order checks performed within the Outpatient Pharmacy application.

- Aminoglycoside Ordered
- Dangerous Meds for Patient >64
- Glucophage –Lab Results

The CPRS order checks shall be incorporated in the following Outpatient Pharmacy order entry processes:

- Entering a new order via backdoor pharmacy options
- Finishing a pending order
- Renewing an order
- Editing an order which results in a new order being created
- Verifying an order
- Copying an order
- Reinstating a discontinued order

No user action/intervention shall be required after a CPRS order check warning is displayed.

The following information is displayed for the Aminoglycoside Ordered order check:

- Order Check Name
- Text message displaying an estimated CrCL if available or a message that it is not.

\*\*\*Aminoglycoside Ordered\*\*\*

Aminoglycoside - est. CrCl: <VALUE> (CREAT: <result> BUN: <result>) [Est. CrCl Based on modified Cockcroft-Gault equation using Adjusted Body Weight (if ht > 60 in)].

**-OR-**

\*\*\*Aminoglycoside Ordered\*\*\*

Aminoglycoside - est. CrCl: <Unavailable> (<Results Not Found>) [Est. CrCl Based on modified Cockcroft-Gault equation using Adjusted Body Weight (if ht > 60 in)].

The following information is displayed for the Dangerous Meds for Patient >64 order check:

- Order Check Name
- Text message displaying a message if patient is greater than 64 and has been prescribed Amitriptyline.

\*\*\*Dangerous Meds for Patient >64\*\*\*

Patient is <age>. Amitriptyline can cause cognitive impairment and loss of balance in older patients. Consider other antidepressant medications on formulary.

**-OR-**

Text message displaying a message if patient is greater than 64 and has been prescribed Chlorpropamide.

\*\*\*Dangerous Meds for Patient >64\*\*\*

Patient is <age>. Older patients may experience hypoglycemia with Chlorpropamide due to its long duration and variable renal secretion. They may also be at increased risk for Chlorpropamide-induced SIADH.

**-OR-**

Text message displaying a message if patient is greater than 64 and has been prescribed Dipyridamole.

\*\*\*Dangerous Meds for Patient >64\*\*\*

Patient is <age>. Older patients can experience adverse reactions at high doses of Dipyridamole (e.g., headache, dizziness, syncope, GI intolerance.) There is also questionable efficacy at lower doses.

The following information is displayed for the Glucophage Lab Results order check:

- Order Check Name
- Text message displaying a serum creatinine does not exist or it is greater than 1.5

```
***Metformin Lab Results***
```

```
Metformin - no serum creatinine within past 60 days.
```

-OR-

```
***Metformin Lab Results***
```

```
Metformin - Creatinine results: <creatinine greater than 1.5 w/in past <x> days>
```

Examples of CPRS Order Checks

**Example: New Order Entry – Backdoor – Dangerous Meds for Patient >64 for Dipyridamole**

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

```
Eligibility: NSC
```

```
RX PATIENT STATUS: OPT NSC//
```

```
DRUG: DIPYRIDAMOLE
```

```
Lookup: GENERIC NAME
```

```
    1  DIPYRIDAMOLE 25MG TAB      BL117
```

```
    2  DIPYRIDAMOLE 50MG TAB      BL117
```

```
CHOOSE 1-2: 1  DIPYRIDAMOLE 25MG TAB      BL117
```

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

```
Now doing allergy checks. Please wait...
```

```
***Dangerous Meds for Patient >64***
```

```
Patient is 78. Older patients can experience adverse reactions at high doses of Dipyridamole (e.g., headache, dizziness, syncope, GI intolerance.) There is also questionable efficacy at lower doses.
```

```
Now processing Clinical Reminder Order Checks. Please wait ...
```

```
Now Processing Enhanced Order Checks! Please wait...
```

```
VERB: TAKE
```

```
There are 2 Available Dosage(s):
```

```
    1. 25MG
```

```
    2. 50MG
```

```
Select from list of Available Dosages (1-2), Enter Free Text Dose or Enter a Question Mark (?) to view list: 1 25MG
```

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

```
VERB: TAKE
```

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

```
Dosage Ordered: 25MG
```

```
NOUN: TABLET
```

```
ROUTE: PO//
```

### **Example: Finishing a Pending Order – Dangerous Meds for Patient >64 for Amitriptyline**

Pending OP Orders (ROUTINE) Mar 25, 2008@15:29:09 Page: 1 of 2  
PSOPATIENT,NINE <A>  
PID: 000-00-0000 Ht (cm): 177.80 (10/14/2005)  
DOB: JAN 1, 1930 (78) Wt (kg): 136.36 (10/14/2005)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95

(1) Orderable Item: AMITRIPTYLINE TAB  
(2) Drug: AMITRIPTYLINE 25MG TAB  
NDC: 00056-0176-75  
(3) \*Dosage: 25 (MG)  
Verb: TAKE  
Dispense Units: 1  
Noun: TABLET  
\*Route: ORAL  
\*Schedule: QHS  
(4) Pat Instruct:  
Provider Comments:  
Instructions: TAKE ONE TABLET PO QHS  
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
(5) Patient Status: OPT NSC  
(6) Issue Date: MAR 25, 2008 (7) Fill Date: MAR 25, 2008  
+ Enter ?? for more actions  
BY Bypass DC Discontinue  
ED Edit FN Finish  
Select Item(s): Next Screen// FN Finish

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

\*\*\*Dangerous Meds for Patient >64\*\*\*

Patient is 79. Amitriptyline can cause cognitive impairment and loss of balance in older patients. Consider other antidepressant medications on formulary.

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

Rx # 2612 03/25/08  
PSOPATIENT,NINE #30  
TAKE ONE TABLET BY MOUTH AT BEDTIME  
  
AMITRIPTYLINE 25MG TAB  
PSOPROVIDER,TEN PSOPHARMACIST,22  
# of Refills: 3

Are you sure you want to Accept this Order? NO// YES  
WAS THE PATIENT COUNSELED: NO//

### **Example: Renewing an Order – Dangerous Meds for Patient >64 for Chlorpropamide**

Rx #: 2613\$  
(1) \*Orderable Item: CHLORPROPAMIDE TAB  
(2) Drug: CHLORPROPAMIDE 250MG TAB  
NDC: 0378-0210-01  
(3) \*Dosage: 250 (MG)

Verb: TAKE  
 Dispense Units: 1  
 Noun: TABLET  
 \*Route: ORAL  
 \*Schedule: BID  
 (4) Pat Instructions:  
 SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY  
 (5) Patient Status: OPT NSC  
 (6) Issue Date: 03/25/08 (7) Fill Date: 03/25/08  
 Last Fill Date: 03/25/08 (Mail)  
 + Enter ?? for more actions  
 DC Discontinue PR Partial RL Release  
 ED Edit RF Refill RN Renew  
 Select Action: Next Screen// RN Renew  
  
 FILL DATE: (3/25/2008 - 3/26/2009): TODAY// (MAR 25, 2008)  
 MAIL/WINDOW: WINDOW// WINDOW  
 METHOD OF PICK-UP:  
 Nature of Order: WRITTEN// W  
 WAS THE PATIENT COUNSELED: NO// NO  
  
 Do you want to enter a Progress Note? No// NO  
  
 Now Renewing Rx # 2613 Drug: CHLORPROPAMIDE 250MG TAB  
  
 Now doing remote order checks. Please wait...  
  
 Now doing allergy checks. Please wait...  
  
 \*\*\*DANGEROUS MEDS FOR PATIENT >64\*\*\*  
  
 Patient is 78. Older patients may experience hypoglycemia with Chlorpropamide due do its long duration and variable renal secretion. They may also be at increased risk for Chlorpropamide-induced SIADH.  
  
 Now processing Clinical Reminder Order Checks. Please wait ...  
  
 Now Processing Enhanced Order Checks! Please wait...  
  
 2613A CHLORPROPAMIDE 250MG TAB QTY: 60  
 # OF REFILLS: 3 ISSUED: 03-25-08 SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY

### **Example: Creating New Order from Edit – Glucophage Lab Results for Metformin**

\*(1) Orderable Item: METFORMIN TAB,ORAL  
 (2) Drug: METFORMIN 500MG TAB  
 NDC: 00093-1048-98  
 (3) \*Dosage: 500 (MG)  
 Verb: TAKE  
 ED Edit FN Finish  
 Select Item(s): Next Screen// NEXT SCREEN  
  
 BY Bypass DC Discontinue  
  
 Pending OP Orders (ROUTINE) Mar 25, 2008@15:33:47 Page: 2 of 3  
 PSOPATIENT,NINE <A>  
 PID: 000-00-0000 Ht(cm): 177.80 (10/14/2005)  
 DOB: JAN 1, 1930 (78) Wt(kg): 136.36 (10/14/2005)  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95  
 +  
 Dispense Units: 1  
 Noun: TABLET

\*Route: ORAL  
 \*Schedule: Q12H  
 (4) Pat Instruct:  
 Provider Comments:  
 Instructions: TAKE ONE TABLET PO Q12H  
 SIG: TAKE ONE TABLET BY MOUTH EVERY 12 HOURS  
 (5) Patient Status: OPT NSC  
 (6) Issue Date: MAR 25,2008 (7) Fill Date: MAR 25,2008  
 (8) Days Supply: 30 (9) QTY (TAB): 60  
 Provider ordered 2 refills  
 (10) # of Refills: 2 (11) Routing: MAIL  
 (12) Clinic: BARB'S CLINIC  
 + Enter ?? for more actions  
 ED Edit FN Finish  
 Select Item(s): Next Screen// ED Edit  
 \* Indicates which fields will create an new Order  
 Select Field to Edit by number: (1-15): 3  
  
 Press Return to :  
  
 There are 2 Available Dosage(s):  
 1. 500MG  
 2. 1000MG  
  
 Select from list of Available Dosages (1-2), Enter Free Text Dose  
 or Enter a Question Mark (?) to view list: 500MG// 2 1000MG  
  
 You entered 1000MG is this correct? Yes// YES  
 VERB: TAKE// TAKE  
 DISPENSE UNITS PER DOSE(TABLETS): 2// 2  
 Dosage Ordered: 1000MG  
  
 NOUN: TABLETS// TABLETS  
 ROUTE: ORAL// ORAL  
 Schedule: Q12H// QHS  
 Now searching ADMINISTRATION SCHEDULE (#51.1) file...  
 QHS QHS AT BEDTIME  
 ...OK? Yes// (Yes)  
 (AT BEDTIME)  
 LIMITED DURATION (IN DAYS, HOURS OR MINUTES):  
 CONJUNCTION:  
  
 Pending OP Orders (ROUTINE) Mar 25, 2008@15:34:08 Page: 1 of 3  
 PSOPATIENT,NINE <A>  
 PID: 000-00-0000 Ht (cm): 177.80 (10/14/2005)  
 DOB: JAN 1,1930 (78) Wt (kg): 136.36 (10/14/2005)  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95  
  
 CPRS Order Checks:  
 Duplicate drug class order: ORAL HYPOGLYCEMIC AGENTS,ORAL (CHLORPROPAMIDE  
 TAB 250MG TAKE ONE TABLET BY MOUTH TWICE A DAY [PENDING])  
 Overriding Provider: PSOPROVIDER,TEN  
 Overriding Reason: testing  
  
 Metformin - no serum creatinine within past 60 days.  
 Overriding Provider: PSOPROVIDER,TEN  
 Overriding Reason: testing  
  
 \*(1) Orderable Item: METFORMIN TAB,ORAL  
 (2) Drug: METFORMIN 500MG TAB  
 (3) Dosage: 1000 (MG)

Verb: TAKE  
+ This change will create a new prescription!  
AC Accept ED Edit DC Discontinue  
Select Item(s): Next Screen// AC Accept

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

\*\*\*Metformin Lab Results\*\*\*

Metformin - no serum creatinine within past 60 days.

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

Rx # 2614 03/25/08  
PSOPATIENT,NINE #1440  
TAKE TWO TABLETS BY MOUTH AT BEDTIME

METFORMIN 500MG TAB  
PSOPROVIDER,TEN PSOPHARMACIST,22  
# of Refills: 2

Are you sure you want to Accept this Order? NO// YES  
Nature of Order: SERVICE CORRECTION//

### Example: Verifying an Order – Dangerous Meds for Patient >64 for Dipyridamole

OP Medications (NON-VERIFIED) Mar 25, 2008@15:39:03 Page: 1 of 2  
PSOPATIENT,NINE <A>  
PID: 000-00-0000 Ht(cm): 177.80 (10/14/2005)  
DOB: JAN 1,1930 (78) Wt(kg): 136.36 (10/14/2005)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95  
  
Rx #: 2615\$  
(1) \*Orderable Item: DIPYRIDAMOLE TAB  
(2) Drug: DIPYRIDAMOLE 25MG TAB  
NDC: 0115-1070-01  
(3) \*Dosage: 25 (MG)  
Verb: TAKE  
Dispense Units: 1  
Noun: TABLET  
\*Route: ORAL  
\*Schedule: QHS  
(4) Pat Instructions:  
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
(5) Patient Status: OPT NSC  
(6) Issue Date: 03/25/08 (7) Fill Date: 03/25/08  
Last Fill Date: 03/25/08 (Mail)  
+ Enter ?? for more actions  
DC Discontinue PR (Partial) RL (Release)  
ED Edit RF (Refill) RN (Renew)  
Select Action: Next Screen// VF VF  
  
RX: 2615 PATIENT: PSOPATIENT,NINE (000-00-0000)  
STATUS: Non-Verified CO-PAY STATUS  
DRUG: DIPYRIDAMOLE 25MG TAB

QTY: 30      30 DAY SUPPLY  
 SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
 LATEST: 03/25/2008      # OF REFILLS: 3      REMAINING: 3  
 ISSUED: 03/25/08      PROVIDER:  
 LOGGED: 03/25/08      CLINIC: BARB'S CLINIC  
 EXPIRES: 03/26/09      DIVISION: HINES (499)  
 CAP: SAFETY      ROUTING: MAIL  
 ENTRY BY: PSOPROVIDER,TEN      VERIFIED BY:

ACTIVITY LOG:

#	DATE	REASON	RX REF	INITIATOR OF ACTIVITY
---	------	--------	--------	-----------------------

1 03/25/08 PATIENT INST.ORIGINAL  
 COMMENTS: Patient Instructions Not Sent By Provider.  
 PATIENT STATUS : OPT NSC      COPIES : 1

Press RETURN to Continue:

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

\*\*\*DANGEROUS MEDS FOR PATIENT >64\*\*\*

Patient is 78. Older patients can experience adverse reactions at high doses of Dipyridamole (e.g., headache, dizziness, syncope, GI intolerance.) There is also questionable efficacy at lower doses.

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

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

### Example: Copying an Order – Aminoglycoside Ordered – Gentamicin

Select Action: Next Screen// CO CO  
  
 OP Medications (ACTIVE)      Mar 25, 2008@15:46:18      Page: 1 of 2  
 PSOPATIENT,NINE      <A>  
 PID: 000-00-0000      Ht(cm): 177.80 (10/14/2005)  
 DOB: JAN 1,1930 (78)      Wt(kg): 136.36 (10/14/2005)  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 1.95  
  
 Rx #: 2616\$  
 (1) \*Orderable Item: GENTAMICIN INJ,SOLN  
 (2)      Drug: GENTAMICIN 40MG/ML 2ML VI  
 Verb: INJECT  
 (3)      \*Dosage: 80MG  
 \*Route: INTRAMUSCULAR  
 \*Schedule: Q8H  
 (4) Pat Instructions:  
 SIG: INJECT 80MG IM EVERY 8 HOURS  
 (5) Patient Status: OPT NSC  
 (6)      Issue Date: 03/25/08      (7) Fill Date: 03/25/08  
 Last Fill Date: 03/25/08 (Window)  
 Last Release Date:      (8)      Lot #:  
 Expires: 04/24/08      MFG:

+ Enter ?? for more actions

AC Accept

ED Edit

New OP Order (COPY) Mar 25, 2008@15:46:18 Page: 1 of 2  
PSOPATIENT,NINE  
PID: 000-00-0000 Ht(cm): 177.80 (10/14/2005)  
DOB: JAN 1,1930 (78) Wt(kg): 136.36 (10/14/2005)  
SEX: MALE  
CrCl: <Not Found> (CREAT: Not Found) BSA (m2): 1.95

Orderable Item: GENTAMICIN INJ,SOLN  
(1) Drug: GENTAMICIN 40MG/ML 2ML VI  
(2) Patient Status: OPT NSC  
(3) Issue Date: MAR 25,2008 (4) Fill Date: MAR 25,2008  
Verb: INJECT  
(5) Dosage Ordered: 80MG  
Route: INTRAMUSCULAR  
Schedule: Q8H  
(6) Pat Instruction:  
SIG: INJECT 80MG IM EVERY 8 HOURS  
(7) Days Supply: 10 (8) QTY (VI): 10  
(9) # of Refills: 0 (10) Routing: WINDOW  
(11) Clinic: SHIRL-2  
(12) Provider: PSOPROVIDER,TEN (13) Copies: 1  
+ Enter ?? for more actions

AC Accept ED Edit

Select Action: Next Screen// AC Accept

\*\*\*Aminoglycoside Ordered\*\*\*

Aminoglycoside - est. CrCl: <Unavailable> (<Results Not Found>) [Est.  
CrCl based on modified Cockcroft-Gault equation using Adjusted Body  
Weight (if ht > 60 in)]

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

Do you want to enter a Progress Note? No// NO  
Rx # 2617 03/25/08  
PSOPATIENT,NINE #10  
INJECT 80MG IM EVERY 8 HOURS

GENTAMICIN 40MG/ML 2ML VI  
PSOPROVIDER,TEN PSOPHARMACIST,22  
# of Refills: 0

Is this correct? YES//

### **Example: Reinstating a Discontinued Order – Glucophage Lab Results for Metformin**

Rx #: 2614\$  
(1) \*Orderable Item: METFORMIN TAB,ORAL  
(2) Drug: METFORMIN 500MG TAB  
NDC: 00093-1048-98  
(3) \*Dosage: 1000 (MG)  
Verb: TAKE  
Dispense Units: 2  
Noun: TABLETS

```

        *Route: ORAL
        *Schedule: QHS
(4) Pat Instructions:
        SIG: TAKE TWO TABLETS BY MOUTH AT BEDTIME
(5) Patient Status: OPT NSC
(6) Issue Date: 03/25/08          (7) Fill Date: 03/25/08
        Last Fill Date: 03/25/08 (Mail)
+
        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
===== 2614 METFORMIN 500MG TAB

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

***Metformin Lab Results***

Metformin - Creatinine results: <creatinine greater than 1.5 w/in past <x> days>
Now processing Clinical Reminder Order Checks. Please wait ...
Now Processing Enhanced Order Checks! Please wait...

Prescription #2614 REINSTATED!
    Prescription #2614 Filled: MAR 25, 2008Printed: MAR 25, 2008Released:
        Either print the label using the reprint option
        or check later to see if the label has been printed.

```

## 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...

***CRITICAL*** Drug Interaction with Prospective Drug:
          CIMETIDINE 300 MG and

          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:**

```
***CRITICAL*** Drug Interaction with Prospective Drug:
          WARFARIN 2MG TAB and

          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:**

```
*** THERAPEUTIC DUPLICATION(S) *** POTASSIUM CHLORIDE 30 MEQ with  
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:**

```
*** THERAPEUTIC DUPLICATION(S) *** CEFAZOLIN 1 GM with  
Clinic Order: CEFAZOLIN 2 GM (PENDING)  
Solution(s): 5% DEXTROSE 50 ML OVER 30 MINUTES  
Schedule: Q8H  
Order Date: NOV 20, 2012@11:01  
Start Date: *****  
Stop Date: *****  
  
Clinic Order: CEFAZOLIN SOD 1GM INJ (EXPIRED)  
Solution(s): 5% DEXTROSE 50 ML OVER 30 MINUTES  
Schedule: Q12H  
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 list of available possible dosages shown after order checks is linked to the drug ordered. One of the dosages listed may be chosen or a different, free text dosage may be entered. Confirmation of the dosage is required and the value entered is displayed again to allow the user to confirm that it is correct.

With patch PSO\*7\*402, there were changes made to the display of the available dosage list to break only after the third dosage. Text changes were also made to existing prompts (with or without a page break) to inform a user of the number of dosages defined for the drug selected and that more dosages exist should a break occur. Text changes were also made when no dosages are available.

```
There are 3 Available Dosage(s):  
1. 250MG  
2. 500MG  
3. 1000MG  
  
Select from list of Available Dosages (1-3), Enter Free Text Dose  
or Enter a Question Mark (?) to view list: 3 500MG  
  
You entered 500MG is this correct? Yes// <Enter> YES
```

Break only after 3 dosages with text changes

There are **5** Available Dosage(s) :

- 1. 10MG
- 2. 20MG
- 3. 40MG

Enter RETURN to view **additional dosages** or '^' to exit list of dosages:

- <Page Break>-----
  - 4. 80MG
  - 5. 120MG

Select from list of Available Dosages **(1-5)**, Enter Free Text Dose  
or Enter a Question Mark (?) to view list:

### **No Available Dosages**

There are **NO** Available Dosage(s) .

Please Enter a Free Text Dose:

For numeric dosages, the Dispense Units Per Dose value is calculated based on the strength of the dosage ordered divided by the strength of the medication ordered. The 500 mg Dosage Ordered will require two 250 mg capsules. The Dosage Ordered is re-displayed after the Dispense Units to allow the entry to be double-checked.

DISPENSE UNITS PER DOSE (CAPSULES) : 2 // <**Enter**> 2  
Dosage Ordered: 500MG

If a Route has not been associated with the Dispense Drug, the default Route of PO or Oral will be displayed. A different Route can be entered or it can be deleted at this point if needed. The Route is not required to complete a prescription. If the abbreviation entered is in the MEDICATION ROUTES file, the entry will be expanded in the Sig based on the OUTPATIENT EXPANSION field.

ROUTE: PO // <**Enter**>      ORAL      PO      MOUTH

or

ROUTE: PO // @ <Enter to delete>

A default schedule associated with the Orderable Item of the drug ordered is displayed at the "Schedule:" prompt. The default can be accepted or a different free text schedule can be entered. Free text entries cannot contain more than two spaces or be more than twenty characters long. Entries will be compared against a list of common abbreviations, first in the ADMINISTRATION SCHEDULE file and then in the MEDICATION INSTRUCTION file, and expanded if the entry matches. Any entry not found in the list of common abbreviations will be displayed in the Sig as entered.

With patch PSO\*7\*402, the user will be informed from which file the schedule selection is made and if the value entered will be considered as free text. The NAME, OLD SCHEDULE NAME(S) fields will be used for lookup from the ADMINISTRATION SCHEDULE file. The NAME, SYNONYM, and OLD MED INSTRUCTION NAME(S) fields will be used for lookup from the MEDICATION INSTRUCTION file. The user will first be presented with selections from the ADMINISTRATION SCHEDULE file based on the value entered at the schedule prompt. If the user selects an entry, the lookup is complete. If the user chooses not to select a value from the ADMINISTRATION SCHEDULE file, the software displays selections from the MEDICATION INSTRUCTION file. If a selection is made, the lookup is complete. If the user chooses not to select a value, the software informs the user that the value as entered will be accepted at the schedule prompt as a free text entry.

```
Schedule: BID
Now searching ADMINISTRATION SCHEDULE (#51.1) file...
    BID   BID   TWICE A DAY
        ...OK? Yes// N  (No)

    1   BID EXCLUDE MDD      BID
    2   BID PRN      BID
    3   BID-AM      BID
    4   BID-NOON     BID
    5   BID-W/MEAL    BID
Press <Enter> to see more, '^' to exit this list, OR
CHOOSE 1-5:
    6   BID2 PRN      BID
CHOOSE 1-6:
Now searching MEDICATION INSTRUCTION (#51) file...
    BID   TWICE A DAY
        ...OK? Yes// N  (No)
AP      BIDAP  TWICE A DAY IN MORNING AND EVENING
        ...OK? Yes// N  (No)

Free text 'BID' entered for schedule (TWICE A DAY)
```

The LIMITED DURATION field is used only when a medication should be taken for a limited period of time. Days are assumed for numeric entries. The user should follow the number with an “H” to specify hours or an “M” to specify minutes.



Do not use the LIMITED DURATION field for Days Supply.

#### Example: Entering a New Order (continued)

```
LIMITED DURATION (IN DAYS, HOURS OR MINUTES) : 10 (DAYS)
```

The CONJUNCTION field is used to join dosing sequences in complex orders. Entries are limited to AND, THEN, or EXCEPT. AND is used for concurrent doses, such as “Take 1 tablet every morning AND take 2 tablets at bedtime.” THEN is used for consecutive doses, such as “Take 2 tablets daily for one week THEN take 1 tablet for five days.” EXCEPT is used to describe any dosing sequence that is not routine, such as “Take 1 tablet every day EXCEPT take no tablets Wednesday.” See Chapter 2 in the *User Manual - Supplemental* for examples.

CONJUNCTION: <Enter>

Any entry in the PATIENT INSTRUCTIONS field will first be checked to see if it contains any abbreviations that can be expanded. The entry will be added to the end of the Sig, after the dosing information, and the entire Sig will be displayed.

PATIENT INSTRUCTIONS: <b>WF</b>	WITH FOOD
(TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS WITH FOOD)	
OTHER PATIENT INSTRUCTIONS: <b>WF</b>	CON ALIMENTO

Two optional fields, OTHER LANGUAGE PREFERENCE and PMI LANGUAGE PREFERENCE in the PHARMACY PATIENT file, store if a patient has another language preference and if the patient's PMI sheets should print in English or Spanish at the CMOP. The CMOP functionality was requested for future CMOP use. When printing locally from Outpatient Pharmacy this parameter is not used. These fields are accessed through the *Update Patient Record* option and the protocol Patient Record Update [PSO PATIENT RECORD UPDATE]. If the other language preference is indicated for a patient, the user will be prompted to enter OTHER PATIENT INSTRUCTIONS after selecting the PATIENT INSTRUCTIONS field to enter/edit. If a quick code is entered at the OTHER PATIENT INSTRUCTIONS prompt, the expansion entered at the OTHER PATIENT INSTRUCTIONS EXPANSIONS will print on the prescription label.

A default value for Days Supply based on patient status is displayed. A default quantity is calculated when possible. See Chapter 2 in the *User Manual - Supplemental* for more information on QUANTITY calculations.

DAYS SUPPLY: (1-90): 30// **10**  
QTY ( CAP ) : 80// <Enter> 80

#### Example: Entering a New Order (continued)

COPIES: 1// <Enter> 1
# OF REFILLS: (0-11): 11// 0
PROVIDER: OPPROVIDER4, TWO
CLINIC: OUTPT NURSE GREEN TEAM
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
REMARKS: <Enter>
ISSUE DATE: TODAY// <Enter> (MAY 30, 2001)
FILL DATE: (5/30/2001 - 6/9/2001): TODAY// <Enter> (MAY 30, 2001)
Nature of Order: WRITTEN// <Enter> W
WAS THE PATIENT COUNSELED: NO// <b>Y</b> YES
WAS COUNSELING UNDERSTOOD: NO// <b>Y</b> YES

An option to add a progress note has been added. If “Yes” is entered at this prompt, the progress note entry will begin after the order information has been displayed and confirmed. The order is redisplayed, along with information on any service-connected disabilities on record.

```
Do you want to enter a Progress Note? No// <Enter>  
  
Rx # 503906          05/30/01  
OPPATIENT16,ONE      #80  
TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS WITH FOOD  
  
AMPICILLIN 250MG CAP  
OPPROVIDER1,TWO      OPPHARMACIST4, THREE  
# of Refills: 11  
  
SC Percent: 40%  
Disabilities: NONE STATED  
  
Was treatment for Service Connected condition?
```

To determine if the order should be charged copay, eligible copay exemptions for the order are displayed one at a time. The user is asked if it the first applies to the order. In this example, the user is first asked if the order is being prescribed for any of the service-connected conditions displayed. If yes had been entered at this prompt, the fill would have been set for No Copay and no other exemption questions would have been asked. In this example, the patient has reported exposure to herbicides during Vietnam-era service.

```
Was treatment related to Agent Orange exposure? NO  
  
Is this correct? YES// <Enter>  
  
Another New Order for OPPATIENT16,ONE? YES//
```

Medications with non-numeric dosages, such as ointments and creams, will display non-numeric possible dosages as a default. Because the dosage is non-numeric, values for dispense units per dose and quantity cannot be calculated.

### **Example: Entering a New Order (continued)**

```
DRUG: HYDROCORTISONE 0.5% CREAM        DE200        VISN FORM; 30 GM/TUBE (IEN)  
...OK? Yes// (Yes)  
Now doing order checks. Please wait...  
  
There are 4 Available Dosage(s):  
1. SMALL AMOUNT  
2. MODERATE AMOUNT  
3. LIBERALLY  
4. LARGE AMOUNT  
  
Select from list of Available Dosages (1-4), Enter Free Text Dose  
or Enter a Question Mark (?) to view list: 2 MODERATE AMOUNT  
  
You entered MODERATE AMOUNT is this correct? Yes// <Enter> YES  
ROUTE: TOPICAL// <Enter> TOPICAL
```

During prescription processing, if the label printer selected has an Automated Dispensing Device (ADD) defined, then Rx will be routed to the appropriate automated dispensing devices. A message will be displayed indicating the automated dispensing devices where the Rx will be routed. Below is an example of the routing message.

PRESCRIPTIONS SENT TO:	
OPTIFILL1	
100002815	ACETAMINOPHEN 325MG C.T.
100002816	AMOXICILLIN 250MG CAP
100002824	AMOXAPINE 50MG TAB
SCRIPTPRO1	
100002844	CIMETIDINE 200MG TAB

## **Entering a New Order --ePharmacy (Third Party Billable)**

For patients who have active third party insurance and have the appropriate eligibility requirements, the software will submit electronic claims to their insurance companies when prescriptions for billable drugs are ordered.

After a WINDOW order is entered and finished, the billing data is sent to the Electronic Claims Management Engine (ECME). ECME sends a message back to Outpatient Pharmacy displaying the status of the claim. For MAIL orders, the communication between Outpatient Pharmacy and ECME happens either during the Local Mail Label Print or during the CMOP transmission.

The following example shows the creation of a new WINDOW order starting with the "DRUG:" prompt.

### **Example: Entering a New Order for ePharmacy Billing**

```
DRUG: PREDNISONE
Lookup: GENERIC NAME
    1  PREDNISONE 1MG TAB          HS051
    2  PREDNISONE 20MG S.T.        HS051
    3  PREDNISONE 5MG TAB          HS051
CHOOSE 1-3: 3  PREDNISONE 5MG TAB          HS051
Now doing order checks. Please wait...
Previously entered ICD diagnosis codes: <Enter>

Select Primary ICD Code: <Enter>
VERB: TAKE
There are 2 Available Dosage(s):
    1. 20MG
    2. 40MG

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 20MG
```

```

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

NOUN: TABLET
ROUTE: PO// <Enter>
      1   PO   ORAL (BY MOUTH)      PO
      2   PO   ORAL      PO
CHOOSE 1-2: 2   ORAL      PO   BY MOUTH
Schedule: TID
Now searching ADMINISTRATION SCHEDULE (#51.1) file...
      TID   TID   THREE TIMES A DAY
      ...OK? Yes// (Yes)
      (THREE TIMES A DAY)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10 (DAYS)
CONJUNCTION: <Enter>
PATIENT INSTRUCTIONS: WF
WITH FOOD
      (TAKE ONE TABLET BY BY MOUTH THREE TIMES A DAY FOR 10 DAYS WITH FOOD)
DAYS SUPPLY: (1-90): 30// <Enter>
QTY ( TAB ) : 30// <Enter> 30
COPIES: 1// <Enter> 1
# OF REFILLS: (0-5): 5// <Enter>
PROVIDER: OPPROVIDER4,TWO
CLINIC: <Enter>
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
REMARKS: <Enter>
ISSUE DATE: TODAY// <Enter> (NOV 02, 2005)
FILL DATE: (11/2/2005 - 11/3/2006): TODAY// <Enter> (NOV 02, 2005)
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 # 100003840          11/02/05
OPPATIENT,FOUR           #30
TAKE ONE TABLET BY BY MOUTH THREE TIMES A DAY FOR 10 DAYS WITH FOOD

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

Is this correct? YES// <Enter> YES
Veteran Prescription 100003840 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Gathering claim info
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE

Another New Order for OPPATIENT,FOUR? YES// 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> (CREAT: Not Found)	BSA (m <sup>2</sup> ) : _____		
# RX #	DRUG	ISSUE QTY ST	LAST REF DATE
-----ACTIVE-----			
1 100003840e	PREDNISONE 5MG TAB	30 A>	11-02 11-02 5 30
<p style="border: 1px solid black; padding: 5px; text-align: center;">↑ Denotes ePharmacy Rx</p>			
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) ), Reject Resolution Required, or Refill Too Soon, the prescription will be marked as “REJECTED”, and the user will have the opportunity to resolve before continuing.

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

#### **Example: Handling a Rejected New Order for ePharmacy Billing**

```
Veteran 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
      *** VETERAN - REJECT RECEIVED FROM THIRD PARTY PAYER ***
-----
Division : ALBANY          NPI#: 1234567890      NCPDP: 4150001
Patient  : OPPAT., 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
Group Name  : RXINS
Cardholder ID: 000011322P
Contact: 800 555-5555
Group Number: 12454
```

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)override, (I)gnore, (Q)uit: Q// O 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>

Veteran 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.

Example: Handling a Reject Resolution Required rejected New Prescription for ePharmacy Billing.

For VETERAN prescriptions, a reject code can be specified in the Reject Resolution Required section of the ePharmacy Site Parameter screen to stop a prescription from being filled. The Reject Resolution Required reject codes will prevent a prescription from being filled during any claims processing under the following conditions:

- VETERAN eligibility
- The prescription is an original fill

- The prescription is not released
- The reject is on the Reject Resolution Required list for the division
- The total gross amount of the prescription is at or above the specified threshold amount

For VETERAN prescription rejections that have Reject Resolution Required rejects, the user will be able to select from (I)gnore, which bypasses claims processing and allows the prescription to be filled, or (Q)uit which sends it to the Third Party Payer Rejects – Worklist. Prescriptions with these type rejects cannot be filled until the reject is resolved. See following example.

#### **Example: Handling a Reject Resolution Required rejected New Order for ePharmacy Billing (continued)**

```

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Building the HL7 packet
IN PROGRESS-Transmitting
IN PROGRESS-Processing response
E REJECTED

*** VETERAN - REJECT RECEIVED FROM THIRD PARTY PAYER ***
-----
Division : ALBANY          NPI: 1234567890      NCPDP: 4150001
Patient  : OP,FOUR(000-01-1322P)  Sex: M      DOB: JAN 13, 1922(83)
Rx/Drug   : 99999999/0 - TESTOSTERONE (ANDROD)    ECME#: 000001234567
Reject(s): 76 - Plan Limitations Exceeded Received on JUN 07, 2013@11:26:05

Payer Message: DAYS SUPPLY IS MORE THAN ALLOWED BY PLAN
Insurance   : TEST INS           Contact: 800-555-5555
Group Name   : RXINS            Group Number: 12454
Cardholder ID: 0000011322P

Reject Resolution Required
Gross Amount Due ($34.42) is greater than or equal to
Threshold Dollar Amount ($0)
Please select Quit to resolve this reject on the Reject Worklist.
-----
Select one of the following:
I          (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION
Q          (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(I)gnore, (Q)uit: Q//
```

#### **Example: Handling a TRICARE Rejected New Order for ePharmacy Billing**

Rejected TRICARE claims will be denoted with “TRICARE” during submission to ECME and within the subsequent reject notification screen. Also, the reject codes will be displayed in both places. The following example shows a prescription being submitted to ECME and this process

occurs directly following the “Is this correct? YES//” prompt during finish. Where DUR or RTS are one of the reject codes, the user will be able to select from (D)iscontinue the prescription, submit (O)VERRIDE codes, or (Q)uit which sends the rejection to the Third Party Payer Rejects - Worklist. A TRICARE rejection may not be (I)gnored.

**TRICARE** Prescription 101110 submitted to ECME for claim generation.

Claim Status:  
IN PROGRESS-Waiting to start  
IN PROGRESS-Building the claim  
IN PROGRESS-Transmitting  
IN PROGRESS-Processing response  
E REJECTED  
    79 - Refill Too Soon  
    14 - M/I Eligibility Clarification Code

\*\*\* REJECT RECEIVED FOR **TRICARE** PATIENT \*\*\*

Division : ALBANY ISC NPI# : 5000000021  
Patient : OPTRICARE,ONE(666-55-4789) Sex: M DOB: OCT 18,1963(44)  
Rx/Drug : 101110/0 - NAPROXEN 250MG S.T. ECME#: 000000112303  
Reject(s): REFILL TOO SOON (79), 14 - M/I Eligibility Clarification Code (14).  
Received on MAR 03, 2008@14:40:57.

Insurance : TRICARE Contact:  
Group Name : TRICARE PRIME Group Number: 123123  
Cardholder ID: SI9844532

Select one of the following:

- O (O) VERRIDE - RESUBMIT WITH OVERRIDE CODES  
D (D) iscontinue - DO NOT FILL PRESCRIPTION  
Q (Q) UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)verride, (D)iscontinue, (Q)uit: Q//

Example: Handling a non-DUR/RTS or non-clinical TRICARE rejected New Order for ePharmacy Billing.

For TRICARE prescription rejections that have non-DUR/RTS or non-clinical rejects, the user will be able to select from (D)iscontinue the prescription or (Q)uit which sends it to the Third Party Payer Rejects - Worklist. TRICARE prescriptions with these type rejects cannot be filled until the rejection is resolved. Example:

TRICARE Prescription 101113 submitted to ECME for claim generation.

Claim Status:  
IN PROGRESS-Waiting to start  
IN PROGRESS-Building the claim  
IN PROGRESS-Building the HL7 packet  
IN PROGRESS-Transmitting  
E REJECTED

07 - M/I Cardholder ID Number  
14 - M/I Eligibility Clarification Code

\*\*\* REJECT RECEIVED FOR TRICARE PATIENT \*\*\*

-----  
Division : ALBANY ISC NPI#: 5000000021  
Patient : OPTRICARE,ONE(666-55-4789) Sex: M DOB: OCT 18,1963(44)  
Rx/Drug : 101113/0 - SIMETHICONE 40MG TAB ECME#: 000000112306  
Reject(s): M/I Eligibility Clarification Code (14), M/I Cardholder ID  
Number (07). Received on MAR 03, 2008@14:43:42.

Insurance : TRICARE Contact:  
Group Name : TRICARE PRIME Group Number: 123123  
Cardholder ID: SI9844532

-----

Select one of the following:

D (D)iscontinue - DO NOT FILL PRESCRIPTION  
 Q (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(D)iscontinue, (Q)uit: Q//

For non-billable TRICARE prescriptions, an abbreviated version of the reject notification screen will be displayed. Because the prescription is non-billable, the insurance and ECME information that's currently provided for DUR/RTS rejects will not be displayed (i.e. insurance, group name, group #, ECME #, contact, cardholder ID). In this case, the prescription must be discontinued.

Is this correct? YES// ...

\*\*\* TRICARE - NON-BILLABLE \*\*\*

-----  
Division : ALBANY ISC NPI#:  
Patient : OPTRICARE,ONE(666-55-4789) Sex: M DOB: OCT 18,1963(44)  
Rx/Drug : 102058/0 - ABSORBABLE GELATIN S  
Date/Time: AUG 27, 2008@16:49:46  
Reason : Drug not billable.

-----

This is a non-billable TRICARE prescription. It cannot be filled or sent to the reject worklist. It must be discontinued.

Press <RETURN> to continue...  
Nature of Order: SERVICE CORRECTION// S  
Requesting PROVIDER: OPHARM OPPHARM, ONE OO

Labels will not print for discontinued TRICARE prescriptions, and reprint label will not be allowed for TRICARE rejected prescriptions.

Select Rx (Prescriptions) Option: REPrint an Outpatient Rx Label

```
Reprint Prescription Label: 101113      SIMETHICONE 40MG TAB
Number of Copies? : (1-99): 1 //
Print adhesive portion of label only? ? No// NO
Do you want to resend to Dispensing System Device? No// NO
Comments: REPRINT
```

```
Rx # 101113          03/03/08
OPTRICARE, ONE        #180
```

ONE MOUTH TWICE A DAY

```
SIMETHICONE 40MG TAB
OPPHARM, ONE          OPPHARM, ONE
# of Refills: 3
```

```
Select LABEL DEVICE: NULL Bit Bucket
```

No Label(s) printed.

```
Reprint Prescription Label:
```

Suspended TRICARE prescriptions will remain on suspense when a reject occurs, when the prescription is non-billable, or when the third party claim remains in an 'IN PROGRESS' status in ECME. Labels will not print. Once the reject is resolved, the user may pull the prescription early from suspense or wait for the next scheduled Print from Suspense option runs at which time labels will print accordingly. This includes CMOP and local suspense.

```
TRICARE Prescription 101607 submitted to ECME for claim generation.
```

```
Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response
```

```
*** TRICARE - 'IN PROGRESS' ECME status ***
```

```
-----
Division : ALBANY ISC                      NPI#: 5000000021
Patient  : OPTRICARE, ONE(666-55-4789)   Sex: M          DOB: OCT 18, 1963 (44)
Rx/Drug   : 101607/0 - ACETAZOLAMIDE 250MG
Date/Time: APR 20, 2008@20:11:17
Reason    : ECME Status is in an 'IN PROGRESS' state and cannot be filled
-----
```

This prescription will be suspended. After the third party claim is resolved, it may be printed or pulled early from suspense.

```
Press <RETURN> to continue...
```

A rejected TRICARE prescription may not have a partial fill ordered until the reject is resolved.

```
OP Medications (SUSPENDED)      Apr 18, 2008@19:10:16      Page: 1 of 2
OPTRICARE, ONE
```

PID: 666-55-4789    Ht (cm) : \_\_\_\_\_ ( \_\_\_\_\_ )  
 DOB: OCT 18, 1963 (44)    Wt (kg) : \_\_\_\_\_ ( \_\_\_\_\_ )  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found)                          BSA (m2) : \_\_\_\_\_  
  
 Rx #: 101526e  
 (1) \*Orderable Item: ACETAZOLAMIDE PILL  
 (2)    Drug: ACETAZOLAMIDE 500MG SEQUELS  
     NDC: 00555-0513-02  
     Verb: TAKE  
 (3)    \*Dosage: 1 PILL  
     \*Route: ORAL  
     \*Schedule: BID  
 (4) Pat Instructions:  
     SIG: TAKE 1 PILL BY MOUTH TWICE A DAY  
 (5) Patient Status: OTHER FEDERAL  
 (6)    Issue Date: 04/18/08    (7) Fill Date: 04/19/08  
     Last Fill Date: 04/19/08 (Window)  
     Last Release Date:    (8)    Lot #:  
     Expires: 04/19/09    MFG:  
+  
 DC Discontinue    PR Partial    RL Release  
 ED Edit    RF (Refill)    RN Renew  
 Select Action: Next Screen//  Partial

OP Medications (SUSPENDED)                                  Apr 18, 2008@19:10:16                                  Page: 1 of 2  
 OPTRICARE, ONE  
 PID: 666-55-4789    Ht (cm) : \_\_\_\_\_ ( \_\_\_\_\_ )  
 DOB: OCT 18, 1963 (44)    Wt (kg) : \_\_\_\_\_ ( \_\_\_\_\_ )  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found)                          BSA (m2) : \_\_\_\_\_  
  
 Rx #: 101526e  
 (1) \*Orderable Item: ACETAZOLAMIDE PILL  
 (2)    Drug: ACETAZOLAMIDE 500MG SEQUELS  
     Verb: TAKE  
 (3)    \*Dosage: 1 PILL  
     \*Route: ORAL  
     \*Schedule: BID  
 (4) Pat Instructions:  
     SIG: TAKE 1 PILL BY MOUTH TWICE A DAY  
 (5) Patient Status: OTHER FEDERAL  
 (6)    Issue Date: 04/18/08    (7) Fill Date: 04/19/08  
     Last Fill Date: 04/19/08 (Window)  
     Last Release Date:    (8)    Lot #:  
     Expires: 04/19/09    MFG:  
+     Partial cannot be filled on TRICARE non-payable Rx  
 DC Discontinue    PR Partial    RL Release  
 ED Edit    RF (Refill)    RN Renew  
 Select Action: Next Screen//

If ECME's status on the claim remains in an "In Progress" state past the processing timeout during finish of the prescription, TRICARE prescriptions will not be allowed to be filled. Instead it will be placed on suspense until the rejection is resolved. Below is an example of this screen:

TRICARE Prescription 101607 submitted to ECME for claim generation.

Claim Status:  
IN PROGRESS-Building the claim

IN PROGRESS-Transmitting  
IN PROGRESS-Parsing response

\*\*\* TRICARE - 'IN PROGRESS' ECME status \*\*\*  
-----  
Division : ALBANY ISC NPI#: 5000000021  
Patient : OPTRICARE,ONE(666-55-4789) Sex: M DOB: OCT 18,1963(44)  
Rx/Drug : 101607/0 - ACETAZOLAMIDE 250MG  
Date/Time: APR 20, 2008@20:11:17  
Reason : ECME Status is in an 'IN PROGRESS' state and cannot be filled  
-----

This prescription will be suspended. After the third party claim is resolved, it may be printed or pulled early from suspense.

Press <RETURN> to continue...

If a pharmacy is active for ePharmacy processing but an insurance plan is not linked or not active, TRICARE prescription will be allowed to be filled without third party claim submission. The phrase "Inactive ECME TRICARE" will be displayed during Finish and an ECME log entry will be added stating such.

#### **Example of message during finish:**

Do you want to enter a Progress Note? No// NO  
  
Rx # 102046 08/27/08  
OPTRICARE, TEST #180  
ONE MOUTH TWICE A DAY  
  
DANTROLENE 25MG CAP  
OPPROVIDER, ONE OPPHAR, ONE  
# of Refills: 3  
  
Is this correct? YES// ...  
-Rx 101921 has been discontinued...

Inactive ECME TRICARE

#### **Example of ECME Activity Log entry:**

ECME Log:			
#	Date/Time	Rx Ref	Initiator Of Activity
1	8/27/08@11:07:45	ORIGINAL	OPPHARM, ONE
Comments: TRICARE-Inactive ECME TRICARE			

#### **Example: Handling a CHAMPVA Rejected New Order for ePharmacy Billing**

Rejected CHAMPVA claims will be denoted with “CHAMPVA” during submission to ECME and within the subsequent reject notification screen. Also, the reject codes will be displayed in both places. The following example shows a prescription being submitted to ECME and this process occurs directly following the “Is this correct? YES//” prompt during finish. Where DUR or RTS are one of the reject codes, the user will be able to select from (D)iscontinue the prescription, submit (O)VERRIDE codes, or (Q)uit which sends the rejection to the Third Party Payer Rejects - Worklist. A CHAMPVA rejection may not be (I)gnored.

**CHAMPVA** Prescription 101110 submitted to ECME for claim generation.

**Claim Status:**

IN PROGRESS-Waiting to start  
IN PROGRESS-Building the claim  
IN PROGRESS-Transmitting  
IN PROGRESS-Processing response  
E REJECTED  
    79 - Refill Too Soon  
    14 - M/I Eligibility Clarification

\*\*\* REJECT RECEIVED FOR **CHAMPVA** PATIENT \*\*\*

Division : ALBANY ISC NPI#: 5000000021  
Patient : OPCHAMPVA,ONE(666-55-4789) Sex: M DOB: OCT 18,1963(44)  
Rx/Drug : 101110/0 - NAPROXEN 250MG S.T. ECME#: 000000112303  
Reject(s): REFILL TOO SOON (79), 14 - M/I Eligibility Clarification Code (14).  
Received on MAR 03, 2008@14:40:57.

Insurance : CHAMPVA Contact:  
Group Name : CHAMPVA PRIME Group Number: 123123  
Cardholder ID: SI9844532

Select one of the following:

- O (O) VERRIDE - RESUBMIT WITH OVERRIDE CODES  
D (D) iscontinue - DO NOT FILL PRESCRIPTION  
O (O) UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)verride, (D)iscontinue, (O)ut: O//

Example: Handling a non-DUR/RTS or non-clinical CHAMPVA rejected New Order for ePharmacy Billing.

For CHAMPVA prescription rejections that have non-DUR/RTS or non-clinical rejects, the user will be able to select from (D)iscontinue the prescription or (Q)uit which sends it to the Third Party Payer Rejects - Worklist. CHAMPVA prescriptions with these type rejects cannot be filled until the rejection is resolved. Example:

CHAMPVA Prescription 101113 submitted to ECME for claim generation.

**Claim Status:**

```
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Building the HL7 packet
IN PROGRESS-Transmitting
E REJECTED
  07 - M/I Cardholder ID Number
  14 - M/I Eligibility Clarification Code
```

\*\*\* REJECT RECEIVED FOR CHAMPVA PATIENT \*\*\*

---

```
Division : ALBANY ISC                               NPI#: 5000000021
Patient  : OPCHAMPVA,ONE(666-55-4789)  Sex: M      DOB: OCT 18,1963(44)
Rx/Drug   : 101113/0 - SIMETHICONE 40MG TAB        ECME#: 000000112306
Reject(s): M/I Eligibility Clarification Code (14), M/I Cardholder ID
           Number (07). Received on MAR 03, 2008@14:43:42.
```

---

```
Insurance    : CHAMPVA                         Contact:
Group Name   : CHAMPVA PRIME                   Group Number: 123123
Cardholder ID: SI9844532
```

---

Select one of the following:

<input checked="" type="checkbox"/> D	(D)iscontinue - DO NOT FILL PRESCRIPTION
<input type="checkbox"/> Q	(Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(D)iscontinue, (Q)uit: Q//

For non-billable CHAMPVA prescriptions, an abbreviated version of the reject notification screen will be displayed. Because the prescription is non-billable, the insurance and ECME information that's currently provided for DUR/RTS rejects will not be displayed (i.e. insurance, group name, group #, ECME #, contact, cardholder ID). In this case, the prescription must be discontinued.

Is this correct? YES// ...

\*\*\* CHAMPVA - NON-BILLABLE \*\*\*

---

```
Division : ALBANY ISC                               NPI#:
Patient  : OPCHAMPVA,ONE(666-55-4789)  Sex: M      DOB: OCT 18,1963(44)
Rx/Drug   : 102058/0 - ABSORBABLE GELATIN S
Date/Time: AUG 27, 2008@16:49:46
Reason    : Drug not billable.
```

---

This is a non-billable CHAMPVA prescription. It cannot be filled or sent to the reject worklist. It must be discontinued.

Press <RETURN> to continue...
Nature of Order: SERVICE CORRECTION// S
Requesting PROVIDER: OPHARM OPPHARM,ONE OO

Labels will not print for discontinued CHAMPVA prescriptions, and reprint label will not be allowed for CHAMPVA rejected prescriptions.

Select Rx (Prescriptions) Option: REPrint an Outpatient Rx Label

Reprint Prescription Label: 101113 SIMETHICONE 40MG TAB

Number of Copies? : (1-99): 1//

Print adhesive portion of label only? ? No// NO

Do you want to resend to Dispensing System Device? No// NO

Comments: REPRINT

Rx # 101113 03/03/08  
OPCHAMPVA, ONE #180

ONE MOUTH TWICE A DAY

SIMETHICONE 40MG TAB  
OPPHARM, ONE OPPHARM, ONE  
# of Refills: 3

Select LABEL DEVICE: NULL Bit Bucket

No Label(s) printed.

Reprint Prescription Label:

Suspended CHAMPVA prescriptions will remain on suspense when a reject occurs, when the prescription is non-billable, or when the third party claim remains in an 'IN PROGRESS' status in ECME. Labels will not print. Once the reject is resolved, the user may pull the prescription early from suspense or wait for the next scheduled Print from Suspense option runs at which time labels will print accordingly. This includes CMOP and local suspense.

CHAMPVA Prescription 101607 submitted to ECME for claim generation.

Claim Status:

IN PROGRESS-Building the claim

IN PROGRESS-Transmitting

IN PROGRESS-Parsing response

\*\*\* **CHAMPVA - 'IN PROGRESS'** ECME status \*\*\*

-----  
Division : ALBANY ISC NPI#: 5000000021  
Patient : OPCHAMPVA, ONE (666-55-4789) Sex: M DOB: OCT 18, 1963 (44)  
Rx/Drug : 101607/0 - ACETAZOLAMIDE 250MG  
Date/Time: APR 20, 2008@20:11:17  
Reason : ECME Status is in an 'IN PROGRESS' state and cannot be filled  
-----

This prescription will be suspended. After the third party claim is resolved, it may be printed or pulled early from suspense.

Press <RETURN> to continue...

A rejected CHAMPVA prescription may not have a partial fill ordered until the reject is resolved.

OP Medications (SUSPENDED)	Apr 18, 2008@19:10:16	Page:	1 of 2
OPCHAMPVA, ONE			
PID: 666-55-4789	Ht (cm): _____ (_____)		
DOB: OCT 18, 1963 (44)	Wt (kg): _____ (_____)		
SEX: MALE			
CrCL: <Not Found> (CREAT: Not Found)	BSA (m <sup>2</sup> ): _____		
Rx #: 101526e			
(1) *Orderable Item: ACETAZOLAMIDE PILL			
(2) Drug: ACETAZOLAMIDE 500MG SEQUELS			
NDC: 00555-0513-02			
Verb: TAKE			
(3) *Dosage: 1 PILL			
*Route: ORAL			
*Schedule: BID			
(4) Pat Instructions:	SIG: TAKE 1 PILL BY MOUTH TWICE A DAY		
(5) Patient Status: OTHER FEDERAL			
(6) Issue Date: 04/18/08	(7) Fill Date: 04/19/08		
Last Fill Date: 04/19/08 (Window)			
Last Release Date:	(8) Lot #:		
Expires: 04/19/09 MFG:			
+			
DC Discontinue	PR Partial	RL Release	
ED Edit	RF (Refill)	RN Renew	
Select Action: Next Screen// <input checked="" type="checkbox"/> Partial			
OP Medications (SUSPENDED)	Apr 18, 2008@19:10:16	Page:	1 of 2
OPCHAMPVA, ONE			
PID: 666-55-4789	Ht (cm): _____ (_____)		
DOB: OCT 18, 1963 (44)	Wt (kg): _____ (_____)		
SEX: MALE			
CrCL: <Not Found> (CREAT: Not Found)	BSA (m <sup>2</sup> ): _____		
Rx #: 101526e			
(1) *Orderable Item: ACETAZOLAMIDE PILL			
(2) Drug: ACETAZOLAMIDE 500MG SEQUELS			
Verb: TAKE			
(3) *Dosage: 1 PILL			
*Route: ORAL			
*Schedule: BID			
(4) Pat Instructions:	SIG: TAKE 1 PILL BY MOUTH TWICE A DAY		
(5) Patient Status: OTHER FEDERAL			
(6) Issue Date: 04/18/08	(7) Fill Date: 04/19/08		
Last Fill Date: 04/19/08 (Window)			
Last Release Date:	(8) Lot #:		
Expires: 04/19/09 MFG:			
+ Partial cannot be filled on CHAMPVA non-payable Rx			
DC Discontinue	PR Partial	RL Release	
ED Edit	RF (Refill)	RN Renew	
Select Action: Next Screen//			

If ECME's status on the claim remains in an "In Progress" state past the processing timeout during finish of the prescription, a CHAMPVA prescription will not be allowed to be filled.

Instead it will be placed on suspense until the rejection is resolved. Below is an example of this screen:

```
CHAMPVA Prescription 101607 submitted to ECME for claim generation.
```

Claim Status:

IN PROGRESS-Building the claim  
IN PROGRESS-Transmitting  
IN PROGRESS-Parsing response

```
*** CHAMPVA - 'IN PROGRESS' ECME status ***
```

```
-----  
Division : ALBANY ISC NPI#: 5000000021  
Patient : OPCHAMPVA,ONE(666-55-4789) Sex: M DOB: OCT 18,1963(44)  
Rx/Drug : 101607/0 - ACETAZOLAMIDE 250MG  
Date/Time: APR 20, 2008@20:11:17  
Reason : ECME Status is in an 'IN PROGRESS' state and cannot be filled  
-----
```

This prescription will be suspended. After the third party claim is resolved, it may be printed or pulled early from suspense.

```
Press <RETURN> to continue...
```

If a pharmacy is active for ePharmacy processing but an insurance plan is not linked or not active, the CHAMPVA prescription will be allowed to be filled without third party claim submission. The phrase "Inactive ECME CHAMPVA" will be displayed during Finish and an ECME log entry will be added stating such.

**Example of message during finish:**

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

```
Rx # 102046 08/27/08  
OPCHAMPVA, TEST #180  
ONE MOUTH TWICE A DAY
```

```
DANTROLENE 25MG CAP  
OPPROVIDER, ONE OPPHAR, ONE  
# of Refills: 3
```

```
Is this correct? YES// ...  
-Rx 101921 has been discontinued...
```

```
Inactive ECME CHAMPVA
```

**Example of ECME Activity Log entry:**

ECME Log:	# Date/Time	Rx Ref	Initiator Of Activity
-----------	-------------	--------	-----------------------

```
=====
1 8/27/08@11:07:45 ORIGINAL OPPHARM, ONE
Comments: CHAMPVA -Inactive ECME CHAMPVA
```

### **Displaying a Patient's Remote Prescriptions**

If 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//
```

If the user responds **NO**, then the normal procedure occurs for entering prescriptions. If the user responds **YES**, the “Remote Facilities Visited” screen appears such as the following example.

```
Remote Facilities Visited Dec 30, 2008@17:26:47 Page: 1 of 1
Patient: PSOPATIENT,ONE (000-00-0000) DOB: 01/02/1967
Station
HDR CHEYENNE

Enter ?? for more actions
DR Display Remote Pharmacy Data DB Display Both Pharmacy Data
Action:Quit//DR
```

To display the prescriptions at the remote pharmacy location, enter DR at the “Action” prompt. The “Medication Profile – Remote” screen appears such as the following example.

```
Medication Profile - Remote Dec 30, 2008@17:29:43 Page: 1 of 2
Patient: PSOPATIENT,ONE (000-00-0000) DOB: 01/02/1967
RX# DRUG ST QTY ISSUED LAST FILLED
HDR CHEYENNE
712885 AMOXICILLIN TRIHYDRATE 250MG CAP A 90 11/06/08 11/06/08
SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
PROVIDER: MCKAY, ELMER
712886 DILTIAZEM (INWOOD) 240MG CAP,SA A 30 11/28/08 11/28/08
SIG: TAKE ONE CAPSULE BY MOUTH EVERY DAY
PROVIDER: MCKAY, ELMER
712888 LABETALOL HCL 200MG TAB A 60 12/30/08 12/30/08
SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
PROVIDER: MCKAY, ELMER
712887 SIMVASTATIN 20MG TAB A 15 12/09/08 12/09/08
SIG: TAKE ONE-HALF TABLET BY MOUTH EVERY EVENING TESTING
FOR PATTESTING FOR PATIENT TESTING FOR PATTESTING
FOR PATIENTENT INSTRUCTION ON SIG1 TESTING FOR
PATIENT INSTRUCTION ON SIG1 TESTING FOR PATIENT
REPLACE IENT WITH IENT TESTING FOR PATIENT
+
Enter ?? for more actions

Select Action:Next Screen//
```

## Editing a New Order

An asterisk or star (\*) is shown in front of each field that will create a new order if it is changed. The Sig field cannot be edited directly, but it will change if the fields used to construct the Sig are edited.

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. For more information, see the example Editing an ePharmacy Order.



**Note:** Do not use the up-arrow (^) after editing one field to jump past the rest of the fields. Using just the up-arrow results in the changes just entered being deleted. The user must press <Enter> through *all* the order fields when editing to save the changes.

### Example: Editing a New Order

```
OP Medications (ACTIVE)      May 30, 2001 16:48:05      Page: 1 of 3
OPPATIENT16,ONE
PID: 000-24-6802
DOB: APR 3,1941 (60)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)          BSA (m2): 1.95
                                                Ht (cm): 177.80 (02/08/1999)
                                                Wt (kg): 90.45 (02/08/1999)

Rx #: 503908
(1) *Orderable Item: AMPICILLIN CAP,ORAL *** (N/F) ***
(2) Drug: AMPICILLIN 250MG CAP *** (N/F) ***
     NDC: 00093-5145
(3) *Dosage: 500 (MG)
     Verb: TAKE
     Dispense Units: 2
     Noun: CAPSULES
     *Route: ORAL
     *Schedule: QID
     *Duration: 10D (DAYS)
(4) Pat Instructions: with food
     SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
          WITH FOOD
(5) Patient Status: SERVICE CONNECTED
+       Enter ?? for more actions
DC Discontinue      PR Partial      RL Release
ED Edit            RF (Refill)    RN Renew
Select Action: Next Screen// ED Edit
Select fields by number: (1-19): 4
PATIENT INSTRUCTIONS: WITH FOOD// WITH FOOD AVOIDING DAIRY FOODS
```

If a new order is created due to the editing of a field that affects copay, like Duration, the values previously entered display as defaults.

Edits to fields that are not starred (\*), like Patient Instructions, will not create a new order. Note that the new Patient Instruction text now appears at the end of the Sig.

### **Example: Editing a New Order (continued)**

```
OP Medications (ACTIVE)      May 30, 2001 16:54:25      Page: 1 of 3
OPPATIENT16,ONE
PID: 000-24-6802
DOB: APR 3,1941 (60)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)          BSA (m2): 1.95
                                                Ht(cm): 177.80 (02/08/1999)
                                                Wt(kg): 90.45 (02/08/1999)

Rx #: 503908
(1) *Orderable Item: AMPICILLIN CAP,ORAL *** (N/F) ***
(2)           Drug: AMPICILLIN 250MG CAP *** (N/F) ***
           NDC: 00093-5145
(3)           *Dosage: 500 (MG)
           Verb: TAKE
Dispense Units: 2
           Noun: CAPSULES
           *Route: ORAL
           *Schedule: QID
           *Duration: 10D (DAYS)
(4) Pat Instructions: WITH FOOD AVOIDING DAIRY FOODS
           SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
           WITH FOOD AVOIDING DAIRY FOODS
(5) Patient Status: SERVICE CONNECTED
+   Enter ?? for more actions
DC Discontinue      PR Partial          RL Release
ED Edit            RF (Refill)        RN Renew
Select Action: Next Screen//
```

When a starred field, like Dosage, is changed, a new order is created. The dispense units per dose and quantity are recalculated, if possible, and the new order includes a remark noting the original prescription number.

```
Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 500// 750MG 750MG

You entered 750MG is this correct? Yes// <Enter> YES
VERB: TAKE// <Enter> TAKE
DISPENSE UNITS PER DOSE (CAPSULE(S)): 3// <Enter> 3
Dosage Ordered: 750MG
NOUN: CAPSULE(S)// <Enter> CAPSULE(S)
ROUTE: ORAL// <Enter> ORAL
Schedule: <Enter> QID
Now searching ADMINISTRATION SCHEDULE (#51.1) file...
    QID QID FOUR TIMES A DAY
    ...OK? Yes// (Yes)
    (FOUR TIMES A DAY)

LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10D// <Enter> 10D (DAYS)
CONJUNCTION: <Enter>
New OP Order (ROUTINE)      May 30, 2001 17:11:44      Page: 1 of 2
OPPATIENT16,ONE
PID: 000-24-6802
DOB: APR 3,1941 (60)
SEX: MALE
                                                Ht(cm): 177.80 (02/08/1999)
                                                Wt(kg): 90.45 (02/08/1999)
```

CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95

Orderable Item: AMPICILLIN CAP,ORAL \*\*\* (N/F) \*\*\*  
 (1) Drug: AMPICILLIN 250MG CAP \*\*\* (N/F) \*\*\*  
 (2) Patient Status: SERVICE CONNECTED  
 (3) Issue Date: MAY 30,2001 (4) Fill Date: MAY 30,2001  
 (5) Dosage Ordered: 750 (MG)  
 Verb: TAKE  
 Dispense Units: 3  
 Noun: CAPSULE(S)  
 Route: ORAL  
 Schedule: QID  
 \*Duration: 10D (DAYS)  
 (6) Pat Instruction: WITH FOOD AVOIDING DAIRY FOODS  
 SIG: TAKE THREE CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10  
 DAYS WITH FOOD AVOIDING DAIRY FOODS  
 :  
 (7) Days Supply: 10 (8) QTY (CAP): 120  
 (9) # of Refills: 0 (10) Routing: WINDOW  
 (11) Clinic: OUTPT NURSE GREEN TEAM  
 (12) Provider: OPPROVIDER4,TWO (13) Copies: 1  
 (14) Remarks: New Order Created by editing Rx # 503908.  
 Entry By: OPPROVIDER4,TWO Entry Date: MAY 30,2001 17:11:44  
 This change will create a new prescription!  
 AC Accept ED Edit  
 Select Action: Edit// AC



If the DAYS SUPPLY field is edited, the QTY field is recalculated. If the QTY field is edited, the DAYS SUPPLY field value does not change, but a message is displayed warning the user of the change and recommending that the value be checked.

New OP Order (ROUTINE) May 31, 2001 12:57:06 Page: 2 of 2  
 OPPATIENT16,ONE <A>  
 PID: 000-24-6802 Ht(cm): 177.80 (02/08/1999)  
 DOB: APR 3,1941 (60) Wt(kg): 90.45 (02/08/1999)  
 +  
 (7) Days Supply: 30 (8) QTY (CAP): 120  
 (9) # of Refills: 0 (10) Routing: WINDOW  
 (11) Clinic: OUTPT NURSE GREEN TEAM  
 (12) Provider: OPPROVIDER4,TWO (13) Copies: 1  
 (14) Remarks: New Order Created by editing Rx # 503910.  
 Entry By: OPPROVIDER4,TWO Entry Date: MAY 31,2001 12:57:06  
 Enter ?? for more actions  
 AC Accept ED Edit  
 Select Action: Edit// <Enter> Edit  
 Select Field to Edit by number: (1-14): 7  
 DAYS SUPPLY: (1-90): 10// 7

Once changes are entered the screen redisplays with the changes and the order can be accepted or edited again.

If the order is accepted, the prescription is checked for drug/drug interactions and, if none exist, prompts follow for nature of order and whether the patient was counseled.

### **Example: Editing a New Order (continued)**

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

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

Nature of Order: WRITTEN// ??
```

Nature of Order Activity	Require E.Signature	Print Chart Copy	Print on Summary
WRITTEN			x
VERBAL	x	x	x
TELEPHONED	x	x	x
SERVICE CORRECTION			
POLICY		x	x
DUPLICATE			
SERVICE REJECT	x	x	

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

### **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 <A>
OPPATIENT, FOUR
PID: 000-01-1322P Ht (cm): _____ (_____)
DOB: JAN 13, 1922 (83) Wt (kg): _____ (_____)
SEX: MALE CrCL: <Not Found> (CREAT: Not Found) BSA (m2): _____
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): _____
ISSUE LAST REF DAY
# RX # DRUG QTY ST DATE FILL REM SUP
-----ACTIVE-----
1 100003840e PREDNISONE 5MG TAB 30 A> 11-02 11-02 5 30
```

Enter ?? for more actions PU Patient Record Update PI Patient Information Select Action: Quit// <b>1</b>	NO New Order SO Select Order
---	---------------------------------

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

The DAW Code default is 0 – No Product Selection Indicated, unless the DAW Code has been set for this drug at the DRUG file level.

Enter **21** to edit the field.

**Example: Editing an ePharmacy Order (continued)**

OP Medications (ACTIVE) OPPATIENT, FOUR	Nov 03, 2005@12:51:52	Page: 3 of 3 <b>&lt;A&gt;</b>
PID: 000-01-1322P DOB: JAN 13,1922 (83) SEX: MALE CrCL: <Not Found> (CREAT: Not Found)	Ht (cm) : _____ (_____) Wt (kg) : _____ (_____)	BSA (m <sup>2</sup> ) : 1.95

(19) Counseling: YES Was Counseling Understood: YES  
(20) Refill Data  
(21) DAW Code: 0 - NO PRODUCT SELECTION INDICATED  
Entry By: OPPHARMACIST4, THREE Entry Date: 11/03/05 12:50:51

+ Enter ?? for more actions  
DC Discontinue PR Partial RL Release  
ED Edit RF Refill RN Renew  
Select Action: Next Screen// **21**  
Select fields by number: (1-21): **21**  
  
DAW CODE: 0// ??  
  
Answer with BPS NCPDP DAW CODE  
Choose from:  
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

Dispensed As Written code. This information is used for electronic claim transmission to third party payers (insurance companies).

DAW CODE: 0// **5** - SUBSTITUTION ALLOWED-BRAND DRUG DISPENSED AS A GENERIC  
Are You Sure You Want to Update Rx 100003853? Yes// <Enter>

The field is updated and displayed in the Medication Profile.

OP Medications (ACTIVE) Nov 03, 2005@12:51:52 Page: 1 of 3  
OPPATIENT, FOUR <A>  
PID: 000-01-1322P Ht (cm): \_\_\_\_\_ (\_\_\_\_\_)  
DOB: JAN 13, 1922 (83) Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95  
  
(19) Counseling: YES Was Counseling Understood: YES  
(20) Refill Data  
(21) DAW Code: 0 - NO PRODUCT SELECTION INDICATED  
Entry By: OPPHARMACIST4, THREE Entry Date: 11/03/05 12:50:51

```

+           Enter ?? for more actions
DC   Discontinue      PR   Partial          RL   Release
ED   Edit             RF   Refill          RN   Renew
Select Action: Quit//  

New OP Order (ROUTINE)      Nov 04, 2005@08:36:29      Page: 2 of 2
OPPATIENT, FOUR
PID: 000-01-1322P          Ht (cm): _____ (_____)
DOB: JAN 13, 1922 (83)      Wt (kg): _____ (_____)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 1.95

+
(7)    Days Supply: 30          (8)    QTY (TAB): 30
(9)    # of Refills: 5         (10)   Routing: WINDOW
(11)   Clinic:
(12)   Provider: OPPROVIDER4, TWO      (13)   Copies: 1
(14)   Remarks: New Order Created by editing Rx # 100003840.
Entry By: OPPHARMACIST4, THREE      Entry Date: NOV 4, 2005 08:36:06

```

This change will create a new prescription!

```

AC   Accept      ED   Edit
Select Action: Edit// AC   Accept
Nature of Order: SERVICE CORRECTION// <Enter> S
WAS THE PATIENT COUNSELED: NO// YES
WAS COUNSELING UNDERSTOOD: NO// YES

```

```

Do you want to enter a Progress Note? No// <Enter> NO
Rx # 100003852      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// <Enter> YES...  
Claim has status E REJECTED. Not reversed.

This status refers to the original prescription.

Veteran Prescription 100003852 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  
E PAYABLE

This status refers to the newly created prescription.

## Using the Copy Action

When a double question mark (??) is entered at the "Select Action" prompt above, the hidden actions below will display in the action area.

The following actions are also available:

AL	Activity Logs (OP)	REJ	View REJECT	DN	Down a Line
VF	Verify (OP)	VER	View ePharmacy Rx	FS	First Screen
CO	Copy (OP)	RES	Resubmit Claim	GO	Go to Page
TR	Convert Titration Rx	REV	Reverse Claim	LS	Last Screen
TM	Titration Mark/UnmarkIN		Intervention Menu	PS	Print Screen
RP	Reprint (OP)	DA	Display Drug AllergiesPT		Print List
HD	Hold (OP)	DIN	Drug Restr/Guide (OP)QU		Quit
UH	Unhold (OP)	+	Next Screen	RD	Re Display Screen
PI	Patient Information	-	Previous Screen	SL	Search List
PP	Pull Rx (OP)	<	Shift View to Left	UP	Up a Line
IP	Inpat. Profile (OP)	>	Shift View to Right		
OTH	Other OP Actions	ADPL	Auto Display(On/Off)		

Copy is a hidden action used to create a new order exactly like the original order. Any field of the new order can be edited. This action does not affect the status of the original order but the duplicate order checks will occur.

### Example: Using the Copy Action

```
Medication Profile                Jun 04, 2001 15:49:09          Page: 1 of 1
OPPATIENT6,ONE
PID: 000-13-5790
DOB: FEB 8,1922 (79)
Ht(cm): 175.26 (08/10/1999)
Wt(kg): 75.45 (08/10/1999)

SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)          BSA (m2): 2.15

ISSUE LAST REF DAY
# 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
```

Actions in parentheses, like Refill in the example below, are not available for the order.

OP Medications (ACTIVE) Jun 04, 2001 15:50:49 Page: 1 of 3  
 OPPATIENT6,ONE  
 PID: 000-13-5790 Ht (cm): 175.26 (08/10/1999)  
 DOB: FEB 8,1922 (79) Wt (kg): 75.45 (08/10/1999)  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 2.15  
 Rx #: 503911\$  
 (1) \*Orderable Item: AMPICILLIN CAP,ORAL \*\*\* (N/F) \*\*\*  
 (2) Drug: AMPICILLIN 250MG CAP \*\*\* (N/F) \*\*\*  
     NDC: 00093-5145  
 (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

After "CO" is entered, the heading on the screen changes to "New OP Order (COPY)" and the available actions are limited to "Accept" or "Edit".

### **Example: Using the Copy Action (continued)**

New OP Order (COPY) Jun 04, 2001 15:51:32 Page: 1 of 2  
 OPPATIENT6,ONE  
 PID: 000-13-5790 Ht (cm): 175.26 (08/10/1999)  
 DOB: FEB 8,1922 (79) Wt (kg): 75.45 (08/10/1999)  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 2.15  
 Orderable Item: AMPICILLIN CAP,ORAL \*\*\* (N/F) \*\*\*  
 (1) Drug: AMPICILLIN 250MG CAP \*\*\* (N/F) \*\*\*  
 (2) Patient Status: OUTPT NON-SC  
 (3) Issue Date: JUN 4,2001 (4) Fill Date: JUN 4,2001  
 (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

Once the copied order is accepted, the previous order information displays.

Duplicate Drug in Local Rx:

Rx #: 503911  
Drug: AMPICILLIN 250MG CAP  
SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV COMMENTS  
QTY: 80 Refills remaining: 0  
Provider: OPPROVIDER4, TWO Issued: 05/25/01  
Status: Active Last filled on: 06/01/01  
Processing Status: Released locally on 06/01/01@11:34:13 (Window)  
Days Supply: 10

Discontinue Rx # 503911? **YES**

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

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

Press Return to Continue:

Nature of Order: WRITTEN// <Enter> W  
WAS THE PATIENT COUNSELED: NO// <Enter> NO

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

The new order information is displayed and, once verified, the old order is discontinued.

### **Example: Using the Copy Action (continued)**

Rx # 503913 06/04/01  
OPPATIENT6, ONE #80  
TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV COMMENTS

AMPICILLIN 250MG CAP  
OPPROVIDER4, TWO OPPHARMACIST4, THREE  
# of Refills: 0

Is this correct? YES//<Enter> ...  
-Rx 503911 has been discontinued...

SC Percent: 10%  
Disabilities:  
PROSTATE GLAND CONDITION 10% - SERVICE CONNECTED  
INGUINAL HERNIA 0% - SERVICE CONNECTED

Was treatment for Service Connected condition: **N**

The Medication Profile screen is redisplayed at this point. The dollar sign after the first prescription number means that a copay charge is associated with that order. The default printer is displayed and the user can queue the label to print, change the default printer, or hold, suspend, or bypass printing.

Medication Profile Jun 04, 2001 16:03:55 Page: 1 of 1  
 OPPATIENT6,ONE  
 PID: 000-13-5790 Ht (cm): 175.26 (08/10/1999)  
 DOB: FEB 8,1922 (79) Wt (kg): 75.45 (08/10/1999)  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.92  
 ISSUE LAST REF DAY  
 # RX # DRUG QTY ST DATE FILL REM 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>

### 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.

Patient Information Nov 04, 2005@09:19:26 Page: 1 of 1  
 OPPATIENT,FOUR  
 PID: 000-01-1322P Ht (cm): \_\_\_\_\_ (\_\_\_\_\_)  
 DOB: JAN 13,1922 (83) Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found) BSA (m2): \_\_\_\_\_

Eligibility: NSC, VA PENSION

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      Ht (cm): \_\_\_\_\_ (\_\_\_\_\_)  
 DOB: JAN 13,1922 (83)      Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): \_\_\_\_\_  
 # RX # DRUG      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

OP Medications (ACTIVE)      Nov 04, 2005@09:24:17      Page: 1 of 1  
 OPPATIENT, FOUR  
 PID: 000-01-1322P      Ht (cm): \_\_\_\_\_ (\_\_\_\_\_)  
 DOB: JAN 13,1922 (83)      Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): \_\_\_\_\_

Rx #: 100003852e  
 (1) \*Orderable Item: PREDNISONE TAB  
 (2) CMOP Drug: PREDNISONE 5MG TAB  
     NDC: 00054-4728  
 (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 <A>  
PID: 000-01-1322P Ht (cm): ( )

DOB: JAN 13,1922 (83) Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2):

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 in Local Rx:

Rx #: 100003852  
Drug: PREDNISONE 5MG TAB  
SIG: TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30  
DAYS WITH FOOD AVOIDING DAIRY FOODS  
QTY: 30 Refills remaining: 5  
Provider: OPPROVIDER4,TWO Issued: 11/04/05  
Status: Active Last filled on: 11/04/05  
Processing Status: Released locally on 11/04/05@11:34:13 (Mail)  
Days Supply: 30

Discontinue Rx # 100003852? **YES**

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

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced 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...

Veteran 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	BSA (m2):	_____	
CrCL:	<Not Found> (CREAT: Not Found)	ISSUE	LAST REF DAY	
# RX #	DRUG	QTY	ST DATE	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//

### Reversing an ePharmacy Claim

Reverse Claim is another hidden action, used to reverse a claim. Claims are almost always reversed by the ePharmacy Site Manager and not by untrained Pharmacy staff members. If the prescription has a primary and secondary claim, neither claim may be reversed with this action. In that case, contact an OPECC to resolve the issue.

The action will prompt for a fill number with a default value of the most recent fill.

### Example: Reversing an ePharmacy Claim

```
Select Action: Next Screen// REV Reverse Claim
Enter the line numbers for the Payable claim(s) to be Reversed.

You've chosen to REVERSE the following prescription for OPPATIENT,ONE
 2.62 COLCHICINE 0.6MG 00143120110 05/06 2720684      0/000004317569 W RT AC/N
Enter REQUIRED REVERSAL REASON: ?

This response must have no more than 60 characters
and must not contain embedded up arrow.

Enter REQUIRED REVERSAL REASON: TESTING
Are you sure?(Y/N) ? YES

Processing Primary claim...

Claim Status:
Reversing...
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
E REVERSAL ACCEPTED

Reversal Accepted
1 claim reversal submitted.
```

### 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	DN	Down a Line	
VF	Verify (OP)	VER	View ePharmacy Rx	FS	First Screen	
CO	Copy (OP)	RES	Resubmit Claim	GO	Go to Page	
TR	Convert Titration Rx	REV	Reverse Claim	LS	Last Screen	
TM	Titration Mark/Unmark IN		Intervention Menu	PS	Print Screen	
RP	Reprint (OP)	DA	Display Drug Allergies PT		Print List	
HD	Hold (OP)	DIN	Drug Restr/Guide (OP) QU		Quit	
UH	Unhold (OP)	+	Next Screen	RD	Re Display Screen	
PI	Patient Information	-	Previous Screen	SL	Search List	
PP	Pull Rx (OP)	<	Shift View to Left	UP	Up a Line	
IP	Inpat. Profile (OP)	>	Shift View to Right			
OTH	Other OP Actions	ADPL	Auto Display(On/Off)			

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)



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)



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).

#### **Example: HOLD with PSORPH Security Key or PSO TECH ADV Security Key**

OP Medications (SUSPENDED)	May 11, 2012@10:12:56	Page: 1 of 3
PAGPATNM, M		<A>
PID: 666-00-0286	Ht (cm) : _____ ( _____ )	
DOB: DEC 1, 1900	Wt (kg) : _____ ( _____ )	
SEX: MALE		
CrCL: <Not Found> (CREAT: Not Found)	BSA (m <sup>2</sup> ) : _____	
Rx #: 100002926		

```

(1) *Orderable Item: FLUOXETINE CAP, ORAL
(2)          CMOP Drug: EFFEXOR
                  NDC: 55111-0147
(3)          *Dosage: 10 (MG)
                  Verb: TAKE
          Dispense Units: 1
                  Noun: CAPSULE
                  *Route: ORAL
                  *Schedule: QAM
(4) Pat Instructions:
                  SIG: TAKE ONE CAPSULE MOUTH EVERY MORNING
(5) Patient Status: OPT NSC
(6) Issue Date: 02/14/12           (7) Fill Date: 05/09/12
          Last Fill Date: 05/29/12 (Mail)
+          Enter ?? for more actions
DC  Discontinue          PR  Partial          RL  Release
ED  Edit                 RF  (Refill)        RN  Renew
Select Action: Next Screen// HD  HD
Nature of Order: WRITTEN//      W

```

If the user has the PSORPH security key, the following HOLD reasons are available:

```

HOLD REASON: ?

Enter reason medication is placed in a 'Hold' status.
Choose from:
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)

```

If the user has the PSO TECH ADV security key, the following HOLD reasons are available:

```

HOLD REASON: ?

Enter reason medication is placed in a 'Hold' status.
Choose from:
1      INSUFFICIENT QTY IN STOCK
7      BAD ADDRESS
8      PER PATIENT REQUEST
98     OTHER/TECH (NON-CLINICAL)

```

The same conditions apply for Unholding a prescription. Users with the PSORPH security key can unhold for the following reason:

```

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)

Users with only the PSO TECH ADV security key can unhold for the following reasons:

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



If a user does not have a PSORPH security key and tries to unhold a prescription, the message “**The HOLD can only be removed by a pharmacist**” is displayed.

Each time a user holds or unholds a prescription, an entry is created in the Activity Log. These entries include HOLD COMMENTS and the HOLD REASON when a prescription is placed on HOLD and UNHOLD COMMENTS when the prescription is removed from HOLD. Again, HOLD reasons 98 and 99 require the user to enter a HOLD comment.

### **Example: Activity Log with HOLD/UNHOLD Comments**

Activity Log:				
#	Date	Reason	Rx Ref	Initiator Of Activity
...				
8	05/10/12	HOLD	REFILL 1	USER, PHARMACY
				Comments: Rx placed on HOLD (Reason: BAD ADDRESS) and removed from SUSPENSE - HOLD COMMENTS ENTERED BY THE USER MANUALLY.
...				
9	05/10/12	UNHOLD	REFILL 1	USER, PHARMACY
				Comments: Rx Removed from HOLD - UNHOLD COMMENTS ENTERED BY THE USER WHEN REMOVING THE RX FROM HOLD. Renewing a Prescription

This action allows the pharmacy manager, pharmacist, or pharmacy technician to process renewals for existing orders.

### **Example: Renewing a Prescription**

(This example begins after an order is selected from the Medication Profile screen.)

OP Medications (ACTIVE)	Jun 04, 2001 16:14:40	Page: 1 of 3
OPPATIENT29, ONE		<A>
PID: 000-87-6543	Ht (cm): 175.26 (06/07/2000)	
DOB: SEP 12, 1919 (81)	Wt (kg): 79.09 (06/07/2000)	
SEX: MALE		
CrCL: <Not Found> (CREAT: Not Found)	BSA (m2): 1.95	
Rx #: 503910		

```

(1) *Orderable Item: AMPICILLIN CAP,ORAL *** (N/F) ***
(2)          Drug: AMPICILLIN 250MG CAP *** (N/F) ***
          NDC: 00093-5145
(3)          *Dosage: 500 (MG)
          Verb: TAKE
Dispense Units: 2
          Noun: CAPSULES
          *Route: ORAL
          *Schedule: QID
          *Duration: 10D (DAYS)
(4) Pat Instructions: with food
          SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
          WITH FOOD
(5) Patient Status: SERVICE CONNECTED
          Enter ?? for more actions
DC  Discontinue      PR  Partial           RL  Release
ED  (Edit)           RF  (Refill)         RN  Renew
Select Action: Quit// RN  Renew
FILL DATE: (6/4/2001 - 7/4/2001): TODAY// <Enter> (JUN 04, 2001)
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
Nature of Order: WRITTEN// <Enter> W
WAS THE PATIENT COUNSELED: NO// <Enter> NO

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

Now Renewing Rx # 503910    Drug: AMPICILLIN 250MG CAP

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...
-----  

503910A      AMPICILLIN 250MG CAP           QTY: 80
# OF REFILLS: 0  ISSUED: 06-04-01
SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS WITH FOOD
FILLED: 06-20-01
ROUTING: WINDOW      PHYS: OPPROVIDER4,TWO

Edit renewed Rx ? Y//
```

If the order is not edited, the order is renewed and the display returns to the Medication Profile screen.

### **Example: Renewing a Prescription (continued)**

(To save space, only the second Prescription Renew screen is displayed in this example.)

Prescription Renew	Jun 04, 2006 16:18:17	Page: 2 of 2
OPPATIENT29,ONE		<A>
PID: 000-87-6543	Ht (cm): 175.26 (06/07/2000)	
DOB: SEP 12,1919 (81)	Wt (kg): 79.09 (06/07/2000)	

```

+
      SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
          WITH FOOD
      Days Supply: 30
          QTY (CAP): 80
      (3) # of Refills: 0
      (4) Routing: WINDOW
      (5) Clinic: OUTPT NURSE GREEN TEAM
      (6) Provider: OPPROVIDER4,TWO
      (7) Copies: 1
      (8) Remarks: RENEWED FROM RX # 503910
      Entry By: OPPROVIDER4,TWO           Entry Date: JUN 4,2006 16:16:27

      Enter ?? for more actions
      AC Accept          DC Discontinue
      BY Bypass          ED Edit
      Select Item(s): Quit// ED   Edit [Or enter the field(s), e.g., 1,5,7]

      Select Field to Edit by number: (1-8): 5
      CLINIC: OUTPT NURSE GREEN TEAM //OUT
          1 OUTPT NURSE BLUE TEAM
          2 OUTPT NURSE GREEN TEAM
          3 OUTPT NURSE YELLOW TEAM
      CHOOSE 1-3: 1 OUTPT NURSE BLUE TEAM
      Prescription Renew       Jun 04, 2006 16:24:32           Page: 2 of 2
      OPPATIENT29,ONE
      PID: 000-87-6543           Ht (cm): 175.26 (06/07/2000)
      DOB: SEP 12,1919 (81)           Wt (kg): 79.09 (06/07/2000)
+
      SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
          WITH FOOD
      Days Supply: 30
          QTY (CAP): 80
      (3) # of Refills: 0
      (4) Routing: WINDOW
      (5) Clinic: OUTPT NURSE BLUE TEAM
      (6) Provider: OPPROVIDER4,TWO
      (7) Copies: 1
      (8) Remarks: RENEWED FROM RX # 503910
      Entry By: OPPROVIDER4,TWO           Entry Date: JUN 4,2006 16:23:56

      Enter ?? for more actions
      AC Accept          DC Discontinue
      BY Bypass          ED Edit
      Select Item(s): Quit// AC Accept

      RX# 503910A has been suspended until 06-20-01.

```



The user may renew more than one order on the same patient by typing the desired order numbers separated by a comma (for example: 1,3,5). Original provider comments are not carried over to any renewals in Outpatient Pharmacy.

### **Renewing an ePharmacy Order**

When renewing an ePharmacy order, upon acceptance of the renewed 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.

(This example begins after an order is selected from the Medication Profile screen.)

```
OP Medications (ACTIVE)           Nov 04, 2005@11:48:14          Page: 1 of 3
OPPATIENT,FOUR
PID: 000-01-1322P               Ht (cm): _____ (_____)
DOB: NOV 12,1075 (29)           Wt (kg): _____ (_____)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): _____
Rx #: 100003642$e
(1) *Orderable Item: SIMETHICONE TAB,CHEWABLE
(2)          Drug: SIMETHICONE 40MG TAB
             NDC: 55154-8606-0
(3)          *Dosage: 40 (MG)
             Verb: CHEW
             Dispense Units: 1
             Noun: TABLET
             *Route: ORAL
             *Schedule: TID
(4) Pat Instructions:
             SIG: CHEW ONE TABLET BY BY MOUTH THREE TIMES A DAY
(5) Patient Status: OPT NSC
(6) Issue Date: 08/11/05          (7) Fill Date: 08/11/05
             Last Fill Date: 08/11/05 (Window)
+           Enter ?? for more actions
DC Discontinue          PR Partial          RL Release
ED Edit                 RF Refill          RN Renew
Select Action: Next Screen// RN Renew
FILL DATE: (11/4/2005 - 11/5/2006): TODAY// <Enter> (NOV 04, 2005)
MAIL/WINDOW: WINDOW// <Enter>WINDOW
METHOD OF PICK-UP: <Enter>
Nature of Order: WRITTEN// <Enter> W
WAS THE PATIENT COUNSELED: NO//<Enter> NO

Now Renewing Rx # 100003642    Drug: SIMETHICONE 40MG TAB
Now doing remote order checks. Please wait...
Now doing allergy checks. Please wait...
Now processing Clinical Reminder Order Checks. Please wait ...
Now Processing Enhanced Order Checks! Please wait...
-----
100003642A  SIMETHICONE 40MG TAB          QTY: 90
# OF REFILLS: 5 ISSUED: 11-04-05
SIG: CHEW ONE TABLET BY BY MOUTH THREE TIMES A DAY
FILLED: 11-04-05
ROUTING: WINDOW      PHYS: OPPROVIDER4,TWO
Edit renewed Rx ? Y// <Enter> ES
```

### **Example: Renewing an ePharmacy Order (continued)**

(To save space, only the second Prescription Renew screen is displayed in this example.)

Prescription Renew                    Jun 04, 2001 16:18:17                    Page: 2 of 2  
 OPPATIENT, FOUR  
 PID: 000-01-1322P                    Ht (cm): \_\_\_\_\_ (\_\_\_\_\_)  
 DOB: NOV 12, 1075 (29)                    Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)  
 +  
 Days Supply: 30  
 QTY ( ) : 90  
 (3) # of Refills: 5  
 (4) Routing: WINDOW  
 (5) Clinic:  
 (6) Provider: OPPROVIDER4, TWO  
 (7) Copies: 1  
 (8) Remarks: RENEWED FROM RX # 100003642  
 Entry By: OPPHARMACIST4, THREE                    Entry Date: NOV 4, 2005 11:56:31  
  
 Enter ?? for more actions  
 AC Accept                            DC Discontinue  
 BY Bypass                            ED Edit  
 Select Item(s): Quit// 5

**CLINIC: 3EN**  
 Prescription Renew                    Jun 04, 2001 16:24:32                    Page: 2 of 2  
 OPPATIENT, FOUR  
 PID: 000-01-1322P                    Ht (cm): \_\_\_\_\_ (\_\_\_\_\_)  
 DOB: NOV 12, 1075 (29)                    Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)  
 +  
 Days Supply: 30  
 QTY ( ) : 90  
 (3) # of Refills: 5  
 (4) Routing: WINDOW  
 (5) Clinic:  
 (6) Provider: OPPROVIDER4, TWO  
 (7) Copies: 1  
 (8) Remarks: RENEWED FROM RX # 100003642  
 Entry By: OPPHARMACIST4, THREE                    Entry Date: NOV 4, 2005 11:56:31  
  
 Enter ?? for more actions  
 AC Accept                            DC Discontinue  
 BY Bypass                            ED Edit  
 Select Item(s): Quit// **AC Accept**  
 SC Percent: 40%  
 Disabilities: NONE STATED

Was treatment for Service Connected condition? NO// <Enter>  
 Reversing prescription 100003642.

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 100003642 has been discontinued...



Original provider comments are not carried over to any renewals in Outpatient Pharmacy.

## 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> (CREAT: Not Found)	BSA (m2): 2.08	
# RX #	DRUG	ISSUE LAST REF DAY
		QTY ST DATE FILL REM SUP
-----ACTIVE-----		
1 100002518	PENICILLAMINE 250MG TAB	31 A 02-29 02-29 5 31
-----PENDING-----		
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)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95

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 \* Editing starred fields will  
Drug Message: NATL FORM create a new order  
(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  
+ 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): \_\_\_\_\_ (\_\_\_\_\_)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2):

Flagged by PHARMACY,USER on 6/12/12@14:00: test

Rx#: 100001943A  
Orderable Item: ACETAMINOPHEN TAB  
CMOP Drug: THIORIDAZINE 30MG/ML CONC.  
NDC: 24236-641-02  
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.

### **Example: Unflagging an Order**

```
FLAGGED: 03/13 23:14 by OPPHARM, TWO
        DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE DISPENSING.
COMMENTS: CHECKED WITH PATIENT. NO HEART CONDITION.
          ... order unflagged.
```

At that point, the flag from the Medication Profile is removed, but the flagged/unflagged reason remains on the Pending OP Orders screen unless you reflag the order.



**Note:** If a user does not have the PSORPH security key, they cannot unflag an order and will receive the following message when selecting the Accept (AC) action:

```
+      Enter ?? for more actions
AC    Accept           DC   (Discontinue)       FL   (Flag/Unflag)
BY    Bypass           ED   (Edit)
Select Item(s): Next Screen// AC   Accept

Order must be unflagged by a pharmacist before it can be finished.

Enter RETURN to continue:
```

### **Example: An Unflagged Order**

```
Pending OP Orders (ROUTINE)      March 14, 2008 09:16:33      Page: 1 of 2
OPPATIENT16,ONE
PID: 000-24-6802
DOB: APR 3,1941 (66)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)          BSA (m2): 1.95
                                                <NO ALLERGY ASSESSMENT>
                                                Ht(cm): 177.80 (02/08/2007)
                                                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.
Unflagged by OPPHARM, TWO on 03/14/08@09:26: CHECKED WITH PATIENT. NO HEART
CONDITION.

* (1) Orderable Item: ACETAMINOPHEN TAB
(2)      CMOP Drug: ACETAMINOPHEN 500MG TAB
          Drug Message: NATL FORM
          *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
                                                * Editing starred fields will
                                                create a new order
```

```

(8) Days Supply: 30          (9) QTY (TAB): 60
+ Enter ?? for more actions
BY Bypass           DC Discontinue      FL Flag/Unflag
ED Edit            FN Finish
Select Item(s): Next Screen//
```

### Example: An Unflagged Renewal

```

Prescription Renew          Jun 12, 2012@14:02:18          Page: 1 of 2
PAGPATNM, M
PID: 666-00-0286          Ht (cm): _____ (_____)
DOB: DEC 1, 1900          Wt (kg): _____ (_____)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)          BSA (m2): _____
Flagged by PHARMACY, USER on 6/12/12@14:00: test
Unflagged by PHARMACY, USER on 6/12/12@14:02: testing unflag

Rx#: 100001943A
Orderable Item: ACETAMINOPHEN TAB
CMOP Drug: THIORDAZINE 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)
+ Enter ?? for more actions
AC Accept           DC Discontinue      FL Flag/Unflag
BY Bypass           ED Edit
Select Item(s): Next Screen// Prescription Renew          Jun 12, 2012@14:02:1
8 Page: 1 of 2
```

After pending orders have been unflagged, they can be processed.



If you attempt to process a flagged order and are a user with a PSORPH security key, you are prompted “Unflag Order? NO//”. If you respond YES, enter comments to unflag the order and continue with processing. If you respond NO, you cannot process the order because it is still flagged. Users with only the PSO TECH ADV security key cannot unflag an order and will receive the following message when selecting the Accept (AC) action:

```

+ Enter ?? for more actions
AC Accept           DC (Discontinue)      FL (Flag/Unflag)
BY Bypass           ED (Edit)
Select Item(s): Next Screen// AC Accept

Order must be unflagged by a pharmacist before it can be finished.

Enter RETURN to continue:
```

## Barcode Rx Menu

### [PSO BARCODE MENU]

Use this menu to batch barcode refills and renewals of prescriptions, and check the quality of the barcode print. The menu contains the following options:

- *Barcode Batch Prescription Entry*
- *Check Quality of Barcode*
- *Process Internet Refills*

### **Barcode Batch Prescription Entry**

#### **[PSO BATCH BARCODE]**

Enter refills or renewals by batch entry using barcodes with this option. Select either refills or renewals. Then fill in information for the prescriptions to be batch barcode, i.e., fill date, route, etc. Next, use a barcode wand to enter the barcodes for the prescriptions to be refilled or renewed.

When using the Barcode Batch Prescription Entry option [PSO BATCH BARCODE], if the prescription has been marked as a Titration/Maintenance Rx, and the user attempts to renew or refill the prescription, the following message will display:

For a renewal:

"Rx# XXXXXX is marked as Titration Rx and cannot be renewed."

For a refill:

"Rx# XXXXXX is marked as Titration Rx and cannot be refilled."

### **Check Quality of Barcode**

#### **[PSO BARCODE CHECK]**

No action is taken on the prescription by using this option. Use this option to check the quality of the printed barcodes or use it to practice using the barcode reader. After the barcode is scanned the barcode number will echo back on the screen and the screen will return to the "Read Barcode" prompt. No action is taken on the prescription by using this option.

The following are some common causes for failure of the barcode reader and how they can be corrected.

1. Barcode too faint (change printer ribbon)
2. Improper scanning (move the wand at a steady rate)
3. Defective barcode reader (replace the reader)

## **Process Internet Refills**

### **[PSO INTERNET REFILLS]**

This option allows the pharmacist to process prescription orders entered on the Internet through My HealtheVet. The system will prompt the user for the information as shown in the following example. The user enters the appropriate response for each prompt by pressing **Enter** on the keyboard to accept the default setting for a prompt. The user must type the appropriate word or letter to enter a response contrary to the default.



The recommended usage of this option is three times a day to ensure the requested refills are processed in a timely manner.

#### **Example: Process Internet Refills Screen**

```
FILL DATE: (1/28/2005 - 12/31/2699): TODAY// <Enter> (AUG 11, 2005)
MAILWINDOW: MAIL// <Enter> MAIL
Will these refills be Queued or Suspended? Q// S <Enter> USPENDED
Allow refills for inpatient ? N// <Enter> O
Allow refills for CNH ? N//<Enter> O
Allow early refills? N// <Enter> O

Process internet refill requests at this time? YES// <Enter> YES
Process internet refills for all divisions? NO// <Enter> O
```

Users can process refills for their division or all divisions within a site. However, sites can set parameters in the PHARMACY SYSTEM file for the INTERDIVISIONAL PROCESSING and DIVISION PROMPT ASKED fields that control responses to user input on the Internet Refills Screen. Note that site control parameters override any entries made by the user in the Process Internet Refills screen.

If the INTERDIVISIONAL PROCESSING parameter is set to **No**, regardless of the user's input at the "Process internet refills for all divisions?" prompt, only the refills for the user's division will be filled.

If the INTERDIVISIONAL PROCESSING parameter is set to **Yes** and the DIVISION PROMPT ASKED parameter is set to **No**, then the refill orders are processed for all divisions without any additional user input.

If the INTERDIVISIONAL PROCESSING parameter is set to **Yes** and the DIVISION PROMPT ASKED parameter is set to **Yes**, refills for the user's division will be processed without any additional input. If unprocessed refills outside the user's division exist, the "Continue?" prompt displays, allowing the user to confirm each refill, as shown in the example below.

### **Example: Process Internet Refills for all Divisions?**

```
Process internet refills for all divisions? NO// Y YES  
Now refilling Rx# 100002310      Drug: CAPTROPRIL 100MG TABS  
Qty: 60          Sig: TAKE ONE TABLET BY MOUTH TWICE A DAY  
Rx # 100002310 is for (ALBANY) division.  
Continue? N// Y YES
```

This refill is outside  
the user's division.

If the user enters Yes at the “Continue?” prompt, the refill will be processed.

If the user enters No at the “Continue?” prompt, the refill will not process at this time, and the refill request will remain in the PRESCRIPTION REFILL REQUEST file. These refill requests may be processed later by a user in the same division, or any division, depending on the PHARMACY SYSTEM file parameters.

Refills processed successfully are flagged as FILLED in the RESULTS field of the PRESCRIPTION REFILL REQUEST file. Refills not processed due to conditions such as: Rx Expired, Discontinued, On Hold, Deleted, are flagged as NOT FILLED in the RESULTS field of PRESCRIPTION REFILL REQUEST file.

### **Complete Orders from OERR**

#### **[PSO LMOE FINISH]**

When a clinician has created an order for a patient, the pharmacist then completes and verifies the order. The *Complete Orders from OERR* option is used to complete orders entered into the patient record through Order Entry Results Reporting (OERR) V. 3.0. This option uses the List Manager features. PSO\*7\*391 added a new sort selection, 'CS' enabling users to select digitally signed CS orders separately.

Patch PSO\*7\*505 adds new sort selection ‘SU’, enabling users to select supply item orders separately. This patch also adds new sort selections under the ‘CS’ controlled substances sort. Users may now choose NON-CS+SCHEDULES III-V, or NON-CS ONLY orders.

PSO\*7\*505 also introduces a new secondary sort feature, allowing users to further sort the list of orders that will be presented in option Complete Orders from OERR. After a user has selected a primary sort filter, a prompt will appear asking if the user would like to select a secondary sort filter. If the user answers yes, a new prompt appears for the user to again select from the list of sort selections. This secondary list does not include the item selected as the primary sort filter. For example, if the user chooses to first sort by ‘PA’ (Patient), the ‘PA’ (Patient) sort item will not appear in the secondary list.

The user may select orders by patient, route, priority, clinic, flag, supply items, or controlled substances. If Clinic is selected, the user may then choose to select by Clinic or Clinic Sort Group. In any sort, orders are completed on a first-in/first-out basis by patient. Clinic Sort Groups can be added or edited in the *Enter/Edit Clinic Sort Groups* option, found under the *Maintenance (Outpatient Pharmacy)* menu option. Orders entered before implementation of patch PSO\*7\*46 (Pharmacy Ordering Enhancements (POE)) must have the fields used to build the Sig filled in before processing can be completed.

If a temporary address has no end date, the following text is now displayed: “(Temp address from XXX 99,9999 till (no end date)).”

For ePharmacy orders, after an order is finished, the billing data is sent to the Electronic Claims Management Engine (ECME). ECME sends a message back to Outpatient Pharmacy displaying the status of the claim. For an example, see “Finishing an ePharmacy Order” in this section.

### **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 ...
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

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.

Select By: (PA/RT/PR/CL/FL/CS/E): PATIENT// <Enter>
All Patients or Single Patient: (A/S/E): SINGLE// <Enter>
Select Patient: OPPATIENT16,ONE  OPPATIENT16,ONE      4-3-41      000246802
    YES      SC VETERAN
```

Do you want to see Medication Profile? Yes//



The user may enter a question mark at the “Select Patient” prompt to view a list of patients with pending orders. A single patient may be selected for processing, or pending orders for all patients may be processed in sequence by the time of each order’s entry into the system.



Flagged orders will not be processed. They are not a part of any pending orders. To process flagged orders, you should enter FL at the “Select By” prompt. 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.



After selecting a primary sort filter, the user will be asked if they wish to select a secondary sort filter. The filter chosen in as the primary filter will not appear in the secondary filter list.

```
Select Patient: ZZTEST, PATIENTONE      5-20-70      0003456789      YES
      SC VETERAN
Would you like to select a secondary filter? N// YES
Select another filter: (RT/PR/CL/FL/CS/SU/C/E): ROUTE// ?
```

Enter:

```
'RT' to process orders by route (mail/window)
'PR' to process orders by priority
'CL' to process orders by clinic
'FL' to process flagged orders
'CS' to process digitally signed CS orders
'SU' to process supply item orders
or 'C' to continue with one filter
or 'E' or '^' to exit
```

Select one of the following:

RT	ROUTE
PR	PRIORITY
CL	CLINIC
FL	FLAGGED
CS	CONTROLLED SUBSTANCES
SU	SUPPLY
C	CONTINUE W/PRIMARY
E	EXIT

```
Select another filter: (RT/PR/CL/FL/CS/SU/C/E): ROUTE//
```



If the user answers YES to “Do you want to see Medication Profile?” and the patient has remote prescription(s), the following prompt appears.

REMOTE PRESCRIPTIONS AVAILABLE!
Display Remote Data? N//



If the user answers YES to “Display Remote Data?” then the “Remote Facilities Visited” screen appears, allowing the user to see what facilities the patient has prescriptions at and what those prescriptions are.

After the user answers the medication profile prompt, a warning displays if no allergy assessment has been made. The patient’s eligibility and RX patient status also displays.

### **Example: Finishing an Order from OERR (continued)**

```
OPPATIENT16, ONE          4-3-41      0004246802
YES      SC VETERAN

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

(The Patient Information and Medication Profile screens display next, but are not shown in this example.)

```
Pending OP Orders (ROUTINE)   March 13, 2008 16:31:33      Page: 1 of 2
OPPATIENT16, ONE
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> (CREAT: Not Found)           BSA (m2): 1.95

*(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
+      Enter ?? for more actions
BY Bypass             DC Discontinue        FL Flag/Unflag
ED Edit              FN Finish
Select Item(s): Next Screen/// FN Finish

* Editing starred fields will
create a new order
```

After “Finish” is selected, the user is prompted to fill in any information missing from fields needed to complete the order.



If you attempt to process a flagged order, you are prompted “Unflag Order? NO//”. If you respond **YES**, enter comments to unflag the order and continue with processing. If you respond **NO**, you cannot process the order because it is still flagged.



If an order is sent from OERR without a Dispense Drug selected, and there is only one Dispense Drug tied to the Orderable Item, that drug will be inserted in the DRUG field (#2 on the screen). If there is more than one Dispense Drug tied to the Orderable Item, a “No Dispense Drug Selected” message will display in the DRUG field (#2 on the screen) and a Dispense Drug must be selected to complete/finish the order.

The following Drug are available for selection:

1. ACETAMINOPHEN 325MG
2. ACETAMINOPHEN EXTRA STR 500MG



If the drug list is empty, the user should select a new orderable item or the order can be discontinued.

### **Example: Finishing an Order from OERR (continued)**

Select Drug by number: (1-2): 1

If the user chooses to copy Provider Comments into the Patient Instructions, they will be displayed on the end of both the Patient Instructions and the Sig.



If the patient has been identified as having another language preference, the Provider Comments will not be appended to the other language Sig.

Provider Comments:  
WITH A FULL MEAL  
Copy Provider Comments into the Patient Instructions? No// **Y** YES  
  
(TAKE ONE TABLET BY MOUTH TWICE A DAY WITH A FULL MEAL)  
  
Rx # 503902 05/22/01  
OPPATIENT16,ONE #60  
TAKE ONE TABLET BY MOUTH TWICE A DAY WITH A FULL MEAL  
  
ACETAMINOPHEN 500MG TAB  
OPPROVIDER4,TWO OPPHARMACIST4,THREE  
# of Refills: 3  
  
Are you sure you want to Accept this Order? NO// **Y** YES

After an order is accepted, the user will be prompted to enter the missing information.

METHOD OF PICK-UP:  
WAS THE PATIENT COUNSELED: NO// **Y** YES  
WAS COUNSELING UNDERSTOOD: NO// **Y** YES

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

SC Percent: 20%  
Disabilities:

KNEE CONDITION	10% - SERVICE CONNECTED
TRAUMATIC ARTHRITIS	10% - SERVICE CONNECTED
SEPTUM, NASAL, DEVIATION OF	0% - SERVICE CONNECTED
RESIDUALS OF FOOT INJURY	0% - SERVICE CONNECTED

This Rx has been flagged as: SC  
 Was treatment for Service Connected condition: YES// <Enter>  
 Press Return to Continue:

## 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.

Flagged orders will not be processed. They are not a part of any pending orders. 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 ...
- 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

Select Rx (Prescriptions) Option: **COMPllete 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> (CREAT: Not Found) BSA (m2):  
# RX # DRUG ISSUE LAST REF DAY  
QTY ST DATE FILL REM SUP  
-----  
-----ACTIVE-----  
1 100002518 PENICILLAMINE 250MG TAB 31 A 02-29 02-29 5 31  
-----PENDING-----  
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 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)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.95  
  
Flagged by OPPHARM, TWO on 03/13/08@23:14: DOUBLE CHECK WITH PATIENT FOR HEART  
CONDITION BEFORE DISPENSING.  
  
*(1) Orderable Item: ACETAMINOPHEN TAB * Editing starred fields will  
(2) CMOP Drug: ACETAMINOPHEN 500MG TAB create a new order  
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  
+ Enter ?? for more actions  
BY Bypass DC Discontinue FL Flag/Unflag  
ED Edit FN Finish  
Select Item(s): Next Screen// FL Flag/Unflag
```

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.

### **Example: Unflagging an Order**

```
FLAGGED: 03/13 23:14 by OPPHARM, TWO  
DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE DISPENSING.  
COMMENTS: CHECKED WITH PATIENT. NO HEART CONDITION.  
... order unflagged.
```

At that point, the flag from the Medication Profile is removed, but the flagged/unflagged reason remains on the Pending OP Orders screen unless you reflag the order.

## **Example: An Unflagged Order**

```
Pending OP Orders (ROUTINE)      March 14, 2008 09:16:33      Page: 1 of 2
OPPATIENT16,ONE
PID: 000-24-6802
DOB: APR 3,1941 (66)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)          BSA (m2): 1.95

<NO ALLERGY ASSESSMENT>
Ht(cm): 177.80 (02/08/2007)
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.
Unflagged by OPPHARM, TWO on 03/14/08@09:26: CHECKED WITH PATIENT. NO HEART
CONDITION.

*(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
+
Enter ?? for more actions
BY Bypass           DC Discontinue        FL Flag/Unflag
ED Edit            FN Finish
Select Item(s): Next Screen//
```

*\* Editing starred fields will  
create a new order*

After pending orders have been unflagged, they can be processed.



If you attempt to process a flagged order, you are prompted “Unflag Order? NO//”. If you respond **YES**, enter comments to unflag the order and continue with processing. If you respond **NO**, you cannot process the order because it is still flagged.

## **Changes to Finishing Pending Orders Process - Digitally Signed Orders Only**

Digitally signed orders will be identifiable by the “Digitally Signed Order” message in reverse video on the message bar.



If the terminal in use is set up as a VT-100, there may be problems with this message display and the “Processing Digitally Signed Order” message. Updating the VistA terminal session to use VT-320 will avoid this problem.

The provider’s PKI certificate is re-validated when accessing a digitally signed order. If the validation check is unsuccessful, an error code is sent to the pharmacist and an entry is made in the Rx Activity Log. The error code type will result in either the order being automatically rejected/discontinued or the pharmacist being given the choice to finish, bypass, or discontinue

the order. Digitally signed prescriptions that have been discontinued cannot be reinstated. The Speed Discontinuation functionality will no longer delete unverified prescriptions.

## **Finishing an Order from OERR with Multiple Institutions**

Multiple Institution entries can be added using the *Site Parameter Enter/Edit* option. If the local site has multiple entries in the CPRS ORDERING INSTITUTION field the user will be prompted for an Institution when entering the *Complete Orders from OERR* option. After an Institution is selected, then the Pending Orders that will be shown for completion will be those Pending Orders from clinics that are associated with the Institution selected.

### **Example: Finishing an Order from OERR with Multiple Institutions**

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

Orders to be completed for all divisions: 21

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

Select Rx (Prescriptions) Option: CComplete Orders from OERR

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

Select CPRS ORDERING INSTITUTION: BIRMINGHAM, AL// <Enter> BIRMINGHAM, AL.521

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

Select By: (PA/RT/PR/CL/E): PATIENT// PA
```

[See the previous example for completion of this option.]

## **Finishing an ePharmacy Order**

After the user reviews the ePharmacy order and chooses to accept the order, the billing data is sent to ECME, which sends a message back to Outpatient Pharmacy displaying the status of the claim. The ECME section of the Activity Log is also updated.

```
Is this correct? YES// <Enter>
-Rx 100003869A has been discontinued...

Veteran Prescription 100003919 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
E PAYABLE
```

## **Activity Log**

Multiple Activity Logs exist for a completed or finished order. Any single activity log or all activity logs can be viewed.

Use the hidden action (AL) to view the activity log once a completed or finished order is selected.

### **Example: Activity Log**

```
OP Medications (ACTIVE)           Jun 08, 2001 11:01:29      Page: 1 of 3
OPPATIENT29,ONE
PID: 000-87-6543
DOB: SEP 12,1919 (81)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)          BSA (m2): 1.95

Rx #: 503915
(1) *Orderable Item: AMPICILLIN CAP,ORAL *** (N/F) ***
(2)          Drug: AMPICILLIN 250MG CAP *** (N/F) ***
          NDC: 00093-51
(3)          *Dosage: 750 (MG)
          Verb: TAKE
Dispense Units: 3
          Noun: CAPSULE(S)
          *Route: ORAL
          *Schedule: QID
          *Duration: 10D (DAYS)
(4) Pat Instructions: WITH FOOD AVOIDING DAIRY FOODS
          SIG: TAKE THREE CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
          WITH FOOD AVOIDING DAIRY FOODS
(5) Patient Status: SERVICE CONNECTED
+          Enter ?? for more actions
DC  Discontinue          PR  Partial          RL  Release
ED  Edit                  RF  (Refill)        RN  Renew
Select Action: Next Screen// AL
Select Activity Log by number
1. Refill      2. Partial      3. Activity      4. Labels
5. Copay       6. ECME        7. All Logs: (1-7): 7// <Enter>
```

The prompt for the selection of the Activity Log depends on what type of prescription is selected. For example, if the prescription is an ePharmacy prescription, ECME displays as item #6. If the prescription is a CMOP prescription, CMOP displays as item #6.

### **Example: Activity Log (continued)**

```
Rx Activity Log           Jun 08, 2001 11:02:51      Page: 1 of 2
OPPATIENT16,ONE
PID: 000-24-6802
DOB: APR 3,1941 (60)
Ht(cm): 177.80 (02/08/1999)
Wt(kg): 90.45 (02/08/1999)

Rx #: 503904 Original Fill Released: 5/25/01
Routing: Window      Finished by: OPPHARMACIST4,THREE
```

```

Refill Log:
# Log Date Refill Date Qty Routing Lot # Pharmacist
=====
There are NO Refills For this Prescription

Partial Fills:
# Log Date Date Qty Routing Lot # Pharmacist
=====
There are NO Partials for this Prescription

Activity Log:
# Date Reason Rx Ref Initiator Of Activity
=====
1 05/25/01 ORIGINAL
Comments: Patient Instructions Not Sent By Provider.
2 05/25/01 PROCESSED ORIGINAL OPPHARMACIST4, THREE
Comments: Label never queued to print by User

Label Log:
# Date Rx Ref Printed By
=====
1 09/25/06 ORIGINAL OPPHARMACIST31, THREE
Comments: ScripTalk label printed
2 09/25/06 ORIGINAL OPPROVIDER, ONE
Comments: ROUTING=WINDOW (BAD ADDRESS)

Copay Activity Log:
# Date Reason Rx Ref Initiator Of Activity
=====
There's NO Copay activity to report

ECME Log:
# Date/Time Rx Ref Initiator Of Activity
=====
1 11/30/05@18:38:29 ORIGINAL OPPHARMACIST, ONE
Comments: No claim submission made. Billing Determination was: DRUG NOT BILLABLE.
[This shows an extended view of what displays on the screen.]
Enter ?? for more actions

Select Action:Quit// <Enter>

```

The Activity Logs will appear the same as the OP logs with the exception of the addition of a CMOP Event Log. Here is an example of a sample CMOP Event Log:

```

Rx Activity Log Jul 06, 2006 09:54:24 Page: 2 of 2
OPPATIENT2, ONE
PID: 000-23-4567 Ht(cm): 188.40 (12/02/00)
DOB: DEC 14, 1060 (34) Wt(kg): 109.10 (12/02/00)

CMOP Event Log:
Date/Time Rx Ref TRN-Order Stat Comments
=====
09/17/00@1526 Ref 1 267-4 DISP NDC: 1234TEST5678

CMOP Lot#/Expiration Date Log:
Rx Ref Lot # Expiration Date
=====
Ref 1 1234TST 07/07/00

Enter ?? for more actions

```

```
Select Action:Quit// <Enter>
```

If this were an ePharmacy prescription, the prompt will display as follows:

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

For an ePharmacy prescription, the ECME Event Log displays before the CMOP Event Log.

### **Example: ECME Event Log of an ePharmacy prescription**

```
Rx Activity Log           Nov 07, 2005@12:23:37          Page: 1 of 1
OPPATIENT,FOUR
PID: 000-01-1322P
DOB: NOV 12,1075 (29)          Ht (cm): _____ (_____)
                                Wt (kg): _____ (_____)

Rx #: 100003861   Original Fill Released:
Routing: Window      Finished by: OPPHARMACIST4,THREE

ECME Log:
#  Date          Rx Ref          Initiator Of Activity
=====
1  5/16/07@14:40:40    ORIGINAL    OPPHARMACIST4,THREE
Comments: ECME:WINDOW FILL(NDC:00058-2467-05)-E PAYABLE-pOPP INSURANCE
2  5/16/07@14:40:40    ORIGINAL    OPPHARMACIST4,THREE
Comments: Billing quantity submitted through ECME: 25.000 (ML)
3  5/20/07@14:21:52    ORIGINAL    OPPHARMACIST4,THREE
Comments: ECME:REJECT WORKLIST-DUR OVERRIDE CODES (AD/AS/1B)-E
REJECTED-pOPP INSURANCE
4  5/20/07@14:21:52    ORIGINAL    OPPHARMACIST4,THREE
Comments: Billing quantity submitted through ECME: 25.000 (ML)

=====
Enter ?? for more actions

Select Action:Quit// <Enter>
```

The activity log has an entry indicating that the Rx has been sent to the external interface. With patch PSO\*7\*354, this activity entry is enhanced to indicate the routing automated dispensing device. The Domain Name Server (DNS) information of the automated dispensing device is appended to the Comment field of the activity log. This is usually an IP address or the DNS name.

The activity log was also updated to display the mail tracking information available in the RXD-13 segment of the HL7 message received by VistA from the external dispensing interface.

### **Example: Activity Log with Multiple Dispensing Devices**

**Rx Activity Log** May 23, 2011@12:30:12 Page: 2 of 3  
 OUTPATIENT, SIX <A>  
 PID: 355-43-4343 Ht (cm): \_\_\_\_\_ (\_\_\_\_\_)  
 DOB: OCT 29, 1932 (78) Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)  
 +  
 1 05/04/11 REPRINT ORIGINAL OPPHARMACIST4, FOUR  
 Comments: TESTING MULTIDEVICES (1 COPIES)  
 2 05/04/11 X-INTERFACE ORIGINAL OPPHARMACIST4, FOUR  
 Comments: Prescription (Reprint) sent to external interface.  
 3 05/04/11 X-INTERFACE ORIGINAL POSTMASTER  
 Comments: HL7 ID - 50073974 MESSAGE TRANSMITTED TO 10.4.131.13  
 4 05/04/11 X-INTERFACE ORIGINAL POSTMASTER  
 Comments: HL7 ID - 50073975 MESSAGE TRANSMITTED TO 10.4.142.22  
 5 05/04/11 DISP COMPLETED ORIGINAL  
 Comments: External Interface Dispensing is Complete. Filled By: OPTECH, ONE  
 Checking Pharmacist: OPPHARMACIST4, FOUR  
 Mail Tracking Info.: USPS #123456789 received at 05/04/11@15:32:23  
  
 Label Log:  
 # Date Rx Ref Printed By  
 ======  
 1 05/02/11 ORIGINAL OPPHARMACIST4, FIVE  
 Comments: From RX number 100002987  
 2 05/04/11 ORIGINAL OPPHARMACIST4, FOUR  
 Comments: From RX number 100002987 (Reprint)  
 + Enter ?? for more actions  
 Select Action:Next Screen//

For HOLD/UNHOLD of prescriptions, the activity log entries include HOLD COMMENTS and the HOLD REASON when a prescription is placed on HOLD and UNHOLD COMMENTS when the prescription is removed from HOLD.

### **Example: Activity Log with HOLD/UNHOLD Comments**

Activity Log:

#	Date	Reason	Rx Ref	Initiator Of Activity
...				
8	05/10/12	HOLD	REFILL 1	USER, PHARMACY
				Comments: Rx placed on HOLD (Reason: BAD ADDRESS) and removed from SUSPENSE - HOLD COMMENTS ENTERED BY THE USER MANUALLY.
...				
9	05/10/12	UNHOLD	REFILL 1	USER, PHARMACY
				Comments: Rx Removed from HOLD - UNHOLD COMMENTS ENTERED BY THE USER WHEN REMOVING THE RX FROM HOLD.

The activity logs for both Titration and Maintenance Rx's will record the corresponding Titration and Maintenance Rx # if they exist.

### **Example: Activity Log with activity logs for both Titration and Maintenance Rx's**

Titration Rx:

#	Date	Reason	Rx Ref	Initiator of Activity
1	09/29/08	EDIT	ORIGINAL	OPUSER, ONE
				Comments: Maintenance Dose Rx: 100005130

Maintenance Rx:

#	Date	Reason	Rx Ref	Initiator of Activity
1	09/29/08	EDIT	ORIGINAL	OPUSER, TWO

Comments: Titration Dose Rx: 100005392

## Discontinue Prescription(s)

### [PSO C]

This option is used either to discontinue a prescription without deleting its record from the files, or to reinstate a prescription discontinued by pharmacy.

#### Example: Discontinuing a prescription

Select Rx (Prescriptions) Option: **DISCONTINUE** Prescription(s)

Discontinue/Reinstate by Rx# or patient name: (R/P): **PATIENT NAME**

Are you entering the patient name or barcode: (P/B): **Patient Name**

Select PATIENT NAME: **OPPATIENT16,ONE** OPPATIENT16,ONE 9-7-52 000246802  
YES SC VETERAN

RX #	DRUG	QTY	ST	ISSUE	LAST	REF	DAY
				DATE	FILL	REM	SUP
-----ACTIVE-----							
1 100003218	AMPICILLIN 500MG CAP			10 A	05-11	05-11	5 30
2 100003238	PREDNISONE 5MG TAB			30 A	05-30	05-30	3 10
3 100003205\$	TRIPROLIDINE & PSEUDOEPHEDRINE			10 A	05-01	05-01	5 31
-----DISCONTINUED-----							
4 100003216\$	AMPICILLIN 10GM INJ. M.D.V.			30 DC	05-07	05-07	5 30
5 100003214	PREDNISONE 1MG TAB			30 DE	05-07	05-07	3 10

Press RETURN to continue: <**Enter**>

Discontinue all or specific Rx#'s?: (A/S): **SPECIFIC Rx's**

ENTER THE LINE #: (1-5): **2**

Comments: RESTRICTED/NF MED

Nature of Order: SERVICE CORRECTION// ??

Nature of Order Activity	Require E.Signature	Print Chart Copy	Print on Summary
WRITTEN			x
VERBAL	x	x	x
TELEPHONED	x	x	x
SERVICE CORRECTION			
POLICY		x	x
DUPLICATE			

```
SERVICE REJECT           x           x
Nature of Order: SERVICE CORRECTION// SERVICE REJECT      R
Requesting PROVIDER: OPPROVIDER30,TWO // <Enter>      TO
100003238  PREDNISONE 5MG TAB          OPPATIENT16,ONE
                           Rx to be Discontinued
Press Return to Continue: <Enter>
OK to Discontinue? N// YES
```

When a prescription is discontinued, the software checks for any unresolved ECME rejections for that prescription. If a DUR REJECT or REFILL TOO SOON REJECT is found, it will be marked resolved with the reason PRESCRIPTION DISCONTINUED.

When an ePharmacy prescription is discontinued, the software checks for any unreleased fills with a PAYABLE claim. If found, a reversal request is sent to ECME, which forwards it on to the third party payer.

When a pending renewal order is discontinued, Outpatient Pharmacy verifies if there is an active prescription for the same drug. If an active prescription is found, you are prompted with “There is an active Rx for this pending order, Discontinue both (Y/N)?” If you respond **YES**, both the pending order and the active order are discontinued. If you respond **NO**, only the pending order is discontinued and the active order is not discontinued.

## Edit Prescriptions

### [PSO EXEDIT]

This option allows changes to be made to entered orders. Newly entered orders can be edited before release by typing in the corresponding field number. Previously entered orders can be edited by entering the prescription number, then specifying the field to be edited. An asterisk or star (\*) is shown in front of each field that will create a new order if it is changed. See the section “Editing an Order” for an example.

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, the claim for that fill will be reversed. A new claim is created for the new prescription. See “Editing an ePharmacy Order” for an example of editing ePharmacy orders.

## MAXIMUM DAYS SUPPLY

Maximum Days Supply has been added to both the VA PRODUCT File (50.68) and the Drug File (#50.0). This field allows the user to increase the Max Days supply allowed for a drug to greater than 90 up to 365. Controlled substances will remain at 1-90 days supply.

With the addition of Max Days Supply, Days Supply can now be entered from 1-365 for a drug.

Important Note: When the MAXIMUM DAYS SUPPLY is populated in both the VA PRODUCT File (50.68) and the Drug File (#50), the lower of the two values takes priority.

**Example: DAYS SUPPLY: (1-90): 90// (Active Order)**

The MAXIMUM DAYS SUPPLY in the Drug File (#50) and the MAXIMUM DAYS SUPPLY in the VA PRODUCT File (#50.68) are NOT set.

The MAXIMUM DAYS SUPPLY for the Drug File (#50) is a NULL value.

The MAXIMUM DAYS SUPPLY for the VA PRODUCT File (#50.68) is a NULL value.

The DAYS SUPPLY for this prescription can be set to a maximum of 90.

OP Medications (ACTIVE) TEST, PATIENT PID: 000-00-0000 DOB: JAN 2, 1947 (69) SEX: MALE CrCL: <Not Found> (CREAT: Not Found)	May 26, 2016@10:33:19 <NO ALLERGY ASSESSMENT> Ht (cm): _____ (_____) Wt (kg): _____ (_____) BSA (m2): _____	Page: 1 of 3
<hr/>		
Rx #: 100002610\$		
(1) *Orderable Item: ASPIRIN TAB		
(2) Drug: ASPIRIN BUFFERED 325MG TAB NDC: 00182-0196-10		
(3) *Dosage: 325 (MG) Verb: TAKE Dispense Units: 1 Noun: TABLET *Route: ORAL (BY MOUTH) *Schedule: PRN		
(4) Pat Instructions: SIG: TAKE ONE TABLET BY MOUTH AS NEEDED		
(5) Patient Status: OPT NSC		
(6) Issue Date: 05/26/16 Last Fill Date: 05/26/16 (Window) Last Release Date: Expires: 05/27/17		
(7) Fill Date: 05/26/16 (8) Lot #: MFG:		
(9) Days Supply: 90 (10) QTY (CAP): 90 (11) # of Refills: 3 Remaining: 3		
(12) Provider: XXXX, XXXXX (13) Routing: WINDOW (14) Copies: 1 Method of Pickup:		
(15) Clinic: Not on File (16) Division: ALBANY (500)		
<hr/> <b>+-----Enter ?? For more actions-----</b> <hr/>		
DC Discontinue ED Edit Select Action: Next Screen// 9 DAYS SUPPLY: (1-90): 90//	PR Partial RF Refill RL Release RN Renew	

**Example: DAYS SUPPLY: (1-265): 90// (Active Order)**

MAXIMUM DAYS SUPPLY in the Drug File (#50) is greater than the MAXIMUM DAYS SUPPLY in the VA PRODUCT File (#50.68).

The MAXIMUM DAYS SUPPLY for the Drug File (#50) is 365.

The MAXIMUM DAYS SUPPLY for the VA PRODUCT File (#50.68) is null.

After an update from the Pharmacy Product System for a maximum days supply of 265 the following would occur:

The MAXIMUM DAYS SUPPLY for the Drug File (#50) is 365.

The MAXIMUM DAYS SUPPLY for the VA PRODUCT File (#50.68) is 265.

In this scenario, the value in the VA PRODUCT File (#50.68) takes priority since it is the lower of the two values.

The DAYS SUPPLY for this prescription can be set to a maximum of 265.

```
OP Medications (ACTIVE)      May 25, 2016@17:18:47      Page: 1 of 3
TEST, PATIENT
  PID: 000-00-0000
  DOB: JAN 2, 1947 (69)
  SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): _____
-----
Rx #: 100002609$  

(1) *Orderable Item: ASPIRIN TAB  

(2)          Drug: ASPIRIN BUFFERED 325MG TAB  

          NDC: 00182-0196-10  

(3)          *Dosage: 325 (MG)  

          Verb: TAKE  

Dispense Units: 1  

          Noun: TABLET  

          *Route: ORAL (BY MOUTH)  

          *Schedule: PRN  

(4) Pat Instructions:  

          SIG: TAKE ONE TABLET BY MOUTH AS NEEDED  

(5) Patient Status: OPT NSC  

(6)          Issue Date: 05/25/16      (7) Fill Date: 05/25/16  

          Last Fill Date: 05/25/16 (Window)  

          Last Release Date:      (8) Lot #:  

          Expires: 05/26/17      MFG:  

(9)          Days Supply: 90      (10) QTY (CAP): 90  

(11)          # of Refills: 3      Remaining: 3  

(12)          Provider: XXXX,XXXX  

(13)          Routing: WINDOW      (14) Copies: 1  

          Method of Pickup:  

(15)          Clinic: Not on File  

(16)          Division: ALBANY (500)  

+-----Enter ?? for more actions-----  

DC Discontinue      PR Partial      RL Release  

ED Edit            RF Refill       RN Renew  

Select Action: Next Screen// 9
```

DAYS SUPPLY: (1-265) : 90//

### **Example: DAYS SUPPLY: (1-250): 90// (Active Order)**

MAXIMUM DAYS SUPPLY in the VA PRODUCT File (#50.68) is greater than the MAXIMUM DAYS SUPPLY in the Drug File (#50).

The MAXIMUM DAYS SUPPLY for the Drug File (#50) is 250.

The MAXIMUM DAYS SUPPLY for the VA PRODUCT File (#50.68) is 365.

In this scenario, the value in the Drug File (#50) takes priority since it is the lower of the two values.

The DAYS SUPPLY for this prescription can be set to a maximum of 250.

```
OP Medications (ACTIVE)      May 25, 2016@16:37:28      Page: 1 of 3
TEST, PATIENT                <NO ALLERGY ASSESSMENT>
PID: 000-00-0000              Ht (cm): _____ (_____)
DOB: JAN 2, 1947 (69)          Wt (kg): _____ (_____)
SEX: MALE                      BSA (m2): _____
CrCL: <Not Found> (CREAT: Not Found)
-----
Rx #: 100002608$  

(1) *Orderable Item: ASPIRIN TAB  

(2)           Drug: ASPIRIN BUFFERED 325MG TAB  

           NDC: 00182-0196-10  

(3)           *Dosage: 325 (MG)  

           Verb: TAKE  

Dispense Units: 1  

           Noun: TABLET  

           *Route: ORAL (BY MOUTH)  

           *Schedule: PRN  

(4) Pat Instructions:  

           SIG: TAKE ONE TABLET BY MOUTH AS NEEDED  

(5) Patient Status: OPT NSC  

(6)           Issue Date: 05/25/16          (7) Fill Date: 05/25/16  

           Last Fill Date: 05/25/16 (Window)  

           Last Release Date:          (8) Lot #:  

           Expires: 05/26/17          MFG:  

(9)           Days Supply: 90          (10) QTY (CAP): 90  

(11)          # of Refills: 3          Remaining: 3  

(12)          Provider: XXXX,XXXX  

(13)          Routing: WINDOW          (14) Copies: 1  

           Method of Pickup:  

(15)          Clinic: Not on File  

(16)          Division: ALBANY (500)  

+-----Enter ?? for more actions-----  

DC Discontinue      PR Partial      RL Release  

ED Edit            RF Refill       RN Renew  

Select Action: Next Screen// 9  

DAYS SUPPLY: (1-250): 90//
```

### **Example: DAYS SUPPLY: (1-365): 90// (Pending Order)**

**MAXIMUM DAYS SUPPLY** in the Drug File (#50) is greater than the **MAXIMUM DAYS SUPPLY** in the VA PRODUCT File (#50.68)

The **MAXIMUM DAYS SUPPLY** for the Drug File (#50) is 365.

The **MAXIMUM DAYS SUPPLY** for the VA PRODUCT File (#50.68) is a NULL value.  
In this scenario, the value in the Drug File (#50) takes priority since it is the only value.

The **DAYS SUPPLY** for this prescription can be set to a maximum of 365.

```
Pending OP Orders (ROUTINE)      May 31, 2016@11:00:04          Page: 1 of 2
TEST, PATIENT
PID: 000-00-0000
DOB: JAN 2, 1947 (69)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)           BSA (m2):
-----  

*(1) Orderable Item: ASPIRIN TAB
(2)             Drug: ASPIRIN BUFFERED 325MG TAB
    Drug Message: INTEN
(3)             *Dosage: 325 (MG)
    Verb: TAKE
    Dispense Units: 1
        Noun: TABLET
        *Route: ORAL (BY MOUTH)
        *Schedule: PRN
(4) Pat Instruct:
    Provider Comments:
        Instructions: TAKE ONE TABLET PO PRN
        SIG: TAKE ONE TABLET BY MOUTH AS NEEDED
(5) Patient Status: OPT NSC
(6)     Issue Date: MAY 31, 2016      (7) Fill Date: MAY 31, 2016
(8)     Days Supply: 90            (9) QTY (CAP): 90
    Provider ordered 3 refills
(10)    # of Refills: 3          (11) Routing: WINDOW
(12)    Clinic: 242
(13)    Provider: XXXXX,XXXX
(14)    Copies: 1
(15)    Remarks:
    Entry By: XXXXX,XXXX          Entry Date: 05/31/16 10:56:42
-----Enter ?? for more actions-----
BY Bypass          DC Discontinue          FL Flag/Unflag
ED Edit           FN Finish
Select Item(s): Quit// 8
DAYS SUPPLY: (1-365): 90//
```

### **MAXIMUM DAYS SUPPLY**

#### **VA Product File (#50.68) vs Local Drug File (#50)**

<b>Days Supply</b>	<b>VA Product File</b>	<b>Local Drug File</b>	<b>Outpatient Pharmacy 'Days Supply' Prompt</b>
--------------------	------------------------	------------------------	---

60	NULL	NULL	Days Supply (1-90): 60//
60	NULL	365	Days Supply (1-365): 60//
60	365	365	Days Supply (1-365): 60//
60	300	265	Days Supply (1-265): 60//
60	300	365	*****
60	150	NULL	Days Supply (1-150): 60//

The above table displays the MAXIMUM DAYS SUPPLY for files 50.68 and 50, and the effect on the days supply range displayed to the user in Outpatient Pharmacy. The maximum value for the days supply is always the lesser value if the MAXIMUM DAYS SUPPLY is populated in both files.

\*\*The default of 60 is set by the days supply established in the Rx Patient Status file (#53).



When entering a MAXIMUM DAYS SUPPLY value using the *Drug Enter/Edit* [PSS DRUG ENTER/EDIT], and the value is greater than the VA Product File value, the following message displays to the user:

*“Cannot be greater than NDF Maximum Days Supply: <value>”*



The MAXIMUM DAYS SUPPLY value in the Local Drug File (#50) should not exceed the MAXIMUM DAYS SUPPLY value in the VA Product File (#50.68).

### **DAW/NDC Edit**

The Dispensed As Written (DAW)/National Drug Code (NDC) field for discontinued and expired orders can be edited.

For ePharmacy prescriptions, the DAW/NDC field for discontinued and expired orders can be edited. The following statuses are editable.

- 11 – EXPIRED
- 12 – DISCONTINUED
- 14 - DISCONTINUED BY PROVIDER

- 15 - DISCONTINUED (EDIT)

These are additional status results from the prescription being discontinued from CPRS. For status 14 - DISCONTINUED BY PROVIDER, the user can choose to discontinue the prescription in CPRS by selecting “Requesting Physician Cancelled” for the reason.

The following is an example of the activity log entry stored on the prescription for this type of discontinue:

1	06/20/08	DISCONTINUED	ORIGINAL	OPPHARM, ONE
Comments: Discontinued by OE/RR.				

For status 15 - DISCONTINUED (EDIT), the user can edit a prescription in CPRS which discontinues the prescription being edited resulting in status 15 in the Outpatient Pharmacy package. The following is an example of the activity log entry on the prescription in OP:

2	06/05/08	DISCONTINUED	ORIGINAL	OPHARM, ONE
---	----------	--------------	----------	-------------

## ePharmacy Menu

### [PSO EPHARMACY MENU]

 The following menu items are locked with the PSORPH key: ePharmacy Medication Profile Division Preferences, Third Party Payer Rejects – View/Process and Third Party Payer Rejects – Worklist. The following menu item is locked with the PSO TRICARE/CHAMPVA MGR key: TRICARE CHAMPVA Bypass/Override Report. The ePharmacy Site Parameters [PSO ePHARM SITE PARAMETERS] menu is locked with the PSO EPHARMACY SITE MANAGER Key.

The following menu items allow the user to perform ePharmacy specific functions including rejections by third party payers including DUR/RTS and has the following options:

- *Ignored Rejects Report*
- *ePharmacy Medication Profile (View Only)*
- *NDC Validation*
- *ePharmacy Medication Profile Division Preferences*
- *ePharmacy Site Parameters*
- *Third Party Payer Rejects – View/Process*
- *Third Party Payer Rejects – Worklist*
- *TRICARE CHAMPVA Bypass/Override Report*

- *View ePharmacy Rx*
- *Pharmacy Productivity/Revenue Report*

DURs can occur when a third party determines there are safety issues involved with an Rx claim submission, and they can be due to high dose, drug interaction, and excessive utilization. The third party payer returns an NCPDP rejection code of 88 to indicate a DUR.

Refill Too Soon rejections happen when a third party payer determines that a prescription is being processed too early compared to the last time the prescription was filled. This can occur for several reasons, including third party payer's policy differs from VA policy, patient receiving medication at another pharmacy, or the provider may have increased the dosage or frequency of the medication. The third party payer returns an NCPDP rejection code of 79 to indicate a Refill Too Soon.

Prescriptions rejected as DUR, Reject Resolution Required, and Refill Too Soon are moved to the REFILL TOO SOON/DUR REJECT RESOLUTION REQUIRED (Third Party) section of the Medication Profile. Prescriptions rejected as Reject Resolution Required, TRICARE and CHAMPVA are displayed in the OTHER REJECTS PENDING RESOLUTION section of the Medication Profile. The user must resolve a rejected prescription before other actions such as release, label print, renew, and refill, among others, can be performed on it. Actions may still be taken on these prescriptions through CPRS.

### **Ignored Rejects Report**

#### **[PSO IGNORED REJECTS REPORT]**

This option gives the user the ability to run a report for third-party rejects that have been ignored and consequently closed by the pharmacy users.

The user can select one of the following parameters to filter the data in the report:

- **DIVISION:** Allows the user to select one, some or all divisions.
- **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.

Even though the report displays the Billed Amount, that amount cannot be used to determine potential revenue. The Billed Amount shows what was billed to the third-party payer.

### **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]

Page: 1

Ignored Rejects Report

Division: ALBANY

Sorted by PATIENT, DRUG

Run Date: Jun 15, 2007@15:26:35

Date Range: 03/06/2007 - 06/14/2007

Note: Billed amount is what was billed and  
 cannot be used to determine potential revenue.

Rx#	DRUG	PATIENT	IGNORE DT	IGNORED BY
1192029A	SODIUM CHLORIDE 0.9% OPPATIENT,ONE(9999)	04/18/07	OPUSER,ONE	
Billed Amount:	14.18			
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  
 Billed Amount: 21.99  
 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	
.					
DAY	# Rx#	DRUG [^]	QTY	ST	ISSUE LAST REF
SUP					
7	1 100004112e	ALBUTEROL INHALER	1	A	04-21-07 04-21-07 11
30	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
7	4 100004075e	CABERGOLINE 0.5MG TAB	7	E	05-18-05 05-18-05 6
90	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
15	7 100004081	METAPROTERENOL 5% SOLUTION 10ML	15	DC	06-02-07 06-03-07 11
10	8 100004082	METAPROTERENOL 5% SOLUTION 10ML	10	DC	06-02-07 06-03-07 11
15	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
30	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
PENDING (2 order)					
30	14 ALBUTEROL INHALER		RF		06-03-07 2

15 AMITRIPTYLINE 10MG TAB 10 Non-VA MEDS (Not dispensed by VA) (1 order) 16 TAMOXIFEN CITRATE 10MG TABS	RN 06-02-07	3
	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		.	
# Rx#	DRUG [^]	QTY	ST	ISSUE DATE	LAST FILL
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//					

### **NDC Validation**

The initial validation of the NDC can be performed by a pharmacy technician. This functionality only applies to local fills that are not sent to OPAI. This function provides a pharmacy technician the ability to manually enter the prescription number or scan the bar code of the existing prescription label. Then the user may manually enter or scan the NDC of the stock bottle used to fill the prescription. When the system matches the NDC, confirmation is provided to the pharmacy tech and allows the technician to continue processing. However, if the system detects a mismatch and the NDC of the stock bottle has an associated entry in the synonym file, the NDC will be updated in Prescription file (#52) for the fill. The system will then prompt the technician to press enter to continue, a new label will be printed, the original electronic claim reversed, and a new claim submission will be transmitted with the new NDC. In the event that the revised NDC prompts a RTS/DUR rejection, the system will immediately send the item to the Reject Worklist.

In a case where the NDC entered is not defined for the drug in the Drug File, the system prompts the technician that a mismatch has occurred and the prescription needs to be validated by a pharmacist. The system notes that the NDC had not been validated and allows the pharmacy tech

to move to the next prescription. In the event of a change of NDC prompted a rejection, the system immediately sends the item to the Reject Worklist.

The releasing pharmacist will receive a notation that NDC has been validated by technician when processing. If the NDC change has prompted a claim reversal and produced a RTS/DUR rejection, the pharmacist will be presented with a Reject Processing screen at release.

#### **Example: Matched NDC:**

```
Select ePharmacy Menu Option: NV  NDC Validation

Prescription: 101310      DIPYRIDAMOLE 25MG TAB
Rx: 101310          Fill: 0          Patient: OPPATIENT,ONE
Drug: DIPYRIDAMOLE 25MG TAB          NDC: 00597-0017-10
Prescription label NDC: 00597-0017-10
Stock NDC: 00597001710

NDC match confirmed

Prescription:
```

#### **Example: Non-matched NDC:**

```
Prescription: 101341      BIPERIDEN 2MG TAB
Rx: 101341          Fill: 0          Patient: OPPATIENT,ONE
Drug: BIPERIDEN 2MG TAB          NDC: 00044-0120-05
Prescription label NDC: 00044-0120-05
Stock NDC: 00044012006
Due to a change in NDC, a claims reversal and resubmission will be performed.

Veteran Prescription 101341 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
E PAYABLE

Prescription:
```

### **ePharmacy Medication Profile Division Preferences [PSO PMP SITE PREFERENCES]**

This option allows the user to specify certain settings that will control how the *ePharmacy Medication Profile* option works for that user. Below is the list of settings that can be specified through this option:

- **EXP/CANCEL CUTOFF:** Indicates the maximum number of days for an expired and/or discontinued prescription to be cut from the profile.
- **SORT BY:** Indicates the default sorting column. The options are: Rx#, Drug Name, Issue Date or Last Fill Date.

- **SORT ORDER:** Indicates the order in which the column above will be sorted: Ascending or Descending.
- **DISPLAY SIG:** Indicates whether the SIG should be displayed under each prescription or if it should be hidden.
- **GROUP BY STATUS:** Indicates whether the list should be grouped by status (Active, Discontinued, Hold, etc...) or not.
- **DISPLAY ORDER COUNT:** Indicates whether the number of orders under each group should be displayed beside the group name. Example \_\_\_\_\_ACTIVE (3 orders)\_\_\_\_\_

```
Select ePharmacy Menu Option: PF  ePharmacy Medication Profile Division Preferences
ALBANY ISC's current default view:
-----
EXP/CANCEL CUTOFF  : 200  DAYS
SORT BY           : Rx#
SORT ORDER        : ASCENDING
DISPLAY SIG       : ON
GROUP BY STATUS   : OFF
DISPLAY ORDER COUNT: OFF

Delete this default view? NO// <Enter>

EXP/CANCEL CUTOFF: 200// <Enter> DAYS
SORT BY: RX// <Enter> Rx#
SORT ORDER: ASCENDING// ^EXP
EXP/CANCEL CUTOFF: 200// 120  DAYS
SORT BY: RX// <Enter> Rx#
SORT ORDER: ASCENDING// <Enter>
DISPLAY SIG: ON// <Enter>
GROUP BY STATUS: OFF// <Enter>
DISPLAY ORDER COUNT: OFF//<Enter>

Saving...OK!
```



If there is a set of preferences already on file for the division the user is logged under, the option to delete such preferences is presented to the user as seen above.

## ePharmacy Site Parameters

The ePharmacy Site Parameters file (#52.86) stores the ePharmacy Site parameters by division. The EPHARMACY SITE PARAMETERS [PSO ePHARM SITE PARAMETERS] option can be accessed from the ePharmacy Menu [PSO EPHARMACY MENU].



This option requires the PSO EPHARMACY SITE MANAGER security key.

The following site parameters are definable in the General Parameters section:

- **REJECT WORKLIST DAYS:** This is the number of days an unresolved reject can remain on the Third Party Payer Rejects – Worklist without being included in the nightly reject worklist alert mail message.
- **EPHARMACY RESPONSE PAUSE:** This defines the length of an optional pause after the display of the claim transmission messages for rejects resolved from the Reject

Worklist. The pause can be set to a value from zero (0) to three (3) seconds with a default of two (2) seconds. The delay appears at the end of claims transmission messaging and will allow the pharmacist to read the transmission messages before displaying the next screen

In the Transfer Reject Parameters section, the user may enter as many reject codes as they desire along with the manner in which each will be allowed to be placed on the Third Party Payer Rejects – Worklist. This is what appears in the Transfer Reject Parameters section:

- **REJECT CODE:** A valid third party claim reject code should be entered. A listing of these codes is provided when double question marks (??) are entered for this prompt. Valid codes are contained within the BPS NCPDP REJECT CODES file (#9002313.93). Also, a value defined in this field triggers definition of USER field (#2) and DATE OF LAST UPDATE field (#3).
- **AUTO SEND:** This prompt is a companion to the REJECT CODE prompt. Enter YES to allow the entered REJECT CODE to be automatically placed on the Pharmacy Reject Worklist or NO to require Outpatient Pharmacy Electronic Claims Coordinator (OPECC) intervention to do so. A null value will be treated the same as entering NO in this field.

In the Reject Resolution Required Parameters section, the user may enter as many reject codes as they desire along with the manner in which each will be allowed to be placed on the Third Party Payer Rejects – Worklist. This is what appears in the Reject Resolution Required Parameters section:

- **REJECT RESOLUTION REQUIRED CODE:** A valid third party claim reject code should be entered. A listing of these codes is provided when double question marks (??) are entered for this prompt. Valid codes are contained within the BPS NCPDP REJECT CODES file (#9002313.93).
- **THRESHOLD AMOUNT:** This prompt is a companion to the Reject Resolution Required Code prompt. The threshold amount is compared to the gross amount due for the prescription. If the gross amount due is equal to or greater than the threshold amount, then the gross amount due has met the threshold.

If a reject code is specified as a reject resolution required code, and that reject code is received from a third party payer, the system will evaluate the prescription for Reject Resolution Required processing. The prescription will not be filled if these criteria are met: original fill, Veteran eligibility, not released, the reject is on the Reject Resolution Required list for the current division, and the total gross amount of the prescription is at or above the specified threshold.

The short format displays the status in an abbreviated form. The following is an explanation of the Site Parameter actions:

Action	Description
--------	-------------

Action	Description
Edit All Parameters [EA]	Edit all parameters on the screen. This action is a compilation of Edit General Parameters [EG], Edit Transfer Reject Code [ET], and Edit Rej. Resolution Required Code [ER].
Edit General Parameters [EG]	Edit the General Parameters section of the screen. Add, edit, or delete data.
Edit Transfer Reject Code [ET]	Edit the Transfer Reject Code section of the screen. Add, edit or delete reject codes and the associated auto-send parameter.
Edit Rej. Resolution Required Code [ER]	Edit the Edit Rej. Resolution Required Code section of the screen. Add, edit or delete reject codes and the associated threshold parameter.
Copy Parameters [CP]	The parameters for the division displayed on the screen will be copied to one or more selected divisions. All parameters for the destination divisions are overwritten when the copy action is used.
Display Site Parameters [DP]	Select multiple divisions to display parameters
Change Division [CD]	Select a division to display on the screen
Exit [EX]	Exit the ePharmacy Site Parameters option

#### Example: ePharmacy Site Parameter Screen

```

ePharmacy Site Parameters      Jun 19, 2015@15:28:44      Page: 1 of 2
Pharmacy Division: CHEYENNE VAM&ROC

Pharmacy Division: CHEYENNE VAM&ROC
General Parameters
Reject Worklist Days: 1
ePharmacy Response Pause: 0

Transfer Reject Codes
Code Description Auto-Send
---- -----
56 Non-Matched Prescriber ID NO
57 Non-Matched PA/MC Number NO
58 Non-Matched Primary Prescriber NO
60 Product/Service Not Covered For Patient Age YES
61 Product/Service Not Covered For Patient Gender YES
62 Patient/Card Holder ID Name Mismatch YES

```

+ Enter ?? for more actions	
EA Edit All Parameters	CP Copy Parameters
EG Edit General Parameters	DP Display Site Parameters
ET Edit Transfer Reject Code	CD Change Division
ER Edit Rej. Resolution Required Code	EX Exit
Select Action: Next Screen//	

### **Example: Edit General Parameters (EG) action**

```
Select Action: Next Screen// EG Edit General Parameters
REJECT WORKLIST DAYS: 1// ??
    The number of days an uncommented reject can remain on the reject
    worklist without being included in the nightly reject worklist alert
    mail message.

REJECT WORKLIST DAYS: 1//
EPHARMACY RESPONSE PAUSE: 2// ??
    This field contains the number of seconds the claim status message will
    be displayed on the screen after the transmission message. The number
    of seconds to delay may be from 0 to 3 with the default of 2 seconds.

EPHARMACY RESPONSE PAUSE: 2//
```

### **Example: ET (Edit Transfer Reject Code) action**

```
Select Action: Next Screen// ET Edit Transfer Reject Code

All transfer rejects will automatically be placed on the Third Party Payer
Rejects - Worklist if the reject code is defined in the site parameter file
and the AUTO SEND parameter is set to yes. The OPECC must manually transfer
the reject if the reject code is defined in the site parameter file
and the AUTO SEND parameter is set to no. (To be used when Pharmacy can
possibly correct a locally filled Rx.)

TRANSFER REJECT CODE: ??

Choose from:
10      M/I Patient Gender Code
11      M/I Patient Relationship Code
12      M/I Place of Service
13      M/I Other Coverage Code
14      M/I Eligibility Clarification Code
15      M/I Date of Service
16      M/I Prescription/Service Reference Number
17      M/I Fill Number
18      M/I Metric Quantity
.
.
.

TRANSFER REJECT CODE: 81      Claim Too Old

    You are entering a new transfer reject code - 81.
TRANSFER REJECT CODE: 81// ?
AUTO SEND: NO// ??
    Enter YES to allow the Third Party claim reject code to be
    automatically placed on the Pharmacy Reject Worklist or NO
    to require Outpatient Pharmacy Electronic Claims
    Coordinator (OPECC) intervention to do so. A null value
    will be treated the same as entering NO in this field.
```

Choose from:

0 NO  
1 YES  
AUTO SEND: NO//

ANOTHER TRANSFER REJECT CODE:

**Example: ER (Edit Rej. Resolution Required Code) action**

Select Action: Next Screen// ER Edit Rej. Resolution Required Code

All Reject Resolution Required reject codes will automatically be placed on the Third Party Payer Rejects - Worklist. This parameter applies to rejects for original unreleased fills only. Prescriptions will not be filled until the rejects identified by the Reject Resolution parameter are resolved.

REJECT RESOLUTION REQUIRED CODE: ??

Choose from:

10 M/I Patient Gender Code  
11 M/I Patient Relationship Code  
12 M/I Place of Service  
13 M/I Other Coverage Code  
14 M/I Eligibility Clarification Code  
15 M/I Date of Service  
16 M/I Prescription/Service Reference Number  
17 M/I Fill Number  
18 M/I Metric Quantity  
19 M/I Days Supply  
20 M/I Compound Code  
21 M/I Product/Service ID  
22 M/I Dispense As Written (DAW) /Product Selection Code  
23 M/I Ingredient Cost Submitted  
24 M/I SALES TAX  
25 M/I Prescriber ID  
26 M/I Unit Of Measure  
27 Product Identifier not FDA/NSDE Listed  
28 M/I Date Prescription Written  
29 M/I Number Of Refills Authorized

... .

REJECT RESOLUTION REQUIRED CODE: 27 Product Identifier not FDA/NSDE Listed  
You are entering a new reject resolution required code - 27.

REJECT RESOLUTION REQUIRED CODE: 27//

DOLLAR THRESHOLD: 0// ??

If a Reject Resolution Required Code is received on an ECME claim reject, the value of this field is compared to the Gross Amount Due of the prescription.

If the Gross Amount Due is greater or equal to the value of this field then the reject is transferred to the Third Party WorkList for Reject Resolution Required (RRR) processing.

If the value of this field is left blank or set to 0, then all rejects with the RRR reject code will be transferred to the Third Party Worklist for RRR processing.

DOLLAR THRESHOLD: 0//

ANOTHER REJECT RESOLUTION REQUIRED CODE:

#### **Example: CP (Copy Parameters) action**

```
Select Action: Next Screen// CP Copy Parameters

The parameters will be copied from CHEYENNE VAM&ROC Division.

Select the Pharmacy Division(s) to overwrite.
You may select a single or multiple Pharmacy Divisions,
or enter ^ALL to select all Pharmacy Divisions.

Select a Pharmacy Division to be overwritten: ??

Choose from:
FORT COLLINS CLINIC      442GC
GREELEY CLINIC           442GD
MOC - CHEYENNE            442HK
SIDNEY CLINIC             442GB

Select a Pharmacy Division to be overwritten: FORT COLLINS CLINIC      442GC

ANOTHER ONE:

The parameters from Pharmacy Division CHEYENNE VAM&ROC
will overwrite the parameters in Pharmacy Division:

FORT COLLINS CLINIC

Do you want to continue? NO//
```

#### **Third Party Payer Rejects - View/Process [PSO REJECTS VIEW/PROCESS]**

This option provides information about rejects that have been on the Third Party Payer Rejects – Worklist. This option allows the user to find, display and reopen rejects previously resolved from the Third Party Payer Rejects – Worklist in order to take action on them again.

The user can choose to view rejects for one, multiple, or all Outpatient Pharmacy Divisions.

#### **Example: Viewing and Resolving Open Rejects**

```
Select ePharmacy Menu Option: VP Third Party Payer Rejects - View/Process

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

DIVISION: ^ALL
```

The user can select one of the following selections to filter the data displayed:

- **DATE RANGE:** Selects a date range (Default: Last 90 days).

```
BEGIN REJECT DATE: T-90// <Enter> (MAR 09, 2007)
```

END REJECT DATE: T// <Enter> (JUN 07, 2007)

- **(P)ATIENT:** Selects a single patient, multiple patients, or all patients.
- **(D)RUG:** Selects a single drug, multiple drugs, or all drugs.
- **(R)X:** Selects a single prescription number, or multiple prescription numbers.
- **(I)NSURANCE:** Selects a single insurance, multiple insurances, or all insurances.

Select one of the following:

P	PATIENT
D	DRUG
R	Rx
I	INSURANCE

By (P)atient, (D)rug, (R)x or (I)nsurance: P// INSURANCE

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

INSURANCE: TEST  
1 TEST INS PLUS 111 STREET ADDRESS CITY MONTANA Y  
2 TEST INSURANCE 123 MAIN ST CHICAGO ILLINOIS Y  
CHOOSE 1-2: 2 TEST INSURANCE 123 MAIN ST CHICAGO ILLINOIS  
Y TEST INSURANCE

ANOTHER ONE:

Next, the user can choose to display either Unresolved, Resolved, or Both types of rejects.

Select one of the following:

U	UNRESOLVED
R	RESOLVED
B	BOTH

(U)NRESOLVED, (R)RESOLVED or (B)OTH REJECT statuses: B// <Enter> BOTH  
Please wait...

### Example: Viewing and Resolving Open Rejects (continued)

Rejects Processing Screen Nov 21, 2005@08:27:37 Page: 1 of 1  
Divisions: ALL  
Selection: ALL REJECTS FOR TEST INS

# Rx#	PATIENT(ID) [^]	DRUG	REASON
1 100003872	OPPATIENT, FOUR(1322P)	A AND Z OINTMENT	DUR:
2 100003873	OPPATIENT, FOUR(1322P)	PHYTONADIONE 5MG TAB 79 :REFILL TOO	
SO			
3 100003873	OPPATIENT, FOUR(1322P)	PHYTONADIONE 5MG TAB DUR:	
4 100003785	OPPATIENT, TEN(3222)	ALBUMIN 5% 250ML	DUR:
5 100003882	OPPATIENT, TEN(3222)	ALBUTEROL INHALER	DUR:
6 100003884	OPPATIENT, TEN(3222)	TEMAZEPAM 15MG CAP	DUR:

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: Quit//

The following options are available on the screen above:

- DR – Sorts the list by the drug name.
- PA – Sorts the list by the patient's last name.
- RE – Sorts the list by the reject reason.
- RF – Refreshes the screen. (This selection retrieves DUR/ REFILL TOO SOON rejects that happened after the screen was originally populated.)
- RX – Sorts the list by Prescription number.
- GI – Groups the rejects by Insurance Company name.

The following hidden actions are also available (excluding standard ListManager hidden actions):

- TRI (Show/Hide TRICARE) – Toggle that indicates whether to display or hide TRICARE rejections.
- CVA (Show/Hide CHAMPVA) – Toggle that indicates whether to display or hide CHAMPVA rejections.
- PSX (Print to Excel) – Allows the current display list of rejection to output in a format that can easily be imported into a spreadsheet.



The following two sets of characters denote the order by which the list is being sorted: [^] for ascending and [v] for descending. The order inverts every time the user selects the same column by which the list is already ordered. Thus, if the list is currently ordered by Patient in ascending order ([^]) and the user types "PA", the list will be re-sorted in descending order and the order indicator will change to ([v]).

The user selects a specific record to display all relevant information about the prescription and the claim submitted to the payer.

### **Example: Viewing and Resolving Open Rejects (continued)**

Reject Information (Veteran)	Nov 21, 2005@08:29:30	Page:	1 of 2
Division :	ALBANY NPI#: 1234567890	NCPDP:	4150001P TAX ID: XX-XXXXXXX
Patient :	OPPATIENT, FOUR (000-01-1322P)	Sex:	M DOB: JAN 13, 1922 (83)
Rx# :	100003873/0	ECME#:	000000504455 Date of Service: Nov 15, 2005
CMOP Drug:	DOCUSATE NA 100MG CA	NDC Code: 54629-0600-01	
<hr/> REJECT Information (Veteran)			

```
Reject Type      : 79 - REFILL TOO SOON received on NOV 15, 2005@14:13:51
Reject Status   : OPEN/UNRESOLVED
Next Avail Fill: NOV 20,2005
Payer Addl Msg : NEXT RFL 111805,DAYS TO RFL 3, LAST FILL 101805 AT YOUR
                  PHARM,REFILL TOO SOON
Reason Code     : ER (OVERUSE PRECAUTION )
DUR Text       : RETAIL
DUR Add Msg    : THIS IS THE DUR ADDITIONAL TEXT.
```

OTHER REJECTS

```
29 - M/I Number Refills Authorized
39 - M/I Diagnosis Code
```

INSURANCE Information

```
Insurance      : TEST INS
Contact        : 1-800-555-5050
BIN / PCN      : RXINS / XXXXXXXXXXXXXXXXX
```

+ Enter ?? for more actions

VW View Rx	IGN Ignore Reject	OVR Submit Override Codes
MP Medication Profile	RES Resubmit Claim	CSD Change Suspense Date
Select: Next Screen//	<b>IGN</b> Ignore Reject	

These options are available on the screen above:

- VW (View RX) – Takes the user to the *View Prescription* option to review details for that prescription.
- MP (Medication Profile) – Invokes the patient's list of medication.
- IGN (Ignore Reject) – Allows the user to close or resolve the DUR/REFILL TOO SOON/REJECT RESOLUTION REQUIRED Reject without resubmission to the payer. The user will be required to enter a free-text comment and his/her electronic signature.
- RES (Resubmit Claim) – Allows the user to re-submit the claim to the payer. This will automatically mark the reject resolved. The RES action can be used to submit a claim for TRICARE and CHAMPVA non-billable prescriptions with open pseudo-rejection codes of eT and eC. The Reject Information screen only displays the RESUBMISSION indicator if the claim was resubmitted from the ECME User Screen.
- OVR (Submit Override Codes) – Allows the user to re-submit the claim by entering NCPDP override codes, which shall trigger a new claim submission be sent to the payer.
- CSD (Change Suspense Date) – Allows the user to change the fill date for suspended prescriptions.
- DC (Discontinue Rx) – C (Discontinue Rx) – Allows the user to discontinue a TRICARE, CHAMPVA or Veteran prescription. • Note that this is primary action when the prescription is for a TRICARE or CHAMPVA patient and a hidden action when the prescription is for a Veteran patient.

### **Hidden actions:**

- COM (Add Comments) – Allows the user to add reject specific comments. These comments are local to the Reject Worklist and View/Process options and are not transmitted to ECME.
- CLA (Submit Clarif. Code) – Allows the user to re-submit a claim with Clarification Codes.
- ED (Edit Rx) – Allows the user to edit the prescription. If, after editing the prescription, the fill date is equal to the current date or is in the future and the prescription is not already suspended, the user will get the LABEL prompt, which will allow the user to suspend the prescription.
- DC (Discontinue Rx) – Allows the user to discontinue a TRICARE, CHAMPVA or Veteran prescription. Note that this is primary action when the prescription is for a TRICARE or CHAMPVA patient and a hidden action when the prescription is for a Veteran patient.
- PA (Submit Prior Auth.) – Allows the user to re-submit a claim with Prior Authorization information.
- ARI (View Addtnl Rej Info) – Allows the user to display additional reject information from the payer, if available.
- SDC (Suspense Date Calculation) – Allows the user to calculate a new suspense date based on Last Date of Service and Last Days Supply. The suspense date calculation will also consider prior prescriptions for the same patient and drug to allow calculation of a suspense date for a new prescription.
- SMA (Submit Multiple Actions) – Allows the user to resubmit a claim with multiple actions, including the following information: Prior Authorization, Submission Clarification Code, Reason for Service Code, Professional Service Code, and Result of Service Code.
- VER (View ePharmacy Rx) - Allows the user to view and print information for one prescription, combining information from Outpatient Pharmacy, Integrated Billing and ECME.

### **Example: Viewing and Resolving Open Rejects (continued)**

Enter your Current Signature Code:	SIGNATURE VERIFIED
Comments: changed quantity	
When you confirm this REJECT will be marked RESOLVED.	
Confirm? ? NO// <b>Y</b> YES	[Closing...OK]

The following is a sample of the ECME Activity Log update that occurs when a reject is resolved:

### **Example: ECME Activity Log entry: Reject Resolved**

```
Rx Activity Log           Nov 21, 2005@09:43:33      Page: 3 of 3
OPPATIENT, FOUR
  PID: 000-01-1322P          Ht (cm): _____ (_____)
  DOB: JAN 13, 1922 (83)      Wt (kg): _____ (_____)
+
1 11/15/05@14:13:52 ORIGINAL OPPHARMACIST4, THREE
Comments: Submitted to ECME:REJECT WORKLIST-DUR OVERRIDE CODES (DD/M0/1B) -E PAYABLE

ECME REJECT Log:
# Date/Time Rcvd Rx Ref Reject Type STATUS Date/Time Resolved
=====
1 12/11/05@19:03:31 ORIGINAL DUR RESOLVED 12/12/05@16:45:21
Comments: CLAIM RE-SUBMITTED
2 5/30/06@19:13:57 REFILL 2 DUR RESOLVED 5/31/06@15:58:32
Comments: CLAIM RE-SUBMITTED

Enter ?? for more actions

Select Action: Quit//
```

### **Third Party Payer Rejects - Worklist [PSO REJECTS WORKLIST]**

This option gives the user the ability to process Third Party Payer Rejects, CHAMPVA Non-billable rejects and TRICARE Non-billable rejects for one, multiple, or all Outpatient Pharmacy Divisions. Only OPEN/UNRESOLVED rejects that have clinical significance, such as DUR and Refill Too Soon, and rejects transferred from the ECME user screen, are added to the Worklist. Once the reject is marked CLOSED/RESOLVED, it is automatically removed from the Worklist.

Discontinued TRICARE and CHAMPVA prescriptions no longer appear on the Third Party Payer Rejects - Worklist [PSO REJECTS WORKLIST].

### **Example: Resolving Open Rejects**

```
Select Rx (Prescriptions) Option: EPHARMACY Menu

IR    Ignored Rejects Report
MP    ePharmacy Medication Profile (View Only)
NV    NDC Validation
PF    ePharmacy Medication Profile Division Preferences
SP    ePharmacy Site Parameters
VP    Third Party Payer Rejects - View/Process
WL    Third Party Payer Rejects - Worklist
TC    TRICARE CHAMPVA Bypass/Override Report
VER   View ePharmacy Rx

Select ePharmacy Menu Option: WL Third Party Payer Rejects - Worklist
You may select a single or multiple DIVISIONS,
```

or enter ^ALL to select all DIVISIONS.

DIVISION: **^ALL**

Insurance Rejects - Worklist Nov 09, 2010@11:24:10

Page: 1 of 1

Divisions: ALL

Selection: ALL UNRESOLVED REJECTS

# Rx#	PATIENT (ID) [^]	DRUG	REASON
1 100003521	OPPATIENT, TWELVE(5444)	ACETYL CYSTEINE 20% 3 79	:REFILL TOO SOON
	Payer Message: PLAN = 8906	NEXT FILL: 20050429	
2 100003521	OPPATIENT, TWELVE(5444)	ACETYL CYSTEINE 20% 3 79	:REFILL TOO SOON
	Payer Message: RTS - Rx: 9306343 DT: 31-MAR-2005 DS: 30 RD: 23-APRIL 2005		
3 100003872	OPPATIENT, FOUR(1322P)	A AND Z OINTMENT	DUR:
	Payer Message: DUR Reject Error	REJECT RESOLUTION REQUIRED	
4 100003872	OPPATIENT, FOUR(1322P)	A AND Z OINTMENT	07 :M/I Cardholder
	Payer Message:	CHAMPVA - Non-DUR/RTS	
5 101358	OPCVACARE, ONE (7895)	BACLOFEN 10MG TABS	07 :M/I Cardholder
	Payer Message:		
6 100923	OPCVACARE, TWO (4933)	LORAZEPAM 1MG TAB	07 :M/I Cardholder
	Payer Message:	TRICARE - Non-DUR/RTS	
7 101359	OPTRICARE, ONE (7894)	BACLOFEN 10MG TABS	07 :M/I Cardholder
	Payer Message:		
8 100924	OPTRICARE, TRI (4932)	LORAZEPAM 1MG TAB	07 :M/I Cardholder
	Payer Message:	OTHER REJECTS	
9 101173	OPPATIENT, THREE(9877)	FENOPROFEN 300MG CAP 08	:M/I Person Co
	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

The following options are available on the screen above:

- DR – Sorts the list by the drug name.
- PA – Sorts the list by the patient's last name.
- RE – Sorts the list by the reject reason.
- RF – Refreshes the screen. (This selection retrieves DUR/ REFILL TOO SOON rejects that happened after the screen was originally populated.)
- RX – Sorts the list by Prescription number.
- GI – Groups the rejects by Insurance Company name.

The following hidden actions are also available (excluding standard ListManager hidden actions):

- TRI (Show/Hide TRICARE) - When toggled to Show, TRICARE Non-DUR/RTS rejects will be automatically displayed at the end of the listing. Toggling the TRI action to Hide will remove them from the screen.
- CVA (Show/Hide CHAMPVA) - When toggled to Show, CHAMPVA Non-DUR/RTS rejects will be automatically displayed at the end of the listing. Toggling the CVA action to Hide will remove them from the screen.

- PSX (Print to Excel) – Allows the current display list of rejection to output in a format that can easily be imported into a spreadsheet.

After selecting a reject from the list, the following screen is displayed

#### **Example: Resolving Open Rejects (continued)**

Reject Information (UNRESOLVED) Nov 21, 2005@09:51:15	Page: 1 of 1	
Division : ALBANY NPI# : 1234567890 NCPDP: 4150001P TAX ID: XX-XXXXXXX		
Patient : OPPATIENT,FOUR(000-01-1322P) Sex: M DOB: JAN 13,1922(83)		
Rx# : 100003872/0 ECME#: 000000504454 Date of Service: Nov 15, 2005		
CMOP Drug: DOCUSATE NA 100MG CA	NDC Code: 54629-0600-01	
<hr/>		
REJECT Information		
Reject Type : 88 - DUR REJECT received on NOV 15, 2005@14:11:51		
Reject Status : OPEN/UNRESOLVED		
Next Avail Fill: NOV 20,2005		
Payer Addl Msg : DUR Reject Error		
Reason Code :		
DUR Text : _____		
<hr/>		
INSURANCE Information		
Insurance : TEST INS		
Contact :		
BIN / PCN : 741852 / XXXXXXXXXXXX		
Group Number : 12454		
Cardholder ID : 000011322P		
<hr/>		
Enter ?? for more actions		
VW View Rx	IGN Ignore Reject	OVR Submit Override Codes
MP Medication Profile	RES Resubmit Claim	CSD Change Suspense Date
Select: Quit// OVR Submit Override Codes		

These options are available on the screen above:

- VW (View Rx) – Takes the user to the View Prescription option to review details for that prescription.
- MP (Medication Profile) – Invokes the patient's list of medication.
- IGN (Ignore Reject) – Allows the user to close or resolve the DUR/REFILL TOO SOON Reject or the Reject Resolution Required Reject without resubmission to the payer. The user will be required to enter a free-text comment and his/her electronic signature.
- RES (Resubmit Claim) – Allows the user to re-submit the claim to the payer. This will automatically mark the reject resolved. The RES action can be used to submit a claim for TRICARE and CHAMPVA non-billable prescriptions with open pseudo-rejection codes of eT and eC. The Reject Information screen only displays the RESUBMISSION indicator if the claim was resubmitted from the ECME User Screen.
- OVR (Submit Override Codes) – Allows the user to re-submit the claim by entering NCPDP override codes, which shall trigger a new claim submission be sent to the payer. This option is active for DUR rejects only.
- CSD (Change Suspense Date) – Allows the user to change the fill date for suspended prescriptions.

- DC (Discontinue Rx) – Allows the user to discontinue a TRICARE, CHAMPVA or Veteran prescription. Note that this is a primary action when the prescription is for a TRICARE or CHAMPVA patient and a hidden action when the prescription is for a Veteran patient.

**Hidden actions:**

- COM (Add Comments) – Allows the user to add reject specific comments. These comments are local to the Reject Worklist and View/Process options and are not transmitted to ECME.
- CLA (Submit Clarif. Code) – Allows the user to re-submit a claim with Clarification Codes.
- ED (Edit Rx) – Allows the user to edit the prescription.
- DC (Discontinue Rx) – Allows the user to discontinue a TRICARE, CHAMPVA or Veteran prescription. Note that this is primary action when the prescription is for a TRICARE or CHAMPVA patient and a hidden action when the prescription is for a Veteran patient.
- PA (Submit Prior Auth.) – Allows the user to re-submit a claim with Prior Authorization information.
- ARI (View Addtnl Rej Info) – Allows the user to display additional reject information from the payer, if available.
- SDC (Suspense Date Calculation) – Allows the user to calculate a new suspense date.
- SMA (Submit Multiple Actions) – Allows the user to resubmit a claim with multiple actions.

When a claim is rejected, typically the Payer returns a “Reason for Service Code”, which becomes the default for the “Reason for Service Code” prompt. The user can use this reason to then select which code is entered for “Professional Service Code” and “Result of Service Code”.

Available codes for “Professional Service Code” include:

<b>Code</b>	<b>Description</b>
00	NO INTERVENTION
AS	PATIENT ASSESSMENT
CC	COORDINATION OF CARE
DE	DOSING EVALUATION/DETERMINATION
DP	DOSAGE EVALUATED
FE	FORMULARY ENFORCEMENT
GP	GENERIC PRODUCT SELECTION
M0	PRESCRIBER CONSULTED
MA	MEDICATION ADMINISTRATION

MB	OVERRIDING BENEFIT
MP	PATIENT WILL BE MONITORED
MR	MEDICATION REVIEW
P0	PATIENT CONSULTED
PA	PREVIOUS PATIENT TOLERANCE
PE	PATIENT EDUCATION/INSTRUCTION
PH	PATIENT MEDICATION HISTORY
PM	PATIENT MONITORING
PT	PERFORM LABORATORY REQUEST
R0	PHARMACIST CONSULTED OTHER SOURCE
RT	RECOMMENDED LABORATORY TEST
SC	SELF-CARE CONSULTATION
SW	LITERATURE SEARCH/REVIEW
TC	PAYER/PROCESSOR CONSULTED
TH	THERAPEUTIC PRODUCT INTERCHANGE
ZZ	OTHER ACKNOWLEDGEMENT

Available codes for “Result of Service Code” include:

<b><u>Code</u></b>	<b><u>Description</u></b>
00	NOT SPECIFIED
1A	FILLED AS IS, FALSE POSITIVE
1B	FILLED PRESCRIPTION AS IS
1C	FILLED, WITH DIFFERENT DOSE
1D	FILLED, WITH DIFFERENT DIRECTIONS
1E	FILLED, WITH DIFFERENT DRUG
1F	FILLED, WITH DIFFERENT QUANTITY
1G	FILLED, WITH PRESCRIBER APPROVAL
1H	BRAND-TO-GENERIC CHANGE
1J	RX-TO-OTC CHANGE
1K	FILLED, WITH DIFFERENT DOSAGE FORM
2A	PRESCRIPTION NOT FILLED
2B	NOT FILLED, DIRECTIONS CLARIFIED
3A	RECOMMENDATION ACCEPTED
3B	RECOMMENDATION NOT ACCEPTED
3C	DISCONTINUED DRUG
3D	REGIMEN CHANGED
3E	THERAPY CHANGED
3F	THERAPY CHANGED - COST INCREASE ACKNOWLEDGED
3G	DRUG THERAPY UNCHANGED
3H	FOLLOW-UP REPORT
3J	PATIENT REFERRAL
3K	INSTRUCTIONS UNDERSTOOD
3M	COMPLIANCE AID PROVIDED

3N MEDICATION ADMINISTERED  
4A PRESCRIBED WITH ACKNOWLEDGEMENTS

Available codes for “Reason for Service Code” include:

<b><u>Code</u></b>	<b><u>Description</u></b>
AD	ADDITIONAL DRUG NEEDED
AN	PRESCRIPTION AUTHENTICATION
AR	ADVERSE DRUG REACTION
AT	ADDITIVE TOXICITY
CD	CHRONIC DISEASE MANAGEMENT
CH	CALL HELP DESK
CS	PATIENT COMPLAINT/SYMPOTM
DA	DRUG-ALLERGY
DC	DRUG-DISEASE (INFERRED)
DD	DRUG-DRUG INTERACTION
DF	DRUG-FOOD INTERACTION
DI	DRUG INCOMPATIBILITY
DL	DRUG-LAB CONFLICT
DM	APPARENT DRUG MISUSE
DR	DOSE RANGE CONFLICT
DS	TOBACCO USE
ED	PATIENT EDUCATION/INSTRUCTION
ER	OVERUSE
EX	EXCESSIVE QUANTITY
HD	HIGH DOSE
IC	IATROGENIC CONDITION
ID	INGREDIENT DUPLICATION
LD	LOW DOSE
LK	LOCK IN RECIPIENT
LR	UNDERUSE
MC	DRUG-DISEASE (REPORTED)
MN	INSUFFICIENT DURATION
MS	MISSING INFORMATION/CLARIFICATION
MX	EXCESSIVE DURATION
NA	DRUG NOT AVAILABLE
NC	NON-COVERED DRUG PURCHASE
ND	NEW DISEASE/DIAGNOSIS
NF	NON-FORMULARY DRUG
NN	UNNECESSARY DRUG
NP	NEW PATIENT PROCESSING
NR	LACTATION/NURSING INTERACTION
NS	INSUFFICIENT QUANTITY
OH	ALCOHOL CONFLICT
PA	DRUG-AGE
PC	PATIENT QUESTION/CONCERN

PG	DRUG-PREGNANCY
PH	PREVENTIVE HEALTH CARE
PN	PRESCRIBER CONSULTATION
PP	PLAN PROTOCOL
PR	PRIOR ADVERSE REACTION
PS	PRODUCT SELECTION OPPORTUNITY
RE	SUSPECTED ENVIRONMENTAL RISK
RF	HEALTH PROVIDER REFERRAL
SC	SUBOPTIMAL COMPLIANCE
SD	SUBOPTIMAL DRUG/INDICATION
SE	SIDE EFFECT
SF	SUBOPTIMAL DOSAGE FORM
SR	SUBOPTIMAL REGIMEN
SX	DRUG-GENDER
TD	THERAPEUTIC
TN	LABORATORY TEST NEEDED
TP	PAYER/PROCESSOR QUESTION
UD	DUPLICATE DRUG

### **Example: Resolving Open Rejects (continued)**

Professional Service Code: **MR** MEDICATION REVIEW  
 Result of Service Code : **1D** FILLED, WITH DIFFERENT DIRECTIONS

Professional Service Code: MR - MEDICATION REVIEW  
 Result of Service Code : 1D - FILLED, WITH DIFFERENT DIRECTIONS

When you confirm, a new claim will be submitted for  
 the prescription and this REJECT will be marked  
 resolved.

Confirm? ? YES// <Enter>

Prescription 100003872 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-Waiting to process response  
**E PAYABLE**

The following is a sample of the ECME Activity Log update that occurs when a reject is resolved.

### **Example: ECME Activity Log entry: Reject Resolved**

Rx Activity Log

Nov 21, 2005@11:11:53

Page: 3 of 3

```

OPPATIENT, FOUR
PID: 000-01-1322P          Ht(cm): _____ (_____)
DOB: JAN 13,1922 (83)       Wt(kg): _____ (_____)

+
# Date/Time      Rx Ref      Initiator Of Activity
=====

1 5/16/07@14:40:40    ORIGINAL    OPPHARMACIST4, THREE
Comments: Submitted to ECME:WINDOW FILL(NDC:00058-2467-05)
2 5/16/07@14:40:40    ORIGINAL    OPPHARMACIST4, THREE
Comments: Billing quantity submitted through ECME: 25.000 (ML)
3 5/20/07@14:21:52    ORIGINAL    OPPHARMACIST4, THREE
Comments: Submitted to ECME:REJECT WORKLIST-DUR OVERRIDE CODES (AD/AS/1B) -E
REJECTED
4 5/20/07@14:21:52    ORIGINAL    OPPHARMACIST4, THREE
Comments: Billing quantity submitted through ECME: 25.000 (ML)

ECME REJECT Log:
# Date/Time Rcvd      Rx Ref      Reject Type      STATUS      Date/Time Resolved
=====
1 5/16/07@14:40:40    ORIGINAL    DUR             RESOLVED   5/20/07@14:21:52
Comments: CLAIM RE-SUBMITTED

Enter ?? for more actions

Select Action:Quit//TRICARE CHAMPVA Bypass/Override Report

```

#### **Example: Resubmitting an ePharmacy Claim**

Select ED (Edit Rx) and the following hidden actions are available for use.

AL	Activity Logs (OP)	REJ	View REJECT	DN	Down a Line
VF	Verify (OP)	VER	View ePharmacy Rx	FS	First Screen
CO	Copy (OP)	RES	Resubmit Claim	GO	Go to Page
TR	Convert Titration Rx	REV	Reverse Claim	LS	Last Screen
TM	Titration Mark/UnmarkIN		Intervention Menu	PS	Print Screen
RP	Reprint (OP)	DA	Display Drug AllergiesPT		Print List
HD	Hold (OP)	DIN	Drug Restr/Guide (OP)QU		Quit
UH	Unhold (OP)	+	Next Screen	RD	Re Display Screen
PI	Patient Information	-	Previous Screen	SL	Search List
PP	Pull Rx (OP)	<	Shift View to Left	UP	Up a Line
IP	Inpat. Profile (OP)	>	Shift View to Right		
OTH	Other OP Actions	ADPL	Auto Display(On/Off)		

Resubmit Claim is a hidden action used to resubmit a claim to the third-party payer. Claims are almost always resubmitted by the ePharmacy Site Manager and not by untrained Pharmacy staff members. A resubmission is not allowed for the following:

- TRICARE non-billable prescription with a pseudo-rejection of eT
- CHAMPVA non-billable prescription with a pseudo-rejection of eC
- Any prescription with a primary and secondary claim

The action will prompt for a fill number with a default value of the most recent fill.

If a user resubmits a claim and resolves a Reject Resolution Required rejection, additional information will display below the claim processing message. The additional information only displays if the resubmit occurs from Outpatient Pharmacy, not ECME, and only if the claim status is E PAYABLE.

**Example: Resubmitting an ePharmacy Claim to Resolve a Reject Resolution Required rejection**

Veteran Prescription 100937 successfully submitted to ECME for claim generation.

Processing Primary claim...

Claim Status:

IN PROGRESS-Building the claim  
IN PROGRESS-Transmitting  
E PAYABLE

Total Amount Paid: 40.00                      Ingredient Cost Paid: 0.00  
Amount of Copay/Coinsurance: 9.00              Dispensing Fee Paid: 0.00  
Amount Applied to Periodic Deductible: 0.00  
Remaining Deductible Amount: 0.00

Enter RETURN to continue or '^' to exit:

**[PSO Bypass/Override Report]**



This menu option is locked with the [PSO TRICARE/CHAMPVA MGR](#) security key.

This option provides information in a detail or summary report format that will list prescriptions where the Bypass or Override was performed to enable processing of these TRICARE and CHAMPVA prescriptions. The user has the ability to list (I)npatient; (N)on-Billable Product; (R)eject Override; or(A)ll. Besides allowing the selection of all types, the report allows the selection of one or two types. For example, the user can select Non-billable and Reject for the same report.

**Example: Accessing the TRICARE CHAMPVA Bypass/Override Report**

Select Rx (Prescriptions) Option: epharmacy Menu

IR	Ignored Rejects Report
MP	ePharmacy Medication Profile (View Only)
NV	NDC Validation
PF	ePharmacy Medication Profile Division Preferences
SP	ePharmacy Site Parameters
VP	Third Party Payer Rejects - View/Process
WL	Third Party Payer Rejects - Worklist
TC	TRICARE CHAMPVA Bypass/Override Report

You've got PRIORITY mail!

Select ePharmacy Menu Option: TC TRICARE CHAMPVA Bypass/Override Report

Select one of the following:

D DIVISION  
A ALL

Select Certain Pharmacy (D)ivisions or (A)LL:

### **Example: TRICARE CHAMPVA Bypass/Override Report Filters and Data Elements**

Select one of the following:

D DIVISION  
A ALL

Select Certain Pharmacy (D)ivisions or (A)LL: DIVISION

Select ECME Pharmacy Division(s): BATTLE CREEK

Selected:

BATTLE CREEK

Select ECME Pharmacy Division(s): GRAND RAPIDS MI CBOC 515BY VA GRAND  
RAPIDS OPC 515BY VA GRAND RAPIDS OPC

Selected:

BATTLE CREEK

VA GRAND RAPIDS OPC

Select ECME Pharmacy Division(s):

Select one of the following:

T TRICARE  
C CHAMPVA  
A ALL

Select Eligibility (T)RICARE, (C)HAMPVA or (A)LL Entries: ALL// ALL

Select one of the following:

S Summary  
D Detail

Display (S)ummary or (D)etail Format: Detail//

START WITH TRANSACTION DATE: T-1// T-10 (APR 30, 2010)

GO TO TRANSACTION DATE: T// T-9 (MAY 01, 2010)

Select one of the following:

I INPATIENT  
N NON-BILLABLE  
R REJECT OVERRIDE  
P PARTIAL FILL  
A ALL

Select one of the following: \*\*Can select multiples - limit of 2\*\* : <no default>  
ALL

Select one of the following:

S SPECIFIC PHARMACIST(S)  
A ALL PHARMACISTS

Select Specific Pharmacist(s) or include ALL Pharmacists: ALL//

Select one of the following:

S SPECIFIC PROVIDER(S)  
A ALL PROVIDERS

Select Specific Provider(s) or include ALL Providers: ALL//

Select one of the following:

R              Pharmacist  
P              Provider/Prescriber Name

Group/Subtotal Report by Pharmacy (R) Pharmacist or (P) rovider: <no default>  
Pharmacist

Do you want to capture report data for an Excel document? NO//

WARNING - THIS REPORT REQUIRES THAT A DEVICE WITH 132 COLUMN WIDTH BE USED.  
IT WILL NOT DISPLAY CORRECTLY USING 80 COLUMN WIDTH DEVICES

DEVICE: HOME// 0;132;99 INCOMING TELNET

Please wait...

\*\* When selecting from above, Specific Pharmacist(s), the user will be able to continue selecting Pharmacist(s) as necessary. This filter will have the same functionality as the Division/Insurance Company selection filters.

\*\* When selecting from above, Specific Provider(s), the user will be able to continue selecting Provider(s) as necessary. This filter will have the same functionality as the Division/Insurance Company selection filters.

#### **Example of TRICARE CHAMPVA Bypass/Override Report Summary**

TRICARE CHAMPVA BYPASS/OVERRIDE AUDIT REPORT - SUMMARY Print Date: NOV 10,  
2010@10:05:26 PAGE: 1

DIVISION(S): ALL

ELIGIBILITY: ALL

TC TYPES: INPATIENT, NON-BILLABLE, PARTIAL FILL, REJECT OVERRIDE

ALL PRESCRIPTIONS BY AUDIT DATE: From 10/31/10 through 11/10/10

=====

=====

=====

=====

DIVISION: DIVISION ONE

\*\*\*\*\* CHAMPVA INPATIENT \*\*\*\*\*

PHARMACIST: PHARMACIST,ONE	-----
SUB-TOTALS	45.00
RX COUNT	1
MEAN	10.00

PHARMACIST: PHARMACIST,TWO	-----
SUB-TOTALS	30.00
RX COUNT	1
MEAN	30.00

CHAMPVA INPATIENT	
SUBTOTALS	75.00
RX COUNT	2
MEAN	37.50

\*\*\*\*\* CHAMPVA NON-BILLABLE  
\*\*\*\*\*

PHARMACIST: PHARMACIST, THREE	-----
SUB-TOTALS	20.00
RX COUNT	1
MEAN	20.00

CHAMPVA NON-BILLABLE	
SUBTOTALS	20.00
RX COUNT	1
MEAN	20.00

\*\*\*\*\* CHAMPVA PARTIAL FILL  
\*\*\*\*\*

PHARMACIST: PHARMACIST, FOUR	-----
SUB-TOTALS	16.20
RX COUNT	2
MEAN	8.10

PHARMACIST: PHARMACIST, FIVE	-----
SUB-TOTALS	8.00
RX COUNT	1
MEAN	8.00

PHARMACIST: PHARMACIST, SIX	-----
SUB-TOTALS	23.58
RX COUNT	1
MEAN	23.58

CHAMPVA PARTIAL FILL	
SUBTOTALS	47.78
RX COUNT	4
MEAN	11.95

\*\*\*\*\* CHAMPVA REJECT OVERRIDE  
\*\*\*\*\*

CHAMPVA REJECT OVERRIDE	
SUBTOTALS	0.00
RX COUNT	0
MEAN	0.00

\*\*\*\*\* TRICARE INPATIENT  
\*\*\*\*\*

TRICARE INPATIENT	
SUBTOTALS	11.93
RX COUNT	1
MEAN	11.93

\*\*\*\*\* TRICARE NON-BILLABLE  
\*\*\*\*\*

PHARMACIST: OPPHARM, ONE	-----
SUB-TOTALS	8.03
RX COUNT	1
MEAN	8.03
TRICARE NON-BILLABLE	
SUBTOTALS	8.03
RX COUNT	1
MEAN	8.03
***** TRICARE PARTIAL FILL *****	
PHARMACIST: OPPHARM, FOUR	-----
SUB-TOTALS	8.54
RX COUNT	1
MEAN	8.54
PHARMACIST: OPPHARM, FIVE	-----
SUB-TOTALS	16.20
RX COUNT	2
MEAN	8.10
TRICARE PARTIAL FILL	
SUBTOTALS	24.74
RX COUNT	3
MEAN	8.25
***** TRICARE REJECT OVERRIDE *****	
PHARMACIST: OPPHARM, TWO	-----
SUB-TOTALS	29.17
RX COUNT	3
MEAN	9.72
PHARMACIST: OPPHARM, THREE	-----
SUB-TOTALS	10.38
RX COUNT	1
MEAN	10.38
TRICARE REJECT OVERRIDE	
SUBTOTALS	39.55
RX COUNT	4
MEAN	9.89
DIVISION DIVISION ONE	-----
SUBTOTALS	154.51
RX COUNT	9
MEAN	17.17
-----	
GRAND TOTALS	154.51
RX COUNT	9
MEAN	17.17
-----	

REPORT HAS FINISHED

Press Return to continue, '^' to exit:

Example of TRICARE CHAMPVA Bypass/Override Report Detail  
 TRICARE CHAMPVA BYPASS/OVERRIDE AUDIT REPORT - DETAIL Print Date: OCT 31,  
 2010@11:59:22 Page: 1  
 DIVISION(S): DIVISION ONE, DIVISION TWO  
 ELIGIBILITY: ALL  
 TC TYPES: INPATIENT, NON-BILLABLE, PARTIAL FILL, REJECT OVERRIDE  
 ALL PRESCRIPTIONS BY AUDIT DATE: From 09/01/10 through 09/30/10

BENEFICIARY NAME/ID RX INFO	RX#	REF/ECME#	RX DATE
ACTION DATE NDC#	USER NAME DRUG	\$BILLED	QTY
DIVISION: DIVISION ONE			
***** CHAMPVA INPATIENT *****			
CVAPATIENT, TWO/xxxx C RT AC/N 02/13/10 POSTMASTER 06524328809 METFORMIN HCL 500MG TAB CHAMPVA INPATIENT/DISCHARGE	10750570B\$	0/000009300476	02/13/10
CVAPATIENT, THREE/xxxx C RT AC/N 02/13/10 POSTMASTER 06524328809 METFORMIN HCL 500MG TAB CHAMPVA INPATIENT/DISCHARGE	10750570B\$	0/000009300476	02/13/10
CHAMPVA INPATIENT SUBTOTALS RX COUNT MEAN		75.00 2 37.50	
***** CHAMPVA NON-BILLABLE *****			
CVAPATIENT, ONE/xxxx C RT AC/N 02/13/10 POSTMASTER 06524328809 DOCUSATE NA 100MG CA ec CHAMPVA DRUG NOT BILLABLE Fill Per Provider	10750570B\$	0/000009300476	02/13/10
PSOUSER, ONE SUB-TOTALS RX COUNT MEAN		20.00 1 20.00	
CHAMPVA NON-BILLABLE SUBTOTALS RX COUNT MEAN		20.00 1 20.00	
***** CHAMPVA PARTIAL FILL *****			

OPCVA, TWO/272P	2719140	0/N/A	07/27/11
W ** AC/N			
07/27/11                   PSOUSER, THREE		8.18	60
51111048893               ACETAMINOPHEN 325MG TAB			
eC:CHAMPVA-DRUG NON BILLABLE			
CHAMPVA Partial Fill			
OPCVA, TWO/272P	2719141	0/000004315966	07/27/11
W ** AC/N			
07/27/11                   PSOUSER, THREE		8.02	1
58177032404               NITROGLYCERIN 0.4MG SL T			
79:Refill Too Soon			
CHAMPVA Partial Fill			
PSOUSER, ONE			
SUBTOTALS	16.20		
RX COUNT	2		
MEAN	8.10		
TCouser, TWO/265P	2719348	0/N/A	09/08/11
W ** AC/N			
09/08/11                   PSOUSER, FOUR		8.00	1
51111048893               ACETAMINOPHEN 325MG TAB			
CHAMPVA Partial Fill			
PSOUSER, TWO			
SUBTOTALS	8.00		
RX COUNT	1		
MEAN	8.00		
TCouser, TWO/265P	2719354	0/000004316183	09/08/11
W ** AC/N			
09/08/11                   PSOUSER, FOUR		23.58	30
00052047260               CALCIFEDIOL 20MCG CAPS			
79:Refill Too Soon			
22:M/I Dispense As Written (DAW)/Product Selection Code			
23:M/I Ingredient Cost Submitted			
24:M/I SALES TAX			
25:M/I Prescriber ID			
26:M/I Unit Of Measure			
CHAMPVA Partial Fill			
PSOUSER, FIVE			
SUBTOTALS	23.58		
RX COUNT	1		
MEAN	23.58		
CHAMPVA PARTIAL FILL			
SUBTOTALS	47.78		
RX COUNT	4		
MEAN	11.95		
*****	CHAMPVA REJECT OVERRIDE		
*****			
CHAMPVA REJECT OVERRIDE			
SUBTOTALS	0.00		
RX COUNT	0		
MEAN	0.00		

\*\*\*\*\* TRICARE INPATIENT \*\*\*\*\*

OPPATIENT, TRIONE/XXXX 10750XXXX\$ 0/000009300XXX 09/10/10  
C RT AC/N 45.00 180  
09/10/10 POSTMASTER  
06XXX3XXXX METFORMIN HCL 500MG TAB  
TRICARE Inpatient/Discharge

TRICARE INPATIENT  
SUBTOTALS 45.00  
RX COUNT 1  
MEAN 45.00

\*\*\*\*\* TRICARE NON-BILLABLE \*\*\*\*\*

OPPATIENT, TRITWO/XXXX 1075XXXX\$ 0/00000930XXXX 09/10/10  
C RT AC/N 20.00 180  
09/10/10 OPPHARM, ONE  
06XXX3XXXX DOCUSATE NA 100MG CA  
eT TRICARE DRUG NOT BILLABLE  
Fill Per Provider

OPPHARM, ONE  
SUB-TOTALS 20.00  
RX COUNT 1  
MEAN 20.00

TRICARE NON-BILLABLE  
SUBTOTALS 20.00  
RX COUNT 1  
MEAN 20.00

\*\*\*\*\* TRICARE REJECT OVERRIDE \*\*\*\*\*

OPPATIENT, TRIFOUR/XXXX 107XXXX0B\$ 0/00000930XXXX 09/10/10  
C RT AC/N 20.00 180  
09/10/10 OPPHARM, ONE  
06524328809 DOCUSATE NA 100MG CA  
50:Non-Matched Pharmacy Number  
25:M/I Prescriber ID

OPHARM, ONE  
SUB-TOTALS 20.00  
RX COUNT 1  
MEAN 20.00

TRICARE REJECT  
SUBTOTALS 20.00  
RX COUNT 1  
MEAN 20.00

DIVISION: DIVISION ONE -----  
SUBTOTALS 180.00  
RX COUNT 6  
MEAN 30.00 -----

DIVISION: DIVISION TWO

***** CHAMPVA INPATIENT *****			
CVAPATIENT, TWO/xxxx	10750570B\$	0/000009300476	02/13/10
C RT AC/N			
02/13/10	POSTMASTER	10.00	180
06524328809	METFORMIN HCL 500MG TAB		
CHAMPVA INPATIENT/DISCHARGE			
SUB-TOTALS	10.00		
RX COUNT	1		
MEAN	10.00		
CVAPATIENT, THREE/xxxx	10750570B\$	0/000009300476	02/13/10
C RT AC/N			
02/13/10	POSTMASTER	40.00	180
06524328809	METFORMIN HCL 500MG TAB		
CHAMPVA INPATIENT/DISCHARGE			
SUB-TOTALS	40.00		
RX COUNT	1		
MEAN	40.00		
CHAMPVA INPATIENT			
SUBTOTALS	50.00		
RX COUNT	2		
MEAN	25.00		
***** CHAMPVA NON-BILLABLE *****			
CVAPATIENT, ONE/xxxx	10750570B\$	0/000009300476	02/13/10
C RT AC/N			
02/13/10	POSTMASTER	60.00	180
06524328809	DOCUSATE NA 100MG CA		
ec CHAMPVA DRUG NOT BILLABLE			
Fill Per Provider			
OPUSER, SIX			
SUB-TOTALS	60.00		
RX COUNT	1		
MEAN	60.00		
CHAMPVA NON-BILLABLE			
SUBTOTALS	60.00		
RX COUNT	1		
MEAN	60.00		
***** CHAMPVA PARTIAL FILL *****			
OPCVA, TWO/272P	2719140	0/N/A	07/27/11
W ** AC/N			
07/27/11	OPUSER, THREE	8.18	60
51111048893	ACETAMINOPHEN 325MG TAB		
eC:CHAMPVA-DRUG NON BILLABLE			
CHAMPVA Partial Fill			
OPCVA, TWO/272P	2719141	0/000004315966	07/27/11
W ** AC/N			
07/27/11	OPUSER, THREE	8.02	1
58177032404	NITROGLYCERIN 0.4MG SL T		

79:Refill Too Soon  
CHAMPVA Partial Fill

OPUSER, TWO	
SUBTOTALS	16.20
RX COUNT	2
MEAN	8.10

CHAMPVA PARTIAL FILL	
SUBTOTALS	16.20
RX COUNT	2
MEAN	8.10

\*\*\*\*\* CHAMPVA REJECT OVERRIDE  
\*\*\*\*\*

CHAMPVA REJECT OVERRIDE	
SUBTOTALS	0.00
RX COUNT	0
MEAN	0.00

\*\*\*\*\* TRICARE INPATIENT  
\*\*\*\*\*

OPPATIENT, TRISIX/XXXX	107XXXXXX\$	0/00000930XXXX	09/10/10
C RT AC/N			
09/10/10	POSTMASTER	10.00	180
06XXXXXXXXXX	METFORMIN HCL 500MG TAB		
PATIENT IS CURRENTLY ON A WEEKEND PASS AND WILL RETURN ON MONDAY 09/13/2010.			

OPPATIENT, TRISEVEN/XXXX	107XXXXXXB\$	0/0000093XXXXX	09/10/10
C RT AC/N			
09/10/10	POSTMASTER	40.00	180
06XXXXXXXXXX	METFORMIN HCL 500MG TAB		
PATIENT IS CURRENTLY ON A WEEKEND PASS AND WILL RETURN ON MONDAY 09/13/2010.			

TRICARE INPATIENT	
SUB-TOTALS	50.00
RX COUNT	2
MEAN	50.00

\*\*\*\*\* TRICARE NON-BILLABLE  
\*\*\*\*\*

OPPATIENT, TRIEIGHT/XXXX	107XXXXXX\$	0/000009300XXX	09/10/10
C RT AC/N			
09/10/10	OPPHARM, THREE	60.00	180
06XXX3XXXX	DOCUSATE NA 100MG CA		
eT TRICARE DRUG NOT BILLABLE			
Fill Per Provider			

OPHRAM, THREE	
SUBTOTALS	60.00
RX COUNT	1
MEAN	60.00

TRICARE NON-BILLABLE	
SUBTOTALS	60.00
RX COUNT	1
MEAN	60.00

***** TRICARE REJECT OVERRIDE *****			
OPPATIENT, TRININE/XXXX	107XXXXXX\$	0/00000930XXXX	09/10/10
C RT AC/N			
09/10/10 OPHARM, TWO	20.00	180	
06XXXXXXXXXX METFORMIN HCL 500MG TAB			
Claim ID: VA2005-056XXXX-XXXXXX-0007XXX			
50:Non-Matched Pharmacy Number			
25:M/I Prescriber ID			
 OPPHARM, TWO			
SUBTOTALS	20.00		
RX COUNT	1		
MEAN	20.00		
 TRICARE REJECT			
SUBTOTALS	20.00		
RX COUNT	1		
MEAN	20.00		
 DIVISION: DIVISION TWO	-----		
SUBTOTALS	200.00		
RX COUNT	7		
MEAN	28.57		
 GRAND TOTALS	-----		
RX COUNT	13		
MEAN	29.23		
 REPORT HAS FINISHED			
Press RETURN to continue, '^' to exit: TRICARE/CHAMPVA Reject Processing			

The Third Party Payer Rejects - Worklist [PSO REJECTS WORKLIST] and Third Party Payer Rejects - View/Process [PSO REJECTS VIEW/PROCESS] options have been modified in the following manner:

### 1. Display of non-DUR/RTS rejects

- Non-DUR/RTS TRICARE and CHAMPVA rejections each will be segregated at the end of the displayed information. They will be denoted with a "TRICARE - Non-DUR/RTS" or "CHAMPVA - Non-DUR/RTS" header. This header remains regardless of whether the GI - Group by Insurance action is toggled on or off. The TRICARE and CHAMPVA sections sort in the same manner as the main sort for non-TRICARE/CHAMPVA prescriptions (by Rx, drug, patient).

```

Insurance Rejects-Worklist      Aug 13, 2008@16:04:05          Page: 1 of 1
Division : ALBANY ISC
Selection : ALL UNRESOLVED REJECTS
# Rx#      PATIENT(ID) [^]      DRUG          REASON
1 101238    ECMEIBTEST,ONE(5566)  MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
Payer Message:
2 100739    ECMEPAT,TWO(8887)   BENZTROPINE 2MG TAB 79 :REFILL TOO SO
Payer Message:
3 101960    OPTRICARE,ONE(4789)  ACETAZOLAMIDE 250MG 79 :REFILL TOO SO
Payer Message:
                                CHAMPVA - Non-DUR/RTS
4 101358    OPCVACARE,ONE(7895)   BACLOFEN 10MG TABS 07 :M/I Cardholde
Payer Message:
5 100923    OPCVACARE,TWO(4933)  LORAZEPAM 1MG TAB 07 :M/I Cardholde
Payer Message:
                                TRICARE - Non-DUR/RTS
6 101980    OPTRICARE,ONE(4789)  DANTROLENE 25MG CAP 14 :M/I Eligibili
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: Quit//
```

- TRICARE and CHAMPVA DUR/RTS rejects display with all other DUR/RTS rejects. See the boxed text in the example below. Sequences 5 and 9 are rejects for the same prescription. Also note that in the following example GI - Group by Insurance action is toggled OFF.

```

Insurance Rejects-Worklist      Aug 13, 2008@16:10:22          Page: 1 of 1
Division : ALBANY ISC
Selection : ALL UNRESOLVED REJECTS
# Rx#      PATIENT(ID) [^]      DRUG          REASON
1 101238    ECMEIBTEST,ONE(5566)  MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
Payer Message:
2 100739    ECMEPAT,TWO(8887)   BENZTROPINE 2MG TAB 79 :REFILL TOO SO
Payer Message:
3 101358    OPCVACARE,ONE(7895)  BACLOFEN 10MG TABS 07 :REFILL TOO SO
```

Payer Message:			
4	101960	OPTRICARE, ONE (4789)	ACETAZOLAMIDE 250MG 79 :REFILL TOO SO
Payer Message:			
5	101981	OPTRICARE, ONE (4789)	ATENOLOL 100MG TAB 79 :REFILL TOO SO
Payer Message:			
6	101358	OPCVACARE, ONE (7895)	CHAMPVA - Non-DUR/RTS BACLOFEN 10MG TABS 07 :M/I Cardholde
Payer Message:			
7	100923	OPCVACARE, TWO (4933)	LORAZEPAM 1MG TAB 07 :M/I Cardholde
Payer Message:			
8	101980	OPTRICARE, ONE (4789)	TRICARE - Non-DUR/RTS DANTROLENE 25MG CAP 14 :M/I Eligibili
Payer Message:			
9	101981	OPTRICARE, ONE (4789)	ATENOLOL 100MG TAB 14 :M/I Eligibili
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: Quit//

When GI - Group by Insurance action is toggled ON, the headers "TRICARE" and "CHAMPVA" display, and these "TRICARE" and "CHAMPVA" sections sort alphabetically within RTS/DUR insurances. These TRICARE/CHAMPVA sections are separate from the Non-DUR/RTS section that displays at the end of the listing.

### Example with GI action toggled on:

Insurance Rejects-Worklist	Aug 13, 2008@16:12:46	Page: 1 of 1	
Division : ALBANY ISC			
Selection : ALL UNRESOLVED REJECTS GROUPED BY INSURANCE			
# Rx#	PATIENT (ID) [^]	DRUG	REASON
		BLUE CROSS BLUE SHIELD	
1 100739	ECMEPAT, TWO (8887)	BENZTROPIINE 2MG TAB	79 :REFILL TOO SO
Payer Message:			
		CHAMPVA	
2 101358	OPCVACARE, ONE (7895)	BACLOFEN 10MG TABS	07 :REFILL TOO SO
Payer Message:			
		TRICARE	
3 101960	OPTRICARE, ONE (4789)	ACETAZOLAMIDE 250MG	79 :REFILL TOO SO
Payer Message:			
		ZENITH ADMINISTRATORS	
4 101238	ECMEIBTEST, ONE (5566)	MEDROXYPROGESTRONE 1	79 :REFILL TOO SO
Payer Message:			
5 101981	OPTRICARE, ONE (4789)	ATENOLOL 100MG TAB	79 :REFILL TOO SO
Payer Message:			
		CHAMPVA - Non-DUR/RTS	
6 101358	OPCVACARE, ONE (7895)	BACLOFEN 10MG TABS	07 :M/I Cardholde
Payer Message:			
7 100923	OPCVACARE, TWO (4933)	LORAZEPAM 1MG TAB	07 :M/I Cardholde
Payer Message:			
		TRICARE - Non-DUR/RTS	
8 101980	OPTRICARE, ONE (4789)	DANTROLENE 25MG CAP	14 :M/I Eligibili
Payer Message:			
9 101981	OPTRICARE, ONE (4789)	ATENOLOL 100MG TAB	14 :M/I Eligibili

```

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: Quit//
```

The TRI - Show/Hide TRICARE and CVA - Show/Hide CHAMPVA toggle actions appear on the hidden menu on the Insurance Rejects screen. When the TRI action is toggled to Show, TRICARE Non-DUR/RTS rejects will automatically display at the end of the listing. Toggling the TRI action to Hide will remove them from the screen. The CVA action behaves likewise for CHAMPVA Non-DUR/RTS rejects.

### **Example with TRICARE and CHAMPVA rejects displayed:**

```

Insurance Rejects-Worklist     Aug 13, 2008@16:04:05      Page: 1 of 1
Division : ALBANY ISC
Selection : ALL UNRESOLVED REJECTS
# Rx#          PATIENT(ID) [^]          DRUG          REASON
1 101238      ECMEIBTEST,ONE(5566)    MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
Payer Message:
2 100739      ECMEPAT,TWO(8887)      BENZTROPINE 2MG TAB 79 :REFILL TOO SO
Payer Message:
3 101960      OPTRICARE,ONE(4789)    ACETAZOLAMIDE 250MG 79 :REFILL TOO SO
Payer Message:
CHAMPVA - Non-DUR/RTS
4 101358      OPCVACARE,ONE(7895)    BACLOFEN 10MG TABS 07 :M/I Cardholde
Payer Message:
TRICARE - Non-DUR/RTS
5 101980      OPTRICARE,ONE(4789)    DANTROLENE 25MG CAP 14 :M/I Eligibili
Payer Message:
```

```

Select the entry # to view or ?? for more actions
Sort by Drug          RE Sort by Reason          RX Sort by Prescription
PA Sort by Patient        RF Screen Refresh       GI Group by Insurance
Select: Quit// ??
The following actions are also available:
TRI Show/Hide TRICARE   DN Down a Line          PT Print List
CVA Show/Hide CHAMPVA   FS First Screen         SL Search List
VER View ePharmacy Rx   LS Last Screen         ADPL Auto Display(On/Off)
+ Next Screen           GO Go to Page          QU Quit
- Previous Screen        RD Re Display Screen
UP Up a Line             PS Print Screen

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

### **Example of TRICARE and CHAMPVA rejects removed from display:**

```

Insurance Rejects-Worklist     Aug 13, 2008@16:04:05      Page: 1 of 1
Division : ALBANY ISC
Selection : ALL UNRESOLVED REJECTS
# Rx#          PATIENT(ID) [^]          DRUG          REASON
1 101238      ECMEIBTEST,ONE(5566)    MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
Payer Message:
```

2 100739	ECMEPAT, TWO (8887)	BENZTROPINE 2MG TAB 79 :REFILL TOO SO
Payer Message:		
3 101960	OPTRICARE, ONE (4789)	ACETAZOLAMIDE 250MG 79 :REFILL TOO SO
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: Quit// ??

The following actions are also available:

TRI Show/Hide TRICARE	DN Down a Line	PT Print List
CVA Show/Hide CHAMPVA	FS First Screen	SL Search List
VER View ePharmacy Rx	LS Last Screen	ADPL Auto Display(On/Off)
+ Next Screen	GO Go to Page	QU Quit
- Previous Screen	RD Re Display Screen	
UP Up a Line	PS Print Screen	

Enter RETURN to continue or '^' to exit

## **Processing of TRICARE and CHAMPVA Rejections – TRICARE/CHAMPVA Eligible Bypass/Override Functions**

- A bypass function is provided to allow continued processing of prescriptions for TRICARE and CHAMPVA eligible inpatients who have Environmental Indicators at the time the prescription is issued.
- Whenever an TRICARE or CHAMPVA inpatient prescription is auto-reversed by the ECME NIGHTLY BACKGROUND JOB, the prescription will be recorded to the TRICARE CHAMPVA Bypass/Override Report as payment will not be received for this prescription

In the following example a TRICARE patient has Military Sexual Trauma The system displays the Non-Billable Reason “MILITARY SEXUAL TRAUMA” on the screen.

ISSUE DATE: JAN 27, 2015// (JAN 27, 2015)  
 FILL DATE: (1/27/2015 - 1/28/2016): JAN 27, 2015// (JAN 27, 2015)  
 Nature of Order: WRITTEN// W  
 WAS THE PATIENT COUNSELED: NO//  
 Do you want to enter a Progress Note? No// NO

Rx # 104897 01/27/15  
 OPTRICARE, TWO #360  
 TAKE TWO TABLETS BY MOUTH TWICE A DAY

BACLOFEN 10MG TABS  
 BLAESER, DAVE BLAESER, DAVE  
 # of Refills: 3

Was treatment related to Military Sexual Trauma? y YES

Is this correct? YES//

MILITARY SEXUAL TRAUMA

Another New Order for OPTRICARE, TWO? YES//

The following is a sample of the View Prescription ECME Log update. The Non-Billable Reason “MILITARY SEXUAL TRAUMA” is now displayed on the View Prescription ECME Log. This allows the system to record why a TRICARE prescription was allowed to be bypassed.

**Example: View Prescription ECME Log entry: TRICARE INPATIENT/DISCHARGE**

Rx View (Active)	Jun 25, 2015@16:13:31	Page:	5 of 5
OPTRICARE, TWO		Ht (cm):	(        )
PID: 666-55-8741		Wt (kg):	(        )
DOB: OCT 20, 1955 (59)			
+			
ECME Log:			
# Date/Time	Rx Ref	Initiator Of Activity	
=====	=====	=====	
1 1/27/15@15:28:54	ORIGINAL	BLAESER, DAVE	
Comments: TRICARE-Not ECME Billable: MILITARY SEXUAL TRAUMA			

In a similar situation where a prescription is issued to a CHAMPVA patient with an Environmental Indicator would be displayed on the reject processing screen and in the View Prescription ECME Log.

**TRICARE/CHAMPVA Eligible Outpatient Override Function**

- An override function is provided to allow continued processing of prescriptions for TRICARE or CHAMPVA eligible outpatients when a rejected response is received from the TRICARE or CHAMPVA payer/PBM.
- The Reject Action prompt will default to “Quit”. If the Q (Quit) action is selected, the rejected claim will go to the TRICARE or CHAMPVA section, as appropriate, of the Pharmacy Third Party Payer Rejects – Worklist. If the D (Discontinue) action is selected, the next prompt “Nature of Order” will default to “Service Reject”. The I (Ignore) action is available if the user holds the “PSO TRICARE/CHAMPVA” security key and if selected, continued processing will occur.
- The Reject Action prompt will be updated to a default of “Quit”.

**Example of Reject Notification Screen Non-DUR/RTS with the default action of D (Discontinue)**

IN PROGRESS-Transmitting	
IN PROGRESS-Parsing response	
E REJECTED	
21 - M/I Product/Service ID	
*** TRICARE - REJECT RECEIVED FROM THIRD PARTY PAYER ***	
-----	-----
Division : XXXX DIVISION	NPI# : XXXXXXXXXXXX
Patient : TRICARE,ONE(XXXX) Sex: M	DOB: OCT 1,19XX(XX)
Rx/Drug : XXX5341/0 - AMOXICILLIN 250MG CA	ECME# : 000002345678

Reject(s): M/I Product/Service ID (21) Received on NOV 01, 2010@09:30:03.

Insurance : EXPRESS SCRIPT Contact:  
Group Name : TRICARE Group Number: DODA

Select one of the following:

- I (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION  
D (D)iscontinue - DO NOT FILL PRESCRIPTION  
Q (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(I)gnore, (D)iscontinue, (Q)uit: Q// **Discontinue**

**Nature of Order: SERVICE REJECT//**

Requesting PROVIDER: VHAPROVIDER,ONE 111 PHYSICIAN

In the following example a prescription is rejected from the Third Party Payer with a reject code of (88) DUR REJECT. The pharmacist has the option to Discontinue, Ignore, Override or Quit.

 The Ignore action is only displayed for holders of the [PSO TRICARE/CHAMPVA](#) security key.

### Example of Reject Notification Screen DUR/RTS

88 - DUR Reject Error

\*\*\* TRICARE - REJECT RECEIVED FROM THIRD PARTY PAYER \*\*\*

Division : XXXXXX NPI#: 9999999999  
Patient : OPPATIENT,TRICARE (XXXX) Sex: F DOB: OCT 17,19XX(XX)  
Rx/Drug : 2718XXX/0 - BALNETAR 7.5 OZ ECME#: 00000431XXXX  
Reject(s): DUR REJECT (88). Received on NOV 01, 2010@07:08:44.

Insurance : EXPRESS SCRIPTS Contact:  
Group Name : TRICARE Group Number: DODA

Select one of the following:

- O (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES  
I (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION  
D (D)iscontinue - DO NOT FILL PRESCRIPTION  
Q (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)verride, (I)gnore, (D)iscontinue, (Q)uit: Q// i **(I)GNORE - FILL Rx WITHOUT CLAI**  
**M SUBMISSION**

You are bypassing claims processing. Do you wish to continue? NO// y YES

- For Non-Billable TRICARE or CHAMPVA rejects, a Non-Billable Notification Screen is provided to allow continued processing of prescriptions. The Reject Action prompt will default to “Discontinue”. If the action D (Discontinue) is selected, the prompt “Nature of Order” will default to “Service Reject”. The I (Ignore) action is available if the user holds the “PSO TRICARE/CHAMPVA” security key and if it is selected, continued processing will occur. If the action Q (Quit) is selected, the Non-Billable TRICARE or CHAMPVA eligible prescription will go to the **Pharmacy Third Party Payer Rejects – Worklist**

utilizing either Reject Code “eT” with reject description “TRICARE-DRUG NON BILLABLE” or Reject Code “eC” with reject description “CHAMPVA-DRUG NON BILLABLE.” (The reject codes “eT” and “eC” are for use internal to the VistA system only and have no relation to any NCPDP reject code listing.) The new entry will be displayed in the TRICARE or CHAMPVA section of the **Pharmacy Third Party Payer Rejects – Worklist**, as applicable.

In the following example a TRICARE Active Duty patient with Outpatient status submits an OTC, Non-Billable drug or supplies prescription for dispensing. The pharmacist will have the option of Discontinuing the Rx, Ignoring the Rx or Quitting. Discontinue is the option displayed below.

### **Example of Non-Billable Notification Screen**

Is this correct? YES//		
DRUG NOT BILLABLE		
*** TRICARE - NON-BILLABLE ***		
-----		
Division : XXXX DIVISION	NPI# : XXXXXXXXXXXX	
Patient : TRICARE, ONE (XXX-XX-XXXX)	Sex: M	DOB: JAN 1, 19XX (XX)
Rx/Drug : XXX5339/0 - DUCOSATE NA 100MG CA		
Date/Time: OCT 31, 2010@12:22:10		
Reason : Drug not billable		
-----		
This is a non-billable TRICARE prescription.		
Select one of the following:		
D (D)iscontinue - DO NOT FILL PRESCRIPTION		
Q (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)		
I (I)gnore - FILL RX WITHOUT CLAIM SUBMISSION		
(D)iscontinue, (Q)uit, (I)gnore: D// <u>Discontinue</u>		
Nature of Order: SERVICE REJECT//		
Requesting PROVIDER: VHAPROVIDER, ONE	111 PHYSICIAN	

In the following example a TRICARE Active Duty patient with Outpatient status submitted an OTC, Non-Billable drug or Supplies prescription for dispensing. The pharmacist selected the Quit option to send the prescription to the worklist for further review. The Non-Billable drug is displayed on the Pharmacy Third Party Payer Rejects – Worklist with a reason code “eT”.

### **Example of Pharmacy Third Party Payer Rejects – Worklist**

Insurance Rejects-Worklist	Oct 31, 2010@09:15:58	Page: 2 of 5
Division : ALBANY ISC		
Selection : ALL UNRESOLVED REJECTS		
# Rx# PATIENT(ID) [^]	DRUG	REASON
Payer Message:		
	TRICARE - Non-DUR/RTS	
13 102xxx	OPTRICARE, ONE (4789)	DIAZOXIDE 300MG INJ
Payer Message:		eT :TRICARE-DRUG NON

14	102xxx	OPTRICARE, ONE (4789)	MANNITOL 15% S.S. LV 22	:M/I Dispense
	Payer Message:			
15	1028xxx	OPTRICARE, ONE (4789)	METHOCARBAMOL 750MG	34 :M/I Submissio
	Payer Message:			
16	103xxx	OPTRICARE, ONE (4789)	BENZTROPINE 2MG TAB	07 :M/I Cardholde
	Payer Message:			
17	103xxx	OPTRICARE, ONE (4789)	DEXAMETHASONE 0.5MG	07 :M/I Cardholde
	Payer Message:			
18	102xxx	TRICARE, ONLYTRICAR (3939)	NEODECADRON OPHTMALI	07 :M/I Cardholde
	Payer Message:			
19	102xxx	TRICARE, ONLYTRICAR (3939)	GENTAMICIN OPHTHALMI	07 :M/I Cardholde
	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//				

- The Non-Billable TRICARE prescriptions will appear on the Reject Information screen shown in the example below once the TRICARE Non-Billable claim has been selected from the Pharmacy Third Party Payer Rejects – Worklist. The screen will display:
  - ECME# field – will be blank.
  - Insurance Information – will be blank.
  - Reject code section will have the reject code eT and status will state “NO CLAIM SUBMITTED”.
  - Available Actions will be DC – Discontinue Rx, VW -View Rx, MP – Medication Profile, FIL – Fill Rx and IGN Ignore Reject (FIL and IGN will require PSO TRICARE/CHAMPVA Security key).
  - Available Hidden Actions will be COM – Add Comments, ED – Edit Rx, VER – View ePharmacy Rx and all other standard List Manager hidden actions.
  - If the action DC is chosen, the system will discontinue the prescription and the prompt “Nature of Order” will default to “SERVICE REJECT”.
  - The following actions will not be selectable when processing a TRICARE or CHAMPVA eligible Non-Billable reject: Change Suspense Date (CSD)/Submit Override Codes (OVR)/Submit Clarif Code (CLA)/Submit Prior Auth (PA)/Suspense Date Calculation (SDC)/Submit Mult Actions (SMA). If selected for a TRICARE reject, an error message will appear: “[action] not allowed for TRICARE Non-Billable claim”. If selected for a CHAMPVA reject, an error message will appear: “[action] not allowed for CHAMPVA Non-Billable claim”. The only actions available are to Discontinue, Fill the prescription, View prescription, Resubmit Claim or Medication Profile.

### Example of Non-Billable Reject Information Screen

Reject Information (TRICARE) Oct 30, 2010@10:15:01	Page: 1 of 1
Division : ALBANY NPI# : 1234567890 NCPDP: 4150001P TAX ID: XX-XXXXXXX	
Patient : TRICARE, TWO (XXX-XX-XXXX) Sex: M	DOB: JUL
1,19XX (XX)	
Rx# : ###4928/0 ECME# :	Date of Service: Mar 16, 2009
CMOP Drug: DOCUSATE NA 100MG CA	NDC Code: 54629-0600-01

REJECT Information (TRICARE)

Reject Type : TRICARE DRUG NOT BILLABLE(eT) received on OCT 17, 2010@13:19:22  
Reject Status : NO CLAIM SUBMITTED  
Payer Addl Msg : **Not ECME Billable: DRUG NOT BILLABLE**  
Reason Code :  
DUR Text  
: \_\_\_\_\_

COMMENTS

- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

INSURANCE Information

Insurance :  
Contact :  
BIN / PCN :  
Group Number :  
Cardholder ID :

Enter ?? for more actions

VW View Rx	FIL Fill Rx	CSD Change Suspense Date
MP Medication Profile	DC Discontinue Rx	IGN Ignore Reject
RES Resubmit Claim	OVR Submit Override Codes	
Select Item(s): Next Screen //		

**Example of Non-Billable Reject Information Screen displaying the action OVR (Submit Override Codes) error message**

Reject Information (TRICARE) Nov 11, 2010@12:37:30 Page: 1 of  
2  
Division : ALBANY NPI#: 1234567890 NCPDP: 4150001P TAX ID: XX-XXXXXXXPatient  
: OPPATIENT,TRICARE(XXX-XX-XXXX) Sex: F DOB: OCT 7,19XX(XX)  
Rx# : 27XXXXX/0 ECME#: Date of Service: Sep 16, 2010  
Drug : ALUMINUM HYDROXIDE GEL 320MG/5ML SUSP NDC Code: 00054-3035-  
63

REJECT Information (TRICARE)

Reject Type : TRICARE DRUG NOT BILLABLE(eT) received on SEP 16, 2010@13:07:12  
Reject Status : NO CLAIM SUBMITTED  
Payer Addl Msg : **Not ECME Billable: DRUG NOT BILLABLE**  
Reason Code :  
DUR Text  
: \_\_\_\_\_

COMMENTS

- SEP 16, 2010@13:07:12 - Transferred by (XXXXXXXX,XXXX)

INSURANCE Information

Insurance :  
Contact :  
BIN / BIN :  
Group Number :  
+ OVR not allowed for TRICARE Non-Billable claim.

VW View Rx	FIL Fill Rx	CSD Change Suspense Date
MP Medication Profile	DC Discontinue Rx	IGN Ignore Reject
RES Resubmit Claim	OVR Submit Override Codes	
Select Item(s) : Next Screen//		

## Reject Information Screen – Electronic Signature and TRICARE/CHAMPVA Justification



This action requires the security key PSO TRICARE/CHAMPVA.

A user must hold the “PSO TRICARE/CHAMPVA” security key to perform the Fill Rx (FIL) and Ignore Reject (IGN) actions on the Third Party Payer Rejects – Worklist and the “Ignore” action on the TRICARE or CHAMPVA Reject Notification screen. If the user holds the security key “PSO TRICARE/CHAMPVA”, the prompt will display: “You are bypassing claims processing. Do you wish to continue?” If the user enters (No=Default), the user will return to the reject notification screen. If the user selects Yes to continue, the system will mimic the current Ignore action/functionality and allow processing of the prescription. The user will be prompted to enter their electronic signature code and asked to enter data into the TRICARE Justification or CHAMPVA Justification field, which is required. The user will be allowed to “^” out of the process. If the user opts to “^” out of the process, they will be taken back to the Reject Information screen prompt.

In the following example a TRICARE patient with Outpatient status submits a prescription for processing and a rejected response is received from the TRICARE payer/PBM. The pharmacist initially sends the prescription to the Third Party Payer Rejects – Worklist then later decides to finish processing the prescription and chooses the FIL action.

### Example of Reject Information Screen – Electronic Signature and TRICARE Justification

```

Reject Information (TRICARE) Sep 30, 2010@10:25:13          Page: 1 of
1
Division : ALBANY      NPI#: 1234567890      NCPDP: 4150001P  TAX ID: XX-XXXXXXX
Patient  : TRICARE, TWO (XXX-XX-XXXX)   Sex: M           DOB: JAN 1,19XX(XX)
Rx#       : XXX4928/0        ECME#: 000001231234     Date of Service: Feb 08, 2009
CMOP Drug: ACARBOSE 25MG TAB                      NDC Code: 00026-2863-52

REJECT Information (TRICARE)
Reject Type   : M/I Cardholder ID (07) received on JUL 10, 2010@12:22:10
Reject Status  : OPEN/UNRESOLVED - E REJECTED
Payer Addl Msg :
Reason Code   :
DUR Text
:
COMMENTS
-
- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

```

INSURANCE Information  
Insurance : EXPRESS SCRIPTS  
Contact :  
BIN / PCN : 741852 / XXXXXXXXXX  
Group Number : DODA  
Cardholder ID : XXXXXXXX

Enter ?? for more actions  
VW View Rx FIL Fill Rx CSD Change Suspense Date  
MP Medication Profile DC Discontinue Rx IGN Ignore Reject  
RES Resubmit Claim OVR Submit Override Codes  
Select Item(s): Quit/**/FIL**

You are bypassing claims processing. Do you wish to continue (Y/N)? **No//Yes**

Enter your Current Signature Code: **SIGNATURE VERIFIED**  
TRICARE Justification: **Patient required medication**

- If the user does not hold the security key “PSO TRICARE/CHAMPVA”, an on screen alert to the user will display “Action Requires <PSO TRICARE/CHAMPVA> security key” as displayed in the below example. The user will need to press any key to return to the Reject Information screen.

### **Example of Reject Information Screen – Security Key – ALERT**

Reject Information (TRICARE) Sep 30, 2010@10:25:13 Page: 1 of 1  
Division : ALBANY NPI#: 1234567890 NCPDP: 4150001P TAX ID: XX-XXXXXXX  
Patient : TRICARE, TWO(XXXX) Sex: M DOB: JAN 1,19XX(XX)  
Rx# : XXX4928/0 ECME#: 000001231234 Date of Service: Feb 08, 2009  
CMOP Drug: ACARBOSE 25MG TAB NDC Code: 00026-2863-52

REJECT Information (TRICARE)  
Reject Type : M/I Cardholder ID (07) received on JUL 10, 2010@12:22:10  
Reject Status : OPEN/UNRESOLVED - E REJECTED  
Payer Addl Msg :  
Reason Code :  
DUR Text :  
: \_\_\_\_\_

COMMENTS  
- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

INSURANCE Information  
Insurance : EXPRESS SCRIPTS  
Contact :  
BIN / PCN : 741852 / XXXXXXXXXX  
Group Number : DODA  
Cardholder ID : XXXXXXXX  
+ **Action Requires <PSO TRICARE/CHAMPVA> Security Key**  
VW View Rx FIL Fill Rx CSD Change Suspense Date  
MP Medication Profile DC Discontinue Rx IGN Ignore Reject  
RES Resubmit Claim OVR Submit Override Codes  
Select Item(s): Next Screen//

- The person that resolves TRICARE and CHAMPVA non-DUR/RTS rejects is dependent upon the type of reject. Dispense As Written (DAW) reject code 22 can be resolved by

the pharmacy staff by editing the prescription and entering the appropriate DAW code which results in a claims resubmission. Other insurance-related rejects (missing eligibility or cardholder ID number) are resolved by the Outpatient Pharmacy Electronic Claims Coordinator (OPECC). Once the rejection has been resolved, the Reject Information screen under the pharmacy reject worklist shows the status of the prescription as E PAYABLE. At this point the user may select the FIL action that will prompt for label print.

```
Reject Information (TRICARE) Sep 30, 2010@10:25:13 Page: 1 of 1
Division : ALBANY NPI#: 1234567890 NCPDP: 4150001P TAX ID: XX-XXXXXXX
Patient : TRICARE, TWO (XXXX) Sex: M DOB: JAN 1,19XX(XX)
Rx#      : XXX4928/0 ECME#: 000001231234 Date of Service: Feb 08, 2009
CMOP Drug: ACARBOSE 25MG TAB NDC Code: 00026-2863-52

REJECT Information (TRICARE)
Reject Type   : M/I Cardholder ID (07) received on JUL 10, 2010@12:22:10
Reject Status : OPEN/UNRESOLVED - E REJECTED
Payer Addl Msg :
Reason Code   :
DUR Text
: _____
COMMENTS
- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

INSURANCE Information
Insurance      : EXPRESS SCRIPTS
Contact        :
BIN / PCN     : 741852 / XXXXXXXXX
Group Number   : DODA
Cardholder ID  : XXXXXXXX

Enter ?? for more actions
VW View Rx          FIL Fill Rx          OVR Submit Override Codes
MP Medication Profile DC Discontinue Rx CSD Change Suspense Date
Select Item(s): Quit// FIL Fill Rx
                  [Closing all rejections for prescription 102059:
                   07 - ...OK]

Print Label? ? YES//
```

Select LABEL PRINTER: HOME// UCX/TELNET Right Margin: 80//

- For rejects that remain in suspense, the user will be allowed to process the rejection as indicated above; however no labels will be printed until the prescription is pulled early or printed from suspense. Upon resolving the reject, the user will be notified of this information. CMOP prescriptions will function in the same manner.

## Other Rejects

### [PSO REJECTS WORKLIST]

Rejects under the OTHER REJECTS section of the screen contain non-clinical rejects and are resolved in the same manner as DUR/RTS rejects. The comments section denotes whether the reject was transferred automatically as is the case in the example below or "Transferred by

OPECC" will denote those rejects where the OPECC manually transferred them to pharmacy for resolution.

The following example shows the user selecting to resolve sequence 16 from the Third Party Payer Rejects - Worklist option shown above. The user selects ED to edit the DAW code for the prescription, then resubmits the claim afterward. Since the claim was payable, both the RTS reject in sequence 13 and the DAW reject in sequence 16 were marked resolved. Also both are removed from the worklist after submission. The user then proceeds to Patient Prescription Processing option to view the ECME logs which show that claim resubmission was payable and that both rejects have been resolved.

```
Reject Information(Veteran)Jul 30, 2008@14:54:51      Page: 1 of 2
Division : ALBANY    NPI#: 1234567890    NCPDP: 4150001P  TAX ID: XX-XXXXXXX
Patient  : OPPATIENT,FOUR(666-55-9987)  Sex: M           DOB: OCT 20,1965(42)
Rx#      : 2055203/1      ECME#: 000001615102 Date of Service: Jul 15, 2008
CMOP Drug: DANAZOL 50MG CAP                  NDC Code: 00024-0304-06

REJECT Information (Veteran)
Reject Type   : 22 - M/I Dispense As Written- received on JUL 30, 2008@14:32:16
Reject Status  : OPEN/UNRESOLVED
Payer Addl Msg :
Reason Code   :
DUR Text     :

OTHER REJECTS
79 - Refill Too Soon

COMMENTS
- JUL 30, 2008@14:32:16 - Automatically transferred due to override for reject
  code. (OPHARM,ONE)

+       Enter ?? for more actions
VW  View Rx          IGN Ignore Reject          OVR Submit Override Codes
MP  Medication Profile  RES Resubmit Claim      CSD Change Suspense Date
Select: Next Screen// ed   ED

Jul 30, 2008@14:54:53

Rx #: 2055203$e
(1) *Orderable Item: DANAZOL CAP,ORAL
(2)      CMOP Drug: DANAZOL 50MG CAP
          NDC: 00055-0633-02
(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)
```

Select Action: Next Screen// NEXT SCREEN

Last Release Date: (8) Lot #:  
Expires: 07/12/09 MFG:  
(9) Days Supply: 3 (10) QTY (CAP): 6  
(11) # of Refills: 11 Remaining: 10  
(12) Provider: OPPROVIDER,ONE  
(13) Routing: MAIL (14) Copies: 1  
(15) Clinic: Not on File  
(16) Division: CHEYENNE VAM&ROC (442)  
(17) Pharmacist:  
(18) Remarks: New Order Created by copying Rx # 2055182.  
(19) Counseling: NO  
(20) Refill Data  
(21) DAW Code: 0 - NO PRODUCT SELECTION INDICATED  
Finished By: OPHARM,ONE  
+ Enter ?? for more actions  
DC (Discontinue) PR (Partial) RL (Release)  
ED Edit RF (Refill) RN (Renew)

Select Action: Next Screen// 21

DAW CODE: 0// ?

OP Medications (SUSPENDED) Jul 30, 2008@14:54:55 Page: 2 of 3

OPPATIENT, FOUR

PID: 666-55-9987 Ht (cm): \_\_\_\_\_ (\_\_\_\_\_)  
DOB: OCT 20, 1965 (42) Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)

+

Answer with BPS NCPDP DAW CODE

Choose from:

- 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

DAW CODE: 0// 1 - SUBSTITUTION NOT ALLOWED BY PRESCRIBER

Are You Sure You Want to Update Rx 2055203? Yes// YES

OP Medications (SUSPENDED) Jul 30, 2008@14:55:21 Page: 2 of 3

OPPATIENT, FOUR

PID: 666-55-9987 Ht (cm): \_\_\_\_\_ (\_\_\_\_\_)  
DOB: OCT 20, 1965 (42) Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)

+

Last Release Date: (8) Lot #:  
Expires: 07/12/09 MFG:  
(9) Days Supply: 3 (10) QTY (CAP): 6  
(11) # of Refills: 11 Remaining: 10  
(12) Provider: OPPROVIDER,ONE  
(13) Routing: MAIL (14) Copies: 1  
(15) Clinic: Not on File  
(16) Division: CHEYENNE VAM&ROC (442)  
(17) Pharmacist:

```

(18)      Remarks: New Order Created by copying Rx # 2055182.
(19)      Counseling: NO
(20)      Refill Data
(21)          DAW Code: 1 - SUBSTITUTION NOT ALLOWED BY PRESCRIBER
          Finished By: OPHARM,ONE
+          Enter ?? for more actions
DC      (Discontinue)           PR      (Partial)           RL      (Release)
ED      Edit                   RF      (Refill)            RN      (Renew)
Select Action: Next Screen// ^

```

Reject Information (Veteran) Jul 30, 2008@14:55:28      Page: 1 of 2  
Division : CHEYENNE VAM&ROC      NPI#: 1164471991  
Patient : OPPATIENT, FOUR (666-55-9987) Sex: M      DOB: OCT 20, 1965 (42)  
Rx# : 2055203/1      ECME#: 000001615102 Date of Service: Jul 15, 2008  
CMOP Drug: DOCUSATE NA 100MG CA      NDC Code: 54629-0600-01

REJECT Information (Veteran)  
Reject Type : 22 - M/I Dispense As Written- received on JUL 30, 2008@14:32:16  
Reject Status : OPEN/UNRESOLVED  
Payer Addl Msg :  
Reason Code :  
DUR Text :

OTHER REJECTS  
79 - Refill Too Soon

COMMENTS  
- JUL 30, 2008@14:32:16 - Automatically transferred due to override for reject code. (OPHARM,ONE)

+ Enter ?? for more actions  
VW View Rx      IGN Ignore Reject      OVR Submit Override Codes  
MP Medication Profile      RES Resubmit Claim      CSD Change Suspense Date  
Select: Next Screen// RES Resubmit Claim

When you confirm, a new claim will be submitted for the prescription and this REJECT will be marked resolved.

Confirm? YES//  
TRICARE 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> (CREAT: Not Found)	BSA (m2): _____		
# RX #	DRUG	ISSUE QTY ST DATE	LAST 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	BENAZEPRILO 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 OPHTHALMIC 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 Renew	
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): _____ (_____)		
SEX: MALE			
CrCL: <Not Found> (CREAT: Not Found)	BSA (m2): _____		
Rx #: 2055203\$e			
(1) *Orderable Item: DANAZOL CAP, ORAL			
(2) CMOP Drug: DANAZOL 50MG CAP			
	NDC: 00055-0633-02		
(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-p OPP INSURANCE
2 7/30/08@14:32:17 REFILL 1      OPPHARM, TWO
Comments: ECME:PULLED FROM SUSPENSE(NDC:00024-0303-06)-E REJECTED-p OPP INSURANCE
3 7/30/08@14:55:56 REFILL 1      OPPHARM, TWO
Comments: Submitted to ECME:REJECT WORKLIST-E PAYABLE

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//
```

## **Reject Resolution Required Rejects**

### **[PSO REJECTS WORKLIST]**

Rejects under the REJECT RESOLUTION REQUIRED section of the screen are resolved in the same manner as DUR/RTS rejects. The comments section will denote that the reject was transferred automatically to the Third Party Payer Rejects – Worklist for resolution.

The following is an example of the Reject Information Screen for Reject Resolution Required rejects.

```

Reject Information(Veteran) Jun 05, 2013@07:46:18      Page: 1 of 1
Division : ALBANY      NPI#: 1234567890      NCPDP: 4150001P      TAX ID: XX-XXXXXXX
Patient  : OPORVET,J-CNF(061P)  Sex: M          DOB: NOV 20,1961(51)
Rx#      : 2720321/0      ECME#: 000004317186      Date of Service: May 28, 2013
Drug     : AMPICILLIN 1GM INJ                      NDC Code: 00015-7404-99
```

```

REJECT Information BACK-BILL
Reject Type    : 76 - Plan Limitations Exceeded - received on MAY 28, 2013@08:59
Reject Status  : OPEN/UNRESOLVED - E PAYABLE
Payer Addl Msg : EMD 1000: CLAIM PAID RX:000004317186FILL:2013-05-28 BIN:610144
                  PCN:TEST
Reason Code    :
+DUR Text     :

INSURANCE Information
Insurance      : EPOR7                               Coord. Of Benefits: PRIMARY
Contact        : 333-444-5555
BIN / PCN      : 610144 / XXXXXXXX
Group Number   : 777
Cardholder ID  : 152364859
                  Enter ?? for more actions
Cardholder ID  : 152364859
                  Enter ?? for more actions
VW  View Rx          IGN Ignore Reject           OVR Submit Override Codes
MP  Medication Profile   RES Resubmit Claim       CSD Change Suspense Date
(I)gnore, (Q)uit: Q//                               

COMMENTS
- JUN 11, 2013@11:181 - Automatically transferred due to Reject Resolution Required
reject Code. (POSTMASTER)

```

## **View ePharmacy Rx**

### **[BPS RPT VIEW ECME RX]**

The *View ePharmacy Rx* option allows you to view information for one prescription, combining information from Outpatient Pharmacy, Integrated Billing and ECME. More information on this report is available in the *Electronic Claims Management Engine (ECME) User Manual*.

## **Productivity/Revenue Report**

### **[PSO PRODUCTIVITY REVENUE RPT]**

This option gives the user the ability to run a report for Pharmacy productivity, or for Revenue associated with Reject Resolution Required.

The user can select one of the following parameters to filter the data on the report:

- **DIVISION:** Allows the user to select one, some, or all divisions.
- **RRR Revenue or Productivity:** Allows the user to run the RRR Revenue report, or the Productivity report.
- **Closed/Resolved:** Allows the user to choose a claim status of Closed/Resolved E PAYABLE, Closed/Resolved E REJECTED, or both.
- **Begin Date Resolved:** Allows the user to pick the beginning date to begin the search. The beginning resolved date defaults to T-90.
- **End Date Resolved:** Allows the user to pick the ending date to end the search. The ending resolved date defaults to T.
- 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.
  - RX:** Allows the user to select a single, multiple, or all prescriptions.
  - INSURANCE:** Allows the user to select a single, multiple, or all insurances.
  - REJECT CODE:** Allows the user to select a single, multiple, or all reject codes.
- **Sort:** Allows the user to choose one option for the report sort. Options include:
  - Division
  - Date Resolved
  - Resolved By
  - Drug Name
  - Reject Code
- **Patient Name:** Allows the user to include, or exclude the patient name on the report.

The report can also be exported to Excel.

For the Productivity option, prescriptions will be reported if the fill has a rejection that is displayed, or has been displayed on the Pharmacy worklist.

#### Example: Productivity Report

Pharmacy Productivity Report						Print Date: Oct 20,
2015@15:52 Page: 1						
Selected Divisions: ALL						
Date Reject Resolved: 07/22/15 - 10/20/15						
Select by PATIENT: ALL						
Sort by DIVISION						
<hr/>						
<hr/>						
RX#/FILL	REL DATE	DT REJECTED	DT RESOLVED	RESOLVED BY	ACTION TAKEN	
AMT PAID	INSURANCE NAME	DRUG	REJECTION		DIVISION	
PATIENT NAME						
<hr/>						
<hr/>						
111822/0	09/29/11		08/18/15	DAWSON, MARK R	CLAIM RE-SUBMITTED	
0.00 EPHARM INSURA		FLUORESCEIN 10% 5ML INJ	79 - Refill Too Soon		ALBANY ISC	
ECMEPATIENT, DAVE						
111938/0	09/03/15		09/03/15	STILES, CINDY F	CLAIM RE-SUBMITTED	
0.00 EXPRESS SCRIP		DIGITOXIN 0.1MG S.T.	88 - DUR Reject Error		ALBANY ISC	
CS, TRI						

For the Revenue Report, prescriptions will be reported if a Reject Resolution Required reject has been resolved to a payable claim. The original fill and all subsequent refills associated with reject will display.

#### Example: Revenue Report

RRR Revenue Report				Print Date: Oct 20,
2015@15:55 Page: 1				
Selected Divisions: ALL				
Date Reject Resolved: 07/22/15 - 10/20/15				Status: CLOSED/RESOLVED - E
PAYABLE, E REJECTED				
Select by PATIENT: ALL				
Sort by DIVISION				

RX#/FILL	REL DATE	DT REJECTED	DT RESOLVED	RESOLVED BY	ACTION TAKEN
AMT PAID	INSURANCE NAME	DRUG	REJECTION	DIVISION	PATIENT NAME
111822/0 0.00	09/29/11 EPHARM INSURA	08/18/15 FLUORESCIN 10% 5ML INJ	DAWSON, MARK R 79 - Refill Too Soon	CLAIM RE-SUBMITTED ALBANY ISC	ECMEPATIENT, DAVE
111938/0 0.00	09/03/15 EXPRESS SCRIP	09/03/15 DIGITOXIN 0.1MG S.T.	STILES, CINDY F 88 - DUR Reject Error	CLAIM RE-SUBMITTED ALBANY ISC	CS, TRI

## MailMan Message for Open/Unresolved Rejects

When prescriptions remain on the Third Party Payer Reject – Worklist over the specified number of days, the system will send a Mailman Message. This message will be sent to the PSO REJECTS BACKGROUND MESSAGE mail group. Those users needing access to this information will need to be added manually to this mail group.

The specified number of days referred to above is the number of days an uncommented reject can remain on the reject worklist without being included in the nightly reject worklist alert mail message. The number of days are defined in the EPHARMACY SITE PARAMETERS file (#52.86) in the REJECT WORKLIST DAYS field.

The following are the criteria for generating a Mailman message regarding a rejected claim:

- Prescription is active
- Prescription is unreleased
- Claim is on the Reject Worklist for specified number of days or greater
- Claim has no comments added within date range

Adding a comment to the reject will automatically reset the clock for the alert. The specified number of days will be site configurable and stored in EPHARMACY SITE PARAMETERS file (#52.86). The initial patch default setting will be five (5) days; however, the site will be able to reset the parameter between one (1) and thirty (30) to generate the alert message. MailMan message will be sent as a Priority message, and there will be a separate MailMan message for each division. The following is an example of the message:

Subj: ePharmacy - OPEN/UNRESOLVED REJECTS LIST for GENERIC SITE [#2417022]

11/17/14@13:18 70 lines  
From: OUTPATIENT PHARMACY PACKAGE In 'IN' basket. Page 1

No action has been taken within the past 3 days to resolve the rejects listed in this message. They will continue to show on the Third Party Payer Rejects - Worklist until acted upon. Please use the Third Party Payer Rejects - Worklist option to resolve the rejection or add a comment to the rejection.

Prescriptions will not be filled for Unresolved DUR, RTS, RRR, TRICARE and CHAMPVA rejects.

#	RX/FILL	PATIENT (ID)	DRUG	FILL DATE	REJECT DATE
1	104523/1	OPPATIENT,ON(1111)	NITROGLYCERIN 0.3MG S.	2/28/13	11/11/14
		Rx Status: ACTIVE			
		Reason: 79 :Refill Too Soon			
2	104861/0	OPPATIENT,ON(1111)	AMYL NITRITE 0.3ML INH	11/12/14	11/12/14
		Rx Status: ACTIVE			
		Reason: 79 :Refill Too Soon			
			CHAMPVA - Non-DUR/RTS		
3	104520/1	OPPATIENT,ON(1111)	AMOXICILLIN 250MG CAP	2/24/13	6/13/13
		Rx Status: ACTIVE			
		Reason: 07 :M/I Cardholder ID			
		COMMENTS: -JUN 13, 2013@08:53:37 - Automatically transferred due to override for reject code. (POSTMASTER)			
4	104522/1	OPPATIENT,ON(1111)	GUANETHIDINE 10MG S.T.	2/28/13	6/13/13
		Rx Status: ACTIVE			
		Reason: 07 :M/I Cardholder ID			
		COMMENTS: -JUN 13, 2013@08:53:43 - Automatically transferred due to override for reject code. (POSTMASTER)			
			TRICARE - Non-DUR/RTS		
5	104836/0	OPPATIENT,TH(3333)	CASTOR OIL 60ML	7/10/14	7/10/14
		Rx Status: ACTIVE			
		Reason: eT :			
			OTHER REJECTS		
6	104463/1	OPPATIENT,TH(3333)	ACTIVATED CHARCOAL USP		2/20/13
		Rx Status: ACTIVE			
		Reason: eC :			

Enter RETURN to continue or '^' to exit:

## Alerts for Discontinued CMOP Prescription

### Discontinued by a Background Process

When a CMOP prescription with a status of Transmitted or Retransmitted is discontinued by a background process to the Outpatient Pharmacy options, e.g. CPRS or Registration V. 5.3 packages, an email will be sent to the PSX EXTERNAL DISPENSE ALERTS mail group. If no recipients are defined in the new mail group, the message will be sent to PSXCMOPMGR key holders stating that a prescription was just discontinued and that the CMOP status for the discontinued prescription was either Transmitted or Retransmitted.

Subj: TROY - DC Alert on CMOP Rx 123456789 TRANSMITTED [#90494]  
03/03/09@17:37 8 lines  
From: POSTMASTER In 'IN' basket. Page 1 \*New\*

Rx #: 123456789 Fill: 0  
Patient: OUTPATIENT,DCONE (6660)  
Drug: TAMOXIFEN CITRATE 10MG TABS  
Rx Status: DISCONTINUED BY PROVIDER  
Processing Status: TRANSMITTED to CMOP on 02/27/09  
Provider: OPPROVIDER, PROV

\*\*\*\*\* Please contact CMOP or take appropriate action \*\*\*\*\*

Enter message action (in IN basket): Ignore//

## **Discontinued by a Foreground Pharmacy Process**

When a CMOP prescription with a status of Transmitted or Retransmitted is discontinued by a foreground Pharmacy process due to a duplicate drug scenario that would trigger the duplicate to be discontinued, then the Processing Status field of the duplicate drug message is highlighted to alert the user.

Duplicate Drug in Local Rx:

Rx #: 123456789  
Drug: A AND Z OINTMENT  
SIG: APPLY 1 TUBE TO AFFECTED AREA TWICE A DAY  
QTY: 1 Refills remaining: 5  
Provider: OPPROVIDER, PROV Issued: 11/27/09  
Status: Active Last filled on: 11/27/09  
Processing Status: **Transmitted to CMOP on 11/27/09**  
Days Supply: 5

In the above example, the line “Processing Status: Transmitted to CMOP on 11/27/09” is bold.

## **List One Patient's Archived Rx's**

### **[PSO ARCHIVE LIST RX'S]**

This option shows the basic patient demographics and the prescription numbers and dates of archiving for archived prescriptions for this patient.

## **Manual Print of Multi-Rx Forms**

### **[PSO LM MULTI-RX PRINT]**

This option allows the user to reprint the Multi-Rx Refill Request form on laser label stock without having to reprint the entire prescription labels. The user will receive a system confirmation that this form has been queued to print.

### **Example: Manually Printing Multi-Rx Forms**

```
Select Rx (Prescriptions) Option: MANual Print of Multi-Rx Forms  
Enter patient to reprint Multi-Rx refill form for: OPPATIENT2,ONE  
Select LABEL DEVICE: LEX2 LEX2$PRT Bay Pines  
  
Multi-Rx form queued to print
```

## **OneVA Pharmacy Prescription Report [PSO REMOTE RX REPORT]**



**Note:** For additional information regarding OneVA Pharmacy processing go to the VA Software Document Library (VDL), please see Appendix A, OneVA Pharmacy User Manual.



**Note:** To account for copay billing, insurance billing, and subsequent refill capabilities all sites are asked to print to an OneVA Pharmacy Reports and manually release prescriptions filled by other stations. Recommended frequency of printing report is no less than weekly.

The OneVA Pharmacy OneVA Pharmacy patch PSO\*7\*454 – December 2016 introduces the new menu option for retrieving the OneVA Pharmacy Prescription Reports. The ‘ONEVA PHARMACY PRESCRIPTION REPORT [PSO REMOTE RX REPORT]’ menu is located on the ‘RX (PRESCRIPTIONS) [PSO RX]’ menu.

There are three new reports available on the menu with self-describing titles. They are:

1. Prescriptions dispensed for other Host Pharmacies
2. Our prescriptions, filled by other facilities as the Dispensing Pharmacy
3. All OneVA Pharmacy Prescription Activity

### **Example: OneVA Pharmacy Reports**

```
FEE      Patient Prescription Processing  
          Fee Patient Inquiry  
          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  
OneVA Pharmacy Prescription Report  
Reprint an Outpatient Rx Label  
Signature Log Reprint  
View Prescriptions

Select Rx (Prescriptions) <TEST ACCOUNT> Option: OneVA Pharmacy Prescription Ret Report

1. Prescriptions dispensed for other Host Pharmacies
2. Our prescriptions, filled by other facilities as the Dispensing Pharmacy
3. All OneVA Pharmacy Prescription Activity

Select item: (1-3):

Selecting 1 will display the list of prescriptions that our local facility has dispensed on behalf of other host Pharmacy locations as part of the OneVA Pharmacy program. Selecting 2 will display the list of prescriptions other VA Pharmacy locations have filled as a dispensing site for a prescription that originated from our location. Selecting 3 will list all prescriptions that either we have filled for other Pharmacy locations as the dispensing site or other Pharmacy locations have filled on our behalf.

Select item: (1-3): 1 Prescriptions dispensed for other Host Pharmacies

Select one of the following:

D DATE RANGE  
P PATIENT  
S SITE

Answer with 1, 2, or 3.

**Search by: DATE RANGE**

Enter start date: Jul 01, 2016// (JUL 01, 2016)

Examples of Valid Dates:

JAN 20 1957 or 20 JAN 57 or 1/20/57 or 012057  
T (for TODAY), T+1 (for TOMORROW), T+2, T+7, etc.  
T-1 (for YESTERDAY), T-3W (for 3 WEEKS AGO), etc.  
If the year is omitted, the computer assumes a date in the PAST.  
You may omit the precise day, as: JAN, 1957

Enter end date: Jul 31, 2016// (JUL 31, 2016)

**Search by: PATIENT**

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

Select PATIENT NAME: PSOPATIENT, THREE

Select PATIENT NAME: PSOPATIENT, THREE PSOPATIENT, THREE  
666018227 NO NSC VETERAN

8-22-57

No Patient Warnings on file for PSOPATIENT, THREE.

Press RETURN to continue...

**Search by: SITE**

Select INSTITUTION NAME: ?

Answer with INSTITUTION NAME, or STATUS, or STATION NUMBER, or  
OFFICIAL VA NAME, or CURRENT LOCATION, or CODING SYSTEM/ID PAIR, or  
NPI, or STATUS, or NAME (CHANGED FROM), or CODING SYSTEM  
Do you want the entire INSTITUTION List?

Search by: SITE

Select INSTITUTION NAME: DAYTON

1	DAYTON	OH	VAMC	552
2	DAYTON (NHCU)	OH	NHC	5529AA
3	DAYTON NATIONAL CEMETARY	OH	NC	810
4	DAYTONA BEACH OPC	FL	OPC	573BZ
5	DAYTONA VETERANS NURSING HOME	FL	STNB	573DT

Press <RETURN> to see more, '^' to exit this list, OR  
CHOOSE 1-5: 1 DAYTON OH VAMC 552

**OneVA PHARMACY RX REPORT**

Jul 31, 2016@13:14:45

Page: 1 of 4

Our prescriptions, filled by other facilities as the Dispensing Pharmacy

#	DATE	PATIENT	DRUG NAME	TYPE	QTY	DSUP
1	JUL 07, 2016	PSOPATIENT,ONE	LISINOPRIL 2.5MG TAB	OP	3	3
2	JUL 07, 2016	PSOPATIENT,TWO	RALOXIFENE HCL 60MG	OP	5	5
3	JUL 07, 2016	PSOPATIENT,TWO	ATORVASTATIN CALCIUM	OP	5	5
4	JUL 07, 2016	PSOPATIENT,ONE	LISINOPRIL 2.5MG TAB	OP	7	27
5	JUL 08, 2016	PSOPATIENT,ONE	LISINOPRIL 2.5MG TAB	OP	1	1
6	JUL 08, 2016	PSOPATIENT,THREE	LISINOPRIL 5MG TAB	OP	7	27
7	JUL 08, 2016	PSOPATIENT,THREE	LISINOPRIL 5MG TAB	OP	8	28
8	JUL 08, 2016	PSOPATIENT,TWO	RALOXIFENE HCL 60MG	OP	5	5
9	JUL 08, 2016	PSOPATIENT,TWO	RAMIPRIL 10MG CAP	OR	30	30
10	JUL 08, 2016	PSOPATIENT,FOUR	FLUTICASONE PROP 50M	OR	2	30
11	JUL 09, 2016	PSOPATIENT,TWO	RALOXIFENE HCL 60MG	OP	5	5
12	JUL 10, 2016	PSOPATIENT,FIVE	IBUPROFEN 800MG TAB	OR	90	30
13	JUL 10, 2016	PSOPATIENT,THREE	EPSOM SALT	OP	2	3
14	JUL 10, 2016	PSOPATIENT,THREE	EPSOM SALT	OP	5	3
15	JUL 10, 2016	PSOPATIENT,THREE	EPSOM SALT	OP	2	3
16	JUL 10, 2016	PSOPATIENT,THREE	EPSOM SALT	OP	2	3

+ Enter ?? for more actions

SI Select Item

Select Action:Next Screen//

**OneVA PHARMACY RX REPORT**

Jul 31, 2016@13:15:31

Page: 2 of 9

All OneVA Pharmacy Prescription Activity

+#	DATE	PATIENT	DRUG NAME	TYPE	QTY	DSUP
17	JUL 08, 2016	PSOPATIENT,SIX	RAMIPRIL 10MG CAP	RF	30	30
18	JUL 08, 2016	PSOPATIENT,SIX	IBUPROFEN 800MG TAB	PR	20	10
19	JUL 08, 2016	PSOPATIENT,SIX	TRAZODONE HCL 50MG T	PR	10	10
20	JUL 08, 2016	PSOPATIENT,SIX	VERAPAMIL HCL 120MG	PR	9	9
21	JUL 08, 2016	PSOPATIENT,TWO	RALOXIFENE HCL 60MG	OP	5	5
22	JUL 08, 2016	PSOPATIENT,TWO	CETIRIZINE HCL 10MG	PR	5	5
23	JUL 08, 2016	PSOPATIENT,TWO	RAMIPRIL 10MG CAP	OR	30	30
24	JUL 08, 2016	PSOPATIENT,TWO	RALOXIFENE HCL 60MG	RF	30	30
25	JUL 08, 2016	PSOPATIENT,FOUR	FLUTICASONE PROP 50M	OR	2	30
26	JUL 09, 2016	PSOPATIENT,TWO	LISINOPRIL 10MG TAB	PR	5	5
27	JUL 09, 2016	PSOPATIENT,TWO	RALOXIFENE HCL 60MG	OP	5	5
28	JUL 09, 2016	PSOPATIENT,SEVEN	VITAMIN B COMPLEX CA	PR	5	5
29	JUL 10, 2016	PSOPATIENT,FIVE	ASCORBIC ACID 500MG	PR	5	5

30	JUL 10, 2016	PSOPATIENT, TWO	CETIRIZINE HCL 10MG	RF	30	30
31	JUL 10, 2016	PSOPATIENT, FIVE	IBUPROFEN 800MG TAB	OR	90	30
32	JUL 10, 2016	PSOPATIENT, THREE	EPSOM SALT	OP	2	3
+ Enter ?? for more actions						
SI	Select Item					
Select Action:Next Screen//						

**OneVA PHARMACY RX REPORT** Jul 31, 2016@11:52:26 Page: 1 of 6  
 Prescriptions dispensed for other Host Pharmacies

#	DATE	PATIENT	DRUG NAME	TYPE	QTY	DSUP
1	JUL 07, 2016	PSOPATIENT, ONE	CETIRIZINE HCL 10MG	PR	5	5
2	JUL 07, 2016	PSOPATIENT, TWO	CLOPIDOGREL BISULFAT	PR	5	5
3	JUL 07, 2016	PSOPATIENT, ONE	CETIRIZINE HCL 10MG	PR	5	5
4	JUL 07, 2016	PSOPATIENT, ONE	LISINOPRIL 10MG TAB	PR	5	5
5	JUL 07, 2016	PSOPATIENT, THREE	AMPHOTERICIN B 50MG/	PR	7	27
6	JUL 07, 2016	PSOPATIENT, THREE	AMPHOTERICIN B 50MG/	RF	3	27
7	JUL 08, 2016	PSOPATIENT, THREE	AMPHOTERICIN B 50MG/	PR	1	1
8	JUL 08, 2016	PSOPATIENT, THREE	CETIRIZINE HCL 10MG	PR	1	1
9	JUL 08, 2016	PSOPATIENT, FOUR	IBUPROFEN 800MG TAB	PR	20	10
10	JUL 08, 2016	PSOPATIENT, FIVE	RAMIPRIL 10MG CAP	RF	30	30
11	JUL 08, 2016	PSOPATIENT, FIVE	IBUPROFEN 800MG TAB	PR	20	10
12	JUL 08, 2016	PSOPATIENT, FIVE	TRAZODONE HCL 50MG T	PR	10	10
13	JUL 08, 2016	PSOPATIENT, FIVE	VERAPAMIL HCL 120MG	PR	9	9
14	JUL 08, 2016	PSOPATIENT, ONE	CETIRIZINE HCL 10MG	PR	5	5
15	JUL 08, 2016	PSOPATIENT, ONE	RALOXIFENE HCL 60MG	RF	30	30
16	JUL 09, 2016	PSOPATIENT, ONE	LISINOPRIL 10MG TAB	PR	5	5
+ Enter ?? for more actions						
SI	Select Item					
Select Action:Next Screen//						

**OneVA PHARMACY RX REPORT** Jul 31, 2016@11:53:34 Page: 1 of 2  
 Prescriptions dispensed for other Host Pharmacies

#	DATE	PATIENT	DRUG NAME	TYPE	QTY	DSUP
1	JUL 07, 2016	PSOPATIENT, THREE	AMPHOTERICIN B 50MG/	PR	7	27
2	JUL 07, 2016	PSOPATIENT, THREE	AMPHOTERICIN B 50MG/	RF	3	27
3	JUL 08, 2016	PSOPATIENT, THREE	AMPHOTERICIN B 50MG/	PR	1	1
4	JUL 08, 2016	PSOPATIENT, THREE	CETIRIZINE HCL 10MG	PR	1	1
5	JUL 10, 2016	PSOPATIENT, THREE	MONTELUKAST 10MG TAB	RF	27	27
6	JUL 11, 2016	PSOPATIENT, THREE	NEOSPORIN OPHTH OINT	PR	2	10
7	JUL 11, 2016	PSOPATIENT, THREE	THIAMINE 100MG/ML IN	PR	1	3
8	JUL 14, 2016	PSOPATIENT, THREE	ATORVASTATIN CALCIUM	RF		
9	JUL 14, 2016	PSOPATIENT, THREE	CETIRIZINE HCL 10MG	RF		
10	JUL 14, 2016	PSOPATIENT, THREE	MONTELUKAST 10MG TAB	PR	10	10
11	JUL 19, 2016	PSOPATIENT, THREE	NEOSPORIN OPHTH OINT	PR	1	1
12	JUL 19, 2016	PSOPATIENT, THREE	MONTELUKAST 10MG TAB	PR	1	1
13	JUL 20, 2016	PSOPATIENT, THREE	NYSTATIN 100000 UNT/	RF	30	29
14	JUL 20, 2016	PSOPATIENT, THREE	ATORVASTATIN CALCIUM	RF	44	29
15	JUL 20, 2016	PSOPATIENT, THREE	NEOSPORIN OPHTH OINT	PR	1	1
16	JUL 20, 2016	PSOPATIENT, THREE	ATORVASTATIN CALCIUM	PR	3	2
+ Enter ?? for more actions						
SI	Select Item					
Select Action:Next Screen//						

**OneVA PHARMACY RX REPORT** Jul 31, 2016@11:56:55 Page: 1 of 2  
 Prescriptions dispensed for other Host Pharmacies

#	DATE	PATIENT	DRUG NAME	TYPE	QTY	DSUP
1	JUL 15, 2016	PSOPATIENT, SIX	VERAPAMIL HCL 120MG	PR	1	1

2	JUL 19, 2016	PSOPATIENT, SIX	IBUPROFEN 800MG TAB	PR	1	1
3	JUL 19, 2016	PSOPATIENT, THREE	NEOSPORIN OPHTH OINT	PR	1	1
4	JUL 19, 2016	PSOPATIENT, SEVEN	TRAZODONE HCL 50MG T	PR	10	1
5	JUL 19, 2016	PSOPATIENT, SEVEN	TRAZODONE HCL 50MG T	RF	60	60
6	JUL 19, 2016	PSOPATIENT, SEVEN	TRAZODONE HCL 50MG T	PR	10	10
7	JUL 19, 2016	PSOPATIENT, SEVEN	TRAZODONE HCL 50MG T	PR	10	1
8	JUL 19, 2016	PSOPATIENT, SEVEN	TRAZODONE HCL 50MG T	PR	10	1
9	JUL 19, 2016	PSOPATIENT, SIX	IBUPROFEN 800MG TAB	RF	30	10
10	JUL 19, 2016	PSOPATIENT, SIX	IBUPROFEN 800MG TAB	PR	10	10
11	JUL 20, 2016	PSOPATIENT, THREE	NYSTATIN 100000 UNT/	RF	30	29
12	JUL 20, 2016	PSOPATIENT, THREE	ATORVASTATIN CALCIUM	RF	44	29
13	JUL 20, 2016	PSOPATIENT, THREE	NEOSPORIN OPHTH OINT	PR	1	1
14	JUL 20, 2016	PSOPATIENT, THREE	ATORVASTATIN CALCIUM	PR	3	2
15	JUL 20, 2016	PSOPATIENT, THREE	NEOSPORIN OPHTH OINT	PR	7	11
16	JUL 20, 2016	PSOPATIENT, THREE	NYSTATIN 100000 UNT/	PR	5	3

+ Enter ?? for more actions  
SI Select Item

Select Action:Next Screen//

**OneVA PHARMACY RX REPORT** Jul 27, 2016@10:39:33 Page: 1 of 1  
Prescriptions dispensed for other Host Pharmacies

#	DATE	PATIENT	DRUG NAME	TYPE	QTY	DSUP
1	JUL 08, 2016	PSOPATIENT, SIX	IBUPROFEN 800MG TAB	PR	20	10
2	JUL 27, 2016	PSOPATIENT, SIX	IBUPROFEN 800MG TAB	RF	60	30
3	JUL 27, 2016	PSOPATIENT, SIX	CETIRIZINE HCL 10MG	PR	10	10

Total Cost for items in this report: \$13.71

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

Select Action:Quit// SI Select Item  
Enter a number (1-3) : 2

**OneVA PHARMACY RX DETAILS** Jul 27, 2016@10:41:01 Page: 1 of 1  
Detailed report of Prescriptions dispensed for other Host Pharmacies

Request Date/Time: JUL 27, 2016@10:14:57  
Patient: PSOPATIENT, SIX  
RX #: 2718862  
Rx Hosted at Site: DAYTSHR TEST LAB  
Request Type: REFILL  
Requesting Pharmacist: LASTNAME, FIRSTNAME  
Dispensed Date: JUL 27, 2016  
Drug Name at Originating (Host) site: IBUPROFEN 800MG TAB  
Local (matched) drug: IBUPROFEN 800MG TAB  
Cost of Local Refill/Partial: \$1.36

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

Select Action:Quit// SI Select Item  
Enter a number (1-3): 3

**OneVA PHARMACY RX DETAILS** Jul 27, 2016@10:42:06 Page: 1 of 1  
Detailed report of Prescriptions dispensed for other Host Pharmacies

Request Date/Time: JUL 27, 2016@10:29:21  
Patient: PSOPATIENT,SIX  
RX #: 2718861  
Rx Hosted at Site: DAYTSHR TEST LAB  
Request Type: PARTIAL FILL  
Requesting Pharmacist: LASTNAME,FIRSTNAME  
Dispensed Date: JUL 27, 2016  
Drug Name at Originating (Host) site: CETIRIZINE HCL 10MG TAB  
Local (matched) drug: CETIRIZINE HCL 10MG TAB  
Cost of Local Refill/Partial: \$11.90

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

## **Reprint an Outpatient Rx Label**

### [PSO RXRPT]

The label reprint function allows a single label or many copies of the same label to be reproduced. When the patient is enrolled in ScripTalk®, a message is displayed to the user indicating this and prompting the user to use the ScripTalk® label for the prescription bottle.

### **Example: Reprinting an Outpatient Rx Label**

Select Rx (Prescriptions) Option: REPRINT AN OUTPATIENT RX LABEL  
  
Reprint Prescription Label: **400693** ADHESIVE TAPE WATERPROOF 1IN ROLL  
Patient is a ScripTalk patient. Use ScripTalk label for prescription bottle.  
  
Number of Copies? : (1-99): 1// <Enter>  
Print adhesive portion of label only? N// <Enter>   
Reprint the FDA Medication Guide? No// YES  
Comments:  
  
Rx # 400693 06/27/03  
OPPATIENT16,ONE #1

AS DIR ON AFFECTED AREA

ADHESIVE TAPE WATERPROOF 1IN ROLL  
OPPROVIDER30, TWO OPPHARMACIST4, THREE  
# of Refills: 2

Select LABEL DEVICE: L8150\$PRT COPY ROOM 1A

ALBANY's FDA Medication Guide Printer(s) on file:

BIRM1\$PRT (Default)  
L8150\$PRT

Select FDA MED GUIDE PRINTER: BIRM1\$PRT// <Enter>

LABEL(S) QUEUED TO PRINT

When reprinting, you can choose whether or not you want to resend to a dispensing device using an external interface. If you do choose to resend, then the prescription will be sent to the dispensing system, and an entry will be made in the label log. This documents that this was a reprint and also resent to the dispensing system device. If you do not resend the prescription to the dispensing device, then only one entry is made in the label log.

### **Example: Reprinting an Outpatient Rx Label – Multiple Dispensing Device**

Select Rx (Prescriptions) Option: REPRINT AN OUTPATIENT RX LABEL

Reprint Prescription Label: 100002987 BACLOFEN 10MG TABS  
Number of Copies? : (1-99): 1//  
Print adhesive portion of label only? ? No// NO  
Do you want to resend to Dispensing System Device? No// y YES  
Comments: Multiple dispensing devices

Rx # 100002987 05/02/11  
OPPATIENT, TEN #7

TAKE ONE TABLET BY BY MOUTH EVERY DAY FOR 7 DAYS

BACLOFEN 10MG TABS  
OPPHARMACIST, FOUR OPPHARMACIST, NINE  
# of Refills: 7

Select LABEL DEVICE: LEXMARK5\$PRT

LABEL(S) QUEUED TO PRINT

PREScriptions SENT TO:  
SCRIPTPRO1  
100002987 BACLOFEN 10MG TABS

STORAGE DEVICES  
SCRIPTCENTER  
100002987 BACLOFEN 10MG TABS

## **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.

## **Restrictions to Providers on Controlled Substances Orders**

As part of patch PSO\*7\*391, the Kernel patch XU\*8\*580 introduced new fields to the NEW PERSON file (#200). Apart from the DEA#/VA# requirement, DEA further classifies what CS schedule a provider is authorized to write. These new fields are:

- 55.1 SCHEDELE II NARCOTIC (S), [PS3;1]
- 55.2 SCHEDELE II NON-NARCOTIC (S), [PS3;2]
- 55.3 SCHEDELE III NARCOTIC (S), [PS3;3]
- 55.4 SCHEDELE III NON-NARCOTIC (S), [PS3;4]
- 55.5 SCHEDELE IV (S), [PS3;5]
- 55.6 SCHEDELE V (S), [PS3;6]

If one of the above fields is populated for a provider, then when placing a new order in backdoor pharmacy, the software will now check for the drug schedule with the provider privileges. If the provider does not have schedule II privileges, the software will display the following message:

"Provider not authorized to write Federal Schedule 2 prescriptions."

When placing an order for a CS Detoxification drug, the software will now check for a valid Detoxification number for the provider. If the provider does not have a Detoxification number, the software will display the following message:

"Provider must have a DETOX# to order this drug."

Prior to PSO\*7\*391, the default days supply for all drugs was based on Patient Rx Status. PSO\*7\*391 changes the default for CS schedule II drugs to be set to 30 (or to the current Patient Rx Status if lower than 30). The Integration Control Registration #3278 that returns day supply (DSUP^PSOSIGDS) is modified to return 30 for CS schedule II drugs.

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# **Chapter 24: Updating a Patient's Record**

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This chapter describes the option used for updating a patient's record.

## **Update Patient Record**

**[PSO PAT]**

Use this option to update the patient information currently in the computer. Patient records can also be updated while being viewed by using the *Patient Record Update* screen action. If implementing Other Language Modifications, use either to set a patient's other language preference.

In support of Registration patch DG\*5.3\*522, the Outpatient Pharmacy software provides for the automatic population of city, state, and county based on entry of a zip code.

### **Example: Updating a patient record**

Select Outpatient Pharmacy Manager Option: <b>UPDATE</b> Patient Record					
Select Patient:	<b>OPPATIENT, ONE</b>	12-4-53	000007890	YES	SC VETERAN
OPPATIENT, ONE 4500 S MAIN ST ADDRESS LINE2 LINE 3 OF ADDRESS MADISON WISCONSIN 53705		ID#:	000-00-7890 DOB: DEC 4,1953		
		PHONE:	555-555-1653 ELIG: SC LESS THAN 50% SC%: 10		
WEIGHT (Kg) :	CrCL: <Not Found>	(CREAT: Not Found)	HEIGHT (cm) :	BSA (m2): _____	
DISABILITIES: ARTHRITIS-10% (SC), FOREARM CONDITION-5% (NSC), FOREARM CONDITION-4% (NSC), BENIGN EYE GROWTH-0% (NSC), LOSS OF FIELD OF VISION-20% (SC),					
ALLERGIES:					
ADVERSE REACTIONS:					

If the PSO site parameter is set to allow editing of patient data, this prompt, “Do you want to update the Permanent address/phone? //N”, is displayed. If the user enters “NO”, then the software will not allow the user to update the permanent address and Bad Address Indicator fields.

Do you want to update the address/phone? N// **Y** YES  
Update (P)ermanent address, (T)emporary, or (B)oth// **<Enter>**

```
STREET ADDRESS [LINE 1]: 4500 S MAIN ST// 4800 S MAIN ST
STREET ADDRESS [LINE 2]: ADDRESS LINE2// <Enter> ADDRESS LINE2
STREET ADDRESS [LINE 3]: LINE 3 OF ADDRESS// <Enter> LINE 3 OF ADDRESS
ZIP+4: 53705// <Enter> 53705
```

Select one of the following:

1 MADISON\*

CITY: MADISON// <Enter> \*

STATE: WISCONSIN

COUNTY: DANE

PHONE NUMBER [WORK]:

BAD ADDRESS INDICATOR: ? <Enter>

Please enter 1 if the address is 'UNDELIVERABLE', 2 if the patient  
is 'HOMELESS', or 3 for 'OTHER' bad address reasons.

Choose from:

1 UNDELIVERABLE  
2 HOMELESS  
3 OTHER

Are you sure that you want to save the above changes? **YES**

Change saved.

Changes to the permanent address/Bad Address Indicator will not be saved until the prompt “Are you sure that you want to save the above changes?” is answered YES.

Press **ENTER** to continue:

Temporary Address:

TEMPORARY ADDRESS ACTIVE?: NO// <Enter> NO

Press Return to continue: <Enter>

PHONE NUMBER [CELLULAR]:

CNH CURRENT:

FEE HOSPITAL I.D.:

TEMPORARY ADDRESS ACTIVE?: NO//

REMARKS:

>>PHARMACY PATIENT DATA<<

CAP:

MAIL:

MAIL STATUS EXPIRATION DATE:

DIALYSIS PATIENT:

NARRATIVE:

Eligibility: COLLATERAL OF VET.

Disabilities:

PATIENT STATUS: SERVICE CONNECTED//

COMMUNITY NURSING HOME:

NURSING HOME CONTRACT:

LAST DATE OF CONTRACT:

RESPITE PATIENT START DATE:

RESPITE PATIENT END DATE:

OTHER LANGUAGE PREFERENCE:

PMI LANGUAGE PREFERENCE:

# **Chapter 25: Verifying Prescriptions**

---

This chapter describes the option and methods used for verifying prescriptions.

## **Verification**

**[PSO VER]**

The *Verification* menu is used by pharmacists to verify prescriptions with a non-verified status; obtain a listing of those remaining non-verified prescriptions; or calculate the number of non-verified prescriptions by entering the patient or the clerk.

The following options are available on the *Verification* menu:

- *List Non-Verified Scripts*
- *Non-Verified Counts*
- *Rx Verification by Clerk*

If the verification site parameter is set to yes, new prescriptions entered by a non-pharmacist (i.e., someone who does not hold the PSORPH key) will be put in a non-verified status, entered into the non-verified orders file, and will not be made active (nor will labels be printed) until they are reviewed and verified by a pharmacist. Once new and renewed prescriptions for a patient are verified, all labels for that patient will be printed together. If a patient has refills only, these labels will be printed as they are entered.

A pharmacist may choose to verify all entries made by a particular technician rather than all the prescriptions for an individual patient.



Prescriptions in a non-verified status cannot be canceled, edited, or deleted through the usual options. If a non-verified prescription is auto canceled on admission, it can be reinstated, but it returns to the non-verified status.

When the VERIFICATION outpatient site parameter is set to 'No', a user who does not hold the PSORPH key will not be allowed to finish a pending order.

The *Patient Prescription Processing* [PSO LM BACKDOOR ORDERS] and *Complete Orders from OERR* [PSO LMOE FINISH] options have been modified to incorporate the above functionality.

## **List Non-Verified Scripts [PSO VRPT]**

This option allows the user to obtain a list of all scripts remaining in a status of 'Non-Verified' by either patient or entering clerk.

### **Example: Non-verified prescriptions (sorted by patient)**

Select Outpatient Pharmacy Manager Option: <b>Verification</b>			
Select Verification Option: <b>List Non-Verified Scripts</b>			
Sort By Patient or Clerk: P// <Enter> ATIENT			
DEVICE: HOME// [Select Print Device]			
<p style="text-align: center;">NON-VERIFIED PRESCRIPTIONS AS OF JUL 16, 2007@14:49:54 SORTED BY PATIENT (# indicates Critical Drug Interaction)</p>			
Patient name	Rx #	Issued	Drug
			Page: 1
			Entry By
<hr/>			
OPPATIENT, FIVE	1000001860A	04/01/04	ACETAMINOPHEN 1000MG TABLET
OPPATIENT, FOUR	1000001591A	07/27/98	ASPIRIN BUFFERED 325MG TAB
OPPATIENT, ONE	1000001853	10/23/02	ERYTHRITYL TETRANIT. 10MG TAB
OPPATIENT, TWELVE	1000001854	11/25/02	ACETAMINOPHEN 1000MG TABLET
	1000001798A	04/19/99	INSULIN NPH U-100 INJ (PORK)
<hr/>			
Select Verification Option:			

## **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: <b>NON-Verified Counts</b>
DEVICE: HOME// [Select Print Device]
<hr/>

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.)

Date	# of Non-verified Rx's	# of 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.

## Verifying ePharmacy Orders

Verifying an ePharmacy order is similar to finishing an order. After the user reviews the ePharmacy order and chooses to accept the order, the billing data is sent to ECME, which sends a message back to Outpatient Pharmacy displaying the status of the claim. The ECME section of the Activity Log is also updated.

```
RX: 101435  PATIENT: OPPATIENT, FOUR (000-01-1322P)
STATUS: Non-Verified
DRUG: ENTEX CAP
QTY: 10    10 DAY SUPPLY
SIG: TAKE 25MG BY BY MOUTH EVERY DAY FOR 10 DAYS WITH FOOD
LATEST: 11/05/2005      # OF REFILLS: 0  REMAINING: 0
ISSUED: 11/05/2005      PROVIDER:
LOGGED: 11/05/2005      CLINIC: NOT ON FILE
EXPIRES: 11/15/2005      DIVISION: ALBANY ISC (500)
CAP: NON-SAFETY          ROUTING: WINDOW
ENTRY BY: OPPHARMACIST,ONE      VERIFIED BY:

PATIENT STATUS : SC LESS THAN 50%      COPIES : 1
EDIT: (Y/N/P) : N// NO
VERIFY FOR OPPHARMACIST4, THREE ? (Y/N/Delete/Quit): Y// <Enter>
```

Veteran Prescription 100003840 successfully submitted to ECME for claim generation.

Claim Status:  
IN PROGRESS-Waiting to start  
IN PROGRESS-Gathering claim info

IN PROGRESS-Packet being built  
IN PROGRESS-Waiting for transmit  
IN PROGRESS-Transmitting  
E PAYABLE

Another New Order for OPPATIENT, FOUR? YES//

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# **Chapter 26: CPRS Order Checks: How They Work**

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## **Introduction**

In CPRS, Order Checks occur by evaluating a requested order against existing patient data. Most order checks are processed via the CPRS Expert System. A few are processed within the Pharmacy, Allergy Tracking System, and Order Entry packages. Order Checks are a real-time process that occurs during the ordering session and is driven by responses entered by the ordering provider. Order Check messages are displayed interactively in the ordering session.

Order Checks review existing data and current events to produce a relevant message, which is presented to patient caregivers. Order Checks use the CPRS Expert System (OCX namespace), to define logical expressions for this evaluation and message creation. In addition to the expert system Order Checks have some hard-coded algorithms. For example, the drug-drug interaction order check is made via an entry point in the pharmacy package whereas Renal Functions for Patients 65 and Over is defined as a rule in the CPRS Expert System.

## **Order Check Data Caching**

Data caching was recently added to improve the speed of order checks. Before data caching, order checks could be slow because each order check retrieved data from the other VISTA packages—even if the order checks used the same data. With data caching, the first order check in an ordering session retrieves data from other VISTA packages, uses the data to evaluate whether it should display a warning, and then stores the retrieved data in the ^XTMP("OCXCACHE" global for five minutes. The order checks that occur in the next five minutes can use the cached data, if it is the appropriate data, instead of retrieving data from the other packages. After five minutes, the cached data expires, and order checks must retrieve new data from the VISTA packages.

For example, before data caching was implemented, if an order check took 3 seconds to retrieve data from other VISTA packages, and there were 12 order checks, clinicians might wait 36 seconds to sign orders. With data caching, the first order check might take 3 seconds to retrieve the data, but subsequent order checks could use the cache and might take only .03 seconds each. That would be 3.33 seconds compared to 36 seconds. The numbers in this example are for illustration only and do not reflect real system speed. However, data caching should speed up order checks.

To avoid using all available disk space for storing data from order checks, there are several ways to clear the ^XTMP("OCXCACHE" global. ORMTIME removes data from the global when it runs. The suggested frequency for running ORMTIME is every 30 minutes, but not every site

runs it that frequently. Kernel clean up utilities also remove data from the cache when they run, which is usually every 24 hours. If needed, users that have access to the programmer's prompt can manually clear the cache from that prompt by using PURGE^OCXCACHE.

## Hash Counts and DEA Certification

When processing a digitally signed pending order, the integrity of the original order placed in CPRS is now being checked to ensure that the data fields listed below are not altered from the time the order is signed in CPRS and later selected for processing in backdoor pharmacy. This is done by passing the data elements listed below to a Kernel Application Programming Interface (API), Integration Control Registration (ICR) #3539 along with the CPRS hash count provided by ICR #5709. The Kernel API compares these two hash values and returns an "OK" if the pending order is unaltered; otherwise, a "-1^error code^error message" is returned.

Example: "-1^89802016^Mismatched digital signature hash values."

The following fields are used in the hash check:

- Date of Issuance
- Full Name and Address of the Patient
- Drug Name
- Quantity Prescribed
- Directions for Use
- Prescriber Name
- Prescriber Address (site address)
- Prescriber DEA / VA Registration Number
- Order Number (CPRS)

The Kernel API will also check for the validity of the DEA certificate. If the certificate is revoked or expired, the API will return the appropriate error code. If the error code is related to hash mismatch, or the DEA certificate is revoked, the following events will be triggered during pending order processing:

- The order will be auto discontinued.
- First line of the pending order screen will have the message "Digital Signature Failed: Corrupted (Hash mismatch)" or "Certificate revoked" concatenated with "Order Auto Discontinued", and the message will be highlighted.

- The status bar of the screen will have the message "Signature Failed: Corrupted (Hash mismatch)" or "Certificate revoked."

A mail message will be generated to the holders of the PSDMGR key notifying that the order has been auto-discontinued (similar to the example listed below). If the discontinuation is due to a hash mismatch as a result of altering one of the fields listed above, the mail message will show the altered fields with the discrepancies as shown in the following example.

#### **Example: Mail Message of Discontinuation Due to Hash Mismatch**

```
Subj: DIGITALLY SIGNED NEW ORDER AUTO DISCONTINUED [#196353]
      03/20/12@17:1024 lines
From: POSTMASTER In 'IN' basket. Page 1 *New*
```

---

Following order was auto discontinued when finishing a pending order  
due to Corrupted (Hash mismatch) - 89802016

Division	:	GREELEY CLINIC
CPRS Order #	:	5587651
Issue Date	:	MAR 7,2012
Patient	:	TEST, PATIENT (0908)
Address	:	P.O. BOX 31 LAPORTE, CA 95981
Drug	:	CODEINE SULFATE 60MG TAB
Dosage Ordered:	:	120 (MG)
Dosage Form	:	TABLETS
Quantity	:	54
Provider	:	TEST, PROVIDER
DEA#	:	TA1234563
Site Address	:	2360 E PERSHING BLVD 2360 East Pershing Boulevard CHEYENNE

Differences in CPRS and Pharmacy Pending File

Data Name	CPRS File	Pharmacy Pending File
-----	-----	-----
QTY PRESCRIBED	15	30

If the error code is related to 'certificate expired', the pending order will be processed (will not be auto-discontinued), and a notification will be sent to the provider with the message, "DEA certificate expired. Renew your certificate."

The following changes have been made for finishing a CS order:

- When finishing a pending CS order, if the user does not hold the new PSDRPH security key, the order will be marked as 'Non-Verified'. To verify a 'Non-Verified' CS order, the PSDRPH security key is now required. To discontinue a pending CS order, the PSDRPH security key is now required.

- The pending order screen will now display the provider's DEA/VA #, the DETOX# (if available), and the site address.
- When finishing a new pending CS order, the dosage, provider name, or the number of refills will not be allowed editing; however, the user will be allowed to select other possible dosages for the same drug if available. If the changes to the dispense drug results in creating a new order, the user will be notified by the message " Digitally Signed Order - No such changes allowed." If pharmacy wants to make such changes, then they have to discontinue (DC) the pending order and start a new order. However, the user will be allowed to select other possible dosages for the same drug that does not change the prescribed dosage.
- When finishing a new pending CS order, the day supply or the quantity will not be allowed to increase but can be decreased. If the day supply is decreased, the number of refills will also be adjusted accordingly depending on the drug setup (maximum refills, not refillable, etc). The quantity may be auto-calculated to a higher quantity by the system only when the dosage remains the same, but the dispense drug strength is changed – i.e. 2mg tablets #30 is changed to 1mg tablets, the Sig is updated, and the system changes the quantity to 60. A manual change to a higher quantity is not allowed.
- When finishing a pending CS order or verifying a CS order by the PSDRPH key holder, any edit to some of the key fields, such as dispense drug, dosage, dispense units, issue date, day's supply, quantity or number of refills, will now be captured and stored in the activity log.



In patch PSO\*7\*99, a change was made for pending orders not to recalculate the quantity for CS drugs on selecting a different strength of the same drug and resulting in the same prescribed dosage. This change is removed in patch PSO\*7\*391.



Patch PSO\*7\*505 introduces enhancements to editing of Controlled Substance prescriptions. Fields that would create a new prescription such as Orderable Item, Dose, Provider, and Refills are no longer editable on CS prescriptions. Additionally, controlled substance prescription can no longer be finished if the prescription is for a patient that does not have a zip code in their patient profile.

# **Chapter 27: Error Messages**

---

## **Error Information**

The text in the error message and reason column will be displayed to the user. The type of error is displayed in column 1.

## **Three Levels of Error Messages**

<b>System</b>	When such an error occurs, no Drug Interaction, Duplicate Therapy, or Dosing order checks will be performed. Other order checks that do not use the COTS database (FDB) will still be performed such as allergy/ADRs, duplicate drug (for outpatient only) and new CPRS order checks, etc.
<b>Drug</b>	The second error level is for the drug and no Drug Interaction/Duplicate Therapy or Dosing order checks will be performed for a specific drug. Drug level errors can occur for the prospective drug (drug being processed) or the profile drug. If a drug level error occurs on the prospective drug, no profile drug errors will be displayed. The only exception to this is when you are processing an IV order with multiple prospective drugs (i.e. multiple IV Additives). Profile drug level errors will only be shown once per patient session.  There are two reasons that a drug level error is generated; the drug is not matched to NDF or the drug is matched to NDF, but the VA Product to which it is matched does not have a GCNSEQNO assigned or the GCNSEQNO assigned does not match up to the GCNSEQNO in the COTS database. The latter (GCNSQENO mismatch) is rare.
<b>Order</b>	The third error level is for the order. Order level errors will only occur with dosing order checks. Please see the Dosing Order Check User Manual for more information.

<b>Error Level</b>	<b>Error Message</b>	<b>Reason</b>	<b>Why message is being displayed.</b>
System	No Enhanced Order Checks can be performed.	Vendor Database cannot be reached.	The connectivity to the vendor database has gone down. A MailMan message is sent to the G. PSS ORDER CHECKS mail group when the link goes down and when it comes back up.
System	No Enhanced Order Checks can be performed.	The connection to the vendor database has been disabled.	A user has executed the Enable/Disable Vendor Database Link [PSS ENABLE/DISABLE DB LINK] option and disabled the interface.

<b>Error Level</b>	<b>Error Message</b>	<b>Reason</b>	<b>Why message is being displayed.</b>
System	No Enhanced Order Checks can be performed.	Vendor database updates are being processed.	The vendor database (custom and standard data) is being updated using the DATUP (Data Update) process.
System	“Signatured Failed-Order Auto Discontinued”.	Hash Mismatch	Original digitally signed CS order placed in CPRS is checked to ensure data fields are not altered from the time the order is signed in CPRS and later selected for processing in backdoor pharmacy.
System	“DEA certificate expired. Renew your certificate.”	Validity of the DEA certificate.	Kernel API check for the validity of the DEA certificate. If certificate is revoked or expired, the API will return the appropriate error code.
System	No Enhanced Order Checks can be performed.	An unexpected error has occurred.	There is a system network problem and the vendor database cannot be reached or a software interface issue.
System	No Dosing Order Checks can be performed	Dosing Order Checks are disabled	A user has executed the <i>Enable/Disable Dosing Order Checks</i> [PSS Dosing Order Checks] option.
Drug	Enhanced Order Checks cannot be performed for Local or Local Outpatient Drug: <DRUG NAME>	Drug not matched to NDF.	The local drug being ordered/ or on profile has not been matched to NDF. Matching the drug to a VA Product will eliminate this message.
Drug	Order Checks could not be done for Remote Drug: <DRUG NAME>, please complete a manual check for Drug Interactions and Duplicate Therapy. Remote order indicator		If this error message is displayed, it means that the VA product that the local or remote drug being ordered/or on the local or remote profile does not have a GCNSEQNO or in rare cases, the GCNSEQNO assigned to the VA Product does not match up with a GCNSEQNO in the vendor database.
Drug	Enhanced Order Checks cannot be performed for Orderable Item: <OI NAME>	No active Dispense Drug found.	Highly unlikely that this error would be seen. At the time the order check was being performed the orderable item did not have an active dispense drug associated.

# **Chapter 28: FDA Medication Guides**

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Medication Guides are paper handouts that come with many prescription medicines. These guides address issues that are specific to particular drugs and drug classes, and they contain FDA approved information that can help patients avoid serious adverse events. The FDA requires that medication guides be issued with certain prescribed drugs and biological products when the agency determines that: certain information is necessary to prevent serious adverse effect; patient decision-making should be informed by information about a known serious side effect with a product; or patient adherence to directions for the use of a product are essential to its effectiveness. The VA maintains a web-enabled repository of all approved FDA Medication Guides, both current and archived versions of the documents. Following is the link to this repository: <http://vaww.national.cmop.va.gov/FDAMedGuides/>

## **Displaying an FDA Medication Guide**

The system provides users the ability to display individual FDA Medication Guides for a specific prescription when one is available.

Outpatient Pharmacy provides an option under the OTH hidden action within the Patient Prescription Processing [PSO LM BACKDOOR] option, aka 'Backdoor Pharmacy', allowing users to retrieve the Medication Guide associated with a prescription similar to the reprint of the PMI. Users may retrieve an FDA Medication Guide for a specific prescription by invoking the OTH (Other OP Actions) hidden action and selecting the new action, MG Display FDA Medication Guide.

A Java software component running on the user's PC will then display the FDA Medication Guide Adobe Acrobat document (.pdf) by automatically opening it through the Adobe Acrobat reader via Microsoft Internet Explorer.

### **Example 1: Displaying an FDA Medication Guide**

```
--- Other OP Actions ---
  PN  Progress Note (OP)
  AP  Action Profile (OP)
  MI  Print Medication Instructions
  DO  Display Orders' Statuses
  MG  Display FDA Medication Guide

  Select Item(s): MG  Display FDA Medication Guide

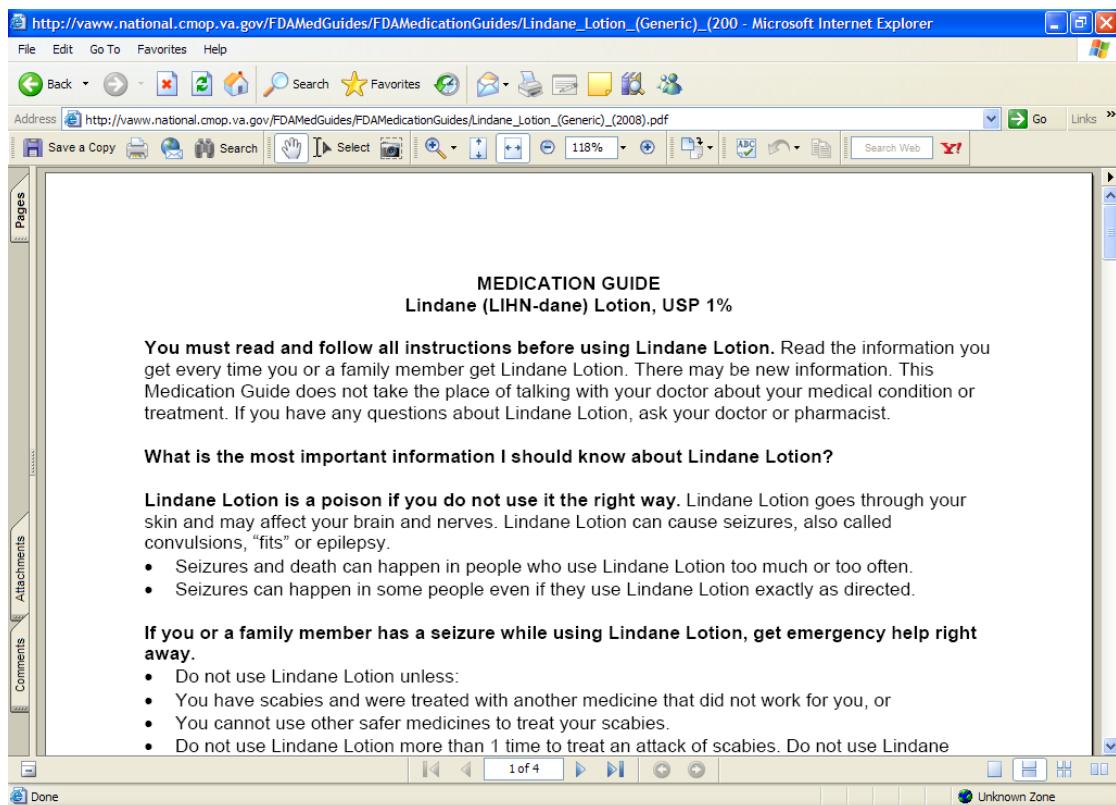
  The following URL provides the link to the FDA Medication Guide
  associated with this medication: Thin Client users; copy/paste the URL
  below into a browser to access the FDA Medication Guide for this drug:

  vaww.national.cmop.va.gov/FDAMedGuides/Lindane_(Generic)_ (2008).pdf
```

Please wait...

Enter RETURN to continue, '?' for HELP, or '^' to exit:

The following Internet explorer browser will open automatically:



### **Example 2: Displaying an FDA Medication Guide for an Rx when the Java Software Component is not installed.**

If a user tries to use this option from a computer which does not have the required Java software component installed, the following message will display:

Select Item(s): MG      Display FDA Medication Guide

The following URL provides the link to the FDA Medication Guide associated with this medication. Thin Client users: copy/paste the URL below into a browser to access the FDA Medication Guide for this drug:

vaww.national.cmop.va.gov/FDAMedGuides/Lindane\_(Generic)\_(2008).pdf

Please wait...

The system is unable to display FDA Med Guide automatically.

The FDA Medication Guide will not automatically open on Thin Client and some types of encrypted sessions. If you do not believe this is the reason contact your local technical support for assistance.

You can copy/paste the link above into your browser's address bar to retrieve the FDA Medication Guide.

Enter RETURN to continue, '?' for HELP, or '^' to exit: ?  
When unable to get the FDA Medication Guide to display, review the following suggestion(s) for troubleshooting potential problems:

- 1) The browser did not open automatically. This may be due to the following:
  - You might be connected to VistA via Thin Client or an encrypted session that prevents the FDA Med Guide from automatically displaying. Please copy and paste the URL link below into your browser's address bar to retrieve the FDA Medication Guide:

[vaww.national.cmop.va.gov/FDAMedGuides/Lindane\\_Lotion\\_\(Generic\)\\_ \(2008\).pdf](http://vaww.national.cmop.va.gov/FDAMedGuides/Lindane_Lotion_(Generic)_ (2008).pdf)

- The computer might not have the required Java software component installed or the software might not be functioning properly. Please, contact technical support for assistance.

- 2) When doing a copy/paste of the link into the browser's address and an HTTP 404 - File Not Found error is received. This may be due to the following:
  - A common issue exists when the link is displayed in two lines in the terminal screen. When you copy both lines at the same time and paste it into the browser's address, the second line is ignored by the browser resulting in a 'broken' link. To resolve this issue, copy and paste one line at a time from the terminal screen into the browser's address to make sure the complete link is used.
  - The FDA Medication Guide Server may be down at the moment. Please, wait a few minutes and try again. If the problem persists, contact technical support for assistance.
- 3) The browser opened automatically, however you receive an HTTP 404 - File Not Found error. This may be due to the following:
  - The FDA Medication Guide Server may be down at the moment. Please, wait a few minutes and try again. If the problem persists, contact technical support for assistance.

### **Example 3: Displaying an FDA Medication Guide for a medication that does not have an FDA Medication Guide on file.**

If a user tries to use this option for a medication that does not have an FDA Medication Guide on file, the following message will display:

Select Item(s): MG      Display FDA Medication Guide

There is no FDA Medication Guide associated with this medication.

Enter RETURN to continue, '?' for HELP, or '^' to exit: ?

When unable to get the FDA Medication Guide to display, review the following suggestion(s) for troubleshooting potential problems:

- 1) If no FDA Medication Guide exists for a product that you believe should have one, confirm that one is required by visiting the FDA website

(www.fda.gov). If one is required, log a support ticket to request its addition. Please understand that there may be a delay between the time that a new Medication Guide is posted to the FDA website and when it is made available in VistA through a National Drug File data update patch.

## Printing an FDA Medication Guide

The Outpatient Pharmacy application automatically prints an FDA Medication Guide on a separate, designated printer after printing the prescription label and PMI sheet, if one is available, for the medication being dispensed. Anytime a label is printed, the system ensures that if the specific drug has an associated medication guide, it will be printed whether the script is a normal fill, a partial fill or a refill.

When an FDA medication guide is sent to the printer, information is included in the footer of the document to identify the Patient, the Rx# and the date it was printed.



The system indicates when an associated medication guide exists on the prescription label printout. The printout contains the following statement on the same line where Additional Warnings appear: "Read FDA MED Guide."

## Site Parameters

### [PSO SITE PARAMETERS]

There are new site parameters related to the automatic printing of FDA Medication Guides.

#### Example 1: Updating the FDA Medication Guide Print Server URL

```
Select Outpatient Pharmacy Manager Option: MAINTenance (Outpatient Pharmacy)
Select Maintenance (Outpatient Pharmacy) Option: SITE Parameter Enter/Edit
Select SITE NAME:      ALBANY 500
Would you like to see all site parameters for this division? Y// NO
NAME: ALBANY//
MAILING FRANK STREET ADDRESS: 114 HOLLAND AVE//
AREA CODE: 518//
PHONE NUMBER: 472-4307//
MAILING FRANK ZIP+4 CODE: 12180//
SITE NUMBER: 514//
NCPDP NUMBER: ^FDA
    1   FDA MED GUIDE PRINT SERVER URL
    2   FDA MED GUIDE PRINTER
CHOOSE 1-2: 1   FDA MED GUIDE PRINT SERVER URL
FDA MED GUIDE PRINT SERVER URL: ??
    This is the Uniform Resource Locator (URL) and Port Number for the Print
    Server running the Java Application responsible for automatically
    printing of the Food and Drug Administration (FDA) Medication Guides for
    the division (e.g., 'http://10.4.21.22:8092/').
```

## FDA Medication Guide Printer Selection

Upon logging into outpatient pharmacy, in addition to selecting the Label and Profile printers, the user is prompted to select the FDA Medication Guide printer as well. Only devices with a WINDOWS NETWORK PRINTER NAME field (#135) defined in the DEVICE file (#3.5) are selectable. The FDA Medication Guide printer can be changed at any point of the dispensing process. The user can also change the FDA Medication Guide printer through the Change Label Printer option [PSO CHANGE PRINTER].

### Example 2: Selecting the Printer

```
Select OPTION NAME: PSO MAN
      1   PSO MANAGER          Outpatient Pharmacy Manager
      2   PSO MANUAL AUTO EXPIRE    Manual Auto Expire Rxs
CHOOSE 1-2: 1   PSO MANAGER          Outpatient Pharmacy Manager
Outpatient Pharmacy software - Version

Division:     ALBANY   500

                    You are logged on under the ALBANY division.

Select PROFILE PRINTER: HOME//    GENERIC INCOMING TELNET

Select LABEL PRINTER: HOME//    GENERIC INCOMING TELNET

OK to assume label alignment is correct? YES//

ALBANY's FDA Medication Guide Printer(s) on file:

        BIRM1$PRT
        L8150$PRT

Select FDA MED GUIDE PRINTER: HINES FDA MED GUIDE PRINTER//    HINES

Bingo Board Display: OUTPATIENT//
```

## The Default FDA Medication Guide Printer

### [PSO SITE PARAMETERS]

Only one printer from the PHARMACY DIVISION file (#59) list of available printers used to print FDA Medication Guides may be selected as the default printer. The use of the list by the sites is optional. The user also has the ability to change the default FDA Medication Guide printer through the Site Parameter Enter/Edit option [PSO SITE PARAMETERS].

### Example 3: Setting the Default FDA Medication Guide Printer

```
Select Outpatient Pharmacy Manager Option: MAINtenance (Outpatient Pharmacy)
Select Maintenance (Outpatient Pharmacy) Option: SITE Parameter Enter/Edit
```

```

Select SITE NAME:    ALBANY 500
Would you like to see all site parameters for this division? Y// NO

NAME: ALBANY//MAILING FRANK STREET ADDRESS: 114 HOLLAND AVE//  

AREA CODE: 518// ^FDA      1   FDA MED GUIDE PRINT SERVER URL  

          2   FDA MED GUIDE PRINTER
CHOOSE 1-2: 2   FDA MED GUIDE PRINTER
Select FDA MED GUIDE PRINTER: BAY PINES FDA MED GUIDE PRINTER
// ?
Answer with FDA MED GUIDE PRINTER
Choose from:
SUPPORT LINE PRINTER
BIRMI$PRT
HINES FDA MED GUIDE PRINTER
BAY PINES MED GUIDE PRINTER

You may enter a new FDA MED GUIDE PRINTER, if you wish
Enter the FDA Medication Guide printer for the division.
Only devices with a Windows Network Printer Name are allowed.

Answer with DEVICE NAME, or LOCAL SYNONYM, or $I, or VOLUME SET(CPU), or
SIGN-ON/SYSTEM DEVICE, or FORM CURRENTLY MOUNTED
Do you want the entire DEVICE List? N (No)
Select FDA MED GUIDE PRINTER: BAY PINES MED GUIDE PRINTER
// BIRMI BIRMI$PRT BHM | PRN| \\VHAISPLAB5\BIRMI
...OK? Yes// (Yes)

FDA MED GUIDE PRINTER: BIRMI$PRT//
DEFAULT PRINTER: ?
Indicate whether the printer is the default FDA Medication Guide Printer
for the division.
Choose from:
1      YES
DEFAULT PRINTER: 1  YES
Select FDA MED GUIDE PRINTER:

```

## **Reprinting an FDA Medication Guide**

### **[PSO LM BACKDOOR ORDERS]**

The system allows the user to reprint the associated FDA Medication Guide for a given prescription fill (or the latest FDA Medication Guide available for the medication on the prescription when reprinting a prescription label) and for prescription fills sent to CMOP by invoking the RM action under the OTH (Other OP Actions) after selecting a specific prescription in Backdoor Pharmacy, as seen below. The system prompts the user whether to reprint a medication guide, if an FDA Medication Guide is associated with a Prescription, when reprinting a label. The Default is set to 'NO'.

#### **Example 4: Drug Not matched to National Drug File**

If a user tries to use this option for a medication that is not matched to the National Drug File, the following message will display:

```

--- Other OP Actions ---

PN  Progress Note (OP)

```

```

AP  Action Profile (OP)
MI  Print Medication Instructions
DO  Display Orders' Statuses
MG  Display FDA Medication Guide
RM  Reprint FDA Medication Guide
Select Item(s): RM  Reprint FDA Medication Guide
ACETAMINOPHEN 325MG C.T. not matched to the National Drug File (NDF)

Enter RETURN to continue:

```

### **Example 5: No FDA Medication Guide Associated with Drug**

If a user tries to use this option for a medication that does not have an FDA Medication Guide on file, the following message will display:

```

--- Other OP Actions ---

PN  Progress Note (OP)
AP  Action Profile (OP)
MI  Print Medication Instructions
DO  Display Orders' Statuses
MG  Display FDA Medication Guide
RM  Reprint FDA Medication Guide

Select Item(s): RM  Reprint FDA Medication Guide

No FDA Medication Guide on file for this Rx.
Enter RETURN to continue:

```

### **Example 6: Reprinting an FDA Medication Guide for a Medication that has an FDA Medication Guide on File**

```

--- Other OP Actions ---

PN  Progress Note (OP)
AP  Action Profile (OP)
MI  Print Medication Instructions
DO  Display Orders' Statuses
MG  Display FDA Medication Guide
RM  Reprint FDA Medication Guide

Select Item(s): RM  Reprint FDA Medication Guide

ALBANY's FDA Medication Guide Printer(s) on file:

    BIRM1$PRT
    L8150$PRT

Select FDA MED GUIDE PRINTER: SUPPORT LINE PRINTER//  ROOM 234

Select FDA Medication Guide to reprint:

-----
# FL  FDA MED GUIDE FILE NAME          TYPE      DATE
-----
1  0  Lindane_Lotion_(Generic)_ (2008).pdf        WINDOW 07/02/11
2  P1 Lindane_Lotion_(Generic)_ (2008).pdf        WINDOW 08/16/11

```

```

3 1 Lindane_Lotion_(Generic)_(2008).pdf           WINDOW 09/21/11
4      Lindane_Lotion_(Generic)_(2008).pdf          LATEST

Select FDA Med Guide (1-4): 3 Lindane_Lotion_(Generic)_(2008).pdf

FDA Medication Guide sent to printer.

Enter RETURN to continue: Example 7: Reprinting FDA Medication Guide from Profile
OP Medications (ACTIVE)          Oct 04, 2011@10:52:23      Page: 1 of 2
OUTPATNM,CATHLEEN                <NO ALLERGY ASSESSMENT>
PID: 666-00-0704                  Ht(cm): _____ (_____)
DOB: FEB 1,1955 (56)             Wt(kg): _____ (_____)
SEX: FEMALE
CrCL: <Not Found> (CREAT: Not Found)          BSA (m2): _____
-----
Rx #: 300411$                    Rx #: 300411$ (1) *Orderable Item: LINDANE SHAMPOO
(1) *Orderable Item: LINDANE SHAMPOO
(2) Drug: LINDANE 1% SHAMPOO
      Verb: SHAMPOO
(3) *Dosage: 1
      *Route: ORAL (BY MOUTH)
      *Schedule: QD
(4) Pat Instructions:
      SIG: SHAMPOO 1 BY MOUTH EVERY DAY
(5) Patient Status: SC LESS THAN 50%
(6) Issue Date: 09/02/11          (7) Fill Date: 09/02/11
      Last Fill Date: 09/02/11 (Window)
      Last Release Date:        (8) Lot #:
      Expires: 09/02/12          MFG:
-----Enter ?? for more actions-----
DC Discontinue          PR Partial          RL Release
ED Edit                 RF Refill          RN Renew
Select Action: Next Screen// rp RP
Number of Copies? : (1-99): 1//          Print adhesive portion of label only? No// NO
Print the FDA Medication Guide? No// YES
Comments: TESTING SINGLE RX REPRINT

Rx # 300411          09/02/11
OUTPATNM,CATHLEEN      #1
SHAMPOO 1 BY MOUTH EVERY DAY

LINDANE 1% SHAMPOO
ROBERTSON,MARK          ROCHA, MARCELO
# of Refills: 5

Press Return to Continue:

```

## **Changing the FDA Medication Guide Printer**

**[PSO CHANGE PRINTER]**

Users have the ability to change the currently selected FDA Medication Guide printer through the Change Label Printer option [PSO Change Printer.]

### **Example 8: Changing the FDA Med Guide Printer**

Select Outpatient Pharmacy Manager Option: Change Label Printer

```
Select PROFILE PRINTER: TELNET-IN// GENERIC INCOMING TELNET
Select LABEL PRINTER: TELNET-IN// GENERIC INCOMING TELNET
OK to assume label alignment is correct? YES//'
ALBANY's FDA Medication Guide Printer(s) on file:
      BIRM1$PRT      L8150$PRT
Select FDA MED GUIDE PRINTER: BIRM1$PRT// hines HINES FDA MED GUIDE PRINTER HI
NES
```

## Prompt During Label Print

The system prompts the user to select a different FDA Medication Guide printer when printing labels, if at least one FDA Medication Guide is associated with a Prescription label being printed.

## Label Log and CMOP Event Log Display

The Label Log as well as the CMOP Event Log displays the FDA MED Guide URL under the Comments line to denote that an FDA Medication Guide printed along with the label or that there was one associated with the medication when the prescription fill was transmitted to CMOP.

### Example 9: Label Log and CMOP Event Log Display

```
Label Log:
# Date          Rx Ref           Printed By
=====
1 10/04/11      ORIGINAL        ROCHA, MARCELO
Comments: From RX number 300418
FDA Med Guide: Lindane_Lotion_(Generic)_ (2008).pdf

CMOP Event Log:
Date/Time       Rx Ref   TRN-Order     Stat      Comments
=====
10/04/11@0943   Orig    15-1          TRAN
FDA Med Guide: NSAIDs_(Class)_ (2009).pdf
```

## Audit Trail for FDA Medication Guide Printing

The system stores the unique FDA Medication Guide document name for each fill being transmitted to CMOP in the PRESCRIPTION file (#52).

## Automatically Printing FDA Medication Guides is Optional

The FDA Medication Guide automatic printing functionality is an optional functionality. Each pharmacy division may choose to turn this functionality ON or OFF. Reasons a pharmacy division might choose to turn the FDA Medication Guide automatic printing functionality OFF are:

FDA Medication Guides print on a different printer than the prescription labels. High-volume window prescription dispensing sites may not have the necessary resources for collating FDA Medication Guides with their corresponding prescription labels.

Automated-dispensing systems such as Optfill also perform the prescription label printing, which usually happens at a later time than when the labels are printed in VistA. Since FDA Medication Guides automatically print at the same time labels print from VistA, medication guides may print too early in the dispensing process, causing confusion.

To turn the FDA Medication Guide automatic printing functionality OFF or to not turn it ON for a specific pharmacy division, make sure the FDA MED GUIDE PRINT SERVER URL field has no value. This field can be edited via the Site Parameter Enter/Edit [PSO SITE PARAMETERS] option, as shown below.



Whether the functionality is being turned ON or OFF, the prescription label printed from VistA will still include the note “Read FDA Med Guide” when one is associated with the medication being dispensed.

#### **Example 10: Updating the FDA Med Guide Print Server URL Field**

```
Select Outpatient Pharmacy Manager Option: SUPERvisor Functions
```

```
Add New Providers  
Daily Rx Cost  
Delete a Prescription  
Edit Provider  
Initialize Rx Cost Statistics  
Inter-Divisional Processing  
Inventory  
Lookup Clerk by Code  
Lookup National Clean-Up Utility Data  
Monthly Rx Cost Compilation  
Patient Address Changes Report  
Pharmacist Enter/Edit  
Purge Drug Cost Data  
Recompile AMIS Data  
Site Parameter Enter/Edit  
View Provider
```

```
Select Supervisor Functions Option: SITE Parameter Enter/Edit
```

```
Select SITE NAME: ALBANY      500  
Would you like to see all site parameters for this division? Y// NO
```

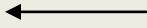
```
NAME: ALBANY//  
MAILING FRANK STREET ADDRESS: 114 HOLLAND AVE//  
AREA CODE: 518//  
PHONE NUMBER: 472-4307//  
MAILING FRANK ZIP+4 CODE: 12208//  
SITE NUMBER: 500//
```

NCPDP NUMBER:

...

LOGICAL LINK: PSO DISP//  
PROCESS AUTO REFILLS FOR INPAT:  
PROCESS AUTO REFILLS FOR CNH:  
FDA MED GUIDE PRINT SERVER URL: ??

This is the Uniform Resource Locator (URL) and Port Number for the Print Server running the Java Application responsible for automatically printing of the Food and Drug Administration (FDA) Medication Guides for the division (e.g., 'http://10.4.21.22:8092/').

FDA MED GUIDE PRINT SERVER URL: 

Make sure this field is blank (no value).

# **Chapter 29: Security Keys**

---

A security key is a unique entry in the Security Key file (^DIC(19.1,) which may prevent access to a specific option or action by including the key as part of the option's entry in the Option file (^DIC(19,). Only users entered in the Holder field of the Security Key file may access the option or action.

## **Security Keys**

### **PSO TRICARE/CHAMPVA**

PSO\*7\*385 renamed the PSO TRICARE security key to PSO TRICARE/CHAMPVA. Please see [TRICARE/CHAMPVA Eligible Outpatient Override Function](#) for further information on this security key.

### **PSO TRICARE/CHAMPVA MGR**

PSO\*7\*385 renamed the PSO TRICARE MGR security key to PSO TRICARE/CHAMPVA MGR. Please see [TRICARE CHAMPVA Bypass/Override Report](#) for further information on this security key.

### **PSO TECH ADV**

PSO\*7\*386 added the PSO TECH ADV security key for use of holding and unholding prescriptions. Please see [Holding and Unholding a Prescription](#) for further information on this security key.

### **PSO EPHARMACY SITE MANAGER**

PSO\*7\*421 added the PSO EPHARMACY SITE MANAGER security key for use of changing ePharmacy Site Parameters. Please see [ePharmacy Site Parameters](#) for further information on this security key.

# **Appendix A: OneVA Pharmacy User Manual**

## **PSO\*7\*479**

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### **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
05/2017	ii, <a href="#">14</a> , <a href="#">26</a> , <a href="#">27</a> , and <a href="#">30</a>	PSO*7*479	Modifies the prompt to the user when printing a OneVA Pharmacy label.  (B. Thomas, TW)
11/2016	All	PSO*7*454	Initial Issue

## **Introduction**

### **Purpose**

The purpose of the OneVA Pharmacy User Manual is to describe the new capability that will allow a Pharmacist from any VA Pharmacy location to refill or partial a patient’s prescription that originated from another VA Pharmacy location, contingent on the host site status where the prescription originated.

In addition, this User Manual will provide instructions on how to obtain the details of the prescriptions dispensed by another VA Pharmacy location by introducing the new OneVA Pharmacy report menu.

Lastly, Frequently Asked Questions (FAQs) are addressed regarding the new OneVA Pharmacy capabilities and limitations.

### **Document Orientation**

#### **Organization of the Manual**

The OneVA Pharmacy User Manual contains the following sections:

- ‘Introduction’ section that includes the assumed experience and skill level a user will have in order to use the software patch and provides the specifics related to the support of the software. This section also lists the references, resources, documentation conventions, disclaimers, and the organization of the manual.
- ‘System Summary’ section that includes the system configuration steps necessary to turn on the OneVA Pharmacy software and the data flow diagrams for the View Orders, Dispense Order from another VA Pharmacy Location, and OneVA Pharmacy Prescription Report Use Cases. This section also lists specific messages for the user regarding continuity of operation.
- ‘Getting Started’ section provides the overview of logging into the system, introduces the system menu, and lists the caveats and exceptions for this software patch.
- ‘Using the Software’ section provides the detailed steps for using the OneVA Pharmacy capability within both the ‘PATIENT PRESCRIPTION PROCESSING [PSO LM BACKDOOR ORDERS]’ and the ‘ONEVA PHARMACY PRESCRIPTION REPORT [PSO REMOTE RX REPORT]’ menus.
- ‘Troubleshooting’ section includes common system messages and actions to take if a significant error occurs.
- ‘Acronyms and Abbreviation’ section lists all acronyms and abbreviations used throughout this document.
- ‘Appendix’ details the Frequently Asked Questions (FAQs) associated with the new capabilities and provides the programs limitations.

### **Assumptions**

The OneVA Pharmacy User Manual assumes the user has the following experience/skills:

- User has basic knowledge of the Veterans Health Information Systems and Technology Architecture (VistA) system (such as the use of commands, menu options, and navigation tools).
- User has access to the ‘Rx (PRESCRIPTIONS) [PSO RX]’ menu within VistA and holds appropriate security keys for their user role, such as PSORPH, to identify the user as a Pharmacist.
- User has completed any prerequisite training.

### **Coordination**

The Veterans Affairs Medical Center (VAMC) VistA Coordinator responsible for the implementation of OneVA Pharmacy patch will address the ability of Pharmacists to fulfill non-controlled substance prescriptions from any VA Pharmacy location where a prescription originated at another VA Pharmacy site.

The Audience for this User Manual is the Pharmacist and anyone else eligible to fulfill prescriptions (non-controlled).

The OneVA Pharmacy Implementation Manager and the Implementation team will coordinate with the Regional VistA Services teams for a National Rollout using a phased approach. As part of the distribution and installation of the OneVA Pharmacy patch, the deployment will include a checklist to confirm that the site connects to VAs Enterprise Messaging Infrastructure (eMI) Enterprise Service Bus (ESB) located in the Austin Information Technology Center (AITC).

### **Disclaimers**

- **Software Disclaimer:** Employees of the Federal Government in the course of their official duties developed this software at the Department of Veterans Affairs (VA). Pursuant to title 17 Section 105 of the United States Code this software is not subject to copyright protection and is in the public domain. VA assumes no responsibility whatsoever for its use by other parties, and makes no guarantees, expressed or implied, about its quality, reliability, or any other characteristic. We would appreciate acknowledgement if the software is used. This software can be redistributed and/or modified freely if any derivative works bear some notice that they are derived from it, and any modified versions bear some notice that they have been modified.
- **Documentation Disclaimer:** The appearance of external hyperlink references in this manual does not constitute endorsement by the VA of this Web site or the information, products, or services contained therein. VA does not exercise any editorial control over the information found at these locations. Such links are consistent with the stated purpose of VA.

### **Documentation Conventions**

All patient data displayed on screen images within this document consists of mocked up test data therefore there is no concern regarding misuse or violation of Personally Identifiable Information (PII) as defined in Office of Management and Budget (OMB) Memorandum M-07-1616.

Various symbols used throughout the documentation to alert the reader to special information. The following table gives a description of each of these symbols.

**Table 1: Documentation Symbols and Descriptions**

Symbol	Description
	NOTE: Used to inform the reader of general information including references to additional reading material
	CAUTION: Used to caution the reader to take special notice of critical information

## **References and Resources**

References and resources for the OneVA Pharmacy patch available on the VA Software Document Library (VDL) and are as follows:

- [Pharm: Outpatient Pharmacy: Technical Manual/Security Guide](#)
- [OneVA Pharmacy Release Notes: provides an overview of features and functions that are new with this patch.](#)
- [Pharm: Outpatient Pharmacy: Deployment, Installation, Rollback, and Back-out Plan - provides information necessary to install the software.](#)
- [Pharm: Outpatient Pharmacy: User Manual – Manager: includes the processing and functions for the Manager.](#)
- [Pharm: Outpatient Pharmacy: User Manual – Pharmacist Menu: includes the processing and functions for the Pharmacist.](#)
- [Pharm: Outpatient Pharmacy: User Manual – Supplemental: includes information about the OneVA Pharmacy label printing.](#)
- [Pharm: Outpatient Pharmacy: User Manual – Technician: includes the processing and functions for the Technician.](#)
- [Pharm: Outpatient Pharmacy: User Manual – Technician: includes the processing and functions for the Technician.](#)

OneVA Pharmacy training videos are available and can be found by following these links:

- Training Video – View Order Use Case:

- [https://thebitsgroup.sharepoint.com/sites/Collab/OneVA/\\_layouts/15/guestaccess.aspx?guestaccesstoken=tcfMDx1L5KCE%2bYwXcpVhzOZWY6TLA0MlcqvRG0d5lJs%3d&docid=1a8fecf5b24e441c49e0bef5343c64d3c&rev=1](https://thebitsgroup.sharepoint.com/sites/Collab/OneVA/_layouts/15/guestaccess.aspx?guestaccesstoken=tcfMDx1L5KCE%2bYwXcpVhzOZWY6TLA0MlcqvRG0d5lJs%3d&docid=1a8fecf5b24e441c49e0bef5343c64d3c&rev=1)
- Training Video – Dispense Order from Another Location:
  - [https://thebitsgroup.sharepoint.com/sites/Collab/OneVA/\\_layouts/15/guestaccess.aspx?guestaccesstoken=WWtW%2bGtN3d19wif%2bjOArtKlt5OrRY6v7m1ptnx8Sbc%3d&docid=16ec25932acc149a487fc7dbb1d8fa255&rev=1](https://thebitsgroup.sharepoint.com/sites/Collab/OneVA/_layouts/15/guestaccess.aspx?guestaccesstoken=WWtW%2bGtN3d19wif%2bjOArtKlt5OrRY6v7m1ptnx8Sbc%3d&docid=16ec25932acc149a487fc7dbb1d8fa255&rev=1)

## National Service Desk and Organization Contacts

The following table lists the Operational Tier 1 through Tier 5 Support resources for the OneVA Pharmacy VistA patch including the National Service Desk (NSD), Regional Application Service Line, Clinical Product Support team, OneVA Pharmacy Development team, and VistA maintenance support team.



The support entities listed in the following table does not include support for the integration areas that are part of the OneVA Pharmacy software but not part of the OneVA Pharmacy patch. Not included is support for eMI ESB, HL7, nor for the HDR/CDS Repository.

**Table 2: OneVA Pharmacy Support Entities**

Name	Role	Gov or non-Gov	FTE	Org	Contact Info
Tier 1: National Service Desk	NSD Tier 1 Support	Gov	No change to existing VistA support FTE	NSD	Phone: 1-855-NSD-HELP
Tier 2: National Service Desk	NSD Tier 1 Support	Gov	No change to existing VistA support FTE	NSD	Service Desk Manager (SDM) trouble tickets
Tier 3: Regional Application Service Line	Install Patch – Tier 3	Gov	No change to existing VistA support FTE	OI&T Field Operations	Region 1 – Kaylene Zimmer 360-816-6158 Region 2 – Stefan Test 850-293-0858 Region 3 – Jenny Stafford 901-601-0641 Region 4 – Mike Fournier 603-998-4714 Region 6 – Derik Frioud 303-370-7715

Name	Role	Gov or non-Gov	FTE	Org	Contact Info
Tier 4: EPMO – Clinical Product Support Team – Clin 1	Clin 1 Support/Provider Systems	Gov	No change to existing VistA support FTE	EPMO, OI&T	SDM trouble tickets
Tier 5: Development Team for first 30-days after National Release	Support defect fixing if identified after National Release. The development team is responsible for development and release of all fix patches for defects occurring with the first 30-days of release.	Non-Gov	No change to existing VistA support FTE	VHA Innovations Program	Bill Jutzi, <a href="mailto:William.Jutzi@va.gov">William.Jutzi@va.gov</a> 503.794.2899 Kathy Coupland <a href="mailto:Kathleen.Coupland@va.gov">Kathleen.Coupland@va.gov</a> 404.803.4547
Tier 5: VistA Maintenance Team subsequent to first 30-days	Support defect fixing if identified 30-days after National Release. The VistA Maintenance team is an existing long-term team that works closely with application services line representatives to implement patches beyond the 30-day warranty period.	Non-Gov	No change to existing VistA support FTE	EPMO, OI&T	SDM trouble tickets Todd Downing 404-648-2232

## System Summary

OneVA Pharmacy software provides the Department of Veterans Health Administration (VHA) the capability to allow Veterans traveling across the United States to refill or partial their active VA non-controlled substance prescriptions at any VA Pharmacy location regardless of where the prescription originated. The patch expands available pharmacy information in VistA to Pharmacists, providing direct access to any active and refillable prescription from any VA Pharmacy location.

OneVA Pharmacy software provides a foundation to build and extend new capabilities to the Veteran.

Patch PSO\*7.0\*454 is being released to enhance VistA's "Patient Prescription Processing [PSO LM BACKDOOR ORDERS]" menu (found within the VistA Pharmacy Outpatient Pharmacy package). The OneVA Pharmacy patch will allow the Pharmacist to query for and refill patient's active and refillable prescriptions from other VA Pharmacy VistA instances.

The overall OneVA Pharmacy software design has several components. They are:

1. Veterans Health Information Systems and Technology Architecture (VistA) (Patch PSO\*7.0\*454)
2. Health Level 7 (HL7) Messaging
3. Enterprise Messaging Infrastructure (eMI) Enterprise Service Bus (ESB)
4. Health Data Repository/Clinical Data Service (HDR/CDS) Repository

VistA is the user interface where a pharmacist uses the "Patient Prescription Processing [PSO LM BACKDOOR ORDERS]" menu (found within the VistA Pharmacy Outpatient Pharmacy package) to query for and refill patient's active and refillable prescriptions from other VA Pharmacy VistA instances. Patch PSO\*7.0\*454 uses Health Level 7 (HL7) messaging to query and receive remote prescription details to and from the Health Data Repository/Clinical Data Services (HDR/CDS) Oracle Repository.

The VistA instance where the Veteran is requesting the refill or partial is considered the 'dispensing' VistA instance. This patch allows a Pharmacist, using a 'dispensing' VistA instance, to refill or partial prescription that originated from another VA Pharmacy VistA instance and print a prescription label. The VA Pharmacy VistA instance where the prescription originated and currently exists is the 'host' VistA instance. The host VistA instance is where the update to the prescription record is made once the fill is processed. The label data elements are extracted from the host VistA instance and returned to the dispensing site via HL7 creating the OneVA Pharmacy label. The bar code on the label will be valid at the host site but not at the dispensing site.

The OneVA Pharmacy patch sends the HL7 query message through the Enterprise Service Bus (ESB) Enterprise Messaging Services (eMI). eMI executes a Web Service call to query the HDR/CDS Repository for specific medication information obtained from all VA Pharmacy's VistA sites. The eMI configuration contains filtering processes that applies specific business rules against the HDR/CDS Web Service call to return the appropriate prescriptions to the dispensing VistA. VistA and eMI communicate using HL7 v2.5.1 over Minimal Layer Protocol

(MLLP). Communication to the HDR/CDS Repository takes place via Simple Object Access Protocol (SOAP) Web Services.

The medication data elements return to the dispensing site via HL7 messaging. Once the prescriptions arrive at the dispensing site, they display below any 'local' prescriptions on the Medication Profile view. The prescriptions displayed to the Pharmacist sort by VA Pharmacy site and status. The dispensing Pharmacist can view the remote prescriptions and select one to refill or partially fill. For label printing, VistA triggers the HL7 message stream that executes during the refill or partial fill prescription processes. The host label data elements are returned to the dispensing site within the HL7 segment. The event triggers the Pharmacist to select the dispensing sites printing device to print a host label.

## System Configuration

To use OneVA Pharmacy, the user turns on the 'ONEVA PHARMACY FLAG (#3001)'. The 'ONEVA PHARMACY FLAG (#3001)' is located on the 'OUTPATIENT SITE NAME (#59)' file. This field will allow each division to toggle the OneVA Pharmacy logic 'on' or 'off' depending on current needs. The user changes the field by using 'FILEMAN [FM]' and editing the 'ONEVA PHARMACY FLAG (#3001)' field. The software patch delivers the 'ONEVA PHARMACY FLAG (#3001)' in the 'off' state. When this flag is in the 'off' state, the HDR/CDS Repository is not queried for external prescriptions and other VistA instances will not be able to refill prescriptions that belong to the VistA instance with the flag set to the 'off' state. When in the 'on' state, all prescription queries and actions may be taken for remote queries, refills, and partial fills. In order to process prescriptions from another VistA instance, that instance will also need to have its 'ONEVA PHARMACY FLAG (#3001)' set to the 'on' state.

### Host Site OneVA Pharmacy Flag Not Set On Message

If the 'ONEVA PHARMACY FLAG (#3001)' is not set to the 'on' state at the host site, the dispensing site will receive the following message:

The OneVA Pharmacy flag is turned 'OFF' at this facility. Unable to process refill/partial fill requests. Queries will NOT be made to other VA Pharmacy locations.

### Steps to Turn On ONEVA PHARMACY FLAG (#3001)



DO NOT turn on the OneVA Pharmacy Flag until directed to do so. The software will be released, deployed, and installed with the activation flag set to the "off" position. The Existing Product Intake Program (EPIP) Implementation Team will coordinate with the sites Pharmacy Automatic Data Processing Application Coordinator (ADPAC) on the specific date in which to activate the software.

To turn on the ‘ONEVA PHARMACY FLAG (#3001)’ for all the divisions, use the ‘VA FILEMAN [DIUSER]’ utility and perform the following steps.

To turn on the ‘ONEVA PHARMACY FLAG (#3001)’ for all the divisions, use the ‘VA FILEMAN [DIUSER]’ utility and perform the following steps.

1. Sign-in to the VistA system and select the menu option: VA FILEMAN [DIUSER].

#### **OneVA Pharmacy Flag: VA FileMan**

```
FM      VA FileMan ...
        Manage Mailman ...
        Menu Management ...
        Programmer Options ...
        Operations Management ...
        Spool Management ...
        Information Security Officer Menu ...
        Taskman Management ...
        User Management ...
HL7     HL7 Main Menu ...
NTSI    VHS&RA ADP Tracking System ...
VDEF    VDEF Configuration and Status ...
        Application Utilities ...
        Capacity Planning ...
```

Select Systems Manager Menu <TEST ACCOUNT> Option:

2. Enter <FM> and press <ENTER>.

#### **OneVA Pharmacy Flag: Enter FM Prompt**

```
Select Systems Manager Menu <TEST ACCOUNT> Option: FM
```

The system displays the option name and the prompt for the specific FileMan feature, as displayed in the following image.

### **OneVA Pharmacy Flag: VA FileMan Menu Prompt**

```
Select Systems Manager Menu <TEST ACCOUNT> Option: FM  VA FileMan  
VA FileMan Version 22.0  
Enter or Edit File Entries  
Print File Entries  
Search File Entries  
Modify File Attributes  
Inquire to File Entries  
Utility Functions ...  
Data Dictionary Utilities ...  
Transfer Entries  
Other Options ...  
  
Select VA FileMan <TEST ACCOUNT> Option:
```

3. Enter <EN> and press <ENTER>.

### **OneVA Pharmacy Flag: Enter <EN> to Enter or Edit File Entries Prompt**

```
Select VA FileMan <TEST ACCOUNT> Option: EN
```

The system displays the option name and the prompt for the ‘INPUT TO WHAT FILE’, as displayed in the following image.

### **OneVA Pharmacy Flag: Input to What File Prompt**

```
Select VA FileMan <TEST ACCOUNT> Option: ENter or Edit File Entries  
  
INPUT TO WHAT FILE: DRUG//
```

4. Enter <59> for the ‘OUTPATIENT SITE (#59)’ file and press <ENTER>.

The system displays the option name and the prompt for the ‘EDIT WHICH FILE’, as displayed in the following image.

### **OneVA Pharmacy Flag: Edit Which Filed Prompt**

```
INPUT TO WHAT FILE: DRUG// 59  OUTPATIENT SITE  (5 entries)  
EDIT WHICH FIELD: ALL//
```

- Enter <3001> for the ‘ONEVA PHARMACY FLAG (#3001)’ field and press <ENTER>.

The system displays the option name and the prompt for the ‘THEN EDIT FIELD’, as displayed in the following image.

#### **OneVA Pharmacy Flag: Then Edit Field Prompt**

```
INPUT TO WHAT FILE: DRUG// 59 OUTPATIENT SITE (5 entries)
EDIT WHICH FIELD: ALL// 3001 ONEVA PHARMACY FLAG
THEN EDIT FIELD:
```

- Press <ENTER>.

The system displays the option name and the prompt for the specific ‘OUTPATIENT SITE NAME’, as displayed in the following image.

#### **OneVA Pharmacy Flag: Select OUTPATIENT SITE NAME Prompt**

```
INPUT TO WHAT FILE: DRUG// 59 OUTPATIENT SITE (5 entries)
EDIT WHICH FIELD: ALL// 3001 ONEVA PHARMACY FLAG
THEN EDIT FIELD:

Select OUTPATIENT SITE NAME:
```

- Enter the following command <^LOOP> and press <ENTER>.

#### **OneVA Pharmacy Flag: ^LOOP Command**

```
INPUT TO WHAT FILE: DRUG// 59 OUTPATIENT SITE (5 entries)
EDIT WHICH FIELD: ALL// 3001 ONEVA PHARMACY FLAG
THEN EDIT FIELD:

Select OUTPATIENT SITE NAME: ^LOOP
```

The system displays the option name and the prompt for the specific ‘EDIT ENTRIES BY: NAME//’, as displayed in the following image.

#### **OneVA Pharmacy Flag: Edit Entries by: NAME// Prompt**

```
INPUT TO WHAT FILE: DRUG// 59 OUTPATIENT SITE (5 entries)
EDIT WHICH FIELD: ALL// 3001 ONEVA PHARMACY FLAG
THEN EDIT FIELD:

Select OUTPATIENT SITE NAME: ^LOOP
EDIT ENTRIES BY: NAME//
```

8. Press <ENTER>.

The system displays the option name and the prompt for the specific ‘START WITH NAME: FIRST//’, as displayed in the following image.

#### **OneVA Pharmacy Flag: Start with Name Prompt**

```
INPUT TO WHAT FILE: DRUG// 59 OUTPATIENT SITE (5 entries)
EDIT WHICH FIELD: ALL// 3001 ONEVA PHARMACY FLAG
THEN EDIT FIELD:

Select OUTPATIENT SITE NAME: ^LOOP
EDIT ENTRIES BY: NAME// 
START WITH NAME: FIRST//
```

The ‘^LOOP’ command causes the system to display each division, one by one, allowing the user to set the ‘ON’ option for the ‘ONEVA PHARMACY FLAG’ for each division. After pressing the return key, the next division will display until the ‘LOOP ENDED!’ message displays.

9. Enter <ON> for each division press <ENTER> as displayed in the example for a test VistA instance in the following image.

#### **OneVA Pharmacy Flag: Loop Command Example**

```
INPUT TO WHAT FILE: DRUG// 59 OUTPATIENT SITE (5 entries)
EDIT WHICH FIELD: ALL// 3001 ONEVA PHARMACY FLAG
THEN EDIT FIELD:

Select OUTPATIENT SITE NAME: ^LOOP
EDIT ENTRIES BY: NAME// 
START WITH NAME: FIRST// 

CHEYENNE VAM&ROC 442
ONEVA PHARMACY FLAG: ON ON

CHYSHR TEST LAB 983
ONEVA PHARMACY FLAG: ON// ON

FORT COLLINS CLINIC 442GC
ONEVA PHARMACY FLAG: ON ON

GREELEY CLINIC 442GD
ONEVA PHARMACY FLAG: ON ON

OneVA Pharmacy 983 Inactive as of: May 7, 2016
ONEVA PHARMACY FLAG: ON// ON

SIDNEY CLINIC 442GB
ONEVA PHARMACY FLAG: ON ON

LOOP ENDED!
```

## Data Flows

### Use Case: View Orders

When the Pharmacist enters a request to display the Medication Profile view from a dispensing VistA instance, a query message is sent to eMI. eMI will harvest the necessary information to send a request to the HDR/CDS Repository for the patient's prescriptions. The response is transformed into another message that contains the patient's prescription data. The patient's prescription data is returned to the dispensing VistA instance and displayed on the Medication Profile screen on VistA. This process is referred to as the OneVA Pharmacy View Orders Use Case.

The 'View Orders' Use Case describes the process for users to view all of a patient's active, suspended, on hold, discontinued, or expired prescription orders. This process allows a user to view prescription order information in one place whether the order originated from a dispensing or host VistA instance.



The OneVA Pharmacy's feature to query the HDR/CDS Repository (step 2 in the flow of events) will not execute if the patient has not been treated at more than one VA Medical Center.

#### Actors

- User (e.g. Pharmacist)
- Dispensing VistA Instance
- HDR/CDS Repository
- eMI ESB (proxy to host VistAs)

#### Pre-Conditions

- Patient must have an Integration Control Number (ICN)
- Patient must have information populated in the system
- User must have accessed the 'RX (PRESCRIPTIONS) [PSO RX]' menu within VistA and hold the appropriate security keys for their user role, such as PSORPH to identify the user as a Pharmacist. (No separate Security Key required.).

#### Flow of Events

1. User enters the Medication Profile view.
2. The dispensing VistA instance will retrieve the prescriptions from HDR/CDS Repository.
3. The dispensing VistA instance will send a request via the eMI ESB to the HDR/CDS Repository with the patient identifiers to retrieve the prescriptions with a status of '**Suspended**', '**Active**', '**Hold**', "**Discontinued** (within the past 120 days)" or "**Expired** (within the past 120 days)" from all previous treatment facilities **excluding** local facility.

4. The eMI ESB will exclude the Clinical Data Health Care Repository/Department of Defense (CHDR/DoD) prescriptions that are available in the HDR/CDS Repository for active dual patients.

### Exceptions

- 2a. Patient Not Found
- 2b. Patient Found, No Prescription Records
- 2c. eMI ESB is not accessible.
- 2d. HDR/CDS Repository is not accessible.
- 2e. Multiple Patients Found
- 3a. Patient Found, No Prescription Records Matching Filter

### System Message

- 1a. Please wait. Checking for prescriptions at other VA Pharmacy locations. This may take a moment...
- 1b. Eligibility: RX PATIENT STATUS: OPT NSC
- 2a. Patient Identifier Not Found
- 2b. Patient Found with no Prescription Records
- 2c. The system is down or not responding. Press RETURN to continue.
- 2d. The RX Database is not Responding to the Request
- 2d. The RX Database responded with an error
- 2e. Multiple Patient Matches Found – Correct MVI (note: MVI is the Master Veteran Index. Please know the acronym is not spelled out in the error message.)
- 3a. Patient Found with no Prescription Records Matching Search Criteria

## **Use Case: Dispense Order from another VA Pharmacy Location**

When a Pharmacist selects a prescription from the Medication Profile screen on a dispensing VistA instance (to refill a prescription for a Veteran visiting this location), an HL7 ‘Pharmacy Treatment Dispense’ message transmits via eMI. eMI will receive the request, determine the destination facility, and forward the message to the host VistA instance. The host VistA instance will process the message, decrement the number of refills remaining, update the last fill date, and if a partial request, update the partial information. The host VistA will create an HL7 message (Prescription Refill/Partial Services Response) which contains the prescription label information. eMI will route the HL7 message back to the dispensing VistA instance, displaying the completion of the transaction to the Pharmacist on the screen. The Medication Profile view refreshes by executing the View Order Use Case again. The refilling or partial filling of a prescription order is referred to as the OneVA Pharmacy Dispense Order from another VA Pharmacy Location Use Case.

The ‘Dispense another VA Pharmacy Order’ Use Case describes the process for users to dispense an order that originated from another VA Pharmacy location. Once the user executes the View Order Use Case, the user can select an active prescription from the Medication Profile view that originated in another VA Pharmacy VistA instance to dispense. After selecting the prescription and executing the fill order request, the system will send a message to the originating host VistA instance. This request will decrement the prescription count, but will not affect the inventory of the host facility. When the decrement is successful, communication is made back to the dispensing VistA instance to complete the process and to print a prescription label.

### Actors

- User (e.g. Pharmacist)
- Dispensing VistA Instance
- eMI ESB
- Host VistA Instance

### Pre-Conditions

- Patient must have an ICN.
- Patient must have information populated in the system
- Dispensing VistA instance has the required amount of prescribed medication inventory on-hand.
- User must have accessed the ‘RX (PRESCRIPTIONS) [PSO RX]’ menu within VistA and hold the appropriate security keys for their user role, such as PSORPH to identify the user as a Pharmacist. (No separate Security Key required.).

### Flow of Events

1. User selects a prescription that originated from another VA Pharmacy VistA instance and RF (Refill) from the Medication Profile view.
2. The prescription must be in ‘Active’ status.
3. The dispensing VistA instance will send a refill order request to the eMI ESB.
4. The eMI ESB will route the refill order request to the host VistA instance.
5. The host VistA will conduct order checks.
  - a. The host VistA will update the prescription order and decrement refills.
  - b. The host VistA will create a prescription label.
6. The dispensing VistA instance will dispense medication.
7. The dispensing VistA instance will print the label to the dispensing location printer.

### Alternate Flow

1. User selects a prescription that originated from another VA Pharmacy VistA instance and PF (Partial fill) from the Medication Profile view.

2. The prescription must be in 'Active' status.
3. The dispensing VistA instance will send a partial fill order request to the eMI ESB.
4. The eMI ESB will send a partial fill order request to the host VistA instance.
5. The host VistA will conduct order checks.
  - a. The host VistA will update the prescription order and update partial fill date.
  - b. The host VistA will create a prescription label.
6. The dispensing VistA instance will dispense medication.
7. The dispensing VistA instance will print the label to the dispensing location printer.

#### Exceptions

- 2. Status is not 'Active'
- 3a. eMI ESB is not accessible.
- 4a. The host VistA is not accessible
- 4b. The prescription is a controlled substance
- 5a. The host VistA instance fails the order.

#### System Message

- 1a. Please wait. Checking for remote prescriptions. This may take a moment...
- 1b. Eligibility: RX PATIENT STATUS: OPT NSC//
- 2. Only 'ACTIVE' remote prescriptions may be actioned at this time.
- 3a. The system is down or not responding. Press RETURN to continue.
- 3b. Invalid HL7 Data Format
- 4a. The system is down or not responding. Could not query other VA Pharmacy locations. Press RETURN to continue.
- 4b. Cannot refill Rx# xxxxxxx. This is a controlled substance.
- 5a. The following are the various standard system messages that could display
  - \*\*\* Drug is inactive for Rx # xxxxxxx cannot be refilled \*\*\*" (refill prescription not allowed on inactive drugs)
  - Can't refill Rx # xxxxxxx it is not for this patient.
  - Cannot refill, Rx is discontinued or expired. Later Rx may exist.
  - Can't refill, no refills remaining.
  - This drug has been changed, No refills allowed.
  - The system is down or not responding. Could not query other VA Pharmacy locations. Press RETURN to continue.
  - The system is down or not responding. The other VA Pharmacy location has not installed the OneVA Pharmacy functionality.
  - The system is down or not responding. The other VA Pharmacy location has installed the OneVA Pharmacy software, but is currently not accepting refill or partial fill request.

## **Use Case: OneVA Pharmacy Prescription Report**

The 'OneVA Pharmacy Prescription Report' Use Case allows the user to access reports related to the orders created from the OneVA Pharmacy process. Once the user executes the OneVA Pharmacy Prescription Report Use Case, the user can generate three different reports. The

reports allow the user to view prescriptions filled by another VA Pharmacy location or what other VA Pharmacy locations filled prescriptions for a targeted facility.

#### Actors

- User (e.g., Pharmacist)
- Dispensing VistA Instance

#### Pre-Conditions

- User has accessed the OneVA Pharmacy Prescription Report [PSO REMOTE RX REPORT] menu
- User must have accessed the ‘RX (PRESCRIPTIONS) [PSO RX]’ menu within VistA and hold the appropriate security keys for their user role, such as PSORPH to identify the user as a Pharmacist. (No separate Security Key required.)

#### Flow of Events

1. User selects a report option from the ‘OneVA Pharmacy Prescription Report’ menu.
  - a. User selects ‘Prescriptions we have filled for other facilities’ report.
  - b. User selects ‘Our prescriptions, filled by other facilities’ report.
  - c. User selects ‘All activity for Other VA Pharmacy locations’ report
2. User selects ‘D’ – ‘Date Range’ or go to step 3 or step 4
  - a. User enters start date.
  - b. User enters end date.
3. User selects ‘P’ - ‘Patient’ or go to step 4.
  - a. User enters Patient Name
4. User selects ‘S’ - ‘Site’.
  - a. User enters Institution Name.

#### Alternate Flow

- N/A

#### Exceptions

- N/A

#### System Message

- N/A

## **User Access Levels**

To access the OneVA Pharmacy software the user must have access to the ‘RX (PRESCRIPTIONS) [PSO RX]’ menu within VistA and hold the appropriate security keys for their user role, such as PSORPH to identify the user as a Pharmacist. (No separate Security Key required.).

## Continuity of Operation

### New OneVA Pharmacy Checking for Prescriptions Message

The OneVA Pharmacy software uses a new service call to the HDR/CDS Repository each time the Medication Profile view activates via the ‘PATIENT PRESCRIPTION PROCESSING [PSO LM BACKDOOR ORDERS]’ menu. This new service call activates if the patient has been treated at more than one VA Medical Center. This additional service call retrieves all prescriptions associated with the patient from the repository, which requires additional time. In order to execute the query to the HDR/CDS Repository, the user must answer ‘YES’ to the ‘Would you like to query prescriptions from other OneVA Pharmacy locations?’ prompt and displayed in the following image.

#### Query Prescription from other OneVA Pharmacy Locations Prompt

Would you like to query prescriptions from other OneVA Pharmacy locations? NO//

The user will receive the following message while the query processes:

#### OneVA Pharmacy Checking for Prescriptions Message

Please wait. Checking for prescriptions at other VA Pharmacy locations. This may take a moment...

**i** The OneVA Pharmacy’s feature to query the HDR/CDS Repository will not execute if the patient has only one entry in the ‘TREATING FACILITY LIST (#391.91)’. Prior to validating the ‘TREATING FACILITY LIST’ entries, the process filters on the following list of valid facility types: VAMC, M&ROC, M&ROC(M&RO), OC, OPC, CBOC, PRRTP, DOM, HCS, MC(M), MC(M&D), MORC, NHC, VANPH, SOC, SARRTP.

If there are not two or more valid entries, the system will not display the ‘Executing OneVA Pharmacy Query Message’ listed in the figure above nor will medications that originated from another VA Pharmacy location display on the Medication Profile view.

### New OneVA Pharmacy System Down or Not Responding Message

**i** The system identifies and queries the HDR/CDS Repository for all the prescriptions that are active, suspended, on hold, expired (within 120 days), or discontinued (within 120 days). If the connection fails, the system is down message will display as shown in the following image.

## OneVA Pharmacy System Not Responding Message

The system is down or not responding. Could not query prescriptions at other VA Pharmacy locations.  
Press RETURN to continue:



Contact local support if this problem persists.



When the system is down message displays, the VistA session will continue to display the local/dispensing sites prescriptions on the Medication Profile view. There will be no indication if a patient is registered or has prescriptions on other sites (i.e., remote site prescriptions will not display on the Medication Profile view.)

## OneVA Pharmacy Patient Found No Rx's Informational Message



The system identifies and queries the HDR/CDS Repository but if the patient does not have any prescription records from other VA Pharmacy locations, matching the search criteria, the following informational message displays:

### Informational Message Patient Exists but Has No Remote Prescriptions

When trying to query prescriptions at other VA Pharmacy Locations the following message was encountered:  
\*\*\*  
PATIENT FOUND WITH NO PRESCRIPTION RECORDS MATCHING SEARCH CRITERIA  
\*\*\*  
Press RETURN to continue:

## Getting Started

### Logging On

The OneVA Pharmacy patch is an enhancement to the VistA ‘PHARMACY [PS MENU]’ > ‘OUTPATIENT PHARMACY’ package. To access the application, the user must enter access and verify codes to login.

## **System Menu**

The OneVA Pharmacy patch is an enhancement to the VistA ‘PHARMACY [PSO MENU]’ > ‘OUTPATIENT PHARMACY MANAGER [PSO MANAGER]’ > ‘RX (PRESCRIPTION) [PSO RX]’ menu. The user must have access to these menus in order to execute the OneVA Pharmacy software.

## **Changing User ID and Password**

The OneVA Pharmacy feature occurs fully within the context of VistA and as such relies on the pre-existing procedures to log in and change the user password.

## **Exit System**

The OneVA Pharmacy feature occurs fully within the context of VistA and as such relies on the pre-existing functionality to exit the system. The VistA application will also close if the user is inactive.

## **Caveats and Exceptions**

### **Label Reprinting**

The OneVA Pharmacy patch retrieves the prescription information for the label from the host site and transmits the data back to the dispensing site for printing. As of this writing, there is no ‘REMOTE REPRINT’ option available for OneVA Pharmacy orders. The ‘REPRINT’ action is not operational for the OneVA Pharmacy refills or partials, however, plans are being made to release a new action option as part of the OneVA Pharmacy Phase II initiative.

In order to reprint a label due to a paper jam, a malfunction of the printer, or the need to label multiple packages like inhalers, it is suggested to use the OneVA Pharmacy ‘[Partial Fill Prescription Order](#)’ process and perform the transaction again.

### **Target VistA Time Out Awaiting Reply Message**

OneVA Pharmacy remote refill and remote partial fill actions at times receives the following exception message:

MESSAGE SENT TO TARGET VISTA; TIME OUT AWAITING REPLY

Press RETURN to continue:

The user pressed RETURN and must execute the transaction steps for a second time. If the user repeats the transaction, the process successfully executes.

## **Host Site OneVA Pharmacy Flag Not Set On**

As stated in the '[Systems Configuration](#)' section of this document, if the 'ONEVA PHARMACY FLAG (#3001)' is not set to the 'on' state at the host site, the dispensing site will receive the following message:

The OneVA Pharmacy flag is turned 'OFF' at this facility. Unable to process refill/partial fill requests. Queries will NOT be made to other VA Pharmacy locations.

## **Using the Software**

### **Patient Prescription Processing [PSO LM BACKDOOR ORDERS]**

#### **Selecting a Patient**

Sign-in to the VistA system and select the menu option:

PATIENT PRESCRIPTION PROCESSING [PSO LM BACKDOOR ORDERS]

1. Enter a patient identifying information at the 'Select PATIENT NAME:' prompt.

#### **Select PATIENT NAME Prompt**

Select PATIENT NAME: PSOPATIENT,SIX

**i** The process for selection a patient is unchanged. The system responds with the patient name, date of birth, and other patient information.

2. Press <ENTER> if this is the correct patient.

#### **Patient Found Press RETURN to Continue Prompt**

Select PATIENT NAME: PSOPATIENT,SIX 2-13-61 666012136 NO  
NSC VETERAN

No Patient Warnings on file for PSOPATIENT,SIX.

Press RETURN to continue...

3. Press <ENTER> if the 'Allergy Assessment' message is received:

## Allergy Assessment Message

```
PSOPATIENT,SIX (666-01-2136)
No Allergy Assessment!
```

Press Return to continue:

## View Order Rx's from Other VA Pharmacy Locations

The system begins to execute the OneVA Pharmacy query for prescriptions from all other VA Pharmacy locations if it meets the conditions documented in the '[Continuity of Operation](#)' section of this document.

4. Press <ENTER> and accept the default of 'Yes' at the 'Query Prescription from other OneVA Pharmacy locations' prompt.

### Query Prescription from other OneVA Pharmacy Locations Prompt

```
Would you like to query prescriptions from other OneVA Pharmacy
locations? YES//
```

After entering yes, the 'OneVA Pharmacy Checking for Prescriptions' information message displays.

The system will display the checking for prescriptions message as shown in the following image.

### Executing OneVA Pharmacy Query Message

```
Please wait. Checking for prescriptions at other VA Pharmacy locations. This may
take a moment...
```

 The OneVA Pharmacy's feature to query the HDR/CDS Repository will not execute if the patient has only one entry in the 'TREATING FACILITY LIST (#391.91)'. Prior to validating the 'TREATING FACILITY LIST' entries, the process filters on the following list of valid facility types: VAMC, M&ROC, M&ROC(M&RO), OC, OPC, CBOC, PRRTP, DOM, HCS, MC(M), MC(M&D), MORC, NHC, VANPH, SOC, SARRTP.

If there are not two or more valid entries, the system will not display the ‘Executing OneVA Pharmacy Query Message’ listed in the figure above nor will medications that originated from another VA Pharmacy location display on the Medication Profile view.

 The system identifies and queries the HDR/CDS Repository for all the prescriptions that are active, suspended, on hold, expired (within 120 days), or discontinued (within 120 days). If the connection fails, the system is down message will display as shown in the following image.

### **System is Down or Not Responding Exception Message**

```
The system is down or not responding. Could not query prescriptions at other VA
Pharmacy locations.
Press RETURN to continue:
```



[Contact local support](#) if this problem persists.

 When the system is down message displays, the VistA session will continue to display the local/dispensing sites prescriptions on the Medication Profile view. There will be no indication if a patient is registered or has prescriptions on other sites (i.e., remote site prescriptions will not display on the Medication Profile view.)

Press <ENTER> if the ‘system is down’ message displays.

As mentioned in the ‘[Systems Summary](#)’ section, the OneVA Pharmacy program was an initiative from the grassroots Innovation Program. As such, development requirements were limited, and specific software areas were to remain untouched; kept ‘as-is’.

An example can be found in the following figure where the original ‘REMOTE PRESCRIPTION AVAILABLE – DISPLAY REMOTE DATA’ prompt still remains. The user bypasses the display of remote data once the OneVA Pharmacy patch is available by entering ‘No’.

5. Enter <N> to accept the ‘Display Remote Data? N//’ prompt.
6. Press <ENTER> to accept the default or enter a valid status code change to the status.

### Patient Status Message: Update or Press RETURN to Continue Prompt

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

Eligibility:
RX PATIENT STATUS: OUTPT NON-SC//
```

### Patient Information View

After selecting a patient, the system displays the first page of the ‘Patient Information’ view.

7. Press <ENTER> to continue to the second page of the ‘Patient Information’ view.

### Medication Profile View

8. Press <ENTER> to continue to the ‘Medication Profile’ view.

The ‘Medication Profile’ view lists all prescriptions that originated at the dispensing Pharmacy first, followed by ‘[Non-VA MEDS \(Not Dispensed by VA\)](#)’, then by the prescriptions retrieved from the HDR/CDS Repository that originated at other VA Pharmacy locations. The prescriptions originating from other VA Pharmacy locations display under a divider header line showing the site name, site number, and status.

The first page of the Medication Profile view, in the example displayed in the following image, displays the ‘dispensing site’ (aka ‘local’) prescription orders. The divider heading displays ‘ACTIVE’ and includes the ‘Active’, ‘Suspended’, and ‘Expired’ medications (no changes were made to this format), followed by the orders listed as ‘Discontinued’ medications, then prescriptions in the ‘Hold’ status.

The following image also shows the divider heading for the first ‘other’ VA Pharmacy location site and displays: ‘DAYTON (552) ACTIVE’.

### Medication Profile (Page 1 of 3) Example (Remote Rx)

Medication Profile		Jul 28, 2016@05:20:23	Page:	1 of	3
PSOPATIENT,SIX		<NO ALLERGY ASSESSMENT>			
PID: 666-01-2136		Ht(cm): _____ (_____)			
DOB: FEB 13,1961 (55)		Wt(kg): _____ (_____)			
SEX: FEMALE		CrCL: <Not Found>		BSA (m2): _____	
# RX #	DRUG	QTY	ST	ISSUE DATE	LAST REF DAY
				FILL	REM SUP
<hr/> -----ACTIVE-----					
1 10000126	FLUTICAS 100/SALMETEROL 50 INHL DISK	60	E>	06-01 02-02	11 45
			Qty:	2	
2 10000128	NIACIN 250MG TAB			270 S>	06-08 08-27 2 90
3 10000122	RAMIPRIL 5MG CAP			30 A>	05-31 05-31 8 30
<hr/> -----DISCONTINUED-----					
4 10000125	HYDROCHLOROTHIAZIDE 25MG TAB			60 DC>	02-01 02-02 5 60
<hr/> -----HOLD-----					
5 10000127	LISINOPRIL 2.5MG TAB			90 H>	03-10 - 3 90
<hr/> -----DAYTON (552) ACTIVE-----					
+ Enter ?? for more actions					
PU Patient Record Update		NO	New Order		
PI Patient Information		SO	Select Order		
Select Action: Next Screen//					

9. Press <ENTER> to continue to the next ‘Medication Profile’ view.

Page 2 of the Medication Profile view, in the example displayed in the following image, displays the ‘Active’, ‘Discontinued’, prescriptions in the ‘Hold’ status, and ‘Suspended’ medications for the ‘DAYTON (552)’ site.

The following image also shows the divider heading for the second ‘other’ VA Pharmacy location site and displays: ‘DAYTSHR TEST LAB (984) ACTIVE’.

## Medication Profile (Page 2 of 3) Example (Remote Rx)

<u>Medication Profile</u>		Jul 28, 2016@05:20:46	Page:	2 of 3
PSOPATIENT,SIX		<NO ALLERGY ASSESSMENT>		
PID: 666-01-2136		Ht(cm): _____ (_____)		
DOB: FEB 13,1961 (55)		Wt(kg): _____ (_____)		
SEX: FEMALE		BSA (m2): _____		
CrCL: <Not Found>				
#	RX #	DRUG	ISSUE QTY ST DATE	LAST REF DAY FILL REM SUP
+				
6	2718399	IBUPROFEN 800MG TAB	30 A 06-09	07-19 0 10
7	2718383	OMEPRAZOLE 10MG SA CAP	30 A 02-02	06-10 11 30
8	2718397	VERAPAMIL HCL 120MG TAB	60 A 06-15	06-15 5 60
		-----DAYTON (552) DISCONTINUED-----		
9	2718398	ASPIRIN 325MG BUFFERED TAB	300 DC 03-15	03-15 2 90
		-----DAYTON (552) HOLD-----		
10	2718400	ALBUTEROL 0.5% INHL SOLN	2 H 06-09	- 1 14
		-----DAYTON (552) SUSPENDED-----		
11	2718401	CALCIUM GLUCONATE 500MG TAB	30 S 05-25	07-14 3 30
		-----DAYTSHR TEST LAB (984) ACTIVE-----		
+ Enter ?? for more actions				
PU	Patient Record Update	NO	New Order	
PI	Patient Information	SO	Select Order	
Select Action: Next Screen//				

10. Press <ENTER> to continue to the next ‘Medication Profile’ view.

Page 3 of the Medication Profile view, in the example displayed in the following image, displays the ‘Active’, ‘Discontinued’, prescriptions in the ‘Hold’ status, and ‘Suspended’ medications for the ‘DAYTON (552)’ site.

The following image also shows the divider heading for the second ‘other’ VA Pharmacy location site and displays: ‘DAYTSHR TEST LAB (984) ACTIVE’.

### Medication Profile (Page 3 of 3) Example (Remote RxS)

Medication Profile		Jul 28, 2016@05:16:31	Page:	3 of 3
PSOPATIENT,SIX		<NO ALLERGY ASSESSMENT>		
PID: 666-01-2136		Ht(cm): _____ (_____)		
DOB: FEB 13,1961 (55)		Wt(kg): _____ (_____)		
SEX: FEMALE		BSA (m2): _____		
CrCL: <Not Found>		ISSUE LAST REF DAY		
#	RX #	DRUG	QTY	ST DATE FILL REM SUP
12	2718902	BANDAGE, GAUZE, ROLLER 2 IN X 6 YD	3	A 04-19 04-19 9 29
13	2718744	OMEPRAZOLE 10MG SA CAP	60	A 05-03 05-03 5 60
-----DAYTSHR TEST LAB (984) DISCONTINUED-----				
14	2718745	QUINAPRIL 20MG TAB	30	DC 03-04 03-04 11 30
-----DAYTSHR TEST LAB (984) EXPIRED-----				
15	2718746	AMOXICILLIN 250MG CAP	30	E 06-01 05-04 0 10
-----DAYTSHR TEST LAB (984) HOLD-----				
16	2718747	CETIRIZINE HCL 10MG TAB	45	H 04-23 - 4 45
-----DAYTSHR TEST LAB (984) SUSPENDED-----				
17	2718748	TRAZODONE HCL 50MG TAB	90	S 04-05 06-24 2 90
Enter ?? for more actions				
PU	Patient Record Update	NO	New Order	
PI	Patient Information	SO	Select Order	
Select Action: Quit//				

### **Medication Profile View Example with 'Non-VA MEDS'**

The 'Medication Profile' views, displayed in the following two images, show the format when 'Non-VA MEDS (Not Dispensed by VA)' are available. The dispensing site prescriptions display first, followed by the 'Non-VA MEDS (Not Dispensed by VA)', then by prescriptions that originated from other VA Pharmacy locations.

## Medication Profile (Page 1 of 2) Example (Non-VA MEDS)

<u>Medication Profile</u>		Jul 28, 2016@11:01:57	Page: 1 of 3					
PSOPATIENT, SEVEN								<A>
PID: 666-79-4147			Ht(cm):	177.80	(08/05/2010)			
DOB: JUL 31,1950 (65)			Wt(kg):	95.91	(01/10/2011)			
SEX: MALE		Non-VA Meds on File	Last entry on	08/05/10				
CrCL: 64.0 (est.) (CREAT:1.30mg/dL 1/10/11)			BSA (m2):	2.14				
# RX #	DRUG		ISSUE	LAST	REF	DAY		
			QTY	ST	DATE	FILL	REM	SUP
-----ACTIVE-----								
1 2297756	ASPIRIN 325MG EC TAB		90	S>	03-07	04-11	2	45
2 2297782	BALSALAZIDE DISODIUM 750MG CAP		30	A>	04-25	04-25	11	30
3 2297789	CALCIUM POLYCARBOPHIL 625MG TAB		30	A>	05-09	05-09	11	30
4 2297787	CETIRIZINE HCL 5MG TAB		30	A>	05-03	05-03	4	30
5 2297825	HCTZ 50/TRIAMTERENE 75MG TAB		30	A>	02-02	02-03	11	30
6 2297790	TRAZODONE HCL 50MG TAB		15	A>	05-09	06-09	10	30
-----DISCONTINUED-----								
7 2297758	ATORVASTATIN CALCIUM 20MG TAB		30	DC>	02-01	02-01	11	30
8 2297785	FLUTICASONE PROP 50MCG 120D NASAL INHL			DC>	04-27	04-27	1	30
+ Enter ?? for more actions								
PU Patient Record Update		NO New Order						
PI Patient Information		SO Select Order						
Select Action: Next Screen//								

## Medication Profile (Page 2 of 2) Example (Non-VA MEDS)

<u>Medication Profile</u>		Jul 28, 2016@10:52:26	Page: 2 of 3					
PSOPATIENT, SEVEN								<A>
PID: 666-79-4147			Ht(cm):	177.80	(08/05/2010)			
DOB: JUL 31,1950 (65)			Wt(kg):	95.91	(01/10/2011)			
SEX: MALE		Non-VA Meds on File	Last entry on	08/05/10				
CrCL: 64.0 (est.) (CREAT:1.30mg/dL 1/10/11)			BSA (m2):	2.14				
# RX #	DRUG		ISSUE	LAST	REF	DAY		
+			QTY	ST	DATE	FILL	REM	SUP
+ Enter ?? for more actions								
Qty: 2								
-----HOLD-----								
9 2297759	IBUPROFEN 800MG TAB		90	H>	02-01	-	11	30
-----Non-VA MEDS (Not dispensed by VA)-----								
ASCORBIC ACID 500MG TAB 500MG ONCE DAILY			Date Documented:	08/05/10				
ASPIRIN 81MG EC TAB 81MG ONCE DAILY			Date Documented:	08/05/10				
CALCIUM 250MG/VITAMIN D 125 UNT TAB ONE TABLET AS DIRECTED			Date Documented:	08/05/10				
CHONDROITIN/GLUCOSAMINE CAP/TAB ONE TAB ONCE DAILY			Date Documented:	08/05/10				
+ Enter ?? for more actions								
PU Patient Record Update		NO New Order						
PI Patient Information		SO Select Order						
Select Action: Next Screen//								

## **Dispense (Local) Order Originating from Dispensing (Local) Site**

The dispensing process for filling a prescription order that originated locally from the dispensing site was unaffected by the OneVA Pharmacy patch.

The software still provides access to all previously available actions – no changes were made to the action options related to the dispensing/local prescription refill process. To refill a prescription, the action id is ‘RF’. The action option to execute a partial fill for a prescription order is ‘PR’.

The following lists all action options available from the ‘OP Medication Profile’ view.

### **Action Options for Local/Dispensing Orders**

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

Enter RETURN to continue or '^' to exit:

## **Dispense Rx Order from another VA Pharmacy Location**

The ‘Medication Profile’ view displays both the dispensing Pharmacy’s medications that originated on the local VistA instance followed by the prescriptions originating from other VA Pharmacy locations.

In the example that follows, there are no prescriptions for the patient at the dispensing site. The message ‘<No local prescriptions found>’ displays before the first divider header.

## Medication Profile view with no 'local' Prescriptions (Remote Rx's Only)

Medication Profile	Jul 27, 2016@10:11:28	Page: 1 of 1			
PSOPATIENT,SIX	<NO ALLERGY ASSESSMENT>				
PID: 666-01-2136	Ht(cm): _____ (_____)				
DOB: FEB 13, 1961 (55)	Wt(kg): _____ (_____)				
SEX: FEMALE	BSA (m <sup>2</sup> ): _____				
CrCL: <Not Found>	ISSUE DATE	LAST REF DATE			
# RX #	DRUG	QTY ST	FILL REM SUP		
<No local prescriptions found.>					
--DATISHR TEST LAB (984) ACTIVE---					
1 2718861	CETIRIZINE HCL 10MG TAB	30 A	05-21	07-07	7 30
2 2718863	HYDRALAZINE HCL 25MG TAB	60 A	05-11	05-11	5 60
3 2718862	IBUPROFEN 800MG TAB	60 A	05-31	05-31	11 30
Enter ?? for more actions					
PU Patient Record Update	NO New Order				
PI Patient Information	SO Select Order				
Select Action: Quit//					

To access prescriptions originating on other sites, the same process is used.

1. The user can either enter <SO> and press <ENTER> at the 'Select Action' prompt or use the short cut feature to enter <3> and press <ENTER> as displayed in the following image.

### Select Action 'SO' and Select Order by number Prompts Example

```
Select Action: Quit// SO  Select Order
Select Orders by number: (1-3): 3
```

The system displays the REMOTE OP Medications view.



For the following example, note the two data fields:

- Refills
  - Last Fill Date
2. Press <ENTER> to continue.

During the remote refill or partial fill of a prescription order that originated from another VA Pharmacy location, the number of refills remaining is decremented by one and the last refill date

is updated with the current date on the host VistA. In the example displayed in the following image, the patient has '11' refills remaining and the last refill date was '05/31/16'.

### Remote OP Medications view for a prescription

REMOTE OP Medications (ACTIVE) Jul 27, 2016@10:12:37		Page: 1 of 1
PSOPATIENT,SIX <NO ALLERGY ASSESSMENT>		
PID: 666-01-2136	Ht(cm): _____ (_____)	
DOB: FEB 13,1961 (55)	Wt(kg): _____ (_____)	
SEX: FEMALE	BSA (m <sup>2</sup> ): _____	
CrCL: <Not Found>		
Site #: 984(DAYTSHR TEST LAB)		
Rx #: 2718862		
Drug Name: IBUPROFEN 800MG TAB		
Days Supply: 30		
Quantity: 60		
Refills: 11		
Expiration Date: 06/01/17		
Issue Date: 05/31/16		
Stop Date: 06/01/17		
Last Fill Date: 05/31/16		
Sig: TAKE ONE TABLET BY MOUTH TWICE A DAY AS NEEDED --TAKE WITH FOOD IF GI UPSET OCCURS/DO NOT CRUSH OR CHEW--		
Enter ?? for more actions		
RF Refill Rx from Another VA Pharmacy PR Partial		
Select Action:Quit//		

For prescription orders that originated from other VA Pharmacy locations, the dispensing Pharmacy only has two actions available. They are:

- [RF Refill Remote Order](#)
- [PR Partial](#)

### Refill Prescription Order

1. Enter <RF> and press <ENTER> at the Select Action prompt as shown in the following image.

### Remote OP Medication RF Refill Action Item Example

Select Action:Quit// RF
-------------------------

The system confirms the action selected by showing Refill Remote Order on the prompt line as displayed in the following image.

## Remote OP Medication RF Refill Action Item Results Example

```
Select Action:Quit// RF    Refill Rx from Another VA Pharmacy
```

The system then checks for a local drug that matches the remote drug description and if found, displays a question asking the user if the matched drug is acceptable. The prompt is expecting a ‘Yes’ or ‘No’ response. The system provides ‘No’ as the default, as displayed in the following image. In order to process the refill, the user enters ‘Yes’.



For various reasons, there may not be a one to one match of the drug matching between the host and the dispensing sites therefore the message displayed in the following image may change. Follow this [LINK](#) to the ‘Drug Matching’ section for drug matching messages, prompts, and instructions.

## Remote Drug Match Response Example

```
Remote site drug name: IBUPROFEN 800MG TAB
Matching Drug Found for Dispensing: IBUPROFEN 800MG TAB
Would you like to use the system matched drug for this
refill/partial fill? NO//
```

2. Press <ENTER> to continue.

The system displays the processing refill request message as shown in the following image.

## Remote Refill Processing Message

```
Processing refill request. Please be patient as it may take a moment
for the host site to respond and generate your label data...
```

The system completes the remote refill process and generates the label data for printing. The ‘LABEL DEVICE’ message displays as shown in the following image.

## Label Device Prompt

```
TRANSACTION SUCCESSFUL... The refill for RX #763002 has been recorded on
the prescription at the host system.

Select a printer to generate the label or '^' to bypass printing.
```

QUEUE TO PRINT ON  
DEVICE:

The user enters the dispensing site printer information to print the label.



**IMPORTANT:** The OneVA Pharmacy requires stock prescription labels and a laser printer that is accessible at the Select LABEL DEVICE: prompt. If either one of the requirements are lacking, then the label will not print as programmed.



**IMPORTANT:** If the user enters an “^” at the Select LABEL DEVICE: prompt, the prescription label will not be printed and at this time. There is no way to do a reprint of the refill or partial fill label.

The label prints and the system displays a message to indicate the prescription order process completed as shown in the following image.

#### **Successful Refill Status Message**

Rx # 2718862 refilled.  
Press RETURN to continue:

3. Press <ENTER> to continue.

The system displays a message informing that the prescription list is updating. The background process is executing the '[View Order Use Case](#)' and retrieving the updated information about the patient's prescription orders from the HDR/CDS Repository.

The system displays the following message while the query to the HDR/CDS Repository is executing.

#### **System Message: Updating Prescription Order List**

Updating prescription order list...

The system will retrieve all prescriptions from the HDR/CDS repository and redisplay the Medication Profile view showing the updated prescription information.

In the following image the example shows the last refill date has been updated to be '07/27' and the refills remaining is now set to '10'.

### Refill Successful: Medication Profile View Updated

Medication Profile	Jul 31, 2016@17:01:07	Page: 1 of 1
PSOPATIENT,SIX	<NO ALLERGY ASSESSMENT>	
PID: 666-01-2136	Ht(cm):	(_____)
DOB: FEB 13,1961 (55)	Wt(kg):	(_____)
SEX: FEMALE	BSA (m <sup>2</sup> ): _____	
CrCL: <Not Found>	ISSUE DATE	LAST REFILL DATE
# RX # DRUG	QTY ST	DAY REM SUP
<No local prescriptions found.>		
-----DAYTSHR TEST LAB (984) ACTIVE-----		
1 2718861 CETIRIZINE HCL 10MG TAB	30 A 05-21	07-07 7 30
2 2718863 HYDRALAZINE HCL 25MG TAB	60 A 05-11	05-11 5 60
3 2718862 IBUPROFEN 800MG TAB	60 A 05-31	07-27 10 30

### Partial Fill Prescription Order

1. Enter <PR> and press <ENTER> at the Select Action prompt as shown in the following image.

### Remote OP Medication PR Partial Action Item Example

Select Action:Quit// PR Partial
---------------------------------

The system checks for a local drug that matches the remote drug description. If the system matches the drug, a 'Yes' or 'No' prompt displays. The system provides 'No', as the default, as displayed in the following image. In order to fill this partial prescription, order the user enters 'Yes'.



For various reasons, there may not be a one to one match of the drug matching between the host and the dispensing sites therefore the message displayed in the following image may change. Follow this [LINK](#) to the 'Drug Matching' section for drug matching messages, prompts, and instructions.

### **Remote Drug Match Response Example**

```
Remote site drug name: CETIRIZINE HCL 10MG TAB
Matching Drug Found for Dispensing: CETIRIZINE HCL 10MG TAB
Would you like to use the system matched drug for this
refill/partial fill? NO//
```

2. Enter <Y> and press <ENTER>.

The system displays ‘YES’ and the ‘Enter Quantity’ prompt displays as shown in the following image.

### **Partial Fill Example: Quantity**

```
Remote site drug name: CETIRIZINE HCL 10MG TAB
Matching Drug Found for Dispensing: CETIRIZINE HCL 10MG TAB
Would you like to use the system matched drug for this
refill/partial fill? NO// YES
Enter Quantity:
```

3. Enter <10> and press <ENTER>.

The system displays ‘10’ and the ‘DAYS SUPPLY’ prompt displays as shown in the following image.

### **Partial Fill Example: Days Supply**

```
Remote site drug name: CETIRIZINE HCL 10MG TAB
Matching Drug Found for Dispensing: CETIRIZINE HCL 10MG TAB
Would you like to use the system matched drug for this
refill/partial fill? NO// YES
Enter Quantity: 10
DAYS SUPPLY:
```

4. Enter <10> and press <ENTER>.

The system displays ‘10’ and the ‘Pharmacist’ prompt displays defaulting to the name of the Pharmacist as shown in the following image.

### **Partial Fill Example: Pharmacist**

```
Remote site drug name: CETIRIZINE HCL 10MG TAB
Matching Drug Found for Dispensing: CETIRIZINE HCL 10MG TAB
Would you like to use the system matched drug for this
refill/partial fill? NO// YES
Enter Quantity: 10
DAYS SUPPLY: 10
Select PHARMACIST Name: COPE,THOMAS J//          TJC      192      BAY PINES TEST LA
B
```

5. Press <ENTER>.

The system displays the name of the Pharmacist, the Site, and the ‘Remarks’ prompt displays as shown in the following image.

### **Partial Fill Example: Remarks**

```
Remote site drug name: CETIRIZINE HCL 10MG TAB
Matching Drug Found for Dispensing: CETIRIZINE HCL 10MG TAB
Would you like to use the system matched drug for this
refill/partial fill? NO// YES
Enter Quantity: 10
DAYS SUPPLY: 10
Select PHARMACIST Name: COPE,THOMAS J//          TJC      192      BAY PINES TEST LA
B
REMARKS:
```

6. Enter <LAST REFILL LOST> and press <ENTER>.

The system displays ‘LAST REFILL LOST’ as shown in the following image.

### **Partial Fill Example: Remarks Example**

```
Remote site drug name: CETIRIZINE HCL 10MG TAB
Matching Drug Found for Dispensing: CETIRIZINE HCL 10MG TAB
Would you like to use the system matched drug for this
refill/partial fill? NO// YES
Enter Quantity: 10
DAYS SUPPLY: 10
Select PHARMACIST Name: COPE,THOMAS J//          TJC      192      BAY PINES TEST LA
B
REMARKS: LAST REFILL LOST
```

The system displays the processing refill request message as shown in the following image.

## **Remote Refill Processing Message**

Processing refill request. Please be patient as it may take a moment for the host site to respond and generate your label data...

The system completes the remote partial fill process and generates the label data for printing. The ‘LABEL DEVICE’ message displays as shown in the following image.

### **Label Device Prompt**

TRANSACTION SUCCESSFUL... The refill for RX #763002 has been recorded on the prescription at the host system.

Select a printer to generate the label or '^' to bypass printing.

QUEUE TO PRINT ON  
DEVICE:

The user enters the dispensing site printer information to print the label.

The label prints and the system displays a message to indicate the prescription order process completed as shown in the following image.

### **Successful Partial Fill Status Message**

Partial complete for RX #2718861.  
Press RETURN to continue:

7. Press <ENTER> to continue.

The system displays a message informing that the prescription list is updating. The background process is executing the ‘[View Order Use Case](#)’ and retrieving the updated information about the patient’s prescription orders from the HDR/CDS Repository.

The system displays the following message while the query to the HDR/CDS Repository is executing.

### **System Message: Updating Prescription Order List**

Updating prescription order list...

The system will retrieve all prescriptions from the HDR/CDS repository and redisplay the Medication Profile view showing the updated prescription information.

Use the OneVA Pharmacy Prescription Reports capability to review the partial fill activity for both the dispensing and host sites transactions. Follow this [LINK](#) to the OneVA Pharmacy Report section for details.

### **Drug Matching Process**

Overall, three outcomes occur during the OneVA Pharmacy Drug Matching function. They are:

1. One-to-One Match
2. One-to-Many Match
3. No Drug Match

#### **Drug Matching: One-to-Many**

When the drug matching logic identifies a one-to-one match at the dispensing site for the selected host prescription, the system displays the ‘Remote site drug name:’ and the ‘Matching Drug Found for Dispensing:’ and prompts the user to respond ‘YES’ or ‘NO’ as displayed in the following image.

#### **Drug Matching: One-to-One Match**

```
Remote site drug name: CETIRIZINE HCL 10MG TAB and  
Matching Drug Found for Dispensing: CETIRIZINE HCL 10MG TAB messages display  
Would you like to use the system matched drug for this  
refill/partial fill? NO//
```

#### **Drug Matching: One-to-Many**

When the drug matching logic identifies a one-to-many match at the dispensing site for the selected host prescription, the system the ‘Remote site drug name:’ and the ‘Select matching local drug.’ prompt as displayed in the following image.

#### **Drug Matching: One-to-Many - Select matching local drug Prompt**

```
Remote site drug name: TRAZODONE HCL 50MG TAB message displays  
Select matching local drug:
```

To display the list of possible entries, the user enters two question marks <??> at the ‘Select matching local drug’ prompt and presses <ENTER> as displayed in the following image.

## Drug Matching: One-to-Many

```
Remote site drug name: TRAZODONE HCL 50MG TAB message displays
Select matching local drug: ??
```

The system displays the list of possible drug matches and prompts the user to select a drug as shown in the following image.

### Drug Matching: One-to-Many – Select from List of Possible Matches

```
Remote site drug name: TRAZODONE HCL 50MG TAB message displays
Select matching local drug: ??
Choose from:
 2043      TRAZODONE HCL 50MG TAB      CN609      NATL FORM *** AUTO
MED ***
 94095      TRAZODONE HCL 50MG TAB U.D.      CN609      01-23-04      NAT
L FORM (NDC)      messages display
Select matching local drug:
```

In the following example, the user enters <2043> and presses <ENTER>. The system displays the selected drug and prompts the user to respond ‘YES’ or ‘NO’ as displayed in the following image.

### Drug Matching: One-to-Many – Select Drug 2042 Example

```
Remote site drug name: TRAZODONE HCL 50MG TAB message displays
Select matching local drug: ??
Choose from:
 2043      TRAZODONE HCL 50MG TAB      CN609      NATL FORM *** AUTO
MED ***
 94095      TRAZODONE HCL 50MG TAB U.D.      CN609      01-23-04      NAT
L FORM (NDC)      messages display
Select matching local drug: 2043
TRAZODONE HCL 50MG TAB      CN609      NATL FORM *** AUTOMED ***
Would you like to use this drug?
```

### Drug Matching: No Drug Match

When the drug matching logic does not identify any drug match the system at the dispensing site for the selected host prescription, the system the ‘Remote site drug name:’ and the ‘Select matching local drug.’ prompt as displayed in the following image.

### Drug Matching: No Drug Match

```
Remote site drug name: CABERGOLINE 0.5MG TAB
No local match could be found for CABERGOLINE 0.5MG TAB.  messages display
Press RETURN to continue: prompt displays
```

### **Drug Matching: Exception Messages**

The OneVA Pharmacy patch contains specific business rules to prevent refill and/or partial orders that originated at other VA Pharmacy locations from being processed. They include the following list:

The OneVA Pharmacy patch contains specific business rules to prevent refill and/or partial orders that originated at other VA Pharmacy locations from being processed. They include the following list:

- Patient's prescription that originated from another VA Pharmacy location cannot be refilled before the next refill date.

Unable to complete transaction.

Cannot refill Rx# xxxxxxx. Next possible fill date is MM/DD/YYYY

- Patient's prescription that originated from another VA Pharmacy location is not fully or partially dispensed when the prescription status is 'discontinued', 'expired', is on 'hold', or 'suspended'.

Only 'ACTIVE' remote prescriptions may be refilled at this time.

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refilled) when there are zero remaining refills. Note: Partial fills are allowed.

Unable to complete transaction. Cannot refill Rx # xxxxxxx. No refills left.

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when the drug is classified as a controlled substance on the dispensing site.

This is a controlled substance. Cannot refill Rx # xxxxxxx.

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when the drug is classified as a controlled substance on the host site.

Unable to complete transaction. Rx #xxxxxxxx cannot be refilled.

The associated drug is considered a controlled substance at the host facility.

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when the drug is inactive on the dispensing site.

Matched Drug <DRUG NAME> is inactive. Cannot refill.

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when the drug has no dispensing site match.

No local match could be found for <DRUG NAME>

- Patient's prescription that originated from another VA Pharmacy location and cannot be dispensed (refill or partial fill) when no drug on the dispensing site has a matching VA Product ID.

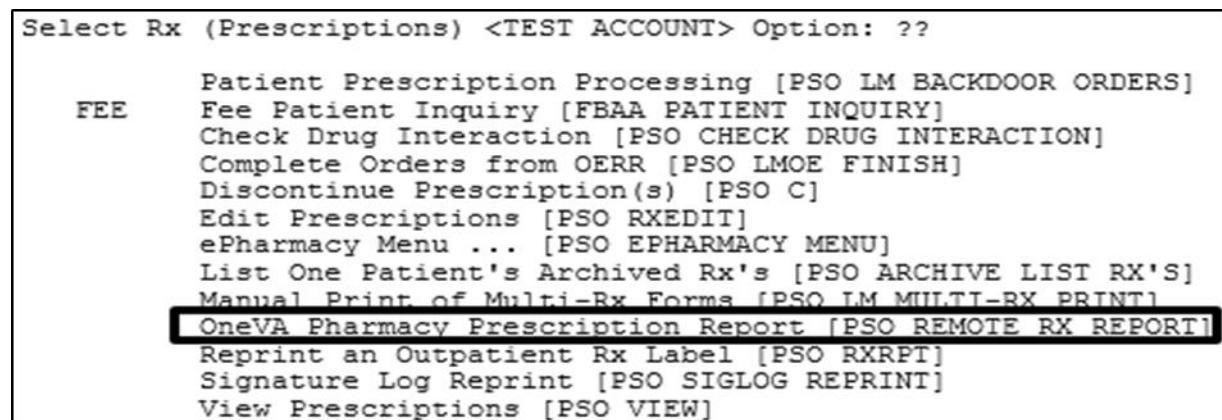
Missing VA Product ID. Rx #xxxxxxxx cannot be refilled.

## **OneVA Pharmacy Prescription Report [PSO REMOTE RX REPORT]**

### **OneVA Pharmacy Report Menu**

The OneVA Pharmacy patch comes with a new menu option for retrieving the OneVA Pharmacy Prescription Reports. The 'ONEVA PHARMACY PRESCRIPTION REPORT [PSO REMOTE RX REPORT]' menu is located on the 'RX (PRESCRIPTIONS) [PSO RX]' menu as highlighted in the following image.

#### **OneVA Pharmacy Prescription Report [PSO REMOTE RX REPORT] Menu**



There are three new reports available on the menu with self-describing titles. They are:

1. Prescriptions dispensed for other Host Pharmacies
2. Our prescriptions, filled by other facilities as the Dispensing Pharmacy
3. All OneVA Pharmacy Prescription Activity

## Accessing OneVA Pharmacy Reports

The following section provides the details to access the report menu, how to select specific refill information using various search options, and provides the description of the report content.

Sign-in to the VistA system and select the menu option:

ONEVA PHARMACY PRESCRIPTION REPORT [PSO REMOTE RX REPORT]

The system will display the three OneVA Pharmacy reports as shown in the following image:

**OneVA Pharmacy Menu and Reports**

```
Select Outpatient Pharmacy Manager <TEST ACCOUNT> Option: rx (Prescriptions)
Orders to be completed for all divisions: 336
Do you want an Order Summary? No// NO

FEE      Patient Prescription Processing
        Fee Patient Inquiry
        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
        OneVA Pharmacy Prescription Report
        Reprint an Outpatient Rx Label
        Signature Log Reprint
        View Prescriptions

Select Rx (Prescriptions) <TEST ACCOUNT> Option: OneVA Pharmacy Prescription Report

1.  Prescriptions dispensed for other Host Pharmacies
2.  Our prescriptions, filled by other facilities as the Dispensing Pharmacy
3.  All OneVA Pharmacy Prescription Activity

Select item: (1-3):
```

- Selecting <1> will display the list of prescriptions that our local facility has dispensed on behalf of other host Pharmacy locations.
- Selecting <2> will display the list of prescriptions other VA Pharmacy locations have filled as a dispensing site for a prescription that originated from our location.

- Selecting <3> will list all prescriptions that we have filled for other Pharmacy locations as the dispensing site and all prescriptions other Pharmacy locations have filled on our behalf.

The user has the option to answer with <1>, <2>, or <3>.

### **Selecting a Report and Report Search Options**

Use the report number to select the desired report.

1. Enter <1> to select the report ‘Prescriptions we have dispensed for other Host Pharmacies’ and press <ENTER>.

#### **Example: Select 1 for Prescriptions dispensed for other Host Pharmacies**

```
Select item: (1-3): 1 Prescriptions dispensed for other Host Pharmacies
```

The system displays the name of the report selected, shows the three search options, and prompts for user to enter the date range, patient, or site as shown in the following image.

#### **Report Search Options**

```
Select item: (1-3):
```

```
Select item: (1-3): 1 Prescriptions dispensed for other Host Pharmacies
```

```
Select one of the following:
```

D	DATE RANGE
P	PATIENT
S	SITE

```
Search by:
```

#### **Search Option D – DATE RANGE**

When selecting the ‘DATE RANGE’ option ‘D’ search feature all refills or partial fills performed between ranges of dates display. When selecting this option, the user enters two additional data items. They are:

- Start date (defaults to 30-days prior to today’s date)
- End date (defaults to today’s date)

1. Enter <D> and press <ENTER>.

The system displays the option name and prompts for the start date as displayed in the following image.

- i** Examples of valid date entry options are available using the ‘HELP’ command ‘?’ as displayed in the following image.

2. Press <ENTER> to accept the default start date.

The system displays the defaulted start date and prompts for the end date as displayed in the following image

#### **Report Date Range Search Example: End Date**

```
Enter start date: Jul 01, 2016// (JUL 01, 2016)
Enter end date: Jul 31, 2016//
```

3. Press <ENTER> to accept the default end date.

#### **Report Date Range Search Example: End Date Image 2**

```
Enter end date: Jul 31, 2016// (JUL 31, 2016)
```

The system displays the ‘Summary Report’ for the selected report

## Report Date Range Search Example Results: Summary Report

OneVA PHARMACY RX REPORT		Jul 26, 2016@18:55:44	Page:	1 of 6
Prescriptions dispensed for other Host Pharmacies				
#	DATE	PATIENT	DRUG NAME	TYPE QTY DSUP
1	JUL 07, 2016	PSOPATIENT,ONE	CETIRIZINE HCL 10MG	PR 5 5
2	JUL 07, 2016	PSOPATIENT,TWO	CLOPIDOGREL BISULFATE	PR 5 5
3	JUL 07, 2016	PSOPATIENT,ONE	CETIRIZINE HCL 10MG	PR 5 5
4	JUL 07, 2016	PSOPATIENT,ONE	LISINOPRIL 10MG TAB	PR 5 5
5	JUL 07, 2016	PSOPATIENT,THREE	AMPHOTERICIN B 50MG/	PR 7 27
6	JUL 07, 2016	PSOPATIENT,THREE	AMPHOTERICIN B 50MG/	RF 3 27
7	JUL 08, 2016	PSOPATIENT,THREE	AMPHOTERICIN B 50MG/	PR 1 1
8	JUL 08, 2016	PSOPATIENT,THREE	CETIRIZINE HCL 10MG	PR 1 1
9	JUL 08, 2016	PSOPATIENT,FOUR	IBUPROFEN 800MG TAB	PR 20 10
10	JUL 08, 2016	PSOPATIENT,FIVE	RAMIPRIL 10MG CAP	RF 30 30
11	JUL 08, 2016	PSOPATIENT,FIVE	IBUPROFEN 800MG TAB	PR 20 10
12	JUL 08, 2016	PSOPATIENT,FIVE	TRAZODONE HCL 50MG T	PR 10 10
13	JUL 08, 2016	PSOPATIENT,FIVE	VERAPAMIL HCL 120MG	PR 9 9
14	JUL 08, 2016	PSOPATIENT,ONE	CETIRIZINE HCL 10MG	PR 5 5
15	JUL 08, 2016	PSOPATIENT,ONE	RALOXIFENE HCL 60MG	RF 30 30
16	JUL 09, 2016	PSOPATIENT,ONE	LISINOPRIL 10MG TAB	PR 5 5
+ Enter ?? for more actions				
SI Select Item				
Select Action:Next Screen//				

### **Search Option P – PATIENT**

When selecting the ‘PATIENT’ option ‘P’ search feature all refills or partial fills performed for a single patient display. Select a patient by specifying the patient name, social security number, last 4-digits of the social security number, or the first initial of the last name with last 4-digits of social security numbers.

1. Enter <P> and press <ENTER>.

The system displays the option name and prompts for the patient’s name as displayed in the following image.

### **Report Patient Search Example: Patient Name**

Select PATIENT NAME:

2. Enter <PSOPATIENT, THREE> and press <ENTER>.

If the text matches multiple patients, a list will display for the user to select a specific patient. If the text matches only one patient, the patient information displays as shown in the following image.

### Report Patient Search Example: Patient Name Display

```
Select PATIENT NAME: PSOPATIENT,THREE PSOPATIENT,THREE          8-22-57
666018227      NO      NSC VETERAN

No Patient Warnings on file for PSOPATIENT,THREE.

Press RETURN to continue...
```

3. Press <ENTER> to continue.

The system displays the ‘Summary Report’ for the selected report.

### Report Patient Search Example: Results Summary Report

OneVA PHARMACY RX REPORT			Jul 31, 2016@11:53:34		Page: 1 of 2		
Prescriptions dispensed for other Host Pharmacies							
#	DATE	PATIENT	DRUG NAME	TYPE	QTY	DSUP	
1	JUL 07, 2016	PSOPATIENT,THREE	AMPHOTERICIN B 50MG/	PR	7	27	
2	JUL 07, 2016	PSOPATIENT,THREE	AMPHOTERICIN B 50MG/	RF	3	27	
3	JUL 08, 2016	PSOPATIENT,THREE	AMPHOTERICIN B 50MG/	PR	1	1	
4	JUL 08, 2016	PSOPATIENT,THREE	CETIRIZINE HCL 10MG	PR	1	1	
5	JUL 10, 2016	PSOPATIENT,THREE	MONTELUKAST 10MG TAB	RF	27	27	
6	JUL 11, 2016	PSOPATIENT,THREE	NEOSPORIN OPHTH OINT	PR	2	10	
7	JUL 11, 2016	PSOPATIENT,THREE	THIAMINE 100MG/ML IN	PR	1	3	
8	JUL 14, 2016	PSOPATIENT,THREE	ATORVASTATIN CALCIUM	RF			
9	JUL 14, 2016	PSOPATIENT,THREE	CETIRIZINE HCL 10MG	RF			
10	JUL 14, 2016	PSOPATIENT,THREE	MONTELUKAST 10MG TAB	PR	10	10	
11	JUL 19, 2016	PSOPATIENT,THREE	NEOSPORIN OPHTH OINT	PR	1	1	
12	JUL 19, 2016	PSOPATIENT,THREE	MONTELUKAST 10MG TAB	PR	1	1	
13	JUL 20, 2016	PSOPATIENT,THREE	NYSTATIN 100000 UNT/	RF	30	29	
14	JUL 20, 2016	PSOPATIENT,THREE	ATORVASTATIN CALCIUM	RF	44	29	
15	JUL 20, 2016	PSOPATIENT,THREE	NEOSPORIN OPHTH OINT	PR	1	1	
16	JUL 20, 2016	PSOPATIENT,THREE	ATORVASTATIN CALCIUM	PR	3	2	
+	Enter ?? for more actions						
SI	Select Item						
Select Action:Next Screen//							

### Search Option S – SITE

The ‘SITE’ option ‘S’ selects all refills performed at a specific VA site. A site can be selected by specifying the Institution’s Name, Status, Station Number, Official VA Name, Current Location, Coding System/ID Pair, National Provider Identifier (NPI), Status, Name (Changed From), or Coding System.

1. Enter <S> and press <ENTER>.

The system displays the option name and prompts for site identification text as displayed in the following image.

### **Report Site Search Example**

```
Search by: SITE
```

```
Select INSTITUTION NAME:
```

2. Enter <DAYTON> and press <ENTER>.

If the text matches only one site, the summary report page displays. If the text matches multiple sites, a list will display for the user to select a facility as shown in the following image.

### **Report Site Search Example: Select Site from Multiple List**

```
Select INSTITUTION NAME: DAYTON
 1  DAYTON          OH  VAMC      552
 2  DAYTON (NHCU)    OH  NHC       5529AA
 3  DAYTON NATIONAL CEMETARY OH  NC      810
 4  DAYTONA BEACH OPC   FL  OPC       573BZ
 5  DAYTONA VETERANS NURSING HOME FL  STNB  573DT
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1  DAYTON          OH  VAMC      552
```

The system displays the ‘Summary Report’ for the selected report.

## Report Site Search Example: Results Summary Report

OneVA PHARMACY RX REPORT		Jul 31, 2016@11:56:55		Page: 1 of 2		
#	DATE	PATIENT	DRUG NAME	TYPE	QTY	DSUP
1	JUL 15, 2016	PSOPATIENT,SIX	VERAPAMIL HCL 120MG	PR	1	1
2	JUL 19, 2016	PSOPATIENT,SIX	IBUPROFEN 800MG TAB	PR	1	1
3	JUL 19, 2016	PSOPATIENT,THREE	NEOSPORIN OPHTH OINT	PR	1	1
4	JUL 19, 2016	PSOPATIENT,SEVEN	TRAZODONE HCL 50MG T	PR	10	1
5	JUL 19, 2016	PSOPATIENT,SEVEN	TRAZODONE HCL 50MG T	RF	60	60
6	JUL 19, 2016	PSOPATIENT,SEVEN	TRAZODONE HCL 50MG T	PR	10	10
7	JUL 19, 2016	PSOPATIENT,SEVEN	TRAZODONE HCL 50MG T	PR	10	1
8	JUL 19, 2016	PSOPATIENT,SEVEN	TRAZODONE HCL 50MG T	PR	10	1
9	JUL 19, 2016	PSOPATIENT,SIX	IBUPROFEN 800MG TAB	RF	30	10
10	JUL 19, 2016	PSOPATIENT,SIX	IBUPROFEN 800MG TAB	PR	10	10
11	JUL 20, 2016	PSOPATIENT,THREE	NYSTATIN 100000 UNT/	RF	30	29
12	JUL 20, 2016	PSOPATIENT,THREE	ATORVASTATIN CALCIUM	RF	44	29
13	JUL 20, 2016	PSOPATIENT,THREE	NEOSPORIN OPHTH OINT	PR	1	1
14	JUL 20, 2016	PSOPATIENT,THREE	ATORVASTATIN CALCIUM	PR	3	2
15	JUL 20, 2016	PSOPATIENT,THREE	NEOSPORIN OPHTH OINT	PR	7	11
16	JUL 20, 2016	PSOPATIENT,THREE	NYSTATIN 100000 UNT/	PR	5	3

+ Enter ?? for more actions  
SI Select Item  
Select Action:Next Screen//

### OneVA Pharmacy Report Content

All OneVA Pharmacy reports contain a summary page and a detailed page and all three reports have the same format and basic information regardless of the search option selected.

The following is an example of the summary page layout for the OneVA

## OneVA Pharmacy Report Example: Summary Page

OneVA PHARMACY RX REPORT		Jul 31, 2016@13:15:31		Page:	2 of 9
All OneVA Pharmacy Prescription Activity					
#	DATE	PATIENT	DRUG NAME	TYPE	QTY DSUP
17	JUL 08, 2016	PSOPATIENT,SIX	RAMIPRIL 10MG CAP	RF	30 30
18	JUL 08, 2016	PSOPATIENT,SIX	IBUPROFEN 800MG TAB	PR	20 10
19	JUL 08, 2016	PSOPATIENT,SIX	TRAZODONE HCL 50MG T	PR	10 10
20	JUL 08, 2016	PSOPATIENT,SIX	VERAPAMIL HCL 120MG	PR	9 9
21	JUL 08, 2016	PSOPATIENT,TWO	RALOXIFENE HCL 60MG	OP	5 5
22	JUL 08, 2016	PSOPATIENT,TWO	CETIRIZINE HCL 10MG	PR	5 5
23	JUL 08, 2016	PSOPATIENT,TWO	RAMIPRIL 10MG CAP	OR	30 30
24	JUL 08, 2016	PSOPATIENT,TWO	RALOXIFENE HCL 60MG	RF	30 30
25	JUL 08, 2016	PSOPATIENT,FOUR	FLUTICASONE PROP 50M	OR	2 30
26	JUL 09, 2016	PSOPATIENT,TWO	LISINOPRIL 10MG TAB	PR	5 5
27	JUL 09, 2016	PSOPATIENT,TWO	RALOXIFENE HCL 60MG	OP	5 5
28	JUL 09, 2016	PSOPATIENT,SEVEN	VITAMIN B COMPLEX CA	PR	5 5
29	JUL 10, 2016	PSOPATIENT,FIVE	ASCORBIC ACID 500MG	PR	5 5
30	JUL 10, 2016	PSOPATIENT,TWO	CETIRIZINE HCL 10MG	RF	30 30
31	JUL 10, 2016	PSOPATIENT,FIVE	IBUPROFEN 800MG TAB	OR	90 30
32	JUL 10, 2016	PSOPATIENT,THREE	EPSOM SALT	OP	2 3
+ Enter ?? for more actions					
SI Select Item					
Select Action:Next Screen//					

The type of report selected determines the refills shown on a report and the search option specified as described within this document. A row number identifies each refill/partial fill. For each row the date processed, patient name, drug name, quantity dispensed, and the quantity supplied displays. There are four refill type values. They are:

- RF – refills
- PR - partial refills
- OR – refills performed by other sites
- OP – partial fills performed by other sites

The total cost is the sum of the costs of all items included in this report and is available on the report ‘Prescriptions we have dispensed for other Host Pharmacies’. The cost is calculated by using the dispensing sites ‘Price Per Dispense Unit’ and multiplying that by the quantity being dispensed.

To review more information about the orders, perform the following steps:

1. Enter <SI> at the ‘Select Action’ prompt and press <ENTER>.

The system displays the action name and prompts for the item to display:

2. Enter <11> at the ‘Enter a number’ prompt and press <ENTER>.

The following image displays the ‘Select Action’ and ‘Enter a number’ prompts.

### OneVA Pharmacy Report Example: Select Item

```
SI      Select Item
Select Action:Quit//  
  
Select Action:Quit// SI  Select Item
Enter a number (1-81): 11
```

The system displays the detail report for that item as displayed in the following image.

### OneVA Pharmacy Report Example: Details Page

```
OneVA PHARMACY RX DETAILS Jul 26, 2016@19:04:16 Page: 1 of 1
Detailed report of Prescriptions we have dispensed for other Host Pharmacies

Request Date/Time: JUL 08, 2016@07:11:33
Patient: PSOPATIENT,FIVE
RX #: 2718865
Rx Hosted at Site: CHYSHR TEST LAB
Request Type: PARTIAL FILL
Requesting Pharmacist: SMITH,JAMES A
Dispensed Date: JUL 08, 2016
Drug Name at Originating (Host) site: IBUPROFEN 800MG TAB
Local (matched) drug: IBUPROFEN 800MG TAB
Cost of Local Refill/Partial: $0.45

Enter ?? for more actions

Select Action:Quit//
```

3. Press <ENTER> to return to the summary report view.
4. Continue to press <ENTER> to return to the report menu prompt.
5. Select a report and search options section to view another report.

## Troubleshooting

OneVA Pharmacy introduces new functionality that allows a Pharmacist to refill or partial fill a prescription from another VA Pharmacy location. This software patch uses HL7 messaging to send and receive remote prescription details from another VA Pharmacy location. This allows a ‘dispensing’ (‘non-custodial’ or ‘local’ pharmacy) to refill a prescription that originated from

another VA Pharmacy location. The VA Pharmacy location where the prescription originated is the ‘host’ (‘remote’) facility.

VistA utilizes HL7 to send a query message to the eMI ESB. eMI sends the HL7 message to the HDR/CDS Repository and medications return to the querying site. The prescriptions display below any ‘local’ prescriptions on the Medication Profile view. The Pharmacist can then view and choose a ‘host’ prescription and will be able to refill or partially fill any active non-controlled substance prescription at either facility.

Entries log for all ‘host’ and ‘dispensing’ refills and partial fills into a new file called ‘REMOTE PRESCRIPTION LOG (#52.09)’. The entries are viewable using the OneVA Pharmacy Prescription Report functionality.

With this integrated VistA patch, several points of failure could occur. The systems design will allow the process to continue if any of the various integration points fail, however, remote prescriptions will not display to the Pharmacist on the Medication Profile view.

There are application error messages that will display during the search for the patient and the patient’s prescriptions. They are:

- No patient error message:

PATIENT IDENTIFIER NOT FOUND

- Multiple patients returned error messages:

MORE THAN ONE PATIENT RETURNED IN CALL TO HDR-CDS  
MORE THAN ONE PATIENT FOUND ON RX DATABASE, CHECK ICN

- Patient returned, no prescription data returned error message:

PATIENT FOUND WITH NO PRESCRIPTION RECORDS

- Patient returned, no prescription data matching filters returned error message:

PATIENT FOUND WITH NO PRESCRIPTION RECORDS MATCHING SEARCH CRITERIA

## **Special Instructions for Error Correction**

Significant errors are errors or conditions that affect the system stability, availability, performance, or otherwise make the system unavailable to its user base. For any significant error, please contact your local support.

## **Acronyms and Abbreviations**

The following table provides the list of acronyms used throughout the document along with their descriptions.

<b>Acronym/Abbreviation</b>	<b>Description</b>
[DIUSER]	FileMan Menu
[PSO LM BACKDOOR ORDERS]	Patient Prescription Processing Menu
[PSO MANAGER]	Outpatient Pharmacy Manager Menu
[PSO MENU]	Pharmacy Menu
[PSO REMOTE RX REPORT]	OneVA Pharmacy Prescription Report Menu
[PSO RX]	Rx (Prescriptions) Menu
AITC	Austin Information Technology Center
C/HDR	Clinical/Health Data Repository
CDS	Clinical Data Services
Clin1	Clinical Product Support Team 1
DAYTSHR	Dayton Test Laboratory VistA instance
DoD	Department of Defense
eMI	Enterprise Messaging Infrastructure
EPMO	Office of Information and Technology Enterprise Program Management Office
ESB	Enterprise Service Bus
GOV	Government
HDR	Health Data Repository
HL7	Health Level 7
ICN	Integrated Control Number
IOC	Initial Operating Capability
IT	Information Technology
MVI	Master Veteran Index
NPI	National Provider Identifier
NSD	National Service Desk
OI&T	Office of Information and Technology
OMB	Office of Management and Budget
OP	Outpatient Pharmacy
OP	OneVA Pharmacy Partial Fill
OR	OneVA Pharmacy Refill
PII	Personally Identifiable Information
PR	Partial Refill (Local)
PSO	Outpatient Prescription Pharmacy
RF	Refill (Local)
Rx	Prescription
SDM	Service Desk Manager
VA	Department of Veterans Affairs
VAMC	Veterans Affairs Medical Center
VDL	VA Software Document Library
VHA	Department of Veterans Health Administration
VistA	Veterans Health Information Systems and Technology

Acronym/Abbreviation	Description
	Architecture

## Frequently Asked Questions (FAQ)

- 1) What is the Value to me as the Veteran?

The previous ‘Coordinated Care for Traveling Veterans’ handbook required either a visit to the Emergency Room/Urgent Care Center or a pharmacy clinic visit to obtain a new prescription. OneVA Pharmacy makes the best use of the prescription already on file at another VA medical center.

Audience: Veteran

- 2) What if I have never been registered at the VA where I’m trying to pick up my prescription?

Veterans must register/enroll at the VA medical center in order for the pharmacy to see their records.

Audience: Veteran

- 3) Does OneVA pharmacy benefit me if I’m not traveling?

Use existing processes to contact the VA where your prescription is on file to request a refill.

Audience: Veteran

- 4) Do you still need to enter Allergies in to the Pharmacy profile?

VistA pharmacy will display allergies and adverse reactions from all remote facilities.

Audience: Pharmacy

- 5) Can we send the prescription to CMOP?

OneVA Pharmacy is designed to provide an immediate fill at the Pharmacy window.

Audience: Pharmacy

- 6) Can any prescription be filled by OneVA pharmacy?

Controlled substances (CS at one or both facilities) cannot be filled via OneVA pharmacy. Drugs not matched to the National Drug file cannot be filled via OneVA Pharmacy. Prescriptions will no remaining refills, on suspense or on hold cannot be filled.

Audience: Pharmacy, Veteran

- 1) What should I do if I do not have the medication in stock?

Order the medication if the Veteran can return the next day, mail from CMOP to a temporary address, utilize the Coordinated Care for Traveling Veteran Handbook. “What would a prudent pharmacist do?”

Audience: Pharmacy

- 2) What information is kept in my VistA system and what information is kept at the host VistA system?

The dispensing VistA system tracks the information in a new OneVA Pharmacy file (not the prescription file) for reporting purposes. The refill or partial fill is tracked in the host system's prescription file and activity log.

Audience: Pharmacy

- 3) What if it is too soon to fill?

Prescription will not be available to refill. Partial fills will be an available option. Sites can use Remote Data Views to see the fill history from the host station, especially if there are concerns for frequent partial fill requests of the same Rx.

Audience: Pharmacy

- 4) What is the dispensing name and address on the label?

The host pharmacy will be the name and address printed on the label which is consistent with how CMOP processes prescriptions.

Audience: Pharmacy

- 5) Are there any responsibilities for the host pharmacy in OneVA pharmacy?

To account for copay billing, insurance billing and subsequent refill capabilities all sites are asked to print to an OneVA Report and manually release prescriptions filled by other stations. Recommended frequency of printing report is no less than weekly.

Audience: Pharmacy

- 6) Does this affect the routine process of finishing prescriptions from the Pending file (ordering from OERR)?

Yes, OneVA pharmacy will bring in prescriptions from other VA treating facilities to create the first enterprise-wide patient-centric actionable medication profile.

Audience: Pharmacy

**7) How does OneVA pharmacy select the drug from my drug file?**

The original prescription resides in the Health Data Repository (HDR). OneVA pharmacy identifies the national drug file (NDF) “VA Product” for the prescription. Matching drugs in your local drug file are identified based on that NDF product. If there is a 1:1 match found, OneVA pharmacy will recommend that drug. If there are multiple possible matches found, OneVA pharmacy will present a pick list to select from.

Audience: Pharmacy

**8) How much information can you see from the Host prescription file?**

OneVA pharmacy displays a limited subset of the prescription. Once the patient is registered, VistAWeb can be utilized to see details of the prescription.

Audience: Pharmacy

**9) What if the original prescription uses an abbreviation that is not in our instruction file?**

The prescription label is generated from the host prescription file. This is consistent with how CMOP processes prescriptions.

Audience: Pharmacy

**10) OneVA pharmacy reports show cost information, which system is used to calculate medication cost?**

The dispensing system’s cost is used in the report.

Audience: Pharmacy

**11) Can I send an OneVA Pharmacy prescription to automation via the Outpatient Pharmacy Automation Interfaces (OPAI)?**

No, this is being evaluated for future functionality. Consider window processing workflows to dispense OneVA Pharmacy fills.

Audience: Pharmacy

**12) If a patient is requesting a medication that requires in-clinic administration, could I use OneVA pharmacy?**

OneVA pharmacy functionality is intended for outpatient prescriptions to be dispensed at the Pharmacy window.

Audience: Pharmacy

**13) How will a patient be notified that their OneVA prescription is ready for pick up?**

OneVA Pharmacy does not interface with prescription ready notification boards. Consider alternative processes and workflow.

Audience: Pharmacy

# Glossary

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

<b>Acronym/Term</b>	<b>Definition</b>
<b>Action Profile</b>	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.
<b>Activity Log</b>	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.
<b>ADD</b>	Automated Dispensing Device.
<b>Allergy/ADR Information</b>	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.
<b>Allergy Order Checks</b>	The process that compares the drugs prescribed for a patient against that patient's recorded allergies
<b>AMIS</b>	Automated Management Information System.
<b>Answer Sheet</b>	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.
<b>API</b>	Application Programming Interfaces.
<b>APSP</b>	Originally Indian Health Service Pharmacy's name space now owned by the Outpatient Pharmacy software.
<b>BSA</b>	Body Surface Area. The Dubois formula is used to calculate the Body Surface Area using the following formula:  $\text{BSA (m}^2\text{)} = 0.20247 \times \text{Height (m)}0.725 \times \text{Weight (kg)}0.425$  The equation is performed using the most recent patient height and weight values that are entered into the vitals package.  The calculation is not intended to be a replacement for independent clinical judgment.

<b>Bypass</b>	Take no action on a medication order.
<b>CHAMPVA</b>	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.
<b>Clinical Reminder Order Checks (CROC)</b>	CPRS Order Checks that use Clinical Reminder functionality, both reminder terms and reminder definitions, to perform checks for groups of orderable items.
<b>CMOP</b>	Consolidated Mail Outpatient Pharmacy.
<b>CPRS</b>	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.
<b>CrCL</b>	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:  Modified Cockcroft-Gault equation using Adjusted Body Weight in kg (if ht > 60in)  This calculation is not intended to be a replacement for independent clinical judgment.
<b>Critical</b>	Interactions with severe consequences that require some type of action (finding facts, contacting prescribers) to prevent potential serious harm.
<b>DATUP</b>	Data Update (DATUP). Functionality that allows the Pharmacy Enterprise Customization System (PECS) to send out custom and standard commercial-off-the-shelf (COTS) vendor database changes to update the two centralized databases at Austin and Martinsburg.
<b>DEA</b>	Drug Enforcement Agency.
<b>DEA Special Handling</b>	The Drug Enforcement Agency special Handling code used for drugs to designate if they are over-the counter, narcotics, bulk compounds, supply items, etc.
<b>DHCP</b>	See VistA.

<b>DIF</b>	Drug Information Framework.
<b>Dispense Drug</b>	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.
<b>DNS</b>	Domain Name Server.
<b>DoD</b>	Department of Defense.
<b>Dosage Ordered</b>	After the user has selected the drug during order entry, the dosage ordered prompt is displayed.
<b>Drug/Drug Interaction</b>	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.
<b>DUE</b>	Drug Usage Evaluation.
<b>Enhanced Order Check</b>	Drug – Drug Interaction, Duplicate Therapy, and Dosing order checks that are executed utilizing FDB's MedKnowledge Framework APIs and database.
<b>ETC</b>	Enhanced Therapeutic Classification.
<b>Expiration/Stop</b>	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.
<b>FDB</b>	First DataBank
<b>Finish</b>	Term used for completing orders from Order Entry/Results Reporting.
<b>GUI</b>	Acronym for Graphical User Interface.
<b>HDR/CDS</b>	Health Data Repository/Clinical Data Services Repository
<b>HDR-Hx</b>	Health Data Repository Historical.
<b>HDR-IMS</b>	Health Data Repository- Interim Messaging Solution.
<b>Issue Date</b>	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.
<b>HFS</b>	Host File Server.
<b>Health Insurance Portability and Accountability Act of 1996 (HIPAA)</b>	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.
<b>JCAHO</b>	Acronym for Joint Commission on Accreditation of Healthcare Organizations.
<b>Label/Profile Monitor</b>	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.
<b>Local Possible Dosages</b>	Free text dosages that are associated with drugs that do not meet all of the criteria for Possible Dosages.
<b>Medication Instruction File</b>	The MEDICATION INSTRUCTION file is used by Unit Dose and Outpatient Pharmacy. It contains the medication instruction name, expansion and intended use.
<b>Medication Order</b>	A prescription.
<b>Medication Profile</b>	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.
<b>Medication Routes File</b>	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.

<b>Med Route</b>	The method in which the prescription is to be administered (e.g., oral, injection).
<b>NCCC</b>	Acronym for National Clozapine Coordinating Center.
<b>Non-Formulary Drugs</b>	The medications, which are defined as commercially available drug products not included in the VA National Formulary.
<b>Non-VA Meds</b>	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 prescribed by providers outside VHA. All Non-VA Meds must be documented in patients' medical records.
<b>OneVA Pharmacy</b>	Prescriptions that originated from another VistA instance other than the site dispensing the prescription.
<b>OPAI</b>	Outpatient Pharmacy Automated Interface.
<b>Order</b>	Request for medication.
<b>Order Check</b>	Order checks (drug-allergy/ADR interactions, drug-drug, duplicate drug, duplicate therapy, and dosing) are performed when a new medication order is placed through either the CPRS or Outpatient Pharmacy applications. They are also performed when medication orders are renewed, when Orderable Items are edited, or during the finishing process in Outpatient Pharmacy. This functionality will ensure the user is alerted to possible adverse drug reactions and will reduce the possibility of a medication error.
<b>Orderable Item</b>	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).
<b>Partial Prescription</b>	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. Partials do count as workload but do not count against the total number of refills for a prescription.
<b>Payer</b>	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).

<b>Pending Order</b>	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.
<b>Pharmacy Narrative</b>	OUTPATIENT NARRATIVE field that may be used by pharmacy staff to display information specific to the patient.
<b>Polypharmacy</b>	The administration of many drugs together.
<b>POE</b>	Acronym for Pharmacy Ordering Enhancements (POE) project. Patch PSO*7*46 contains all the related changes for Outpatient Pharmacy.
<b>Possible Dosages</b>	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.
<b>Prescription</b>	This term is now referred to throughout the software as medication orders.
<b>Prescription Status</b>	<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.</p> <p>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> <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</p>

	become active until a pharmacist reviews them. Until such review, they remain non-verified and cannot be printed, canceled or edited except through the Verification menu.
	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.
	Pending - A prescription that has been entered through OERR. Refill - A second or subsequent filling authorized by the provider. Suspended - A prescription that will be filled at some future date.
<b>Progress Notes</b>	A component of Text Integration Utilities (TIU) that can function as part of CPRS.
<b>Provider</b>	The person who authorized an order. Only users identified as providers who are authorized to write medication orders may be selected.
<b>Reprinted Label</b>	Unlike a partial prescription, a reprint does not count as workload.
<b>Questionnaire</b>	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.
<b>Schedule</b>	The frequency by which the doses are to be administered, such as Q8H, BID, NOW, etc.
<b>Sig</b>	The instructions printed on the label.
<b>Significant</b>	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.
<b>Speed Actions</b>	See Actions.
<b>Suspense</b>	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.
<b>Third (3rd) Party Claims</b>	Health care insurance claims submitted to an entity for reimbursement of health care bills.
<b>Time In</b>	This is the time that the patient's name was entered in the computer.
<b>Time Out</b>	This is the time that the patient's name was entered on the bingo board

	monitor.
<b>TIU</b>	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 accessed for individual patients through the CPRS, or for multiple patients through the TIU interface.
<b>Titration</b>	Titration is the process of gradually adjusting the dose of a medication until optimal results are reached.
<b>TRICARE</b>	TRICARE is the uniformed service health care program for: 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.
	There are differences in how prescriptions for TRICARE beneficiaries are processed versus how prescriptions are processed for veterans.
<b>Units per Dose</b>	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.
<b>VistA</b>	Acronym for Veterans Health Information Systems and Technology Architecture, the new name for Decentralized Hospital Computer Program (DHCP).
<b>Wait Time</b>	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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