

# NEMESIS V3 Suggested List – eHistory.12 Current Medications

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## RxNorm Code Usage Recommendations

RxNorm provides various codes for medications based on the Term Type (TTY). These include but are not limited to: Ingredient (IN), Precise Ingredient (PIN), Brand Name (BN), Semantic Clinical Drug Form (SCDF), Semantic Clinical Drug Component (SCDC), codes indicating the medication strength or concentration or mixtures (Synonym of Another TTY = SY), and many term type dosing options.

To review the RxNorm overview, including an introduction, purpose and examples of RxNorm, and its usage please visit <http://www.nlm.nih.gov/research/umls/rxnorm/overview.html>. To see the explanation of the term types see page three (3) of this document.

## eHistory.12 Current Medications

NEMESIS TAC recommends that the RxNorm Term Type identifying the medication by Ingredient, Primary Ingredient, or Brand Name be utilized for the patient's current medications. This includes the patient's home medications or medications being administered to the patient in a healthcare setting (e.g. hospital, nursing home, etc). To document the route, dose, and dosage units utilize the following three elements:

1. eHistory.13 - Current Medication Dose
2. eHistory.14 - Current Medication Dosage Unit
3. eHistory.15 - Current Medication Administration Route

No specific RxNorm code list will be created for eHistory.12 (Current Medications) because of the vast array of medications contained in the RxNorm database.

## Licensed “Suggested Lists”

The U.S. National Library of Medicine provides access to the RxNorm code values through the Unified Medical Language System (UMLS). An applicant must accept the terms of the UMLS Metathesaurus License and create a UMLS Terminology Services (UTS) account for access to UMLS datasets and terminology browsers.

More information can be found at: <http://www.nlm.nih.gov/databases/umls.html>. RxNorm codes may also be accessed through <http://rxnav.nlm.nih.gov/>

The NEMSIS TAC may only distribute suggested lists with specific value codes from the UMLS system to entities licensed through the UMLS system. Thus, each software developer must seek licensing and provide proof of licensing before gaining access to all of the pre-defined suggested lists available through the NEMSIS TAC.

## Access to “Suggested List” Archive Files

Access to suggested code lists will be provided on a special section of the NEMSIS TAC’s website. A licensed user will be able to login to the site and download the appropriate archive file (RxNorm, ICD-10, etc).

The UMLS license verification service helps determine if the remote user has a license to use and/or distribute certain code sets. If the user does not have a current license, access to the “suggested lists” archive will be denied.

The “suggested list” files will be zipped archives that are automatically created each time one of the licensed code databases is updated in the NEMSIS master data repository.

## Conclusions

By maintaining a single source of these data and making it available internally as well as to our customers, we improve our data quality and consistency. This will reduce reporting errors in data submissions provided it is used as part of our own and our customer’s data management best practices.

## RxNorm Medication Term Types (TTY)

From the National Library of Medicine website: <http://www.nlm.nih.gov/research/umls/rxnorm/overview.html> .

TTY	Name	Definition	Example(s)
IN	Ingredient	A compound or moiety that gives the drug its distinctive clinical properties. The preferred name is usually the USAN name.	Fluoxetine, Insulin, Isophane, Human Gentamicin Sulfate (USP)
PIN	Precise Ingredient	A specified form of the ingredient that may or may not be clinically active. Most precise ingredients are salt or isomer forms.	Fluoxetine Hydrochloride
MIN	Multiple Ingredients	Two or more ingredients created from SCDF. In rare cases when IN/PIN or PIN/PIN combinations of the same base ingredient exist, created from SCD.	Fluoxetine / Olanzapine
DF	Dose Form	A complete list of Dose Forms can be found in <a href="#">Appendix 2</a> of the RxNorm Documentation.	Topical Solution, Oral Tablet
SCDC	Semantic Clinical Drug Component	Ingredient plus strength—see section on Rules and Conventions, below, for units of measurement and for rules pertaining to the calculation of strengths.	Fluoxetine 4 MG/ML
SCDF	Semantic Clinical Drug Form	Ingredient plus dose form.	Fluoxetine Oral Solution
SCD	Semantic Clinical Drug	Ingredient plus strength and dose form.	Fluoxetine 4 MG/ML Oral Solution
BN	Brand Name	A proprietary name for a family of products containing a specific active ingredient.	Prozac
SBDC	Semantic Branded Drug Component	Branded ingredient plus strength.	Fluoxetine 4 MG/ML [Prozac]
SBDF	Semantic Branded Drug Form	Branded ingredient plus dose form.	Fluoxetine Oral Solution [Prozac]
SBD	Semantic Branded Drug	Ingredient, strength, and dose form plus brand name.	Fluoxetine 4 MG/ML Oral Solution [Prozac]
SY	Synonym of another TTY	Given for clarity.	Prozac 4 MG/ML Oral Solution
TMSY	Tall Man Lettering synonym of another TTY	Given to distinguish between commonly confused drugs.	FLUoxetine 10 MG Oral Capsule [PROzac]
BPCCK	Brand Name Pack	Branded Drug Delivery Device.	{12 (Ethinyl Estradiol 0.035 MG / Norethindrone 0.5 MG Oral Tablet) / 9 (Ethinyl Estradiol 0.035 MG / Norethindrone 1 MG Oral Tablet) / 7 (Inert Ingredients 1 MG Oral Tablet) } Pack [Leena 28 Day]
GPCK	Generic Pack	Generic Drug Delivery Device.	{11 (varenicline 0.5 MG Oral Tablet) / 42 (varenicline 1 MG Oral Tablet) } Pack