Outpatient Pharmacy (PSO)

ePharmacy

Technician's User Manual

Version 7.0

December 1997

(November 2013)

Department of Veterans Affairs
Product Support

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
11/2013	Cover, i-vi, 37, 38a, 45a, 46, 61, 85	PSO*7*421	Updated contents to reflect added/removed functionality of current patch. Updated front material. 37, 45a, 46 - Added Reject Resolution Required information, 38a - Added Example for handling Reject Required Rejected 61 - Added if claim submission returns a Reject Resolution Required information, 85 - Added Reject Resolution Required reject to index (S. Taubenfeld, PM; K. McGarghan, Tech Writer)
05/2013	i, ii, vi, 24, 68-68d, 75-75d, 77-78, 85	PSO*7*391	Updated Table of Contents New sort selection for CS. New security key named "PSDRPH" introduced. Added Hash Counts and DEA Certification section. Added two System Error messages. Updated Index (N.Goyal, PM; J.Owczarzak, Tech Writer)
01/2013	i-ii, v-vi 8 4, 6, 22, 23, 26n, 28, 29b, 29v, 36, 52, 55, 56 18a-18d 26e-26e2 27, 48, 55a 29f-29g2 79-84 85	PSO*7*390	Updated Revision History & Table of Contents Added new option Check Interaction Added Creatinine Clearance (CrCl) and Body Surface Area (BSA), when available, to the header area of Patient and Medication Profile displays Added new option Check Drug Interaction Added information regarding clinic orders Update Hidden Actions Added drug allergy changes Update Glossary Update Index (G. Tucker, PM; S. Heiress, Tech Writer)
09/2012	i, ii, vi, 55a – 55d	PSO*7*386	Added section on HOLD and UNHOLD functionality. (N.Goyal, PM; J. Owczarzak, Tech Writer)
02/2012	i-ii, v-vi, 14, 34, 37-40, 42-43, 45a-45h, 63, 66, 68a-b, 70, 79-83	PSO*7*385 PSO*7*359	Added signature alert Expanded ECME Numbers to twelve digits Corrected typos Updated wording on p. 34 from "a message" to "messages"

Date	Revised Pages	Patch Number	Description
			Updated Service Code values Added CHAMPVA functionality Added TRICARE to Glossary Added CHAMPVA to Glossary (S. Spence, PM; C. Smith, Tech Writer)
04/2011	i v, vi 4 5 8 21 22 24 25-26r 27 28-28b 29-29ff 50 54 75 77-78 79-84 85 	PSO*7*251	The following changes are included in this patch: -Updated Revision History -Updated Table of Contents -Outpatient List Manager Screen Views -Added HP and H to Hold Status, and Added DF,DE,DP,DD and DA -Added Intervention menu hidden action information -Added DF,DE,DP,DD and DA, and Added HP and H to Hold Status -Replaced Medication Short Profile -Added Intervention menu hidden action information -Inserted enhanced Order checks, Outpatient Pharmacy generated order checks -Added IN to Screen Scrape -Modified New Order Screen Scrape -Updated Entering a New Order,Added Allergy/ADR, Therapeutic Duplication,and CPRS Order Checks -Duplicate Drug examples -Duplicate Drug examples -CPRS Order Checks – How They Work -Error Messages -Added API, DATUP, DIF, DoD, ETC, FDB, HDR-Hx, and HDR-IMS to the Glossary, and updated page numbering -Updated Index to include Enhanced Drug-Drug Interactions, Duplicate Drug Order Check, Allergy/ADR Order Check Display, Therapeutic Duplication, and CPRS Order Checks, and updated page numbering (H. Whitney, Developer, S. Heiress, Tech Writer)
10/09	v, 11, 21-23, 61, 81	PSO*7*326	The Social Security Number was removed from print outs given to patients. The patient lookup has been expanded to include the ability to look up by prescription number or wand a barcode with the prescription from many options. (E. Wright, PM; S. B. Gilbert, Tech Writer)
08/09	All	PSO*7*320	The following changes are included in this patch. • Remote Data prompt, notification, and screen have been added. • A hidden action, DR [Display Remote], has been

Date	Revised Pages	Patch Number	Description
			added. • "THIS PATIENT HAS PRESCRIPTIONS AT OTHER FACILITIES" prints at the end of the Pull Early from Suspense report. (G. Tucker, PM; S. B. Scudder, Tech Writer)

Preface

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

(This page included for two-sided copying.)

Table of Contents

Chapter 1: Introduction

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.

Documentation Conventions

This *Outpatient Pharmacy V. 7.0 Technician'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 *Archiving* 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): **5**
<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 **Y** for Yes or **N** 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*

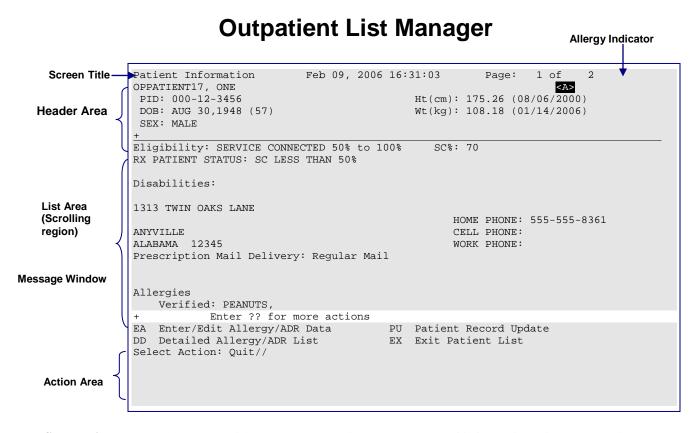**Additional Documentation:**

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

Allergy Indicator

```
Screen Title ──► Patient Information        Feb 09, 2006 16:31:03      Page:   1 of    2
                 OPPATIENT17, ONE                                           <A>
                  PID: 000-12-3456                       Ht(cm): 175.26 (08/06/2000)
Header Area       DOB: AUG 30,1948 (57)                  Wt(kg): 108.18 (01/14/2006)
                  SEX: MALE
                 +
                 Eligibility: SERVICE CONNECTED 50% to 100%    SC%: 70
                 RX PATIENT STATUS: SC LESS THAN 50%

                 Disabilities:

                 1313 TWIN OAKS LANE
List Area                                                HOME PHONE: 555-555-8361
(Scrolling       ANYVILLE                                CELL PHONE:
region)          ALABAMA  12345                          WORK PHONE:
                 Prescription Mail Delivery: Regular Mail


Message Window   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//

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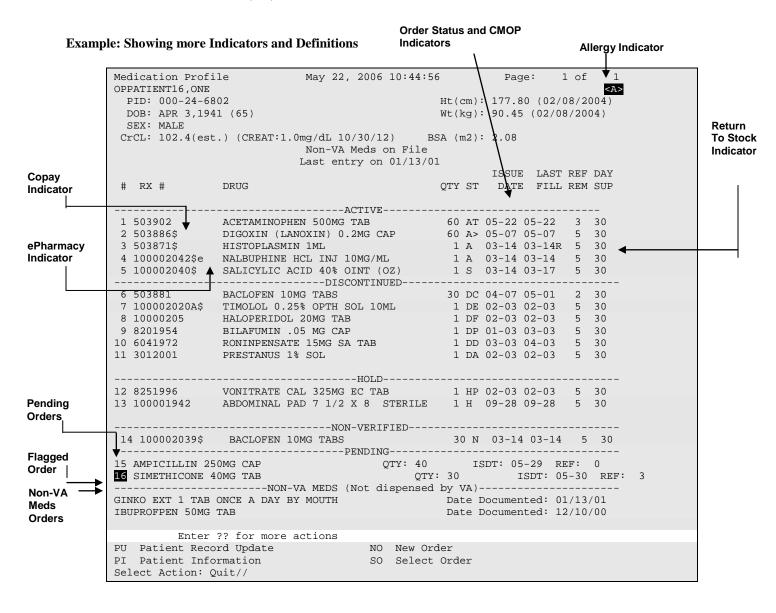
List area: (scrolling region) This area scrolls (like the previous version) and displays the information on which action can be taken.

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. Outpatient Pharmacy hidden actions are displayed with the letters (OP) next to the action.

Example: Showing more Indicators and Definitions

Order Status and CMOP Indicators

Allergy Indicator

Copay Indicator

ePharmacy Indicator

Return To Stock Indicator

Pending Orders

Flagged Order

Non-VA Meds Orders

```
Medication Profile             May 22, 2006 10:44:56        Page:    1 of   1
OPPATIENT16,ONE                                                           <A>
  PID: 000-24-6802                           Ht(cm): 177.80 (02/08/2004)
  DOB: APR 3,1941 (65)                       Wt(kg): 90.45 (02/08/2004)
  SEX: MALE
 CrCL: 102.4(est.) (CREAT:1.0mg/dL 10/30/12)    BSA (m2): 2.08
                            Non-VA Meds on File
                           Last entry on 01/13/01
                                                    ISSUE  LAST REF DAY
  #  RX #         DRUG                        QTY ST  DATE  FILL REM SUP
 -----------------------------------ACTIVE----------------------------------
  1 503902        ACETAMINOPHEN 500MG TAB      60 AT 05-22 05-22   3  30
  2 503886$       DIGOXIN (LANOXIN) 0.2MG CAP  60 A> 05-07 05-07   5  30
  3 503871$       HISTOPLASMIN 1ML              1 A  03-14 03-14R  5  30
  4 100002042$e   NALBUPHINE HCL INJ 10MG/ML    1 A  03-14 03-14   5  30
  5 100002040$    SALICYLIC ACID 40% OINT (OZ)  1 S  03-14 03-17   5  30
 --------------------------------DISCONTINUED-------------------------------
  6 503881        BACLOFEN 10MG TABS           30 DC 04-07 05-01   2  30
  7 100002020A$   TIMOLOL 0.25% OPTH SOL 10ML   1 DE 02-03 02-03   5  30
  8 10000205      HALOPERIDOL 20MG TAB          1 DF 02-03 02-03   5  30
  9 8201954       BILAFUMIN .05 MG CAP          1 DP 01-03 03-03   5  30
 10 6041972       RONINPENSATE 15MG SA TAB      1 DD 03-03 04-03   5  30
 11 3012001       PRESTANUS 1% SOL              1 DA 02-03 02-03   5  30

 ------------------------------------HOLD-----------------------------------
 12 8251996       VONITRATE CAL 325MG EC TAB    1 HP 02-03 02-03   5  30
 13 100001942     ABDOMINAL PAD 7 1/2 X 8  STERILE  1 H  09-28 09-28   5  30

 --------------------------------NON-VERIFIED-------------------------------
 14 100002039$    BACLOFEN 10MG TABS           30 N  03-14 03-14   5  30
 ----------------------------------PENDING----------------------------------
 15 AMPICILLIN 250MG CAP               QTY: 40      ISDT: 05-29  REF:  0
 16 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
 IBUPROFPEN 50MG TAB                            Date Documented: 12/10/00

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

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

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

A	Active
S	Suspended
N	Non-Verified or Drug Interactions
HP	Placed on hold by provider through CPRS
H	Placed on hold via backdoor Pharmacy
E	Expired
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 Computerized Patient Records System (CPRS), or another outside source, that have not been finished by Outpatient Pharmacy.

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

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

Example: Showing Rejected Prescriptions

```
Medication Profile         August 12, 2006@12:35:04         Page:   1 of   1
OPPATIENT16,ONE                                                     <A>
  PID: 000-24-6802                           Ht(cm): 177.80 (02/08/2005)
  DOB: APR 3,1941 (65)                       Wt(kg): 90.45  (02/08/2005)
  SEX: MALE
CrCL: 78.1(est.) (CREAT:1.0mg/dL 6/24/03)       BSA (m2): 2.08
                                           ISSUE   LAST  REF  DAY
#  RX #           DRUG                      QTY ST  DATE  FILL REM  SUP

----------------REFILL TOO SOON/DUR REJECTS (Third Party)----------------------
1 51368009$e     DIGOXIN (LANOXIN) 0.05MG CAP       90 A> 02-16 02-16  3  90
2 51360563e      OXYBUTYNIN CHLORIDE 15MG SA TAB   180 S> 02-15 05-06  0  90
--------------------------------ACTIVE-----------------------------------------
3 100003470e     ABSORBABLE GELATIN FILM            1 A   11-04 11-04  5  31
4 100003461      ACETAMINOPHEN 650MG SUPPOS.       10 A>  11-04 11-04  1  10
5 100003185e     ALBUMIN 25% 50ML                   2 A   08-01 08-01  5   5
------------------------------DISCONTINUED-------------------------------------
6 100003530      ANALGESIC BALM 1 POUND             1 A   01-08 01-08  3  90
7 100003400      APPLICATORS, COTTON TIP STERILE   10 A   09-23 09-23  5  31


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

Using List Manager with Outpatient Pharmacy

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

For Outpatient Pharmacy, the List Manager does the following:

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

Not all functionality displayed in this section (i.e., hidden and speed actions) is available to pharmacy technicians.

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. Outpatient Pharmacy hidden actions are displayed with the letters (OP) next to the 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.

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

Outpatient Pharmacy Hidden Actions

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

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

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

Action	Description
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.

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 Disply [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.
DC	Discontinue.
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 *Update Patient Record* 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.

Chapter 3: Using the Pharmacy Technician's Menu

The options shown in this chapter are intended for use by pharmacy technicians and other pharmacy personnel assigned the *PSO USER2* menu, who will view prescriptions and/or inquire into other Outpatient Pharmacy files.

Example: Accessing the *Pharmacy Technician's Menu*

```
Select OPTION NAME: PSO USER2      Pharmacy Technician's Menu
Outpatient Pharmacy software - Version 7.0
```

The following options are available on this menu:

- *Bingo Board User ...*
- *Change Label Printer*
- *DUE User ...*
- *Medication Profile*
- *Patient Prescription Processing*
- *Pull Early from Suspense*
- *Queue CMOP Prescription*
- *Release Medication*
- *Update Patient Record*

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]
- *Patient Prescription Processing* [PSO LM BACKDOOR ORDERS]
- *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 -
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 NNNNNNNNN-Entry PATIENT List?
```

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Chapter 4: Using the Bingo Board User Menu

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

Bingo Board User
[PSO BINGO USER]

This menu enables use of the bingo board display. The options on this menu allow the user to display, enter, or remove a patient's name or a number 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 Computerized Patient Record System (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 patient's 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 be entered.

A "Ticket #" prompt appears 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: OPPATIENT3,ONE   02-23-74    000579013    NO   NSC VETERAN


        OPPATIENT3,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: OPPROVIDER3,TWO
    Entered By: OPCLERK2,FOUR                 Time In: 10/31/06@06:46
    Drug: ACETAMINOPHEN 325MG TAB UD         Routing: MAIL

Ready For Pickup:
    Division: GENERAL HOSPITAL   Time In: 10:36    Time Out: 10:46
    Rx #: 1022731,


Enter Patient Name:
```

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Chapter 5: 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>
```

(This page included for two-sided copying.)

Chapter 5.5: Check Drug Interaction

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

Check Drug Interaction
[PSO CHECK DRUG INTERACTION]

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

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

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

Drug 3:

Now Processing Enhanced Order Checks!  Please wait...


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

CLINICAL EFFECTS:  Increase hypoprothrombinemic effects of warfarin.

============================================================
Press Return to Continue...:

Display Professional Interaction monograph? N// YES

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


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

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

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

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

Press Return to Continue or "^" to Exit:


Professional Monograph
   Drug Interaction with SIMVASTATIN 40MG TAB and WARFARIN 2MG TABS
```

```
        CLINICAL EFFECTS:  Increase hypoprothrombinemic effects of warfarin.

        PREDISPOSING FACTORS:  None determined.

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

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

Press Return to Continue or "^" to Exit:

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

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

Press Return to Continue or "^" to Exit:


Professional Monograph
   Drug Interaction with SIMVASTATIN 40MG TAB and WARFARIN 2MG TABS
        9.Crestor (rosuvastatin calcium) US prescribing information.
        AstraZeneca Pharmaceuticals LP February, 2012.

        Copyright 2012 First DataBank, Inc.

-----------------------------------------------------------

Enter RETURN to continue or '^' to exit:


Display Professional Interaction monograph? N// O
```

Chapter 6: Creating, Editing, and Printing a DUE Answer Sheet

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

DUE User

[PSOD DUE USER]

This menu provides the means to create an answer sheet entry in the DUE ANSWER SHEET file and edit an existing Answer Sheet. A blank form of a selected DUE questionnaire can also be printed in multiple copies to be distributed to providers to complete when ordering medications being evaluated.

- *1 Enter a New Answer sheet*
- *2 Edit an Existing Answer Sheet*
- *3 Batch Print Questionnaires*

Enter a New Answer Sheet

[PSOD CREATE ANSWER SHEET]

In this option, answers to a DUE Questionnaire can be entered. 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 user can search the file 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.

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.

Chapter 7: 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 prescription display includes all Non-VA Med orders also. 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
- last four digits of the patient's SSN
- 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 and or action 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 via backdoor Pharmacy
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

Code	Status/Description
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)

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
 CrCL: <Not Found>                           BSA (m2): _____
                          Non-VA Meds on File
                          Last entry on 1-20-05
                                              ISSUE  LAST REF DAY
 #  RX #          DRUG                      QTY ST   DATE  FILL REM SUP

---------------REFILL TOO SOON/DUR REJECTS (Third Party)---------------------
 1 2390$e       DIGOXIN (LANOXIN) 0.05MG CAP       90 A>  02-16 02-16  3  90
 2 2391e        OXYBUTYNIN CHLORIDE 15MG SA TAB   180 S>  02-15 05-06  0  90
--------------------------------ACTIVE--------------------------------------
 3 2396         AMPICILLIN 250MG CAP               40 A>  06-12 06-12  0  10
 4 2395         AZATHIOPRINE 50MG TAB              90 E   06-10 05-03  3  90
------------------------------DISCONTINUED----------------------------------
 5 2398         FOLIC ACID 1MG TAB                 90 DD> 05-03 05-03R 3  90
 6 2400         HYDROCORTISONE 1%CR                 1 DE> 05-03 05-03R 11 30
 7 2394         IBUPROFEN 400MG TAB 500'S         270 DC  05-03 05-03  3  90
 8 2399         MVI CAP/TAB                        90 DP> 05-03 05-03R 3  90
 9 2402         TEMPAZEPAM 15MG CAP                30 DF  06-01 06-01  5  30
10 2392         THIAMINE HCL 100MG TAB             90 DA> 05-03 05-03R 3  90
---------------------------------HOLD---------------------------------------
11 2393         WARFARIN 5MG TAB                   90 H   05-03  -    3  90
12 2401         FUROSEMIDE 40MG TAB                90 HP  05-03  -    2  90
 -------------------------------NON-VERIFIED--------------------------------
13 2397         BACLOFEN 10MG TABS                 30 N   03-14 03-14  5  30
--------------------------------PENDING-------------------------------------
14 CAPTOPRIL 25MG TAB              QTY: 180        ISDT: 06-12  REF:  3
15 MULTIVITAMIN CAP/TAB            QTY: 30         ISDT: 06-12> REF:  3
----------------------NON-VA MEDS (Not dispensed by VA) --------------------
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.
Hold Type display codes are shown in blue.
Discontinue Type display codes are shown in blue.
```

Medication Profile: Long Format

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

- physician's name
- fill date
- dates of refills/partial fills
- whether the prescription was filled at the pharmacy window or by mail

- clerk code
- total allowable refills
- which division filled it

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

Example: Medication Profile – Long Format

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

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

OPPATIENT,ONE                          ID#:   0777
    (TEMP ADDRESS from AUG 28,2006 till (no end date))
LINE1                                  DOB:   AUG 5,1919
ANYTOWN                                PHONE: 555-1212
TEXAS  77379                           ELIG:  NSC
CANNOT USE SAFETY CAPS.


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

DISABILITIES:

ALLERGIES:_____

ADVERSE REACTIONS:_____

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

Outpatient prescriptions are discontinued 72 hours after admission


                Medication Profile Sorted by ISSUE DATE


Rx #:  100001968Ae             Drug: LOPERAMIDE 2MG CAP
  SIG: TAKE TWO CAPSULES BY MOUTH EVERY DAY
  QTY: 60           # of Refills: 5      Issue/Expr: 12-15-05/06-16-06
  Prov: OPPROVIDER16,TWO   Entry By: 10000000013 Filled: 01-14-06 (M)
  Last Released:                        Original Release:
  Refilled: 02-19-04 (M)     Released:
  Remarks:
  Division: ALBANY (500)              Active          4 Refills Left
--------------------------------example continues----------------------------------
```

Example: Medication Profile – Long Format (continued)

```
------------------------------------------------------------------------------
                        Non-VA MEDS (Not Dispensed by VA)
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.
```

Example: Medication Profile – Long Format (continued)

```
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]

Note: Patch PSO*7*391 added a new sort selection, 'CS' to the Complete Orders from OERR, enabling users to select digitally signed pending CS orders separately.

See "Using the Pharmacy Intervention Menu" for more details.

Chapter 8: Processing a Prescription

This chapter describes the option and processes used in processing prescriptions.

Patient Prescription Processing
[PSO LM BACKDOOR ORDERS]

The *Patient Prescription Processing* option is used to process outpatient medication orders from OERR V. 3.0. This option uses List Manager features that allow the pharmacy technician to perform the following actions on a prescription without leaving this option.

- Enter a new Rx
- Refill
- Copy (new)
- Renew
- Reprint

- Release
- Order a partial
- Pull early from suspense
- Show a profile
- View activity log (new)

When a new drug order is processed (new, renewal, finish, verify, copy, or an edit that creates a new order), order checks are performed. These include checking for duplicate drug, duplicate drug 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
- 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 two levels of error messages associated with Enhanced Order Checking (Drug Interactions and Duplicate Therapy):

1. System - When a system level error occurs, no Drug Interaction or Duplicate Therapy order checks that utilize the COTS database (FDB) will be performed. Other order checks, such as

Allergy/ADRs, Duplicate Drug (for outpatient only), and the new CPRS order checks, etc. that are performed entirely within VISTA will continue to be executed.

2. Drug - When a drug level error occurs, no Drug Interaction or Duplicate Therapy 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 (GCNSENO mismatch) is rare.

See table below for an explanation of the errors:

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.
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 RemoteDrug: <DRUG NAME>, please complete a manual check for Drug Interactions and Duplicate Therapy.		If this error message is displayed, it means that the VA product that the local or remote drug being ordered/or on 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.

Error Level	Error Message	Reason	Why message is being displayed.
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.
Drug	Enhanced Order Checks cannot be performed for Orderable Item: <OI NAME>	No active, marked for IV Fluid Order Entry IV Additive/Solution found	The orderable item associate with an IV Fluid order did not have an active IV Additive/IV Solution marked for IV fluid order entry use at the time the order check was executed. This is another error the user will probably not see.

See examples below to illustrate error sequences.

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 Processing Enhanced Order Checks! Please wait...

No Enhanced Order Checks can be performed.
   Reason:  Vendor database cannot be reached.

Press Return to Continue...

Available Dosage(s)

1 TABLET
2 TABLETS

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

You entered 1 TABLET is this correct? Yes//   YES
VERB: TAKE
ROUTE: PO//
     1   PO   ORAL (BY MOUTH)      PO
     2   PO   ORAL      PO
CHOOSE 1-2: 1  ORAL (BY MOUTH)     PO   MOUTH
Schedule: Q4H (EVERY 4 HOURS)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES):
CONJUNCTION:
.
.
```

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 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//
.
.
```

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 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//
```

Enhanced Drug-Drug Interactions

This section describes the enhanced Outpatient Pharmacy application Drug-Drug interaction functionality (PSO*7*251).

Legacy VistA drug-drug interactions have been enhanced to utilize First DataBank (FDB) Drug Information Framework (DIF) business rules, Application Programming Interfaces (APIs) and database to provide more clinically relevant drug interaction information. VistA severity levels of 'critical' and 'significant' will continue to be used. 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.

See examples:

Drug interaction warning message for a local outpatient order:

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.
```

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
```

Drug interaction warning message for a remote outpatient order:

Significant Drug Interaction with Remote Rx

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

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

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

Critical Drug Interaction with Remote Rx

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

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

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

Drug interaction warning message that is currently displayed for a Non-VA medication:

Critical Drug Interaction with Non-VA Med Order

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

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

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

Significant Drug Interaction with Non-VA Med Order

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

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

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

Drug interaction warning message that shall be displayed for a pending order:

Critical Drug Interaction with Pending Order

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

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

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

Significant Drug Interaction with Pending Order

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

    Pending Drug: ASPIRIN 325MG TAB
```

```
            SIG: TAKE ONE TABLET EVERY 8 HOURS

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

Clinic Orders

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

MOCHA v1.0 Enhancements 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 v1.0 Enhancements 1, Inpatient medications will perform enhanced order checks for recently discontinued and expired inpatient medications clinic orders.

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

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

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

Unit Dose Clinic Order Check example:

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

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

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

IV Clinic Order Check example:

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

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

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

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

Unit Dose Clinic Order Check example:

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

Drug(s) Ordered:
   POTASSIUM CHLORIDE 30 MEQ

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

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

IV Order Check example:

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

Drug(s) Ordered:
   CEFAZOLIN 1 GM

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

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

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

Duplicate Drug Order Check

The Duplicate Drug order check is performed against active, pending, non-verified, orders on hold (initiated through pharmacy or CPRS), expired and discontinued orders. The timeframe for inclusion of expired and discontinued orders is determined by the display rules on the medication profile. This check will be performed on active Non-VA Medication orders.

Users have the capability to discontinue duplicate orders. 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 DRUG CHECK FOR CLERK outpatient site parameter is set to 'No', no discontinue action is allowed for a clerk on a duplicate drug check. If a medication order is being entered through the pharmacy backdoor options it will be deleted. If finishing a pending order, the user will be forced to discontinue it.

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 30 days or less will be included in the list of medications to be checked.

The Duplicate Drug warning displays the following information for a local or remote outpatient medication order:

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
```

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:

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

Non-VA Med Order
```
Duplicate Drug in a Non-VA Med Order for

                   Drug: CIMETIDINE 300MG TAB
                 Dosage: 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:

a. 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.

b. 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.

c. 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.

d. If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO, and a clerk (no PSORPH key) is finishing a pending order:

d1. 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.

d2. When the VERIFICATION outpatient site parameter is set to YES and the duplicate drug is a remote order

d2a. A duplicate drug warning will be displayed

d2b. The clerk will be allowed to finish the order

d2c. The finished order will have a status of non-verified

d3. When the VERIFICATION outpatient site parameter is set to NO, the clerk will not be allowed to finish the order.

d4. 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.

e. 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.

f. 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.

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)


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>
  (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)

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>
  (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
PSOPROVIDER,TEN          PSOPHARMACIST,ONE
# 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:
.
.
```

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.


VERB: TAKE
Available Dosage(s)
      1. 325MG
      2. 650MG

Select from list of Available Dosages, 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 (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//
.
```

Editing Dispense Drug – Create New Order

```
                 Rx #: 2605A
 (1) *Orderable Item: ASPIRIN TAB,EC
 (2)          Drug: ASPIRIN 325MG EC TAB <DIN>
 (3)        *Dosage: 325 (MG)
              Verb: TAKE
     Dispense Units: 1
             Noun: TABLET
            *Route: ORAL
          *Schedule: BID
 (4)Pat Instructions:
              SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
 (5)  Patient Status: OPT NSC
 (6)     Issue Date: 03/24/08            (7)  Fill Date: 03/24/08
     Last Fill Date: 03/24/08 (Window)
+       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): 2
DRUG: ASPIRIN 325MG EC TAB// ASPIRIN 8

  Lookup: GENERIC NAME
```

```
ASPIRIN 81MG EC TAB           CN103
         ...OK? Yes//   (Yes)

TRADE NAME:
--------------------------------------------------------------------------------
Duplicate Drug in Local Rx:

                 Rx #: 2606
                 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 03/24/08@08:55:32  (Window)
                                                Days Supply: 30
--------------------------------------------------------------------------------
Discontinue RX #2606 ASPIRIN 81MG EC TAB? Y/N NO -Prescription was not discontinued...
.
.
   OR


Discontinue RX #2606 ASPIRIN 81MG EC TAB? Y/N  YES

RX #2606 ASPIRIN 81MG EC TAB will be discontinued after the acceptance of the new order.


You have changed the dispense drug from
ASPIRIN 325MG EC TAB to ASPIRIN 81MG EC TAB.


Current SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
Do You want to Edit the SIG? YES//
Available Dosage(s)
      1. 81MG
      2. 162MG


Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 81MG

You entered 81MG is this correct? Yes//    YES
This edit will discontinue the duplicate Rx & change the dispensed drug!
Do You Want to Proceed? NO// YES

VERB: TAKE// TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 81MG

NOUN: TABLET// TABLET
ROUTE: ORAL// ORAL
Schedule: BID// QAM (EVERY MORNING)
LIMITED DURATION (IN MONTHS, WEEKS, DAYS, HOURS OR MINUTES):
CONJUNCTION:

New OP Order (ROUTINE)      Mar 24, 2008@14:10:20       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)

      Orderable Item: ASPIRIN TAB,EC
  (1)          Drug: ASPIRIN 81MG EC TAB
  (2) Patient Status: OPT NSC
  (3)     Issue Date: MAR 24,2008          (4) Fill Date: MAR 24,2008
  (5) Dosage Ordered: 81 (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): 60
  (9)   # of Refills: 11                     (10)  Routing: WINDOW
+        This change will create a new prescription!
```

```
AC    Accept                           ED    Edit
Select Action: Next Screen// AC    Accept

Nature of Order: SERVICE CORRECTION//        S
WAS THE PATIENT COUNSELED: NO// NO

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

Rx # 2607              03/24/08
PSOPATIENT,FOUR              #60
TAKE ONE TABLET BY MOUTH EVERY MORNING

ASPIRIN 81MG EC TAB
PSOPROVIDER,TEN              PSOPHARMACIST,ONE
# of Refills: 11

       SC Percent: 100%
     Disabilities: NONE STATED

Was treatment for a Service Connected condition? YES//
Is this correct? YES// ...

-Duplicate Drug RX #2606 ASPIRIN 81MG EC TAB has been discontinued...
.
.
```

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//
.
```

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:
.
```

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)

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
 (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)

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
 (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: 102.4(est.) (CREAT:1.0mg/dL 10/30/12)     BSA (m2): 1.78
                                                   ISSUE   LAST REF DAY
 #  RX #         DRUG                           QTY ST  DATE   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
.
```

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
          Dosage: 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
Available Dosage(s)
      1. 300MG
      2. 600MG
```

```
Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 300MG

You entered 300MG is this correct? Yes//
.
.
```

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.

VERB: TAKE
Available Dosage(s)
       1. 300MG
       2. 600MG

Select from list of Available Dosages, 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//  (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...

.
```

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                                                      <A>
 PID: 000-00-0000                            Ht(cm): 182.88 (04/13/2005)
 DOB: JAN 1,1945 (63)                        Wt(kg): 77.27 (04/13/2005)


             Rx #: 2584$
 (1) *Orderable Item: AMLODIPINE/ATORVASTATIN TAB
 (2)          Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
              Verb: TAKE
 (3)        *Dosage: ONE TABLET
           *Route: ORAL
         *Schedule: QAM
 (4)Pat Instructions:
              SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
 (5)  Patient Status: OPT NSC
 (6)     Issue Date: 03/12/08           (7)  Fill Date: 03/12/08
     Last Fill Date: 03/12/08 (Window)
  Last Release Date:                    (8)     Lot #:
          Expires: 03/13/09                     MFG:
+        Enter ?? for more actions


AC   Accept                          ED   Edit

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)

     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.

   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.

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.

If the verification site parameter is turned on, prescriptions entered by the technician will be non-verified and must be verified by the pharmacist. If the verification site parameter is turned off the label is queued to print as though the pharmacist has entered it unless the prescription causes a critical drug interaction. In which case, the prescription will be non-verified and must be verified by the pharmacist.

Actions are displayed in the action area of the screen. Actions with a parenthesis ( ) around them are invalid actions for that order. A double question mark (??) displays all the actions available, including the Outpatient Pharmacy hidden actions described in "Chapter 2: List Manager". If one of the hidden actions is selected and it is invalid, a message will display in the message window. Outpatient Pharmacy hidden actions are displayed with the letters OP next to the action.

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.

For the *Patient Prescription Processing,* if a temporary address has no end date, the following text is displayed in the Status column: "(Temp address from XXX 99,9999 till (no end date))".

Entering a New Order

If a double question mark (??) is entered at the "Select Action" prompt, the following hidden actions will display in the action area. Actions that apply only to outpatient orders are followed by (OP).

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

First, a patient is selected.

Example: Entering a New Order

```
Select Pharmacy Technician's Menu Option: PATient Prescription Processing
Select PATIENT NAME: 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>
```

[Patient Information Screen skipped]

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

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

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

Although "Quit" is the default at the "Select Action" prompt shown on the Patient Information screen, <**Enter**> at this prompt quits the screen and displays the Medication Profile. This Medication Profile includes any Non-VA Med orders documented via the CPRS GUI package.

```
Medication Profile          Jun 12, 2001 14:12:21          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: 102.4(est.) (CREAT:1.0mg/dL 10/30/12)    BSA (m2): 2.08
                                                  ISSUE  LAST REF DAY
 #  RX #         DRUG                           QTY ST  DATE   FILL REM SUP

--------------------------------ACTIVE----------------------------------
 1 503904$      AMPICILLIN 250MG CAP            80  E   05-25 05-25   0  10
 2 503886$      DIGOXIN (LANOXIN) 0.2MG CAP     60  A>  05-07 05-07   5  30
------------------------------DISCONTINUED------------------------------
 3 503902       ACETAMINOPHEN 500MG TAB         60  DC> 05-22 05-22   3  30
```

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

Typing in the letters "NO" at the "Select Action" prompt 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/BT (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 allergy checks.  Please wait...

Now Processing Enhanced Order Checks!  Please wait...

Press return to continue:

===============================================================================
*** 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 ?
```

(This page included for two-sided copying.)

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 order check examples.

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//
.
-------------------------------------------------------------------------
```

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:
.
.
```

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)


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
 (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)


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
 (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: 102.4(est.) (CREAT:1.0mg/dL 10/30/12)    BSA (m2): 1.78
                                                 ISSUE  LAST REF DAY
 #  RX #         DRUG                      QTY ST  DATE  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
.
.
```

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
          Dosage: 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
Available Dosage(s)
      1. 300MG
      2. 600MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 300MG

You entered 300MG is this correct? Yes//
.
.
```

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.

VERB: TAKE
Available Dosage(s)
       1. 300MG
       2. 600MG

Select from list of Available Dosages, 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//  (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...

.
```

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                                                    <A>
 PID: 000-00-0000                         Ht(cm): 182.88 (04/13/2005)
 DOB: JAN 1,1945 (63)                     Wt(kg): 77.27 (04/13/2005)


               Rx #: 2584$
 (1) *Orderable Item: AMLODIPINE/ATORVASTATIN TAB
 (2)          Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
              Verb: TAKE
 (3)        *Dosage: ONE TABLET
            *Route: ORAL
         *Schedule: QAM
 (4)Pat Instructions:
               SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
 (5)   Patient Status: OPT NSC
 (6)      Issue Date: 03/12/08          (7)  Fill Date: 03/12/08
     Last Fill Date: 03/12/08 (Window)
   Last Release Date:                   (8)      Lot #:
           Expires: 03/13/09                     MFG:
+        Enter ?? for more actions


AC   Accept                          ED   Edit

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)


     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.

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...
```

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!

Drug: DILTIAZEM (DILACOR XR) 240MG SA CAP
   Ingredients: DILTIAZEM (REMOTE SITE(S)),
   Class: CV200 CALCIUM CHANNEL BLOCKERS (REMOTE SITE(S))
```

Allergy/ADR Order Check Display

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

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

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

See examples below:

Remote Allergy/ADR – New Order Entry Backdoor – Both Ingredient and Drug Class defined for Allergy/ADR
```
Select Action: Quit// NO   New Order

PATIENT STATUS: SC//
DRUG: DILTIAZEM
  Lookup: GENERIC NAME
    1   DILTIAZEM (DILACOR XR) 240MG SA CAP          CV200     N/F      This
drug will not be processed without Drug Request Form 10-7144
    2   DILTIAZEM (INWOOD) 120MG SA CAP          CV200
    3   DILTIAZEM (INWOOD) 180MG SA CAP          CV200
    4   DILTIAZEM (INWOOD) 240MG SA CAP          CV200
    5   DILTIAZEM (INWOOD) 300MG SA CAP          CV200
```

```
Press <RETURN> to see more, '^' to exit this list, '^^' to exit all lists, OR
CHOOSE 1-5: 1  DILTIAZEM (DILACOR XR) 240MG SA CAP         CV200    N/F   This drug will
not be processed without Drug Request Form 10-7144

Now doing allergy checks.  Please wait...

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

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

Do you want to Intervene? Y// NO

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

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


Do you want to Intervene? Y// ES

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

PROVIDER:    PSOPROVIDER,THREE     TPP     119
RECOMMENDATION:    NO CHANGE

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


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

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

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

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

```
Another New Order for PSOPATIENT, TEN? YES//

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

Now doing allergy checks.  Please wait...


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

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

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for SEPTRA DS TAB

PROVIDER:    PSOPROVIDER,FOUR     FPP    119
RECOMMENDATION:    NO CHANGE

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


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

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

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

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

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

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

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

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

Now doing allergy checks.  Please wait...

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

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

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB

PROVIDER:    PSOPROVIDER, 11     PP     119
RECOMMENDATION:    NO CHANGE

See 'Pharmacy Intervention Menu' if you want to delete this
```

(This page included for two-sided copying.)

```
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 and discontinued orders is determined by the display rules on the medication profile. 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
```

```
             Dosage: 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 ANTAGOINSTS (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>
 (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

==============================================================================
*** 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
              Dosage: 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)
==============================================================================
*** 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...

Available Dosage(s)
       1. 150MG
       2. 300MG


Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list:
.
.
          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 CIMDTIDINE 300MG TAB will be discontinued after the acceptance
of the new order.

Available Dosage(s)
       1. 150MG
       2. 300MG

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

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: ANTILIPEMIC 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

============================================================================= 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

===============================================================================
*** 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) Mar 12, 2008@09:02:56       Page: 1 of  2
PSOPATIENT,ONE                                                    <A>
 PID: 666-00-0000                          Ht(cm): _____ (_____)
 DOB: JAN 1,1910 (98)                      Wt(kg): _____ (_____)


             Rx #: 2573
 (1) *Orderable Item: NIZATIDINE CAP,ORAL
 (2)          Drug: NIZATIDINE 150MG CAP
 (3)        *Dosage: 150 (MG)
              Verb: TAKE
    Dispense Units: 1
             Noun: CAPSULE
          *Route: ORAL
        *Schedule: BID
 (4)Pat Instructions:
             SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
 (5)  Patient Status: SC
 (6)     Issue Date: 03/07/08        (7)  Fill Date: 03/07/08
     Last Fill Date: 03/07/08 (Window)
+       Enter ?? for more actions
DC   Discontinue      PR  (Partial)        RL  (Release)
ED   Edit             RF  (Refill)         RN  (Renew)
Select Action: Next Screen// VF   VF


RX: 2573          PATIENT: PSOPATIENT,ONE (666-00-0000)
STATUS: Non-Verified
     DRUG: NIZATIDINE 150MG CAP
      QTY: 180    90 DAY SUPPLY
      SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
   LATEST: 03/07/2008           # OF REFILLS: 3  REMAINING: 3
   ISSUED: 03/07/08             PROVIDER:
   LOGGED: 03/07/08              CLINIC: NOT ON FILE
  EXPIRES: 03/08/09            DIVISION: HINES (499)
      CAP: SAFETY               ROUTING: WINDOW
 ENTRY BY: PSOPROVIDER,ONE       VERIFIED BY:

PATIENT STATUS : SC                      COPIES : 1

Press RETURN to Continue:
================================================================================
*** THERAPEUTIC DUPLICATION(S) *** NIZATIDINE 150MG CAP with

          Local Rx#: 2580A
               Drug: SUCRALFATE 1GM TAB  (ACTIVE)
                SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
                QTY: 180             Days Supply: 90
   Processing Status: Released locally on 3/12/08@08:55:32  (Window)
       Last Filled On: 03/12/08
```

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

================================================================================
Discontinue RX #2580A SUCRALFATE 1GM TAB ? Y/N  No

Press Return to Continue:
EDIT: (Y/N/P): N// O
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)

      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.

================================================================================
*** 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
 (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


===============================================================================
*** 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
    Processing Status: Released locally on 3/7/08@08:55:32  (Window)
       Last 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, 2008Printed:     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)***
 (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            (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// 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:
1. DIPYRIDAMOLE 25MG TAB
2. DIPYRIDAMOLE 50MG TAB

Select Drug by number:  (1-2): 1
===============================================================================
```

```
*** 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.

Do You want to Edit the SIG? NO// y  YES
Available Dosage(s)
      1. 25MG
      2. 50MG

Select from list of Available Dosages, 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 (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                                                      <A>
  PID: 666-00-0000                            Ht(cm): _____ (_____)
  DOB: JAN 1,1910 (98)                        Wt(kg): _____ (_____)

      Orderable Item: DIPYRIDAMOLE TAB
  (1)          Drug: DIPYRIDAMOLE 25MG TAB
  (2) Patient Status: SC
  (3)     Issue Date: MAR 12,2008        (4) Fill Date: MAR 12,2008
  (5) Dosage Ordered: 25 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
               Route: ORAL
            Schedule: TID
```

```
    (6)Pat Instruction:
                SIG: TAKE ONE TABLET BY MOUTH THREE TIMES A DAY
  (7)    Days Supply: 90                     (8)   QTY (TAB): 180
  (9)   # of Refills: 3                      (10)  Routing: WINDOW
+        This change will create a new prescription!
AC   Accept                              ED    Edit
Select Action: Next Screen// ac   Accept
Nature of Order: SERVICE CORRECTION//       S
WAS THE PATIENT COUNSELED: NO// NO

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

Rx # 2595              03/12/08
PSOPATIENT,ONE                    #180
TAKE ONE TABLET BY MOUTH THREE TIMES A DAY

DIPYRIDAMOLE 25MG TAB
PSOPROVIDER,ONE           PSOPHARMACIST,ONE
# of Refills: 3


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


       SC Percent: 80%
     Disabilities: NONE STATED

Was treatment for a Service Connected condition? YES//
Is this correct? YES// ...
.
```

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>                        BSA (m2): _____
                                               ISSUE  LAST REF DAY
 #  RX #      DRUG                         QTY ST  DATE  FILL REM SUP

----------------------------------ACTIVE----------------------------------
 1 2562      AMINOPHYLLINE 200MG TAB           360 A  03-04 03-04   3  90
 2 2567      CAPTOPRIL 12.5MG TAB              180 A  03-06 03-06   3  90
 3 2563      CISAPRIDE 10MG                     90 A  03-06 03-06   3  90
 4 2568      DIGOXIN 0.125MG                    30 A  03-06 03-06   3  90
 5 2550      IBUPROFEN 600MG TAB               270 A  03-03 03-03   3  90
 6 2560      WARFARIN 5MG TAB                   90 A  03-04 03-04   3  90
-------------------------------DISCONTINUED-------------------------------
 7 2561      CIMETIDINE 300MG TAB               90 DC 03-04 03-04   3  90
----------------------------------HOLD------------------------------------
+        Enter ?? for more actions
PU  Patient Record Update              NO  New Order
PI  Patient Information                SO  Select Order
Select Action: Next Screen// NO   New Order

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

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

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

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

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

     Pending Order FAMOTIDINE 20MG TAB

     Non-VA Med Order for CIMETIDINE 300MG TAB

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

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

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 allergy checks.  Please wait...


Now Processing Enhanced Order Checks!  Please wait...

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

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

-------------------------------------------------------------------------------
Press Return to Continue:

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

```
--------------------------------------------------------------------------------
Press Return to Continue:

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

================================================================================
Press Return to Continue:

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

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

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

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

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

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

(TAKE ONE TABLET BY MOUTH EVERY MORNING )

DAYS SUPPLY:  (1-90): 30// ^
RX DELETED

Duplicate Therapy RX #2710 RANITIDINE HCL 150MG TAB NOT Discontinued.
```

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
```

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 do
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

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

***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.


VERB: TAKE
Available Dosage(s)
     1. 25MG
     2. 50MG

Select from list of Available Dosages, 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//
.
.
```

Renewing an Order – Dangerous Meds for Patient >64 for Chlorpropamide
```
               Rx #: 2613$
 (1) *Orderable Item: CHLORPROPAMIDE TAB
 (2)          Drug: CHLORPROPAMIDE 25OMG TAB
 (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


***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.


2613A        CHLORPROPAMIDE 250MG TAB         QTY: 60
# OF REFILLS: 3  ISSUED: 03-25-08
SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
.
```

Creating New Order from Edit – Glucophage Lab Results for Metformin

```
*(1) Orderable Item: METFORMIN TAB,ORAL
 (2)          Drug: METFORMIN 500MG TAB
 (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)
+
     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 :

Available Dosage(s)
      1. 500MG
```

```
        2. 1000MG

Select from list of Available Dosages, 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 (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)

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

***Metformin Lab Results***

Metformin - no serum creatinine within past 60 days.


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//
.
```

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)

              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                                                   <A>
 PID: 000-00-0000                           Ht(cm): 177.80 (10/14/2005)
 DOB: JAN 1,1930 (78)                       Wt(kg): 136.36 (10/14/2005)


      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//
.
```

Reinstating a Discontinued Order – Glucophage Lab Results for Metformin

```
               Rx #: 2614$
   (1) *Orderable Item: METFORMIN TAB,ORAL
   (2)          Drug: METFORMIN 500MG TAB
   (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 Processing Enhanced Order Checks!  Please wait...


***Metformin Lab Results***

Metformin - Creatinine results: <creatinine greater than 1.5 w/in past <x> days>


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.
```

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.

Example: Entering a New Order (continued)

```
Available Dosage(s)
        1. 250MG
        2. 500MG
        3. 1000MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 3 500MG

You entered 500MG is this correct? Yes// <Enter> YES
```

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
```

(This page included for two-sided copying.)

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 stored list of possible routes, the entry will be expanded in the Sig.

```
ROUTE: PO// <Enter>   ORAL    PO  MOUTH
```
or
```
ROUTE: PO// @ <Enter to delete>
```

A default schedule associated with the drug ordered is displayed. 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 and expanded if the entry matches. Any entry not found in the list of common abbreviations will be displayed in the Sig as entered.

```
Schedule: QID//  (FOUR TIMES 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. Follow the number with an "H" to specify hours or an "M" to specify minutes.

NOTE: Do not use this field for Days Supply.

Example: Entering a New Order (continued)

```
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10 (DAYS)
```

The CONJUCTION 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: WF                 WITH FOOD

(TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS WITH FOOD)

OTHER PATIENT INSTRUCTIONS: WF           CON ALIMENTO
```

Patch PSS*1*47 adds two new optional fields, OTHER LANGUAGE PREFERENCE and PMI LANGUAGE PREFERENCE in the PHARMACY PATIENT file (#55) that stores 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 option Update Patient Record [PSO PAT] 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 this calculation.

```
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// ??

                           Require        Print      Print on
  Nature of Order Activity  E.Signature  Chart Copy  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> W
WAS THE PATIENT COUNSELED: NO// y  YES
WAS COUNSELING UNDERSTOOD: NO// y  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
OPPROVIDER4,TWO            OPPHARMACIST4,THREE
# of Refills: 11

       SC Percent: 40%
      Disabilities: NONE STATED

Was treatment for Service Connected condition? NO
```

To determine if the order should be charged copay, eligible copay exemptions for the order are prompted one at a time. In this example, the user is prompted if the order is being prescribed for any of the service-connected conditions displayed. If any other service connected conditions apply to the patient, questions

for each would appear. In this example, the patient is enrolled for Service Connection and Agent Orange exposure. Each applicable copay exemption prompt will appear no matter what is answered previously.

Example: Entering a New Order (continued)

```
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 default dosages. Because the dosage is non-numeric, values for dispense units per dose and quantity cannot be calculated.

```
DRUG:    HYDROCORTISONE 0.5% CREAM         DE200     VISN FORM; 30 GM/TUBE (IEN)
         ...OK? Yes//   (Yes)
Now doing order checks.  Please wait...

Available Dosage(s)
       1. SMALL AMOUNT
       2. MODERATE AMOUNT
       3. LIBERALLY
       4. LARGE AMOUNT

Select from list of Available Dosages, 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// TOPICAL
```

A default quantity cannot be calculated for complex orders containing the conjunction "Except."

Displaying a Patient's Remote Prescriptions

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

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

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 INTRUCTION ON SIG1 TESTING FOR
                    PATIENT INTRUCTION ON SIG1 TESTING FOR PATIENT
                    REPLACE IENT WITH IENT TESTING FOR PATIENT
+        Enter ?? for more actions

Select Action:Next Screen//
```

Entering a New Order – ePharmacy (Third Party Billable)

For patients who have third party insurance and have the appropriate eligibility requirements, the software will create an ePharmacy order upon finishing of the prescription entry.

After a WINDOW order is entered and finished, the billing data is sent to the Electronic Management Claims Engine (ECME). ECME sends messages 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-9 diagnosis codes: <Enter>

Select Primary ICD-9 Code: <Enter>
VERB: TAKE
Available Dosage(s)
        1. 20MG
        2. 40MG

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

You entered 20MG is this correct? Yes//  <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 (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)
 --------------------------------example continues--------------------------------------
```

Example: Entering a New Order for ePharmacy Billing (continued)

```
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


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
 --------------------------------example continues---------------------------------------
```

View of RX:

```
Medication Profile          Nov 02, 2005@07:33:29        Page:   1 of   1
OPPATIENT,FOUR
  PID: 000-01-1322P                          Ht(cm): _____  (_____)
  DOB: JAN 13,1922 (83)                      Wt(kg): _____  (_____)
  SEX: MALE
 CrCL: <Not Found>                           BSA (m2): _____
                                                  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
```

Denotes ePharmacy Rx

```
          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 displays a sample ECME transmission rejection, and how to resolve the rejection error.

Example: Handling a Rejected New Order for ePharmacy Billing

```
Prescription 999999 successfully submitted to ECME for claim generation.

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


              *** REJECT RECEIVED FROM THIRD PARTY PAYER ***
    -------------------------------------------------------------------
    Division : ALBANY                   NCPDP: 123456789 NPI#: 39393939
    Patient  : OPPATIENT,FOUR(000-01-1322P)  Sex: M     DOB: JAN 13,1922(83)
    Prescription : 99999999/0 - TESTOSTERONE (ANDROD   ECME#: 000001234567
    Reject Type  : 88 - DUR REJECT received on FEB 27, 2006@10:58:25
    Payer Message: DUR Reject Error
    Reason       : ER (OVERUSE PRECAUTION)
    DUR Text     : ANDRODERM    DIS 5MG/24HR
    Insurance    : EMDEON                      Contact: 800 555-5555
    Group Name   : RXINS                  Group Number: 12454
    Cardholder ID: 000011322P
    -------------------------------------------------------------------

    Select one of the following:

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

(O)verride,(I)gnore,(Q)uit: Q// 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.

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

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

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

     Confirm? ? YES// <Enter>

Prescription 99999999 successfully submitted to ECME for claim generation.

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

For Refill Too Soon rejects, the same choices apply.

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 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. 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


                   *** REJECT RECEIVED FROM THIRD PARTY PAYER ***
     ---------------------------------------------------------------------
     Division : ALBANY               NPI: 123456789       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): _____ (_____)

              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:
+
DC   Discontinue         PR   Partial          RL   Release
ED   Edit                RF   (Refill)         RN   Renew
Select Action: Next Screen// p    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): _____ (_____)

              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 unless the user holds the PSO TRICARE/CHAMPVA security key.

```
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 Code


               *** REJECT RECEIVED FOR  CHAMPVA  PATIENT ***
     -----------------------------------------------------------------------
     Division : ALBANY ISC                NPI#: 5000000021   NCPDP:1234567
     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
          Q           (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)verride,(D)iscontinue,(Q)uit: Q//
```

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:

            D          (D)iscontinue - DO NOT FILL PRESCRIPTION
            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): _____ (_____)

             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:
+
DC   Discontinue        PR   Partial            RL   Release
ED   Edit               RF   (Refill)           RN   Renew
Select Action: Next Screen// p    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): _____ (_____)

             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
```

(This page included for two-sided copying.)

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 or scan the bar code of the existing prescription label and then 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 or a Reject Resolution Required 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, 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 prompting 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 the technician when processing. If the NDC change has prompted a claim reversal and produced a RTS/DUR rejection or a Reject Resolution Required rejection, the pharmacist will be presented with a Reject Processing screen at release.

Example: Matched NDC:

```
elect ePharmacy Menu Option: NV  NDC Validation

WAND BARCODE or enter Rx#: 2054787B

Rx: 2054787B        Fill: 0             Patient: OPPATIENT,TWO
Drug: AMOXICILLIN 250MG CAP            NDC: 00003-0101-60

** This NDC has not been validated.


PRODUCT NDC: 00003-0101-60// 00003-0101-60

NDC match confirmed.


WAND BARCODE or enter Rx#:
```

Example: Changed NDC:

Or Modified NDC

```
Select ePharmacy Menu Option:  NDC Validation

WAND BARCODE or enter Rx#:

Rx: 102009        Fill: 0             Patient: OPPATIENT,ONE
Drug: BIPERIDEN 2MG TAB              NDC: 00044-0120-04

** This NDC has not been validated.


PRODUCT NDC: 00044-0120-04// 00044-0120-05 00044-0120-05


Prescription 102009 successfully submitted to ECME for claim generation.

Claim Status:
Reversing and Rebilling a previously submitted claim...
IN PROGRESS-Waiting to start
IN PROGRESS-Building the transaction
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
E REVERSAL ACCEPTED
IN PROGRESS-Building the claim
IN PROGRESS-Building the HL7 packet
IN PROGRESS-Transmitting
E PAYABLE


NDC match confirmed.


WAND BARCODE or enter Rx#:
```

Using the Copy Action

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

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

Use the Copy action to make a duplicate order. Any field of the newly created order can be edited. The original order will remain active, but the duplicate order check will be processed before the new order can be accepted.

Example: Using the Copy Action

```
Medication Profile          Jun 12, 2001 14:39:11        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)
                                                      ISSUE  LAST REF DAY
  #  RX #         DRUG                       QTY ST  DATE  FILL REM SUP

-----------------------------------ACTIVE-------------------------------------
  1 503904$      AMPICILLIN 250MG CAP           80  E  05-25 05-25   0  10
  2 503886$      DIGOXIN (LANOXIN) 0.2MG CAP    60  A> 05-07 05-07   5  30
  3 503916       NADOLOL 40MG TAB               60  A> 06-12 06-12  11  30
--------------------------------DISCONTINUED----------------------------------
  4 503902       ACETAMINOPHEN 500MG TAB        60  DC>05-22 05-22   3  30




          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:  (1-4):3
```

The Order Number can be entered at the "Select Action" prompt instead of "SO".

Once an order is selected, the Copy action can be used.

```
OP Medications (ACTIVE)      Jun 12, 2001 14:42:17        Page:    1 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)

            Rx #: 503916
(1) *Orderable Item: NADOLOL TAB ***(N/F)***
(2)      CMOP Drug: NADOLOL 40MG TAB ***(N/F)***
(3)         *Dosage: 40 (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: SERVICE CONNECTED
(6)     Issue Date: 06/12/01          (7)  Fill Date: 06/12/01
    Last Fill Date: 06/12/01 (Window)
+       Enter ?? for more actions
DC  Discontinue         PR   Partial            RL   Release
ED  Edit                RF   Refill             RN   Renew
Select Action: Next Screen// CO   COPY

--------------------------------example continues------------------------------
```

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".

(New Order (Copy) screen displays merged to save space)

Example: Using the Copy Action (continued)

```
New OP Order (COPY)         Jun 12, 2001 14:47:53      Page:   1 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)


       Orderable Item: NADOLOL TAB ***(N/F)***
  (1)       CMOP Drug: NADOLOL 40MG TAB ***(N/F)***
  (2) Patient Status: SERVICE CONNECTED
  (3)     Issue Date: JUN 12,2001          (4) Fill Date: JUN 12,2001
  (5) Dosage Ordered: 40 (MG)
              Verb: TAKE
     Dispense Units: 1
              Noun: TABLET
             Route: ORAL
          Schedule: BID
  (6)Pat Instruction:
               SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
  (7)    Days Supply: 30                   (8)   QTY (TAB): 60
  (9)   # of Refills: 11                   (10)   Routing: WINDOW
 (11)         Clinic: OUTPT NURSE BLUE TEAM
 (12)       Provider: OPPROVIDER4,TWO      (13)    Copies: 1
 (14)        Remarks: New Order Created by copying Rx # 503916.
   Entry By: OPPROVIDER4,TWO                Entry Date: JUN 12,2001 14:47:53

+         Enter ?? for more actions
AC   Accept                               ED   Edit
Select Action: Next Screen// AC    Accept


--------------------------------------------------------------------------------
Duplicate Drug in Local Rx:

                 Rx #: 503916
                 Drug: NADOLOL 40MG TAB
                  SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
                  QTY: 60            Refills remaining: 11
             Provider: OPPROVIDER4,TWO           Issued: 06/12/01
               Status: Active          Last filled on: 06/12/01
    Processing Status: Released locally on 06/12/01@11:34:13  (Mail)
                                          Days Supply: 30
 -------------------------------------------------------------------------------

Discontinue Rx # 503916? YES

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

Now doing order checks.  Please wait...

Nature of Order: WRITTEN// ??
```

--------------------------------**example continues**-------------------------------------

Example: Using the Copy Action (continued)

```
                            Require        Print      Print on
   Nature of Order Activity  E.Signature   Chart Copy  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>    W
WAS THE PATIENT COUNSELED: NO// <Enter>NO


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


Rx # 503919              06/12/01
OPPATIENT16,ONE                    #60
TAKE ONE TABLET BY MOUTH TWICE A DAY


NADOLOL 40MG TAB
OPPROVIDER4,TWO          OPPHARMACIST4,THREE
# of Refills: 11


Is this correct? YES// <Enter>...
 -Rx 503916 has been discontinued...


      SC Percent: 20%
    Disabilities:
KNEE CONDITION                                10% - SERVICE CONNECTED
TRAUMATIC ARTHRITIS                           10% - SERVICE CONNECTED
TRAUMATIC ARTHRITIS                            0% - SERVICE CONNECTED
SEPTUM, NASAL, DEVIATION OF                    0% - SERVICE CONNECTED
RESIDUALS OF FOOT INJURY                       0% - SERVICE CONNECTED


Was treatment for Service Connected condition? NO
```

The Medication Profile screen is redisplayed at this point. Note that the orders tagged for patient copay charges have a dollar sign ($) after the RX #.

```
Medication Profile         Jun 12, 2001 15:03:10      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)
                                               ISSUE  LAST REF DAY
 #  RX #          DRUG                    QTY ST  DATE   FILL REM SUP


---------------------------------ACTIVE----------------------------------
 1 503904$     AMPICILLIN 250MG CAP           80 E  05-25 05-25   0  10
 2 503886$     DIGOXIN (LANOXIN) 0.2MG CAP    60 A> 05-07 05-07   5  30
 3 503919$     NADOLOL 40MG TAB               60 A> 06-12 06-12  11  30
-------------------------------DISCONTINUED------------------------------
 4 503902      ACETAMINOPHEN 500MG TAB        60 DC>05-22 05-22   3  30


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

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.
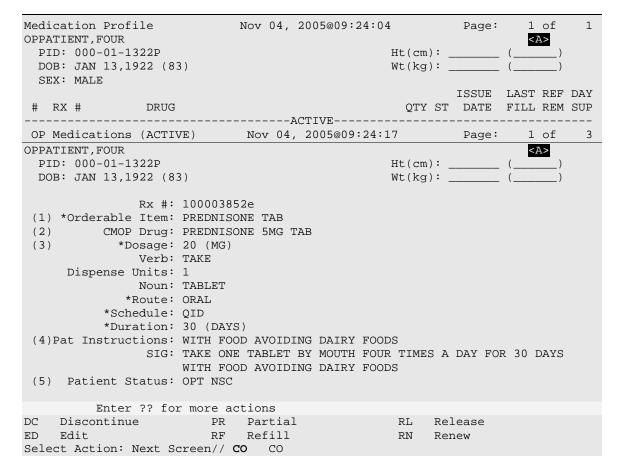
```
Patient Information          Nov 04, 2005@09:19:26       Page:    1 of    1
OPPATIENT,FOUR                                                     <A>
  PID: 000-01-1322P                          Ht(cm): _____ (_____)
  DOB: JAN 13,1922 (83)                      Wt(kg): _____ (_____)
  SEX: MALE


Eligibility: NSC, VA PENSION


Disabilities:


123123  A
BIRMINGHAM                                   PHONE: (205)4444444
ALABAMA  35235
Prescription Mail Delivery: Regular Mail



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                                                     <A>
  PID: 000-01-1322P                          Ht(cm): _____ (_____)
  DOB: JAN 13,1922 (83)                      Wt(kg): _____ (_____)
  SEX: MALE
 CrCL: <Not Found>                         BSA (m2): _____
                                              ISSUE  LAST REF DAY
 #  RX #          DRUG                     QTY ST  DATE  FILL REM SUP

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






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

Example: Copying an ePharmacy Order (continued)

```
Medication Profile             Nov 04, 2005@09:24:04        Page:    1 of    1
OPPATIENT,FOUR                                                         <A>
  PID: 000-01-1322P                                Ht(cm): _____ (_____)
  DOB: JAN 13,1922 (83)                            Wt(kg): _____ (_____)
  SEX: MALE

                                                     ISSUE  LAST REF DAY
 #  RX #          DRUG                        QTY ST  DATE  FILL REM SUP
----------------------------------ACTIVE----------------------------------
 OP Medications (ACTIVE)        Nov 04, 2005@09:24:17        Page:    1 of    3
OPPATIENT,FOUR                                                         <A>
  PID: 000-01-1322P                                Ht(cm): _____ (_____)
  DOB: JAN 13,1922 (83)                            Wt(kg): _____ (_____)

               Rx #: 100003852e
(1) *Orderable Item: PREDNISONE TAB
(2)        CMOP Drug: PREDNISONE 5MG TAB
(3)          *Dosage: 20 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
              *Route: ORAL
           *Schedule: QID
           *Duration: 30 (DAYS)
(4)Pat Instructions: WITH FOOD AVOIDING DAIRY FOODS
                 SIG: TAKE ONE TABLET BY 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): _____ (_____)

      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 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
--------------------------------example continues--------------------------------
```

Example: Copying an ePharmacy Order (continued)

```
--------------------------------------------------------------------------------
Duplicate Drug in Local Rx:

                    Rx #: 100003852
                    Drug: PREDNISONE 5MG TAB
                     SIG: TAKE ONE TABLET 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 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 MOUTH FOUR TIMES A DAY FOR 30 DAYS WITH FOOD
AVOIDING DAIRY FOODS

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



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

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

 -Rx 100003852 has been discontinued...

Prescription 100003853 successfully submitted to ECME for claim generation.

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

View of RX:

```
Medication Profile           Nov 04, 2005@09:25:14        Page:    1 of    1
OPPATIENT,FOUR
 PID: 000-01-1322P                          Ht(cm): _____  (_____)
 DOB: JAN 13,1922 (83)                      Wt(kg): _____  (_____)
 SEX: MALE
 CrCL: <Not Found>                       BSA (m2): _____
                                                   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//
```

Holding and Unholding a Prescription

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

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

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

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

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

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

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

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

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

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

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

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): _____ (_____)

              Rx #: 100002926
 (1) *Orderable Item: FLUOXETINE CAP,ORAL
 (2)        CMOP Drug: EFFEXOR
 (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)
```

Note: 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.
```

(This page included for two-sided copying.)

Renewing a Prescription

This action allows the pharmacy technician to process renewals for existing orders.

Example: Renewing a Prescription

[This example begins after an order has been selected from the Medication Profile screen.]

```
OP Medications (ACTIVE)      Jun 12, 2001 15:08:43      Page:   1 of   3
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: 78.1(est.) (CREAT:1.0mg/dL 2/19/99)    BSA (m2): 2.08

                 Rx #: 503886$
 (1) *Orderable Item: DIGOXIN CAP,ORAL
 (2)        CMOP Drug: DIGOXIN (LANOXIN) 0.2MG CAP
 (3)          *Dosage: .2 (MG)
                 Verb: TAKE
      Dispense Units: 1
                 Noun: CAPSULE
               *Route: ORAL (BY MOUTH)
           *Schedule: Q12H
 (4)Pat Instructions: TAKE AFTER MEALS
   Provider Comments: TAKE AFTER MEALS
                 SIG: TAKE ONE CAPSULE BY MOUTH EVERY 12 HOURS TAKE AFTER MEALS
 (5)  Patient Status: SERVICE CONNECTED
 (6)      Issue Date: 05/07/01          (7)  Fill Date: 05/07/01
 +        Enter ?? for more actions
DC  Discontinue        PR   Partial          RL   Release
ED  Edit               RF   Refill           RN   Renew
Select Action: Next Screen// RN   Renew
FILL DATE:  (6/12/2001 - 6/13/2002): TODAY// <Enter>

MAIL/WINDOW: WINDOW// <Enter> WINDOW

METHOD OF PICK-UP: <Enter>

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


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


Now Renewing Rx # 503886   Drug: DIGOXIN (LANOXIN) 0.2MG CAP


Now doing order checks.  Please wait...


503886A     DIGOXIN (LANOXIN) 0.2MG CAP      QTY: 60
# OF REFILLS: 5  ISSUED: 06-12-01
SIG: TAKE ONE CAPSULE BY MOUTH EVERY 12 HOURS TAKE AFTER MEALS
FILLED: 06-12-01
ROUTING: WINDOW     PHYS: OPPROVIDER4,TWO


Edit renewed Rx ? Y// <Enter>  ES

--------------------------------example continues--------------------------------
```

At this point, the order can be edited as discussed in the Editing a New Order example. If the order is not edited, the order is renewed and the display returns to the Medication Profile screen.

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).

After the edits are made, the order is redisplayed and it can be re-edited or accepted.

If an order was entered before patch PSO*7*46 update, the user will be prompted to fill in any missing dosing information needed as illustrated in this example.

Example: Renewing a Prescription (continued)

```
Edit renewed Rx ? Y// NO

Dosing Instruction Missing!!

Drug: CALCIUM CARBONATE 650MG TAB
TAKE 1 TABLET(S) BY MOUTH THREE TIMES A DAY

FILLED: 04-02-01
ROUTING: WINDOW     PHYS: OPPROVIDER29,TWO

Edit renewed Rx ? Y// <Enter> ES
Available Dosage(s)         Apr 02, 2001@10:49:06
       1. 650MG
       2. 1300MG
Select from list of Available Dosages or Enter Free Text Dose: 1 650MG

You entered 650MG is this correct? Yes// <Enter>  YES
DISPENSE UNITS PER DOSE(TAB): 1// <Enter> 1
Dosage Ordered: 650MG
ROUTE: PO// <Enter>  ORAL     PO  MOUTH
Schedule: TID (THREE TIMES A DAY)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): <Enter>
CONJUNCTION: <Enter>
PATIENT INSTRUCTIONS: <Enter>

(TAKE ONE TAB BY MOUTH THREE TIMES A DAY)


1460971A    CALCIUM CARBONATE 650MG TAB      QTY: 100
# OF REFILLS: 10  ISSUED: 04-02-01
SIG: TAKE ONE TAB BY MOUTH THREE TIMES A DAY
```

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 12,1975 (29)                          Wt(kg): _____ (_____)

            Rx #: 100003642$e
 (1) *Orderable Item: SIMETHICONE TAB,CHEWABLE
 (2)          Drug: SIMETHICONE 40MG TAB
 (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 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 12,1975 (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 12,1975 (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>
```

Example: Renewing an ePharmacy Order (continued)

```
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...

Prescription 100003642A 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-Receiving response
E PAYABLE
```


Original Provider Comments are not carried over to any renewals in Outpatient Pharmacy.

Chapter 9: Pull Early from Suspense

This chapter describes the options used for handling suspended prescriptions.

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, and the user will not be able to reprint a label with the *Reprint Batches from Suspense* option. 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.

The user may also edit the "Method of Pickup". For the prompt "Pull Rx(s) and delete from Suspense", the user should answer **YES** to pull the prescriptions, and they will always be deleted from suspense.

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
                    ID# : 000-00-0000

 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), Reject Resolution Required 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.

(This page included for two-sided copying.)

Chapter 10: 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.

(This page included for two-sided copying.)

Chapter 11: Releasing Medication

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 (SWAC) 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 prescription 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# 101906 (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 continues-------------------------------------
```

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 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        OPPROVIDER11,TWO
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        OPPROVIDER11,TWO
Comment:  NO BILLING FOR THIS FILL
2  10/23/01     IB-INITIATED COPAY   ORIGINAL        OPROVIDER11,TWO

Comment: PARTIAL CHARGE
```

If a prescription is <u>not</u> 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 the pharmacy must use.

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's* option in the *Controlled Substances* (CS) menu. If DEA/PKI is activated and an order is digitally signed, the user is advised that the order must be released through the *Outpatient Rx's* option in the *Controlled Substances* (CS) menu. The same message displays if a user attempts to release a digitally signed CSII order during Speed Release or when using the *Release Medication* 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*


--------------------------------------------------------------------

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.

Note: 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

ePharmacy Rx – Obtain Signature
```

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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 that the current prescription NDC.
- NDC CODE field values in the SYNONYM sub-file in the DRUG file, if valid and different that 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 the DRUG file.

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 the Electronic Claims Management Engine (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. For ePharmacy prescriptions, the releasing pharmacist will receive a notation as to whether the NDC was previously validated. If prior validation of the NDC resulted in a third party claims rejection, the pharmacist will be presented with a Reject Processing screen at release.

Example: Releasing an ePharmacy Order – Selecting Default NDC

```
Select Outpatient Pharmacy Manager Option: RELEASE Medication

Enter PHARMACIST: OPPHARMACIST4,THREE

Enter/Wand PRESCRIPTION number: 100003853
** The following NDC was validated on SEP 19, 2008@16:21:23 by OPTECH,ONE.
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

ePharmacy Rx – Obtain Signature
```

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

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 12: Updating a Patient's Record

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 and to update patient records 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

```
Bingo Board Display: OUTPATIENT// <Enter>
Update Patient Record

Select Patient:     OPPATIENT,ONE    12-4-53   000007890   YES     SC VETERAN

OPPATIENT, ONE                          ID#:   000-00-7890
4500 S MAIN ST                          DOB:   DEC 4,1953
ADDRESS LINE2
LINE 3 OF ADDRESS
MADISON                                 PHONE: 555-555-1653
WISCONSIN  53705                        ELIG:  SC LESS THAN 50%
                                        SC%:   10

WEIGHT(Kg):                             HEIGHT(cm):
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? NO// YES
Update (P)ermanent address, (T)emporary, or (B)oth: BOTH// PERMANENT
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:

--------------------------------example continues-------------------------------------
```

```
         1          MADISON*
CITY: MADISON// <Enter> *
STATE: WISCONSIN
COUNTY: DANE
PHONE NUMBER [RESIDENCE]: 555-555-1653// 555-555-1653
PHONE NUMBER [WORK]:
    BAD ADDRESS INDICATOR: ?

    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: <Enter>

Temporary Address:


TEMPORARY ADDRESS ACTIVE?: NO//  <Enter> NO

Press Return to continue: <Enter>

PHONE NUMBER [CELLULAR]: <Enter>
CNH CURRENT: <Enter>
FEE HOSPITAL I.D.: <Enter>
REMARKS: <Enter>


     >>PHARMACY PATIENT DATA<<

CAP: <Enter>
MAIL: <Enter>
MAIL STATUS EXPIRATION DATE: <Enter>
DIALYSIS PATIENT: <Enter>
NARRATIVE: <Enter>
Eligibility: COLLATERAL OF VET. <Enter>
Disabilities: <Enter>
PATIENT STATUS: SERVICE CONNECTED// <Enter>
COMMUNITY NURSING HOME: <Enter>
NURSING HOME CONTRACT: <Enter>
LAST DATE OF CONTRACT: <Enter>
RESPITE PATIENT START DATE: <Enter>
RESPITE PATIENT END DATE: <Enter>
OTHER LANGUAGE PREFERENCE: <Enter>
PMI LANGUAGE PREFERENCE: <Enter>
```

Chapter 13: CPRS Order Checks: How They Work

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.

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.

Note: 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.

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.

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Chapter 14: Error Messages

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	"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.
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.
Drug	Enhanced Order Checks cannot be performed for Orderable Item: <OI NAME>	No active, marked for IV Fluid Order Entry IV Additive/Solution found	The orderable item associate with an IV Fluid order did not have an active IV Additive/IV Solution marked for IV fluid order entry use at the time the order check was executed. This is another error the user will probably not see.

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.

Two Levels of Error Messages

System   When a system level error occurs, no Drug Interaction or Duplicate Therapy order checks that utilize the COTS database (FDB) will be performed. Other order checks, such as Allergy/ADRs, Duplicate Drug (for outpatient only), and the new CPRS order checks, etc. that are performed entirely within VISTA will continue to be executed.

Drug   When a drug level error occurs, no Drug Interaction or Duplicate Therapy 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 (GCNSENO mismatch) is rare.

Glossary

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

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

Acronym/Term	Definition
CrCL	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.
Critical	Interactions with severe consequences that require some type of action (finding facts, contacting prescribers) to prevent potential serious harm.
DATUP	Data Update (DATUP). Functionality that allows the Pharmacy Enterprise Customization System (PECS) to send out VA custom and standard commercial-off-the-shelf (COTS) vendor database changes to update the production and pre-production centralized MOCHA databases at Austin and Philadelphia.
DEA	Drug Enforcement Agency
DEA Special Handling	The Drug Enforcement Agency special Handling code used for drugs to designate if they are over-the counter, narcotics, bulk compounds, supply items, etc.
DHCP	See VistA.
DIF	Drug Information Framework
Dispense Drug	The Dispense Drug name has the strength attached to it (e.g., Acetaminophen 325 mg). The name alone without a strength attached is the Orderable Item name.
DoD	Department of Defense
Dosage Ordered	After the user has selected the drug during order entry, the dosage ordered prompt is displayed.
Drug/Drug Interaction	The pharmacological or clinical response to the administration of a drug combination different from that anticipated from the known effects of the two agents when given alone.
DUE	Drug Usage Evaluation
ETC	Enhanced Therapeutic Classification system
Expiration/Stop	The date on which a prescription is no longer active. Typically, this date is 30 days after the issue date for narcotics, 365 days after the issue date for other medications and 365 days after the issue date for supplies.
FDB	First DataBank
Finish	Term used for completing orders from Order Entry/Results Reporting V. 3.0.
GUI	Acronym for Graphical User Interface.
Issue Date	The date on which the prescription was written. This date is usually, but not always, the same as the first fill date. This date cannot be later than the first fill date.
HDR-Hx	Health Data Repository Historical

Acronym/Term	Definition
HDR-IMS	Health Data Repository- Interim Messaging Solution
HFS	Host File Server.
Health Insurance Portability and Accountability Act of1996 (HIPAA)	A Federal law that makes a number of changes that have the goal of allowing persons to qualify immediately for comparable health insurance coverage when they change their employment relationships. Title II, Subtitle F, of HIPAA gives HHS the authority to mandate the use of standards for the electronic exchange of health care data; to specify what medical and administrative code sets should be used within those standards; to require the use of national identification systems for health care patients, providers, payers (or plans), and employers (or sponsors); and to specify the types of measures required to protect the security and privacy of personally identifiable health care information. Also known as the Kennedy-Kassebaum Bill, the Kassebaum-Kennedy Bill, K2, or Public Law 104-191.
JCAHO	Acronym for Joint Commission on Accreditation of Healthcare Organizations
Label/Profile Monitor	A file for each printer which records, in the order in which they were printed, the last 1000 labels or profiles printed on that printer. This allows a rapid reprint of a series of labels or profiles that were damaged by a printer malfunction or other event.
Local Possible Dosages	Free text dosages that are associated with drugs that do not meet all of the criteria for Possible Dosages.
Medication Instruction File	The MEDICATION INSTRUCTION file is used by Unit Dose and Outpatient Pharmacy. It contains the medication instruction name, expansion and intended use.
Medication Order	A prescription.
Medication Profile	A list of all active or recently canceled or expired prescriptions for a patient sorted either by date, drug, or classification. Unlike the action profile, this profile is for information only and does not provide a signature line for a physician to indicate action to be taken on the prescription.
Medication Routes File	The MEDICATION ROUTES file contains medication route names. The user can enter an abbreviation for each route to be used at the local site. The abbreviation will most likely be the Latin abbreviation for the term.
Med Route	The method in which the prescription is to be administered (e.g., oral, injection).
NCCC	Acronym for National Clozapine Coordinating Center.
Non-Formulary Drugs	The medications, which are defined as commercially available drug products not included in the VA National Formulary.
Non-VA Meds	Term that encompasses any Over-the-Counter (OTC) medications, Herbal supplements, Veterans Health Administration (VHA) prescribed medications but purchased by the patient at an outside pharmacy, and medications prescribed by providers outside VHA. All Non-VA Meds must be documented in patients' medical records.
Order	Request for medication.

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

Acronym/Term	Definition
	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.
Progress Notes	A component of Text Integration Utilities (TIU) that can function as part of CPRS.
Provider	The person who authorized an order. Only users identified as providers who are authorized to write medication orders may be selected.
Reprinted Label	Unlike a partial prescription, a reprint does not count as workload.
Questionnaire	An entry in the DUE QUESTIONNAIRE file. This file entry contains the set of questions related to a DUE as well as the drugs being evaluated.
Schedule	The frequency by which the doses are to be administered, such as Q8H, BID, NOW, etc.
Sig	The instructions printed on the label.
Significant	The potential for harm is either rare or generally known so that it is reasonable to expect that all prescribers have taken this information into account.
Speed Actions	See Actions.
Suspense	A prescription may not be able to be filled on the day it was requested. When the prescription is entered, a label is not printed. Rather, the prescription is put in the RX SUSPENSE file to be printed at a later date.
Third (3rd) Party Claims	Health care insurance claims submitted to an entity for reimbursement of health care bills.
Time In	This is the time that the patient's name was entered in the computer.
Time Out	This is the time that the patient's name was entered on the bingo board monitor.
TRICARE	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.

Acronym/Term	Definition
TIU	Text Integration Utilities; a package for document handling, that includes Consults, Discharge summary, and Progress Notes, and will later add other document types such as surgical pathology reports. TIU components can be accessed for individual patients through the CPRS, or for multiple patients through the TIU interface.
Units per Dose	The number of Units (tablets, capsules, etc.) to be dispensed as a Dose for an order. Fractional numbers will be accepted for medications that can be split.
VistA	Acronym for Veterans Health Information Systems and Technology Architecture, the new name for Decentralized Hospital Computer Program (DHCP).
Wait Time	This is the amount of time it took to fill the prescription. It is the difference between Time In and Time Out. For orders with more than one prescription, the wait time is the same for each.

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