



# **INPATIENT MEDICATIONS**

## **NURSE'S USER MANUAL**

Version 5.0  
December 1997

(Revised September 2004)



# Revision History

The table below lists changes made since the initial release of this manual. Each time this manual is updated, the Title Page lists the new revised date and this page describes the changes. Either update the existing manual with the Change Pages Document, or replace it with the updated manual.

**Note:** The Change Pages Document may include unedited pages needed for two-sided copying. Only edited pages display the patch number and revision date in the page footer.

Date	Revised Pages	Patch Number	Description
09/04	23-24, 29-30, 37-48, 50-50b, 55-56, 61-62, 97, 105-121	PSJ*5*110	<p>Updated screens appearing on changed pages and pages included for two-sided copying to reflect the correct Patient Name and current dates (where applicable) in compliance with local documentation standards.</p> <p>Updated all example screens displaying the Duration field to show that it has been moved up and to the left of the screen.</p> <p>Updated sections 4.4.5. (View Profile), 4.5. (Order Actions), 4.5.1. (Discontinue), and 4.5.2. (Edit) to include the new Complex Orders functionality that requires the same action to be taken on all associated child orders.</p> <p>Updated section 4.5.5. (Renew) to describe an enhancement that extends the Stop Date/Time for an existing order instead of creating a new order during the Renewal process.</p> <p>Added terms related to Complex Orders and Renewed Orders to the Glossary, resulting in topics being moved to other pages within the Glossary.</p> <p>Updated the Index, and entered new terms related to Complex Orders and Renewed Orders, resulting in topics being moved to other pages within the Index.</p>
05/04	1, 58, 109, 115-120	PSJ*5*107	<p>Updated the Introduction Page. Added the Non-VA Meds documented in CPRS to the list of orders that are included in the order check (allergy/adverse drug reactions, drug-drug interactions, duplicate drug, and duplicate class). Updated Glossary and Index.</p>
07/03	Title, i-iv, 1, 2, 14, 24, 28, 30, 39- 44, 47-50, 50a-50d, 51- 52, 56, 59- 60, 62, 97, 104-113, 115-121	PSJ*5*80	<p>Updated the Title Page, Revision History Page, Table of Contents, Introduction Page, and the Index. The Table of Contents and Index sections are included in their entirety due to the automatic generation of these sections. Updated the Start and Stop Date/Time descriptions to explain how these fields are calculated and displayed with or without the presence of the Duration entered through CPRS. The screen shots include the new Duration display field. The INPATIENT PROFILE ORDER SORT parameter explanation is expanded. Included pages for double-sided printing.</p>

<b>Date</b>	<b>Revised Pages</b>	<b>Patch Number</b>	<b>Description</b>
01/03	Title, i, iii-iv, 1-4, 7, 10, 13, 14, 23, 24, 28-30, 38-44, 47-58, 61, 62, 65-68, 72-74, 77-79, 81, 83, 96, 97, 102, 115-121	PSJ*5*85	Updated the Title Page, Revision History Page, Table of Contents, Introduction Page, and the Index. The Table of Contents and Index sections are included in their entirety due to the automatic generation of these sections. A patient's crises, warnings, allergies, and directives are displayed on the patient profile and order view. A hidden action, CWAD, is also added. The ability to flag an order for clarification and to display an order that was flagged in CPRS is available. A new action, Flag, is available to include any comments associated with the flagged order. The Nature of Order or Electronic Signature abbreviations are displayed beside the Provider's Name on the order. When a patient has not been assessed with allergy information, the display, "No Allergy Assessment" will be included in the Patient Information area. Included pages for double-sided printing.
05/02	All	PSJ*5*58	Updated this manual to include the IV functionality and BCMA – CPRS Med Order Button enhancements released with the BCMA V. 2.0 project.
01/02	Title, i–vi, 1, 2, 21, 22, 61, 62, 89, 89a, 89b, 90-94, 111-118	PSJ*5*65	Updated the Title Page, Revision Page, Table of Contents, Menu Tree, Introduction Page, and the Index. The default Schedule Type determinations were updated for new orders and orders entered through CPRS and finished by pharmacy. A new option and report, Free Text Dosage Report, was added to the Unit Dose Reports. Included pages for double-sided printing.
01/02	Title, i, ii, 1, 2, 19, 20, 21, 22	PSJ*5*63	Updated the Title Page, Revision History Page, and the Introduction Page. The Schedule Type and Stop Date/Time were updated to include the ward and system parameters used in the determination of the stop date for one-time orders. Included pages for double-sided printing.
09/01	All	PSJ*5*50	Added this Revision History Page. Re-formatted the manual into sections. Added Patch Release changes and Pharmacy Ordering Enhancements (POE).
12/97			Original Released Nurse's User Manual.

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Since the documentation is arranged in a topic oriented format and the screen options are not, a menu tree is provided below for the newer users who may need help finding the explanations to the options.

## Menu Tree

## Topic Oriented Section

	Align Labels (Unit Dose)	Output Options
	Discontinue All of a Patient's Orders	Order Options
EUP	Edit Inpatient User Parameters	Maintenance Options
	Hold All of a Patient's Orders	Order Options
IOE	Inpatient Order Entry	Order Options
IPF	Inpatient Profile	Order Options
	INquiries Menu...	Inquiries Option
	Dispense Drug Look-Up	Inquiries Option
	Standard Schedules	Inquiries Option
	Label Print/Reprint	Output Options
	Non-Verified/Pending Orders	Order Options
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	Action Profile #2	Output Options
	AAuthorized Absence/Discharge	Output Options
	Summary	
	Extra Units Dispensed Report	Output Options
	Free Text Dosage Report	Output Options
	INpatient Stop Order Notices	Output Options
	Medications Due Worksheet	Output Options
	Patient Profile (Extended)	Output Options

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# 1. Introduction

The Inpatient Medications package provides a method of management, dispensing, and administration of inpatient drugs within the hospital. Inpatient Medications combines clinical and patient information that allows each medical center to enter orders for patients, dispense medications by means of Pick Lists, print labels, create Medication Administration Records (MARs), and create Management Reports. Inpatient Medications also interacts with the Computerized Patient Record System (CPRS) and the Bar Code Medication Administration (BCMA) packages to provide more comprehensive patient care.

This user manual is written for the Nursing Staff, the Automated Data Processing Application Coordinator (ADPAC), and other healthcare staff for managing, dispensing, and administering medications to the patients within the hospital. The main text of the manual outlines patients' ordering options for new and existing orders, editing options, output options, and inquiry options.

The Inpatient Medications documentation is comprised of several manuals. These manuals are written as modular components and can be distributed independently and are listed below.

Nurse's User Manual V. 5.0 Revised September 2004  
Pharmacist's User Manual V. 5.0 Revised September 2004  
Supervisor's User Manual V. 5.0 Revised December 2003  
Technical/Security Guide V. 5.0 Revised September 2004  
Pharmacy Ordering Enhancements (POE) Phase 2 Release Notes V. 1.0  
Pharmacy Ordering Enhancements (POE) Phase 2 Installation Guide V. 1.0  
Bar Code Medication Administration (BCMA) Version 2.0 Release Notes  
Bar Code Medication Administration (BCMA) Version 2.0 Installation Guide

## 2. Orientation

Within this documentation, several notations need to be outlined.

- Menu options will be italicized.  
Example: *Inpatient Order Entry* indicates a menu option.
- Screen prompts will be denoted with quotation marks around them.  
Example: "Select DRUG:" indicates a screen prompt.
- Responses in bold face indicate what the user is to type in.  
Example: Printing a MAR report by ward group **G**, by ward **W** or by patient **P**.

- Text centered between arrows represents a keyboard key that needs to be pressed in order for the system to capture a user response or move the cursor to another field. <Enter> indicates that the Enter key (or Return key on some keyboards) must be pressed. <Tab> indicates that the Tab key must be pressed.

Example: Press <Tab> to move the cursor to the next field.

Press <Enter> to select the default.

- Text depicted with a black background, displayed in a screen capture, designates reverse video or blinking text on the screen.

Example:

```
(9) Admin Times: 01-09-15-20
*(10) Provider: INPATIENT-MEDS,PHARMACIST
```



- **Note:** Indicates especially important or helpful information.



- Options are locked with a particular security key. The user must hold the particular security key to be able to perform the menu option.

Example:  All options under the *Pick List Menu* option are locked with the PSJU PL key.

- Some of the menu options have several letters that are capitalized. By entering in the letters and pressing <Enter>, the user can go directly to that menu option (the letters do not have to be entered as capital letters).

Example: From the *Unit Dose Medications* option: the user can enter **INQ** and proceed directly into the *INquiries Menu* option.

- ?, ??, ??? One, two, or three question marks can be entered at any of the prompts for on-line 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.

- ^ Caret (up arrow or a circumflex) and pressing <Enter> can be used to exit the current option.



**Screen Title:** The screen title changes according to what type of information List Manager is displaying (e.g., Patient Information, Non-Verified Order, Inpatient Order Entry, etc).

**CWAD Indicator:** This indicator will display when the crises, warnings, allergies, and directives information has been entered for the patient. (This information is entered via the Text Integration Utilities (TIU) package.) When the patient has Allergy/ADR data defined, an “<A>” is displayed to the right of the ward location to alert the user of the existence of this information (**Note:** This data may be displayed using the Detailed Allergy/ADR List action). Crises, warnings, and directives are displayed respectively, “<C>”, “<W>”, “<D>” (**Note:** This data may be displayed using the CWAD hidden action). Any combination of the four indicators can display.

**Header Area:** The header area is a “fixed” (non-scrollable) area that displays the patient’s demographic information. This also includes information about the patient’s current admission. The status and type of order are displayed in the top left corner of the heading, and will include the priority (if defined) for pending orders.

**List Area:** (scrolling region): This is the section that will scroll (like the previous version) and display the information that an action can be taken on. The Allergies/Reactions line includes non-verified and verified Allergy/ADR information as defined in the Allergy package. The allergy data is sorted by type (DRUG, OTHER, FOOD). If no data is found for a category, the heading is displayed as “Allergies/Reactions: No Allergy Assessment”. The Inpatient and Outpatient Narrative lines may be used by the inpatient pharmacy staff to display information specific to the current admission for the patient.

**Message Window:** This section displays a plus sign (+), if the list is longer than one screen, and informational text (i.e., Enter ?? for more actions). If the plus sign is entered at the action prompt, List Manager will “jump” forward to the next screen. The plus sign is only a valid action if it is displayed in the message window.

**Action Area:** The list of valid actions available to the user display in this area of the screen. If a double question mark (??) is entered at the “Select Action:” prompt, a “hidden” list of additional actions that are available will be displayed.

### 3.1. Using List Manager

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

For Inpatient Medications, the List Manager gives the user the following:

- Capability to browse through a list of orders.
- Capability to take action(s) against those items.
- Capability to print MARs, labels and profiles from within the *Inpatient Order Entry* option.
- Capability to select a different option than the option being displayed.

### 3.2. Hidden Actions

A double question mark (??) can be entered at the “Select Action:” prompt for a list of all actions available. Typing the name(s) or synonym(s) at the “Select Action:” prompt enters the actions.

The following is a list of generic List Manager actions with a brief description. The synonym for each action is shown, followed by the action name and description.

<u>Synonym</u>	<u>Action</u>	<u>Description</u>
+	Next Screen	Move to the next screen
-	Previous Screen	Move to the previous screen
UP	Up a Line	Move up one line
DN	Down a line	Move down one line
FS	First Screen	Move to the first screen
LS	Last Screen	Move to the last screen
GO	Go to Page	Move to any selected page in the list
RD	Re Display Screen	Redisplay the current screen
PS	Print Screen	Prints the header and the portion of the list currently displayed

<u>Synonym</u>	<u>Action</u>	<u>Description</u>
PT	Print List	Prints the list of entries currently displayed
SL	Search List	Finds selected text in list of entries
Q	Quit	Exits the screen
ADPL	Auto Display (On/Off)	Toggles the menu of actions to be displayed/not displayed automatically
>	Shift View to Right	Shifts the view on the screen to the right
<	Shift View to Left	Shifts the view on the screen to the left

The following is a list of Inpatient Medications specific hidden actions with a brief description. The synonym for each action is shown followed by the action name and description.

<u>Synonym</u>	<u>Action</u>	<u>Description</u>
MAR	MAR Menu	Displays the MAR Menu
24	24 Hour MAR	Shows the 24 Hour MAR
7	7 Day MAR	Shows the 7 Day MAR
14	14 Day MAR	Shows the 14 Day MAR
MD	Medications Due Worksheet	Shows the Worksheet
LBL	Label Print/Reprint	Displays the Label Print/Reprint Menu
ALUD	Align Labels (Unit Dose)	Aligns the MAR label stock on a printer
LPUD	Label Print/Reprint	Allows print or reprint of a MAR label
ALIV	Align Labels (IV)	Aligns the IV bag label stock on a printer
ILIV	Individual Labels (IV)	Allows print or reprint of an IV bag label
SLIV	Scheduled Labels (IV)	Allows print of the scheduled IV bag label
RSIV	Reprint Scheduled Labels (IV)	Allows reprint of scheduled IV bag labels
OTH	Other Pharmacy Options	Displays more pharmacy options
PIC	Pick List Menu	Displays the Pick List Menu
EN	Enter Units Dispensed	Allows entry of the units actually dispensed for a Unit Dose order
EX	Extra Units Dispensed	Allows entry of extra units dispensed for a Unit Dose order
PL	Pick List	Creates the Pick List report
RRS	Report Returns	Allows the entry of units returned for a Unit Dose order

<b><u>Synonym</u></b>	<b><u>Action</u></b>	<b><u>Description</u></b>
RPL	Reprint Pick List	Allows reprint of a pick list
SND	Send Pick list to ATC	Allows a pick list to be sent to the ATC
UP	Update Pick List	Allows an update to a pick list
RET	Returns/Destroyed Menu	Displays the Returns/Destroyed options
RR	Report Returns	Allows entry of units returned for a Unit Dose order
RD	Returns/Destroyed Entry (IV)	Allows entry of units returned or destroyed for an order
PRO	Patient Profiles	Displays the Patient Profile menu
IP	Inpatient Medications Profile	Generates an Inpatient Profile for a patient
IV	IV Medications Profile	Generates an IV Profile for a patient
UD	Unit Dose Medications Profile	Generates a Unit Dose Profile for a patient
OP	Outpatient Prescriptions	Generates an Outpatient Profile for a patient
AP1	Action Profile #1	Generates an Action Profile #1
AP2	Action Profile #2	Generates an Action Profile #2
EX	Patient Profile (Extended	Generates an Extended Patient Profile
CWAD	CWAD Information	Displays the crises, warnings, allergies, and directives information on a patient

The following actions are available while in the Unit Dose Order Entry Profile.

<b><u>Synonym</u></b>	<b><u>Action</u></b>	<b><u>Description</u></b>
DC	Speed Discontinue	Speed discontinue one or more orders (This is also available in <i>Inpatient Order Entry</i> and <i>Order Entry (IV)</i> )
RN	Speed Renew	Speed renewal of one or more orders
SF	Speed Finish	Speed finish one or more orders
SV	Speed Verify	Speed verify one or more orders

The following actions are available while viewing an order.

<b><u>Synonym</u></b>	<b><u>Action</u></b>	<b><u>Description</u></b>
CO	Copy an order	Allows the user to copy an active, discontinued, or expired Unit Dose order
DIN	Drug Restriction/Guideline Information	Displays the Drug Restriction/Guideline Information for both the Orderable Item and Dispense Drug
I	Mark Incomplete	Allows the user to mark a Non-Verified Pending order incomplete
JP	Jump to a Patient	Allows the user to begin processing another patient
N	Mark Not to be Given	Allows the user to mark a discontinued or expired order as not to be given

## 4. Order Options

The *Unit Dose Medications* option is used to access the order entry, patient profiles and various reports and is the main starting point for the Unit Dose system.

### Example: Unit Dose Menu

```
Select Unit Dose Medications Option: ?

      Align Labels (Unit Dose)
      Discontinue All of a Patient's Orders
EUP   Edit Inpatient User Parameters
ESD   Edit Patient's Default Stop Date
      Hold All of a Patient's Orders
IOE   Inpatient Order Entry
IPF   Inpatient Profile
      INquiries Menu ...
      Label Print/Reprint
      Non-Verified/Pending Orders
      Order Entry
      PATient Profile (Unit Dose)
      Plick List Menu ...
      Reports Menu ...
      Supervisor's Menu ...
```

Within the Inpatient Medications package there are three different paths the nurse can take to enter a new order or take action on an existing order. They are (1) *Order Entry*, (2) *Non-Verified/Pending Orders* and (3) *Inpatient Order Entry*. Each of these paths differs by the prompts that are presented. Once the nurse has reached the point of entering a new order or selecting an existing order, the process becomes the same for each path.



**Note:** When the selected order type (non-verified or pending) does not exist (for that patient) while the user is in the *Non-Verified/Pending Orders* option, the user cannot enter a new order or take action on an existing order for that patient.

Patient locks and order locks are incorporated within the Inpatient Medications package. When a user (User 1) selects a patient through any of the three paths, *Order Entry*, *Non-Verified/Pending Orders*, or *Inpatient Order Entry*, and this patient has already been selected by another user (User 2), the user (User 1) will see a message that another user (User 2) is processing orders for this patient. This will be a lock at the patient level within the Pharmacy packages. When the other user (User 2) is entering a new order for the patient, the user (User 1) will not be able to access the patient due to a patient lock within the **VISTA** packages. A lock at the order level is issued when an order is selected through Inpatient Medications for any action other than new order entry. Any users attempting to access this patient's order will receive a message that another user is working on this order. This order level lock is within the **VISTA** packages.

The three different paths for entering a new order or taking an action on an existing order are summarized below.

## 4.1. Order Entry

[PSJU NE]

The *Order Entry* option allows the nurse to create, edit, renew, hold, and discontinue Unit Dose orders while remaining in the Unit Dose module.

The *Order Entry* option functions almost identically to the *Inpatient Order Entry* option, but does not include IV orders on the profile and only Unit Dose orders may be entered or processed.

After selecting the *Order Entry* option from the *Unit Dose Medications* option, the nurse will be prompted to select the patient. At the “Select PATIENT:” prompt, the user can enter the patient’s name or enter the first letter of the patient’s last name and the last four digits of the patient’s social security number (e.g. A6789). The Patient Information Screen is displayed:

### Example: Patient Information Screen

Patient Information	Sep 11, 2000 16:09:05	Page: 1 of 1
ALASKA, FRED	Ward: 1 EAST	
PID: 123-45-6789	Room-Bed: B-12	Ht (cm): _____ (_____)
DOB: 08/18/20 (80)		Wt (kg): _____ (_____)
Sex: MALE		Admitted: 05/03/00
Dx: TESTING		Last transferred: *****
Allergies/Reactions: No Allergy Assessment		
Inpatient Narrative: INP NARR...		
Outpatient Narrative:		
Enter ?? for more actions		
PU Patient Record Update		NO New Order Entry
DA Detailed Allergy/ADR List		IN Intervention Menu
VP View Profile		
Select Action: View Profile//		

The nurse can now enter a Patient Action at the “Select Action: View Profile//” prompt in the Action Area of the screen.

## 4.2. Non-Verified/Pending Orders

[PSJU VBW]

The *Non-Verified/Pending Orders* option allows easy identification and processing of non-verified and/or pending orders. This option will also show pending and pending renewal orders, which are orders from CPRS that have not been finished by Pharmacy Service. Unit Dose and IV orders are displayed using this option.

The first prompt is “Display an Order Summary? NO// ”. A **YES** answer will allow the nurse to view an Order Summary of Pending/Non-Verified Order Totals by Ward Group. The Pending IV, Pending Unit Dose, Non-Verified IV, and Non-Verified Unit Dose totals are then listed by ward group. The nurse can then specify whether to display Non-Verified Orders, Pending Orders or both.

### Example: Non-Verified/Pending Orders

```
Select Unit Dose Medications Option: NON-Verified/Pending Orders
Display an Order Summary? NO// YES
Searching for Pending and Non-Verified orders.....

Pending/Non-Verified Order Totals by Ward Group

Ward Group          Pending          Non-Verified
                   IV            UD            IV            UD
SOUTH WING          0             25             6             25
NORTH WING          5             9              18            11
^OTHER              29            16            125            52

1) Non-Verified Orders
2) Pending Orders
Select Order Type(s) (1-2): 1
```

Next, the nurse can select which packages to display; Unit Dose Orders, IV Orders, or both provided this user holds the PSJ RNFINISH and the PSJI RNFINISH keys. If the user holds only one of the RNFINISH keys, then either Unit Dose or IV orders will be displayed. The next prompt allows the nurse to select non-verified and/or pending orders for a ward group (**G**), ward (**W**), or single patient (**P**). If ward or ward groups is selected, patients will be listed by wards and then by teams. The nurse will then select the patient from the list.

```
1) Unit Dose Orders
2) IV Orders
Select Package(s) (1-2): 1-2
Select by WARD GROUP (G), WARD (W), or PATIENT (P): PATIENT
Select PATIENT: ALASKA, FRED          123-45-6789  08/18/20  B-12 1 EAST
Select PATIENT: <Enter>
SHORT, LONG, or NO Profile? SHORT// <Enter> SHORT
```

A profile prompt is displayed asking the nurse to choose a profile for the patient. The user can choose a short, long, or no profile. If **NO** profile is chosen, the orders for the patient selected will be displayed, for finishing or verification, by login date with the earliest date showing first. When a pending Unit Dose order has a STAT priority, this order will always be displayed first in the profile view and will be displayed in blinking reverse video. If a profile is chosen, the orders will be selected from this list for processing (any order may be selected). The following example displays a short profile.

**Example: Short Profile**

```

Non-Verified/Pending Orders  Mar 24, 2002@21:02:14          Page: 1 of 1
ALASKA,FRED                      Ward: 1 EAST
PID: 123-45-6789                 Room-Bed: B-12      Ht(cm): _____ (_____)
DOB: 08/18/20 (81)              Wt(kg): _____ (_____)
Sex: MALE                        Admitted: 05/03/00
Dx: TESTING                      Last transferred: *****
----- A C T I V E -----
1  ->PENICILLIN G 120 UNITS (1)    C  03/22  03/29  A
    in DEXTROSE 10% 1000 ML 150 ml/hr
----- P E N D I N G -----
2  PENICILLIN INJ                 ?  *****  *****  P
    Give: 5000000UNT/1VIL IV Q8H

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

```

The nurse can enter a Patient Action at the “Select Action: Quit//” prompt in the Action Area of the screen or choose a specific order or orders.

 When the nurse holds the PSJ RNURSE key, it will be possible to take any available actions on selected Unit Dose or IV orders and verify non-verified orders.

The following keys may be assigned if the user already holds the PSJ RNURSE key:

 PSJ RNFINISH key will allow the nurse to finish Unit Dose orders.

 PSJI RNFINISH key will allow the nurse to finish IV orders.

### 4.3. Inpatient Order Entry [PSJ OE]

The *Inpatient Order Entry* option, if assigned, allows the nurse to create, edit, renew, hold, and discontinue Unit Dose and IV orders, as well as put existing IV orders on call for any patient, while remaining in the Unit Dose module.

When the user accesses the *Inpatient Order Entry* option from the Unit Dose module for the first time within a session, a prompt is displayed to select the IV room in which to enter orders. When only one active IV room exists, the system will automatically select that IV room. The user is then given the label and report devices defined for the IV room chosen. If no devices have been defined, the user will be given the opportunity to choose them. If this option is exited and then re-entered within the same session, the current label and report devices are shown. The following example shows the option re-entered during the same session.

#### Example: Inpatient Order Entry

```
Select Unit Dose Medications Option: IOE Inpatient Order Entry
You are signed on under the BIRMINGHAM ISC IV ROOM
Current IV LABEL device is: NT TELNET TERMINAL
Current IV REPORT device is: NT TELNET TERMINAL
Select PATIENT: ALASKA or A6789
```

At the “Select PATIENT:” prompt, the user can enter the patient’s name or enter the first letter of the patient’s last name and the last four digits of the patient’s social security number (e.g. A6789). The Patient Information Screen is displayed:

#### Example: Patient Information Screen

```
Patient Information          Sep 12, 2000 10:36:38          Page: 1 of 1
ALASKA, FRED                Ward: 1 EAST
  PID: 123-45-6789          Room-Bed: B-12          Ht (cm): _____ (_____)
  DOB: 08/18/20 (80)          WT (kg): _____ (_____)
  Sex: MALE                  Admitted: 05/03/00
  Dx: TESTING                Last transferred: *****

Allergies/Reactions: No Allergy Assessment
Inpatient Narrative: INP NARR...
Outpatient Narrative:

Enter ?? for more actions
PU Patient Record Update          NO New Order Entry
DA Detailed Allergy/ADR List      IN Intervention Menu
VP View Profile
Select Action: View Profile//
```

The nurse can now enter a Patient Action at the “Select Action: View Profile//” prompt in the Action Area of the screen.

## 4.4. Patient Actions

The Patient Actions are the actions available in the Action Area of the List Manager Screen. These actions pertain to the patient information and include editing, viewing, and new order entry.

### 4.4.1. Patient Record Update

The Patient Record Update action allows editing of the Inpatient Narrative and the Patient's Default Stop Date and Time for Unit Dose Order entry.

#### Example: Patient Record Update

Patient Information	Sep 12, 2000 14:39:07	Page: 1 of 1
ALASKA, FRED	Ward: 1 EAST	
PID: 123-45-6789	Room-Bed: B-12	Ht (cm): _____ (_____)
DOB: 08/18/20 (80)		Wt (kg): _____ (_____)
Sex: MALE		Admitted: 05/03/00
Dx: TESTING	Last transferred: *****	
Allergies/Reactions: No Allergy Assessment		
Inpatient Narrative: INP NARR ...		
Outpatient Narrative:		
Enter ?? for more actions		
PU Patient Record Update	NO New Order Entry	
DA Detailed Allergy/ADR List	IN Intervention Menu	
VP View Profile		
Select Action: View Profile// PU		
INPATIENT NARRATIVE: INP NARR...// <b>Narrative for Patient ALASKA</b>		
UD DEFAULT STOP DATE/TIME: SEP 21,2000@24:00//		

The “INPATIENT NARRATIVE: INP NARR...//” prompt allows the nurse to enter information in a free text format, up to 250 characters.

The “UD DEFAULT STOP DATE/TIME:” prompt is the date and time entry to be used as the default value for the STOP DATE/TIME of the Unit Dose orders during order entry and renewal processes. This value is used only if the corresponding ward parameter is enabled. The order entry and renewal processes will sometimes change this date and time.



**Note:** If the Unit Dose order, being finished by the nurse, is received from CPRS and has a duration assigned, the UD DEFAULT STOP DATE/TIME is displayed as the Calc Stop Date/Time.

When the SAME STOP DATE ON ALL ORDERS parameter is set to yes, the module will assign the same default stop date for each patient. This date is initially set when the first order is entered for the patient, and can change when an order for the patient is renewed. This date is shown as the default value for the stop date of each of the orders entered for the patient.



**Note:** If this parameter is not enabled, the user can still edit a patient's default stop date. Unless the parameter is enabled, the default stop date will not be seen or used by the module.

Examples of Valid Dates and Times:

- JAN 20 1957 or 20 JAN 57 or 1/20/57 or 012057
- T (for TODAY), T+1 (for TOMORROW), T+2, T+7, etc.
- T-1 (for YESTERDAY), T-3W (for 3 WEEKS AGO), etc.
- If the year is omitted, the computer uses CURRENT YEAR. Two-digit year assumes no more than 20 years in the future, or 80 years in the past.
- If only the time is entered, the current date is assumed.
- Follow the date with a time, such as JAN 20@10, T@10AM, 10:30, etc.
- The nurse may enter a time, such as NOON, MIDNIGHT, or NOW.
- The nurse may enter NOW+3' (for current date and time Plus 3 minutes \*Note--the Apostrophe following the number of minutes)
- Time is REQUIRED in this response.

#### **4.4.2. New Order Entry**

The New Order Entry action allows the nurse to enter new Unit Dose and IV orders for the patient depending upon the order option selected (*Order Entry, Non-Verified Pending Orders, or Inpatient Order Entry*). Only one user is able to enter new orders on a selected patient due to the patient lock within the **VISTA** applications. This minimizes the chance of duplicate orders.

#### **Unit Dose**

For Unit Dose order entry, a response must be entered at the "Select DRUG:" prompt. The nurse can select a particular drug or enter a pre-defined order set.

Depending on the entry in the "Order Entry Process:" prompt in the *Inpatient User Parameters Edit* option, the nurse will enter a regular or abbreviated order entry process. The abbreviated order entry process requires entry into fewer fields than regular order entry. Beside each of the prompts listed below, in parentheses, will be the word regular, for regular order entry and/or abbreviated, for abbreviated order entry.

- **“Select DRUG:”** (Regular and Abbreviated)

Nurses select Unit Dose medications directly from the DRUG file. The Orderable Item for the selected drug will automatically be added to the order, and all Dispense Drugs entered for the order must be linked to that Orderable Item. If the Orderable Item is edited, data in the DOSAGE ORDERED field and the DISPENSE DRUG field will be deleted. If multiple Dispense Drugs are needed in an order, they may be entered by selecting the DISPENSE DRUG field from the edit list before accepting the new order. After each Dispense Drug is selected, it will be checked against the patient’s current medications for duplicate drug or class, and drug-drug/drug-allergy interactions. (See Section 4.9 Order Check for more information.)

The nurse can enter an order set at this prompt. An order set is a group of pre-written orders. The maximum number of orders is unlimited. Order sets are created and edited using the *Order Set Enter/Edit* option found under the *Supervisor’s Menu*.

Order sets are used to expedite order entry for drugs that are dispensed to all patients in certain medical practices or for certain procedures. Order sets are designed to be used when a recognized pattern for the administration of drugs can be identified. For example:

- A pre-operative series of drugs administered to all patients undergoing a certain surgical procedure.
- A certain series of drugs to be dispensed to all patients prior to undergoing a particular radiographic procedure.
- A certain group of drugs, prescribed by a provider for all patients, that is used for treatment on a certain medical ailment or emergency.

Order sets allow rapid entering of this repetitive information, expediting the whole order entry process. Experienced users might want to set up most of their common orders as order sets.

Order set entry begins like other types of order entry. At the “Select DRUG:” prompt, **S.NAME** should be entered. The **NAME** represents the name of a predefined order set. The characters **S.** tell the software that this will not be a single new order entry for a single drug but a set of orders for multiple drugs. The **S.** is a required prefix to the name of the order set. When the user types the characters **S.?**, a list of the names of the order sets that are currently available will be displayed. If **S.** (<Spacebar> and <Enter>) is typed, the previous order set is entered.

After the entry of the order set, the software will prompt for the Provider’s name and Nature of Order. After entry of this information, the first order of the set will automatically be entered. The options available are different depending on the type of order entry process that is enabled—regular, abbreviated, or ward. If regular or abbreviated order entry is enabled, the user will be shown one order at a time, all fields for each order of the order set and then the “Select Item(s): Next Screen //” prompt.

The user can then choose to take an action on the order. Once an action is taken or bypassed, the next order of the order set will be entered automatically. After entry of all the orders in the order set, the software will prompt for more orders for the patient. At this point the user can proceed exactly as in new order entry, and respond accordingly.

When a drug is chosen, if an active drug text entry for the Dispense Drug and/or Orderable Item linked to this drug exists, then the prompt, “Restriction/Guideline(s) exist. Display?:” will be displayed along with the corresponding defaults. The drug text indicator will be <DIN> and will be displayed on the right hand corner on the same line as the Orderable Item. This indicator will be highlighted.

If the Dispense Drug or Orderable Item has a non-formulary status, this status will be displayed on the screen as “\*N/F\*” beside the Dispense Drug or Orderable Item.

- **“DOSAGE ORDERED:”** (Regular and Abbreviated

To allow pharmacy greater control over the order display shown for Unit Dose orders on profiles, labels, MARs, etc., the DOSAGE ORDERED field is not required if only one Dispense Drug exists in the order. If more than one Dispense Drug exists for the order, then this field is required.

When a Dispense Drug is selected, the selection list/default will be displayed based on the Possible Dosages and Local Possible Dosages.

**Example: Dispense Drug with Possible Dosages**

```
Select DRUG:      BACLOFEN 10MG TABS          MS200
                  ...OK? Yes// <Enter> (Yes)

Available Dosage(s)
1.      10MG
2.      20MG

Select from list of Available Dosages or Enter Free Text Dose: 1 10MG

You entered 10MG is this correct? Yes// <Enter>
```

All Local Possible Dosages will be displayed within the selection list/default.

**Example: Dispense Drug with Local Possible Dosages**

```
Select DRUG:      GENTAMICIN CREAM 15GM      DE101      DERM CLINIC ONLY
                  ...OK? Yes// <Enter> (Yes)

Available Dosage(s)
1.      SMALL AMOUNT
2.      THIN FILM

Select from list of Available Dosages or Enter Free Text Dose: 2 THIN FILM

You entered THIN FILM is this correct? Yes// <Enter>
```



Note: If an order contains multiple Dispense Drugs, Dosage Ordered should contain the total dosage of the medication to be administered.

The user has the flexibility of how to display the order view on the screen. When the user has chosen the drug and when no Dosage Ordered is defined for an order, the order will be displayed as:

**Example: Order View Information when Dosage Ordered is not Defined**

DISPENSE DRUG NAME
Give: UNITS PER DOSE    MEDICATION ROUTE    SCHEDULE

When the user has chosen the drug and Dosage Ordered is defined for the order, it will be displayed as:

**Example: Order View Information when Dosage Ordered is Defined**

ORDERABLE ITEM NAME	DOSE FORM
Give: DOSAGE ORDERED    MEDICATION ROUTE    SCHEDULE	

The DOSAGE ORDERED and the UNITS PER DOSE fields are modified to perform the following functionality:

- Entering a new backdoor order:
  1. If the Dosage Ordered entered is selected from the Possible Dosages or the Local Possible Dosages, the user will not be prompted for the Units Per Dose. Either the BCMA Units Per Dose or the Dispense Units Per Dose, defined under the Dispense Drug, will be used as the default for the Units Per Dose.
  2. If a free text dose is entered for the Dosage Order, the user will be prompted for the Units Per Dose. A warning message will display when the entered Units Per Dose does not seem to be compatible with the Dosage Ordered. The user will continue with the next prompt.
- Finishing pending orders:
  1. If the Dosage Ordered was selected from the Possible Dosages or the Local Possible Dosages, either the BCMA Units Per Dose or the Dispense Units Per Dose, defined under the Dispense Drug, will be used as the default for the Units Per Dose.
  2. If a free text dose was entered for the pending order, the UNITS PER DOSE field will default to 1. A warning message will display when the Units Per Dose does not seem to be compatible with the Dosage Ordered when the user is finishing/verifying the order.

- Editing order:
  1. Any time the DOSAGE ORDERED or the UNITS PER DOSE field is edited, a check will be performed and a warning message will display when the Units Per Dose does not seem to be compatible with the Dosage Ordered. Neither field will be automatically updated.



Note: There will be no Dosage Ordered check against the Units Per Dose if a Local Possible Dosage is selected.

- **“UNITS PER DOSE:”** (Regular)

This is the number of units (tablets, capsules, etc.) of the selected Dispense Drug to be given when the order is administered.

When a selection is made from the dosage list provided at the “DOSAGE ORDERED:” prompt, then this “UNITS PER DOSE:” prompt will not be displayed unless the selection list/default contains Local Possible Dosages. If a numeric dosage is entered at the “DOSAGE ORDERED:” prompt, but not from the selection list, then the default for “UNITS PER DOSE:” will be calculated as follows:  $DOSAGE\ ORDERED / STRENGTH = UNITS\ PER\ DOSE$  and will not be displayed.

If free text or no value is entered at the “DOSAGE ORDERED:” prompt, the “UNITS PER DOSE:” prompt will be displayed. When the user presses <Enter> past the “UNITS PER DOSE:” prompt, without entering a value, a “1” will be stored. A warning message will be generated when free text is entered at the “DOSAGE ORDERED:” prompt and no value or an incorrect value is entered at the “UNITS PER DOSE:” prompt.

- **“MED ROUTE:”** (Regular and Abbreviated)

This is the route of administration to be used for the order. If a Medication Route is identified for the selected Orderable Item, it will be used as the default for the order.

- **“SCHEDULE TYPE:”** (Regular)

This defines the type of schedule to be used when administering the order. If the Schedule Type entered is one-time, the ward parameter, DAYS UNTIL STOP FOR ONE-TIME, is accessed to determine the stop date. When the ward parameter is not available, the system parameter, DAYS UNTIL STOP FOR ONE-TIME, will be used to determine the stop date. When neither parameter has been set, one-time orders will use the ward parameter, DAYS UNTIL STOP DATE/TIME, to determine the stop date instead of the start and stop date being equal.

When a new order is entered or an order entered through CPRS is finished by pharmacy, the default Schedule Type is determined as described below:

- If the schedule is found in the ADMINISTRATION SCHEDULE file and the Schedule Type for that schedule is defined as ONE TIME, then the Schedule Type is ONE TIME.
- If no Schedule Type has been found and the schedule is “TODAY”, “NOW”, “STAT”, “ONCE”, “ONE TIME”, “ONE-TIME”, “ONETIME”, “1TIME”, “1 TIME”, or “1-TIME”, the Schedule Type is ONE-TIME.
- If no Schedule Type has been found and a Schedule Type is defined for the selected Orderable Item, that Schedule Type is used for the order.
- If no Schedule Type has been found and the schedule contains PRN, the Schedule Type is PRN.
- If no Schedule Type has been found and the schedule is “ON CALL”, “ON-CALL” or “ONCALL”, the Schedule Type is ON CALL.
- For all others, the Schedule Type is CONTINUOUS.



Note: During backdoor order entry, the Schedule Type entered is used unless the schedule is considered a ONE-TIME schedule. In that case, the Schedule Type is changed to ONE TIME.

- **“SCHEDULE:”** (Regular and Abbreviated)

This defines the frequency the order is to be administered. Schedules may be selected from the ADMINISTRATION SCHEDULE file or Non-Standard Schedules may be used. A Non-Standard Schedule is one that does not have a consistent interval between administrations. This field allows up to two spaces to be entered, (Ex. TID PC PRN). Unit Dose and IV recognizes Schedules in the following formats:

- QxH - Hourly Schedules where x is the number of hours between administrations
- QxD - Daily Schedules where x is the number of days between administrations
- QxM - Monthly Schedules where x is the number of months between administrations

While entering a new order, if a Schedule is defined for the selected Orderable Item, that Schedule is displayed as the default for the order.

- **“ADMINISTRATION TIMES:”** (Regular)

This defines the time(s) of day the order is to be given. If the schedule for the order contains “PRN”, all Administration Times for the order will be ignored. In new order entry, the default Administration Times are determined as described below:

- If Administration Times are defined for the selected Orderable Item, they will be shown as the default for the order.
- If Administration Times are defined in the INPATIENT WARD PARAMETERS file for the patient’s ward and the order’s schedule, they will be shown as the default for the order.
- If Administration Times are defined for the Schedule, they will be shown as the default for the order.

- **“SPECIAL INSTRUCTIONS:”** (Regular and Abbreviated)

These are the Special Instructions (using abbreviations whenever possible) needed for the administration of this order. This field allows up to 180 characters and utilizes the abbreviations and expansions from the MEDICATION INSTRUCTION file. For new order entry, when Special Instructions are added, the nurse is prompted whether to flag this field for display in a BCMA message box. When finishing orders placed through CPRS, where the Provider Comments are not too long to be placed in this field, the nurse is given the option to copy the comments into this field. Should the nurse choose to copy and flag these comments for display in a BCMA message box on the Virtual Due List (VDL), an exclamation mark “!” will appear in the order next to this field.



Note: For “DONE” Orders (CPRS Med Order) only, the Provider Comments are automatically placed in the SPECIAL INSTRUCTIONS field. If the Provider Comments are greater than 180 characters, Special Instructions will display “REFERENCE PROVIDER COMMENTS IN CPRS FOR INSTRUCTIONS.”

- **“START DATE/TIME:”** (Regular and Abbreviated)

This is the date and time the order is to begin. This package initially assigns the Start Date/Time to the CLOSEST ADMINISTRATION TIME, NEXT ADMINISTRATION TIME or NOW (which is the login date/time of the order), depending on the value of the DEFAULT START DATE CALCULATION field in the INPATIENT WARD PARAMETERS file. Start Date/Time may not be entered prior to 7 days from the order’s Login Date.

- **“STOP DATE/TIME:”** (Regular)

This is the date and time the order will automatically expire. This package initially calculates a default Stop Date/Time, depending on the INPATIENT WARD PARAMETERS file except for one-time orders. For a one-time order, the ward parameter, DAYS UNTIL STOP FOR ONE-TIME, is accessed. When this parameter is not available, the system parameter, DAYS UNTIL STOP FOR ONE-TIME, will be used to determine the stop date. When neither parameter has been set, the ward parameter, DAYS UNTIL STOP DATE/TIME, will be used instead of the start and stop date being equal.

- **“PROVIDER:”** (Regular and Abbreviated)

This identifies the provider who authorized the order. Only users identified as active Providers, who are authorized to write medication orders, may be selected.

- **“SELF MED:”** (Regular and Abbreviated)

Identifies the order as one whose medication is to be given for administration by the patient. This prompt is only shown if the ‘SELF MED’ IN ORDER ENTRY field of the INPATIENT WARD PARAMETERS file is set to on.

- **“NATURE OF ORDER:”** (Regular and Abbreviated)

This is the method the provider used to communicate the order to the user who entered or took action on the order. Nature of Order is defined in CPRS. Written will be the default for new orders entered. When a new order is created due to an edit, the default will be Service Correction. The following table shows some Nature of Order examples.

Nature of Order	Description	Prompted for Signature in CPRS	Chart Copy Printed?
Written	The source of the order is a written doctor’s order	No	No
Verbal	A doctor verbally requested the order	Yes	Yes
Telephoned	A doctor telephoned the service to request the order	Yes	Yes
Service Correction	The service is discontinuing or adding new orders to carry out the intent of an order already received	No	No
Duplicate	This applies to orders that are discontinued because they are a duplicate of another order	No	Yes
Policy	These are orders that are created as a matter of hospital policy	No	Yes

The Nature of Order abbreviation will display on the order next to the Provider's Name. The abbreviations will be in lowercase and enclosed in brackets. Written will display as [w], telephoned as [p], verbal as [v], policy as [i], electronically entered as [e], and service correction as [s]. If the order is electronically signed through the CPRS package AND the CPRS patch OR\*3\*141 is installed on the user's system, then [es] will appear next to the Provider's Name instead of the Nature of Order abbreviation.

**Example: New Order Entry**

```

Patient Information      Feb 14, 2001 10:21:33      Page: 1 of 1
ALASKA,FRED            Ward: 1 EAST
  PID: 123-45-6789      Room-Bed:           Ht (cm) : _____ (_____)
  DOB: 08/18/20 (80)    Wt (kg) : _____ (_____)
  Sex: MALE              Admitted: 02/14/01
  Dx: TEST                Last transferred: *****
-----
Allergies/Reactions: No Allergy Assessment
Inpatient Narrative: Narrative for Patient ALASKA
Outpatient Narrative:

Enter ?? for more actions
PU Patient Record Update      NO New Order Entry
DA Detailed Allergy/ADR List  IN Intervention Menu
VP View Profile
Select Action: View Profile// NO New Order Entry

Select DRUG: POT
  1 POTASSIUM CHLORIDE 10 mEq U/D TABLET      TN403
  2 POTASSIUM CHLORIDE 10% 16 OZ              TN403 N/F BT
  3 POTASSIUM CHLORIDE 20% 16 OZ              TN403 N/F
  4 POTASSIUM CHLORIDE 20MEQ PKT              TN403 UNIT DOSE INPAT
  5 POTASSIUM CHLORIDE 2MEQ/ML INJ 20ML VIAL  TN403 N/F
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1 POTASSIUM CHLORIDE 10 mEq U/D TABLET      TN403
  1. 10
  2. 20
DOSAGE ORDERED (IN MEQ): 1

You entered 10MEQ is this correct? Yes// <Enter> YES
MED ROUTE: ORAL// <Enter> PO
SCHEDULE TYPE: CONTINUOUS// <Enter> CONTINUOUS
SCHEDULE: BID 08-16
ADMIN TIMES: 08-16// <Enter>
SPECIAL INSTRUCTIONS: <Enter>
START DATE/TIME: FEB 14,2001@16:00// <Enter> FEB 14,2001@16:00
STOP DATE/TIME: FEB 23,2001@24:00// <Enter> FEB 23,2001@24:00
PROVIDER: INPATIENT-MEDS,PROVIDER// <Enter>

```

-----report continues-----

**Example: New Order Entry (continued)**

```

NON-VERIFIED UNIT DOSE      Feb 14, 2001 10:23:37      Page: 1 of 2
ALASKA,FRED                  Ward: 1 EAST
PID: 123-45-6789            Room-Bed:                Ht(cm): _____ (_____)
DOB: 08/18/20 (80)          Wt(kg): _____ (_____)

(1)Orderable Item: POTASSIUM CHLORIDE TAB,SA
    Instructions:
(2)Dosage Ordered: 10MEQ
    Duration:                (3)Start: 02/14/01 16:00
(4)  Med Route: ORAL
                                (5) Stop: 02/23/01 24:00

(6) Schedule Type: CONTINUOUS
(8)  Schedule: BID
(9)  Admin Times: 08-16
(10) Provider: INPATIENT-MEDS,PROVIDER [w]
(11) Special Instructions:

(12) Dispense Drug                U/D      Inactive Date
-----
POTASSIUM CHLORIDE 10 mEq U/D TABLET      1

+      Enter ?? for more actions
ED Edit                AC ACCEPT
Select Item(s): Next Screen// AC ACCEPT
NATURE OF ORDER: WRITTEN// <Enter>

...transcribing this non-verified order....

```

```

NON-VERIFIED UNIT DOSE      Feb 14, 2001 10:24:52      Page: 1 of 2
ALASKA,FRED                  Ward: 1 EAST
PID: 123-45-6789            Room-Bed:                Ht(cm): _____ (_____)
DOB: 08/18/20 (80)          Wt(kg): _____ (_____)

*(1)Orderable Item: POTASSIUM CHLORIDE TAB,SA
    Instructions:
*(2)Dosage Ordered: 10MEQ
    Duration:                (3)Start: 02/14/01 16:00
*(4)  Med Route: ORAL
                                (5) Stop: 02/23/01 24:00

(6) Schedule Type: CONTINUOUS
*(8)  Schedule: BID
(9)  Admin Times: 08-16
*(10) Provider: INPATIENT-MEDS,PROVIDER [w]
(11) Special Instructions:

(12) Dispense Drug                U/D      Inactive Date
-----
POTASSIUM CHLORIDE 10 mEq U/D TABLET      1

+      Enter ?? for more actions
DC Discontinue          ED Edit                AL Activity Logs
HD (Hold)                RN (Renew)
FL (Flag)                VF Verify
Select Item(s): Next Screen// VF Verify
...a few moments, please....

Pre-Exchange DOSES: <Enter>

ORDER VERIFIED.

Enter RETURN to continue or '^' to exit:

```

## IV

For IV order entry, the nurse must bypass the “Select DRUG:” prompt (by pressing <Enter>) and then choosing the IV Type at the “Select IV TYPE:” prompt. The following are the prompts that the nurse can expect to encounter while entering a new IV order for the patient.



This option is only available to those nurses who have Inpatient Order Entry access.

- **“Select IV TYPE:”**

These types include admixture, piggyback, hyperal, syringe, or chemotherapy. An admixture is a Large Volume Parenteral (LVP) solution intended for continuous parenteral infusion. A piggyback is a small volume parenteral solution used for intermittent infusion. Hyperalimentation (hyperal) is long-term feeding of a protein-carbohydrate solution. A syringe type order is a type of IV that uses a syringe rather than a bottle or bag. Chemotherapy is the treatment and prevention of cancer with chemical agents and can be administered as a syringe, admixture, or a piggyback.

- **“Select ADDITIVE:”**

There can be any number of additives for an order, including zero. An additive or additive synonym can be entered. If the Information Resources Management Service (IRMS) Chief/Site Manager or Application Coordinator has defined it in the IV ADDITIVES file, the nurse may enter a quick code for an additive. The quick code allows the user to pre-define certain fields, thus speeding up the order entry process. The entire quick code name must be entered to receive all pre-defined fields in the order.



**Note:** Drug inquiry is allowed during order entry by entering two question marks (??) at the STRENGTH prompt for information on an additive or solution.

When an additive is chosen, if an active drug text entry for the Dispense Drug and/or Orderable Item linked to this additive exists, then the prompt, “Restriction/Guideline(s) exist. Display?:” will be displayed along with the corresponding defaults. The drug text indicator will be <DIN> and will be displayed on the right side of the IV Type on the same line. This indicator will be highlighted.

If the Dispense Drug tied to the Additive or the Orderable Item has a non-formulary status, this status will be displayed on the screen as “\*N/F\*” beside the Additive or Orderable Item.

- **“Select SOLUTION:”**

There can be any number of solutions in an order, depending on the type. It is even possible to require zero solutions when an additive is pre-mixed with a solution. If no solutions are chosen, the system will display a warning message, in case it is an oversight, and gives the opportunity to add one. The nurse may enter an IV solution or IV solution synonym.

When a solution is chosen, if an active drug text entry for the Dispense Drug and/or Orderable Item linked to this solution exists, then the prompt, “Restriction/Guideline(s) exist. Display?:” will be displayed along with the corresponding defaults. The drug text indicator will be <DIN> and will be displayed on the right side of the IV Type on the same line. This indicator will be highlighted.

If the Dispense Drug tied to the Solution or the Orderable Item has a non-formulary status, this status will be displayed on the screen as “\*N/F\*” beside the Solution or Orderable Item.

- **“INFUSION RATE:”**

The infusion rate is the rate at which the IV is to be administered. This value, in conjunction with the total volume of the hyperal or the admixture type, is used to determine the time covered by one bag; hence, the system can predict the bags needed during a specified time of coverage. This field is free text for piggybacks. For admixtures, a number that will represent the infusion rate must be entered. The nurse can also specify the # of bags per day that will be needed. Example: 125 = 125 ml/hr (IV system will calculate bags needed per day), 125@2 = 125 ml/hr with 2 labels per day, Titrate@1 = Titrate with 1 label per day. The format of this field is either a number only or <FREE TEXT > @ <NUMBER OF LABELS PER DAY > (e.g., Titrate @ 1).



**Note:** If an administration time(s) is defined, the number of labels will reflect the administration time(s) for the IVPB type orders. Example: one administration time of 12:00 is specified. The infusion rate is entered as 125@3. Only 1 label will print.

- **“MED ROUTE:”**

This is the route of administration for this medication (e.g., IV, SQ). If a corresponding abbreviation is found for this route in the MEDICATION ROUTES file, this module will print that abbreviation on its reports.

- **“SCHEDULE:”**

This prompt occurs on piggyback and intermittent syringe orders. A schedule prompt is a request to queue doses on a recurring basis. For instance, a response to the schedule prompt may be **Q5H**, which would be a request to give doses every five hours. If a non-standard schedule and non-standard administration times are entered, the IV integrity checker will flag this field with a warning and give the nurse an opportunity to re-edit. This field allows up to two spaces to be entered, (Ex. TID PC PRN).



**Note:** It might be inappropriate for some orders with non-standard schedules to be given administration times. For example, the administration times for Q18H (every 18 hours) will vary.

- **“ADMINISTRATION TIME:”**

This is free text. The nurse should enter the times of dose administration using military time such as 03-09-15-21.

- **“OTHER PRINT INFO:”**

Free text is entered and can be up to 60 characters. For new order entry, when Other Print Info is added, the nurse is prompted whether to flag this field for display in a BCMA message box. When finishing orders placed through CPRS, where the Provider Comments are not too long to be placed in this field, the nurse is given the option to copy the comments into this field. Should the nurse choose to copy and flag these comments for display in a BCMA message box on the VDL, an exclamation mark “!” will appear in the order next to this field.



**Note:** For “DONE” Orders (CPRS Med Order) only, the Provider Comments are automatically placed in the OTHER PRINT INFO field. If the Provider Comments are greater than 60 characters, Other Print Info will display “REFERENCE PROVIDER COMMENTS IN CPRS FOR INSTRUCTIONS.”

- **“START DATE / TIME:”**

The system calculates the default Start Date/Time for order administration based on the **DEFAULT START DATE CALCULATION** field in the **INPATIENT WARD PARAMETERS** file. This field allows the site to use the **NEXT** or **CLOSEST** administration or delivery time, or **NOW**, which is the order’s login date/time as the default Start Date. When **NOW** is selected for this parameter, it will always be the default Start Date/Time for IVs. This may be overridden by entering the desired date/time at the prompt.

When NEXT or CLOSEST is used in this parameter and the IV is a continuous-type IV order, the default answer for this prompt is based on the delivery times for the IV room specified for that order entry session. For intermittent type IV orders, if the order has administration times, the start date/time will be the NEXT or CLOSEST administration time depending on the parameter. If the intermittent type IV order does not have administration times, the start date/time will round up or down to the closest hour. The Site Manager or Application Coordinator can change this field.

- **“STOP DATE / TIME:”**

The system calculates the default Stop Date/Time for order administration based on the STOP TIME FOR ORDER site parameter. The default date shown is the least of (1) the <IV TYPE> GOOD FOR HOW MANY DAYS site parameter (where <IV TYPE> is LVPs, PBs, etc.), (2) the NUMBER OF DAYS FOR IV ORDER field (found in the IV ADDITIVES file) for all additives in this order, or (3) the DAY (nD) or DOSE (nL) LIMIT field (found in the PHARMACY ORDERABLE ITEM file) for the orderable item associated with this order. The Site Manager or Application Coordinator can change these fields.

- **“NATURE OF ORDER:”**

This is the method the provider used to communicate the order to the user who entered or took action on the order. Nature of Order is defined in CPRS. Written will be the default for new orders entered. When a new order is created due to an edit, the default will be Service Correction. The following table shows some Nature of Order examples.

Nature of Order	Description	Prompted for Signature in CPRS?	Chart Copy Printed?
Written	The source of the order is a written doctor's order	No	No
Verbal	A doctor verbally requested the order	Yes	Yes
Telephoned	A doctor telephoned the service to request the order	Yes	Yes
Service Correction	The service is discontinuing or adding new orders to carry out the intent of an order already received	No	No
Duplicate	This applies to orders that are discontinued because they are a duplicate of another order	No	Yes
Policy	These are orders that are created as a matter of hospital policy	No	Yes

The Nature of Order abbreviation will display on the order next to the Provider's Name. The abbreviations will be in lowercase and enclosed in brackets. Written will display as [w], telephoned as [p], verbal as [v], policy as [i], electronically entered as [e], and service correction as [s]. If the order is electronically signed through the CPRS package AND the CPRS patch OR\*3\*141 is installed on the user's system, then [es] will appear next to the Provider's Name instead of the Nature of Order abbreviation.

- **“Select CLINIC LOCATION:”**

This prompt is only displayed for Outpatient IV orders entered through the Inpatient Medications package. The user will enter the hospital location name when prompted.

**Example: New Order Entry**

```

Inpatient Order Entry      Feb 28, 2002@13:48:47      Page: 1 of 3
ALASKA,FRED              Ward: 1 EAST
PID: 123-45-6789        Room-Bed: B-12      Ht(cm): _____ (_____)
DOB: 08/18/20 (81)      Wt(kg): _____ (_____)
Sex: MALE                Admitted: 05/03/00
Dx: TESTING              Last transferred: *****
----- A C T I V E -----
  1  BACLOFEN TAB          C 02/20 03/06  A
      Give: 10MG PO QD
      PATIENT SPITS OUT MEDICINE
  2  PREDNISONONE TAB     C 02/25 03/11  A
      Give: 5MG PO TU-TH-SA@09
  3  RESERPINE TAB        C 02/20 03/06  A
      Give: 1MG PO QD
  4  d->FUROSEMIDE 1 MG   O 02/11 02/11  E
      in 5% DEXTROSE 50 ML NOW
  5  d->FUROSEMIDE 10 MG  O 02/11 02/11  E
      in 5% DEXTROSE 50 ML STAT
+      Enter ?? for more actions
PI Patient Information      SO Select Order
PU Patient Record Update   NO New Order Entry
Select Action: Next Screen// NO New Order Entry

Select IV TYPE: p PIGGYBACK.
Select ADDITIVE: MULTI
  1  MULTIVITAMIN INJ
  2  MULTIVITAMINS
CHOOSE 1-2: 2 MULTIVITAMINS

(The units of strength for this additive are in ML)
Strength: 2 ML
Select ADDITIVE: <Enter>
Select SOLUTION: 0.9
  1  0.9% SODIUM CHLORIDE      100 ML
  2  0.9% SODIUM CHLORIDE      50 ML
CHOOSE 1-2: 1 0.9% SODIUM CHLORIDE      100 ML
INFUSION RATE: 125 INFUSE OVER 125 MIN.
MED ROUTE: IV// <Enter>
SCHEDULE: QID
  1  QID      09-13-17-21
  2  QID AC   0600-1100-1630-2000
CHOOSE 1-2: 1      09-13-17-21
ADMINISTRATION TIMES: 09-13-17-21// <Enter>
REMARKS: <Enter>
OTHER PRINT INFO: <Enter>
START DATE/TIME: FEB 28,2002@13:56// <Enter> (FEB 28, 2002@13:56)
STOP DATE/TIME: MAR 30,2002@24:00// <Enter>
PROVIDER: PROVIDER,PAULA// <Enter>

```

-----report continues-----

After entering the data for the order, the system will prompt the nurse to confirm that the order is correct. The IV module contains an integrity checker to ensure the necessary fields are answered for each type of order. The nurse must edit the order to make corrections if all of these fields are not answered correctly. If the order contains no errors, but has a warning, the user will be allowed to proceed.

**Example: New Order Entry (continued)**

```

Orderable Item: MULTIVITAMINS INJ
Give: IV QID

754
[29]5432 1 EAST 02/28/02
ALASKA,FRED B-12

MULTIVITAMINS 2 ML
0.9% SODIUM CHLORIDE 100 ML

INFUSE OVER 125 MIN.
QID
09-13-17-21
Fld by: _____ Chkd by: _____
1[1]

Start date: FEB 28,2002 13:56 Stop date: MAR 30,2002 24:00

Is this O.K.: YES//<Enter> YES
NATURE OF ORDER: WRITTEN// <Enter> W
...transcribing this non-verified order....

```

```

NON-VERIFIED IV Feb 28, 2002@13:56:44 Page: 1 of 2
ALASKA,FRED Ward: 1 EAST
PID: 123-45-6789 Room-Bed: B-12 Ht(cm): _____ (_____)
DOB: 08/18/20 (81) Wt(kg): _____ (_____)
Sex: MALE Admitted: 05/03/00
Dx: TESTING Last transferred: *****

*(1) Additives: Type: PIGGYBACK
MULTIVITAMINS 2 ML
(2) Solutions:
0.9% SODIUM CHLORIDE 100 ML
Duration: (4) Start: 02/28/02 13:56
(3) Infusion Rate: INFUSE OVER 125 MIN.
*(5) Med Route: IV (6) Stop: 03/30/02 24:00
*(7) Schedule: QID Last Fill: *****
(8) Admin Times: 09-13-17-21 Quantity: 0
*(9) Provider: PROVIDER,PAULA [w] Cum. Doses:
*(10)Orderable Item: MULTIVITAMINS INJ
Instructions:
(11) Other Print:

+ Enter ?? for more actions
DC Discontinue RN (Renew) VF Verify
HD (Hold) OC (On Call) FL (Flag)
ED Edit AL Activity Logs
Select Item(s): Next Screen// VF Verify

```

#### 4.4.3. Detailed Allergy/ADR List

The Detailed Allergy/ADR List action displays a detailed listing of the selected item from the patient's Allergy/ADR List. Entry to the *Edit Allergy/ADR Data* option is provided with this list also.

- **Enter/Edit Allergy/ADR Data**  
Provides access to the Adverse Reaction Tracking (ART) package to allow entry and/or edit of allergy adverse reaction data for the patient. See the Allergy package documentation for more information on Allergy/ADR processing.
- **Select Allergy**  
Allows the user to view a specific allergy.

#### 4.4.4. Intervention Menu



This option is only available to those users who hold the PSJ RPHARM key.

The Intervention Menu action allows entry of new interventions and existing interventions to be edited, deleted, viewed, or printed. Each kind of intervention will be discussed and an example will follow.

- **New:** This option is used to add an entry into the APSP INTERVENTION file.

**Example: New Intervention**

```

Patient Information          Sep 22, 2000 08:03:07          Page: 1 of 1
-----
IDAHO,PETER                Ward: 1 West          <A>
PID: 123-45-6789          Room-Bed: A-6        Ht(cm): 167.64 (04/21/99)
DOB: 02/22/42 (58)        Wt(kg): 85.00 (04/21/99)
Sex: MALE                  Admitted: 09/16/99
Dx: TEST PATIENT          Last transferred: *****

Allergies - Verified: CARAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE,
                    CHOCOLATE, NUTS, STRAWBERRIES, DUST
Non-Verified: AMOXICILLIN, AMPICILLIN, TAPE, FISH,
                    FLUPHENAZINE DECANOATE

Adverse Reactions:
Inpatient Narrative: Inpatient narrative for IDAHO
Outpatient Narrative: This is the Outpatient Narrative.

Enter ?? for more actions
PU Patient Record Update          NO New Order Entry
DA Detailed Allergy/ADR List      IN Intervention Menu
VP View Profile
Select Action: View Profile// IN Intervention Menu

--- Pharmacy Intervention Menu ---

NE Enter Pharmacy Intervention      DEL Delete Pharmacy Intervention
ED Edit Pharmacy Intervention       VW View Pharmacy Intervention
PRT Print Pharmacy Intervention

Select Item(s): NE Enter Pharmacy Intervention
Select APSP INTERVENTION DATE: T SEP 22, 2000
Are you adding 'SEP 22, 2000' as a new APSP INTERVENTION (the 155TH)? No// Y
(Yes)
APSP INTERVENTION PATIENT: IDAHO,PETER          08-18-20          123456789          N
SC VETERAN
APSP INTERVENTION DRUG: WAR
1 WARFARIN 10MG          BL100          TAB
2 WARFARIN 10MG U/D          BL100          TAB **AUTO STOP 2D**
3 WARFARIN 2.5MG          BL100          TAB
4 WARFARIN 2.5MG U/D          BL100          TAB **AUTO STOP 2D**
5 WARFARIN 2MG          BL100          TAB
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1 WARFARIN 10MG          BL100          TAB
PROVIDER: INPATIENT-MEDS,PROVIDER          PROV
INSTITUTED BY: PHARMACY// <Enter> PHARMACY
INTERVENTION: ALLERGY
RECOMMENDATION: NO CHANGE
WAS PROVIDER CONTACTED: N NO
RECOMMENDATION ACCEPTED: Y YES
REASON FOR INTERVENTION:
1>
ACTION TAKEN:
1>
CLINICAL IMPACT:
1>
FINANCIAL IMPACT:
1>
Select Item(s):

```

- **Edit:** This option is used to edit an existing entry in the APSP INTERVENTION file.

**Example: Edit an Intervention**

```

Patient Information          Sep 22, 2000 08:03:07          Page: 1 of 1
-----
IDAHO,PETER                Ward: 1 West                <A>
PID: 123-45-6789          Room-Bed: A-6              Ht(cm): 167.64 (04/21/99)
DOB: 02/22/42 (58)       Wt(kg): 85.00 (04/21/99)
Sex: MALE                 Admitted: 09/16/99
Dx: TEST PATIENT         Last transferred: *****
-----
Allergies - Verified: CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE,
                      CHOCOLATE, NUTS, STRAWBERRIES, DUST
Non-Verified: AMOXICILLIN, AMPICILLIN, TAPE, FISH,
                FLUPHENAZINE DECANOATE

Adverse Reactions:
Inpatient Narrative: Inpatient narrative for IDAHO
Outpatient Narrative: This is the Outpatient Narrative.

Enter ?? for more actions
PU Patient Record Update          NO New Order Entry
DA Detailed Allergy/ADR List      IN Intervention Menu
VP View Profile
Select Action: View Profile// IN Intervention Menu

--- Pharmacy Intervention Menu ---

NE Enter Pharmacy Intervention    DEL Delete Pharmacy Intervention
ED Edit Pharmacy Intervention     VW View Pharmacy Intervention
PRT Print Pharmacy Intervention
Select Item(s): ED Edit Pharmacy Intervention
Select INTERVENTION:T SEP 22, 2000 IDAHO,PETER WARFARIN 10MG
INTERVENTION DATE: SEP 22,2000// <Enter>
PATIENT: IDAHO,PETER// <Enter>
PROVIDER: INPATIENT-MEDS,PROVIDER// <Enter>
PHARMACIST: INPATIENT-MEDS,PHARMACIST// <Enter>
DRUG: WARFARIN 10MG// <Enter>
INSTITUTED BY: PHARMACY// <Enter>
INTERVENTION: ALLERGY// <Enter>
OTHER FOR INTERVENTION:
  1>
RECOMMENDATION: NO CHANGE// <Enter>
OTHER FOR RECOMMENDATION:
  1>
WAS PROVIDER CONTACTED: NO// <Enter>
PROVIDER CONTACTED:
RECOMMENDATION ACCEPTED: YES// <Enter>
AGREE WITH PROVIDER:
REASON FOR INTERVENTION:
  1>
ACTION TAKEN:
  1>
CLINICAL IMPACT:
  1>
FINANCIAL IMPACT:
  1>

```

- **Delete:** This option is used to delete an entry from the APSP INTERVENTION file. The nurse may only delete an entry that was entered on the same day.

**Example: Delete an Intervention**

```

Patient Information      Sep 22, 2000 08:03:07      Page: 1 of 1
IDAHO,PETER            Ward: 1 West                <A>
PID: 123-45-6789      Room-Bed: A-6             Ht(cm): 167.64 (04/21/99)
DOB: 02/22/42 (58)    Wt(kg): 85.00 (04/21/99)
Sex: MALE              Admitted: 09/16/99
Dx: TEST PATIENT      Last transferred: *****

Allergies - Verified: CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE,
                    CHOCOLATE, NUTS, STRAWBERRIES, DUST
Non-Verified: AMOXICILLIN, AMPICILLIN, TAPE, FISH,
                    FLUPHENAZINE DECANOATE

Adverse Reactions:
Inpatient Narrative: Inpatient narrative for IDAHO
Outpatient Narrative: This is the Outpatient Narrative.

Enter ?? for more actions
PU Patient Record Update      NO New Order Entry
DA Detailed Allergy/ADR List  IN Intervention Menu
VP View Profile
Select Action: View Profile// IN Intervention Menu

--- Pharmacy Intervention Menu ---

NE Enter Pharmacy Intervention      DEL Delete Pharmacy Intervention
ED Edit Pharmacy Intervention      VW View Pharmacy Intervention
PRT Print Pharmacy Intervention
Select Item(s): DEL Delete Pharmacy Intervention
You may only delete entries entered on the current day.

Select APSP INTERVENTION DATE: T SEP 22, 2000      IDAHO,PETER
WARFARIN 10MG
SURE YOU WANT TO DELETE THE ENTIRE ENTRY? YES

```



- **Print:** This option is used to obtain a captioned printout of Pharmacy Interventions for a certain date range. It will print out on normal width paper and can be queued to print at a later time.

**Example: Print an Intervention**

```

Patient Information          Sep 22, 2000 08:03:07          Page: 1 of 1
-----
IDAHO,PETER                Ward: 1 West                <A>
PID: 123-45-6789          Room-Bed: A-6              Ht(cm): 167.64 (04/21/99)
DOB: 02/22/42 (58)        Sex: MALE                  Wt(kg): 85.00 (04/21/99)
Dx: TEST PATIENT          Admitted: 09/16/99
                           Last transferred: *****

Allergies - Verified: CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE,
                   CHOCOLATE, NUTS, STRAWBERRIES, DUST
Non-Verified: AMOXICILLIN, AMPICILLIN, TAPE, FISH,
                   FLUPHENAZINE DECANOATE

Adverse Reactions:
Inpatient Narrative: Inpatient narrative for IDAHO
Outpatient Narrative: This is the Outpatient Narrative.

Enter ?? for more actions
PU Patient Record Update          NO New Order Entry
DA Detailed Allergy/ADR List      IN Intervention Menu
VP View Profile
Select Action: View Profile// IN Intervention Menu

--- Pharmacy Intervention Menu ---

NE Enter Pharmacy Intervention     DEL Delete Pharmacy Intervention
ED Edit Pharmacy Intervention      VW View Pharmacy Intervention
PRT Print Pharmacy Intervention
Select Item(s): PRT Print Pharmacy Intervention
* Previous selection: INTERVENTION DATE equals 7/2/96
START WITH INTERVENTION DATE: FIRST// T (SEP 22, 2000)
GO TO INTERVENTION DATE: LAST// T (SEP 22, 2000)
DEVICE: <Enter> NT/Cache virtual TELNET terminal      Right Margin: 80//
PHARMACY INTERVENTION LISTING          SEP 22,2000 09:20 PAGE 1
-----

INTERVENTION: ALLERGY

INTERVENTION DATE: SEP 22,2000      PATIENT: IDAHO,PETER
PROVIDER: INPATIENT-MEDS,PROVIDER   PHARMACIST: INPATIENT-MEDS,PHARM
DRUG: WARFARIN 10MG                 INSTITUTED BY: PHARMACY
RECOMMENDATION: NO CHANGE
WAS PROVIDER CONTACTED: NO          RECOMMENDATION ACCEPTED: YES
PROVIDER CONTACTED:

SUBTOTAL                            1
SUBCOUNT                           1
-----
TOTAL                                1
COUNT                              1

```

#### 4.4.5. View Profile

The View Profile action allows selection of a Long, Short, or NO profile for the patient. The profile displayed in the *Inpatient Order Entry* and *Non-Verified/Pending Orders* options will include IV and Unit Dose orders. The long profile shows all orders, including discontinued and expired orders. The short profile does not show the discontinued or expired orders.

#### Example: Profile View

Inpatient Order Entry		Mar 07, 2002@13:03:55		Page: 1 of 1	
ALASKA, FRED		Ward: 1 EAST			
PID: 123-45-6789		Room-Bed: B-12		Ht (cm): _____ (_____)	
DOB: 08/18/20 (81)				Wt (kg): _____ (_____)	
Sex: MALE				Admitted: 05/03/00	
Dx: TESTING		Last transferred: *****			
----- A C T I V E -----					
1	CEPHAPIRIN 1 GM	C	03/04	03/09	A
	in DEXTROSE 5% IN N. SALINE 1000 ML QID				
----- N O N - V E R I F I E D -----					
2	ASPIRIN CAP, ORAL	O	03/07	03/07	N
	Give: 650MG PO NOW				
----- P E N D I N G -----					
3	in DEXTROSE 10% 1000 ML 125 ml/hr	?	*****	*****	P
----- N O N - A C T I V E -----					
4	d->in 5% DEXTROSE 50 ML 125 ml/hr	C	03/06	03/06	E
5	->in 5% DEXTROSE 1000 ML Q8H	C	09/06	09/19	D
Enter ?? for more actions					
PI	Patient Information	SO	Select Order		
PU	Patient Record Update	NO	New Order Entry		
Select Action: Next Screen//					

The orders on the profile are sorted first by status (ACTIVE, NON-VERIFIED, NON-VERIFIED COMPLEX, PENDING, PENDING COMPLEX, PENDING RENEWALS) then alphabetically by SCHEDULE TYPE. Pending orders with a priority of STAT are listed first and are displayed in a bold and blinking text for easy identification. After SCHEDULE TYPE, orders are sorted alphabetically by DRUG (the drug name listed on the profile), and then in descending order by START DATE.

If an order has been verified by pharmacy but has not been verified by nursing, it will be listed under the ACTIVE heading with an arrow (->) to the right of it's number. A CPRS Med Order will have a "DONE" priority and will display a "d" to the right of the number on the long profiles. These orders will display under the Non-Active header.

Orders may be selected by choosing the Select Order action, or directly from the profile using the number displayed to the left of the order. Multiple orders may be chosen by entering the numbers of each order to be included separated by commas (e.g., 1,2,3), or a range of numbers using the dash (e.g., 1-3).



**Note:** The START DATE and DRUG sort may be reversed using the INPATIENT PROFILE ORDER SORT prompt in the *Edit Inpatient User Parameters* option.

Complex Orders will display in groups when the user is in the Profile View. They appear as one numbered list item, as shown in the examples below.

**Example: Non-Verified Complex Order in Profile View**

Inpatient Order Entry		Mar 07, 2004@13:03:55		Page: 1 of 1	
ALASKA, FRED		Ward: ONE EAST			
PID: 123-45-6789	Room-Bed: B-12	Ht (cm): _____	(_____)		
DOB: 08/18/20 (81)		Wt (kg): _____	(_____)		
Sex: MALE		Admitted: 03/03/04			
Dx: TESTING		Last transferred: *****			

---

- - - - - N O N - V E R I F I E D C O M P L E X - - - - -

1	CAPTOPRIL TAB	C	03/26	03/27	N
	Give: 25MG PO QD				
	CAPTOPRIL TAB	C	03/26	03/28	N
	Give: 50MG PO BID				
	CAPTOPRIL TAB	C	03/26	03/29	N
	Give: 100MG PO TID				

Enter ?? for more actions

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

Select Action: Next Screen//

**Example: Pending Complex Order in Profile View**

Inpatient Order Entry		Mar 07, 2004@13:03:55		Page: 1 of 1	
ALASKA, FRED		Ward: ONE EAST			
PID: 123-45-6789	Room-Bed: B-12	Ht (cm): _____	(_____)		
DOB: 08/18/20 (81)		Wt (kg): _____	(_____)		
Sex: MALE		Admitted: 03/03/04			
Dx: TESTING		Last transferred: *****			

---

- - - - - P E N D I N G C O M P L E X - - - - -

1	CAPTOPRIL TAB	?	*****	*****	P
	Give: 25MG PO QD				
	CAPTOPRIL TAB	?	*****	*****	P
	Give: 50MG PO BID				
	CAPTOPRIL TAB	?	*****	*****	P
	Give: 100MG PO TID				

Enter ?? for more actions

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

Select Action: Next Screen//

**Example: Active Complex Order in Profile View**

Inpatient Order Entry		Apr 13, 2004@09:08:51		Page: 2 of 2	
COLORADO,ALBERT		Ward: GEN MED		A	
PID: 123-45-6789		Room-Bed:		Ht (cm): _____ (_____)	
DOB: 02/04/25 (79)				Wt (kg): _____ (_____)	
Sex: MALE				Admitted: 04/12/04	
Dx: SICK				Last transferred: *****	
+					
- - - - - A C T I V E - - - - -					
1	PREDNISONE TAB	C	04/13	04/14	A
	Give: 10 MG PO BID				
2	PREDNISONE TAB	C	04/15	04/16	A
	Give: 5 MG PO BID				
3	PREDNISONE TAB	C	04/17	04/21	A
	Give: 2.5 MG PO QD				
Enter ?? for more actions					
PI	Patient Information	SO	Select Order		
PU	Patient Record Update	NO	New Order Entry		
Select Action: Quit//					

#### 4.4.6. Patient Information

The Patient Information action is displayed for the selected patient. This list contains the patient's demographic data, Allergy/Adverse Reaction data, and Pharmacy Narratives.

##### Example: Patient Information

```

Patient Information          Sep 13, 2000 15:04:31          Page: 1 of 1
ALASKA,FRED                Ward: 1 EAST
PID: 123-45-6789          Room-Bed: B-12          Ht(cm): _____ (_____)
DOB: 08/18/20 (80)        Wt(kg): _____ (_____)
Sex: MALE                  Admitted: 05/03/00
Dx: TESTING                Last transferred: *****

Allergies/Reactions: No Allergy Assessment
Inpatient Narrative: Narrative for Patient ALASKA
Outpatient Narrative:

Enter ?? for more actions
PU Patient Record Update          NO New Order Entry
DA Detailed Allergy/ADR List      IN Intervention Menu
VP View Profile
Select Action: View Profile//
  
```

#### 4.4.7. Select Order

The Select Order action is used to take action on a previously entered order by selecting it from the profile, after the patient is selected and length of profile is chosen.

##### Example: Selecting and Displaying an Order

```

Inpatient Order Entry      Mar 07, 2002@13:10:28          Page: 1 of 1
ALASKA,FRED                Ward: 1 EAST
PID: 123-45-6789          Room-Bed: B-12          Ht(cm): _____ (_____)
DOB: 08/18/20 (81)        Wt(kg): _____ (_____)
Sex: MALE                  Admitted: 05/03/00
Dx: TESTING                Last transferred: *****

- - - - - A C T I V E - - - - -
1  in 5% DEXTROSE 50 ML 125 ml/hr          C 03/06 03/06  A
2  ASPIRIN CAP,ORAL                        C 03/07 03/08  A
   Give: 325MG PO QID
3  CEPHAPIRIN 1 GM                          C 03/04 03/09  A
   in DEXTROSE 5% IN N. SALINE 1000 ML QID
- - - - - P E N D I N G - - - - -
4  in DEXTROSE 10% 1000 ML 125 ml/hr       ? ***** ***** P

Enter ?? for more actions
PI Patient Information          SO Select Order
PU Patient Record Update      NO New Order Entry
Select Action: Quit// 2
  
```

-----report continues-----

### Example: Selecting and Displaying an Order (continued)

ACTIVE UNIT DOSE	Mar 07, 2002@13:10:46	Page:	1 of 2
ALASKA, FRED			
Ward: 1 EAST			
PID: 123-45-6789	Room-Bed: B-12	Ht (cm): _____ (_____)	
DOB: 08/18/20 (81)		Wt (kg): _____ (_____)	
* (1) Orderable Item: ASPIRIN CAP, ORAL <DIN>			
Instructions:			
* (2) Dosage Ordered: 325MG			
Duration:		* (3) Start: 03/07/02 13:10	
* (4) Med Route: ORAL			
BCMA ORDER LAST ACTION: 03/07/02 13:09 Given*			
* (5) Stop: 03/08/02 24:00			
(6) Schedule Type: CONTINUOUS			
* (8) Schedule: QID			
(9) Admin Times: 09-13-17-21			
* (10) Provider: INPATIENT-MEDS, PROVIDER [es]			
(11) Special Instructions:			
(12) Dispense Drug		U/D	Inactive Date
ASPIRIN BUFFERED 325MG TAB		1	
+ Enter ?? for more actions			
DC Discontinue	ED Edit	AL Activity Logs	
HD Hold	RN Renew		
FL (Flag)	VF (Verify)		
Select Item(s): Next Screen//			

The list area displays detailed order information and allows actions to be taken on the selected order. A number displayed to the left of the field name identifies fields that may be edited. If a field, marked with an asterisk (\*) next to its number, is edited, it will cause this order to be discontinued and a new one created. If a pending order is selected, the system will determine any default values for fields not entered through CPRS and display them along with the data entered by the provider.

The BCMA ORDER LAST ACTION field will only display when an action has been performed through BCMA on this order. This information includes the date and time of the action and the BCMA action status. If an asterisk (\*) appears after the BCMA status, this indicates an action was taken on the prior order that is linked to this order.

Actions, displayed in the Action Area, enclosed in parenthesis are not available to the user. In the example above, the action Verify is not available to the user since it was previously verified.



Only users with the appropriate keys will be allowed to take any available actions on the Unit Dose or IV order.

## 4.5. Order Actions

The Order Actions are the actions available in the Action Area of the List Manager Screen. These actions pertain to the patient's orders and include editing, discontinuing, verifying, etc.

## Complex Orders

A Complex Order consists of one or more individual component orders, or “child” orders, that are linked together. Inpatient Medications receives the parent order number from CPRS and links the child orders together. If an action of FN (Finish), VF (Verify), DC (Discontinue), or RN (Renew) is taken on one child order, the action must be taken on all of the associated child orders. For example,

- If one child order within a Complex Order is made active, all child orders in the Complex Order must be made active.
- If one child order within a Complex Order is discontinued, all child orders in the Complex Order must be discontinued.
- If one child order within a Complex Order is renewed, all child orders in the Complex Order must be renewed.

Once a Complex Order is made active, the following fields may not be edited:

- Administration Time.
- Any field where an edit would cause a new order to be created. These fields are denoted with an asterisk in the Detailed View of a Complex Order.

If a change to one of these fields is necessary, the Complex Order must be discontinued and a new Complex Order must be created.

Sets of Complex Orders with a status of “Pending” or “Non-Verified” will be grouped together in the Profile View within Inpatient Medications. Once these orders are made active, they will appear individually in the Profile View.

### Example: Pending Complex Order in Profile View

Inpatient Order Entry		Mar 07, 2004@13:03:55		Page: 1 of 1	
ALASKA, FRED		Ward: ONE EAST			
PID: 123-45-6789	Room-Bed: B-12	Ht (cm): _____	(_____)		
DOB: 08/18/20 (81)		Wt (kg): _____	(_____)		
Sex: MALE		Admitted: 03/03/04			
Dx: TESTING		Last transferred: *****			
- - - - - P E N D I N G C O M P L E X - - - - -					
1	CAPTOPRIL TAB	?	*****	*****	P
	Give: 25MG PO QD				
	CAPTOPRIL TAB	?	*****	*****	P
	Give: 50MG PO BID				
	CAPTOPRIL TAB	?	*****	*****	P
	Give: 100MG PO TID				
Enter ?? for more actions					
PI	Patient Information	SO	Select Order		
PU	Patient Record Update	NO	New Order Entry		
Select Action: Next Screen//					

**Example: Non-Verified Complex Order in Profile View**

Inpatient Order Entry	Mar 07, 2004@13:03:55	Page: 1 of 1
ALASKA, FRED		
Ward: ONE EAST		
PID: 123-45-6789	Room-Bed: B-12	Ht(cm): _____ (_____)
DOB: 08/18/20 (81)		Wt(kg): _____ (_____)
Sex: MALE		Admitted: 03/03/04
Dx: TESTING		Last transferred: *****

---

- - - - - N O N - V E R I F I E D C O M P L E X - - - - -

1	CAPTOPRIL TAB	C	03/26	03/27	N
	Give: 25MG PO QD				
	CAPTOPRIL TAB	C	03/26	03/28	N
	Give: 50MG PO BID				
	CAPTOPRIL TAB	C	03/26	03/29	N
	Give: 100MG PO TID				

Enter ?? for more actions

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

Select Action: Next Screen//

**Example: Active Complex Order in Profile View**

Inpatient Order Entry	Apr 13, 2004@09:08:51	Page: 2 of 2
COLORADO, ALBERT		
Ward: GEN MED		A
PID: 123-45-6789	Room-Bed:	Ht(cm): _____ (_____)
DOB: 02/04/25 (79)		Wt(kg): _____ (_____)
Sex: MALE		Admitted: 04/12/04
Dx: SICK		Last transferred: *****

---

- - - - - A C T I V E - - - - -

1	PREDNISONE TAB	C	04/13	04/14	A
	Give: 10 MG PO BID				
2	PREDNISONE TAB	C	04/15	04/16	A
	Give: 5 MG PO BID				
3	PREDNISONE TAB	C	04/17	04/21	A
	Give: 2.5 MG PO QD				

Enter ?? for more actions

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

Select Action: Quit//

When an action of FN (Finish), VF (Verify), RN (Renew), or DC (Discontinue) is taken on one child order, a message will display informing the user that the order is part of a Complex Order and that the action must be taken on all of the associated child orders.

### Example: Complex Discontinue

```
Select Item(s): Next Screen// DC Discontinue
```

```
This order is part of a complex order. If you discontinue this order the
following orders will be discontinued too (unless the stop date has already
been reached).
```

```
Press Return to continue...
```

```
AMOXAPINE TAB                C 03/25 04/14 A
Give: 200MG PO QD
```

```
Do you want to discontinue this series of complex orders? Yes//
```

### Example: Complex Renew

```
Select Item(s): Next Screen// RN Renew
```

```
This order is part of a complex order. If you RENEW this order the
following orders will be RENEWED too.
```

```
Press Return to continue...
```

```
DAPSONE TAB                   C 04/12 04/16 A
Give: 200 MG PO TID
```

```
RENEW THIS COMPLEX ORDER SERIES? YES//
```

In support of Complex Orders changes, two new-style cross-references will be created to group complex child orders by their parent order. For Unit Dose orders, the cross-reference will be indexed and triggered by the ORDERS FILE PARENT ORDER field and the ORDERS FILE ENTRY field in the UNIT DOSE multiple in the PHARMACY PATIENT file. For IV orders, the cross-reference will be indexed and triggered by the ORDERS FILE PARENT ORDER field and the ORDERS FILE ENTRY field in the IV multiple in the PHARMACY PATIENT file. The cross-reference definition will be created by the pre-install routine PSSCMPLX.

**Example: VA FileManListing of ACX and ACX1 Cross-References**

X-ref	File/Sub-file	Trigger-point field(s)
ACX	PHARMACY PATIENT (#55) /UNIT DOSE (#62)	ORDERS FILE PARENT ORDER (#125) ORDERS FILE ENTRY (#66)
ACX1	PHARMACY PATIENT (#55) /IV (#100)	ORDERS FILE PARENT ORDER (#150) ORDERS FILE ENTRY (#110)

### 4.5.1. Discontinue

When an order is discontinued, the order's Stop Date/Time is changed to the date/time the action is taken. An entry is placed in the order's Activity Log recording who discontinued the order and when the action was taken. Pending and Non-verified orders are deleted when discontinued and will no longer appear on the patient's profile.



**Note:** Any orders placed through the Med Order Button cannot be discontinued.

#### Example: Discontinue an Order

ACTIVE IV	Mar 20, 2001@16:37:49	Page:	1 of 1
ALASKA,FRED	Ward: 1 EAST		
PID: 123-45-6789	Room-Bed: B-12	Ht (cm): _____ (_____)	
DOB: 08/18/20 (80)		Wt (kg): _____ (_____)	
<hr/>			
* (1) Additives:	Order number: 65	Type: ADMIXTURE	<DIN>
ACETAMINOPHEN 100 MEQ			
* (2) Solutions:			
0.9% SODIUM CHLORIDE 100 ML			
Duration:	* (4)	Start: 03/19/01	11:30
* (3) Infusion Rate: 100 ml/hr			
* (5) Med Route: IV	* (6)	Stop: 03/26/01	24:00
* (7) Schedule:	Last Fill: 03/19/01 14:57		
(8) Admin Times:	Quantity: 2		
* (9) Provider: INPATIENT-MEDS, PROVIDER [w]	Cum. Doses: 43		
(10) Other Print:			
<hr/>			
(11) Remarks :	Entry Date: 03/19/01 11:30		
Entry By: INPATIENT-MEDS, PHARMACIST			
Enter ?? for more actions			
DC Discontinue	RN Renew	FL (Flag)	
HD Hold	OC On Call		
ED Edit	AL Activity Logs		
Select Item(s): Quit// <b>DC</b> Discontinue			
NATURE OF ORDER: WRITTEN// <b>&lt;Enter&gt;</b> W			
Requesting PROVIDER: INPATIENT-MEDS, PROVIDER// <b>&lt;Enter&gt;</b> PROV			
REASON FOR ACTIVITY: <b>TESTING</b>			
<hr/>			
DISCONTINUED IV	Mar 20, 2001@16:38:28	Page:	1 of 1
ALASKA,FRED	Ward: 1 EAST		
PID: 123-45-6789	Room-Bed: B-12	Ht (cm): _____ (_____)	
DOB: 08/18/20 (80)		Wt (kg): _____ (_____)	
<hr/>			
* (1) Additives:	Order number: 65	Type: ADMIXTURE	<DIN>
ACETAMINOPHEN 100 MEQ			
* (2) Solutions:			
0.9% SODIUM CHLORIDE 100 ML			
Duration:	* (4)	Start: 03/19/01	11:30
* (3) Infusion Rate: 100 ml/hr			
* (5) Med Route: IV	* (6)	Stop: 03/20/01	16:38
* (7) Schedule:	Last Fill: 03/19/01 14:57		
(8) Admin Times:	Quantity: 2		
* (9) Provider: INPATIENT-MEDS, PROVIDER [w]	Cum. Doses: 43		
(10) Other Print:			
<hr/>			
(11) Remarks :	Entry Date: 03/19/01 11:30		
Entry By: INPATIENT-MEDS, PHARMACIST			
Enter ?? for more actions			
DC (Discontinue)	RN (Renew)	FL (Flag)	
HD (Hold)	OC (On Call)		
ED (Edit)	AL Activity Logs		
Select Item(s): Quit// <b>&lt;Enter&gt;</b> QUIT			

When selecting the DC (Discontinue) action for Complex Orders, a new message is displayed followed by an additional prompt that the user must answer.

**Example: Discontinue a Complex Order**

```

ACTIVE UNIT DOSE                Feb 25, 2004@21:25:50                Page: 1 of 2
ALASKA, FRED                    Ward: 1 EAST
  PID: 123-45-6789              Room-Bed: B-12                Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)            Wt(kg): _____ (_____)
-----
*(1)Orderable Item: ASPIRIN TAB <DIN>
  Instructions:
*(2)Dosage Ordered: 650MG
  Duration:
*(4) Med Route: ORAL
*(3)Start: 03/26/01 14:40
*(5) Stop: 03/28/01 24:00
(6) Schedule Type: CONTINUOUS
*(8) Schedule: QD
(9) Admin Times: 1440
*(10) Provider: INPATIENT-MEDS, PROVIDER [es]
(11) Special Instructions:
-----
(12) Dispense Drug                U/D                Inactive Date
ASPIRIN BUFFERED 325MG TAB        2
+ Enter ?? for more actions
DC Discontinue                    ED (Edit)          AL Activity Logs
HD Hold                            RN Renew
FL Flag                             VF (Verify)
Select Item(s): Next Screen//

Select Item(s): Next Screen// DC Discontinue

This order is part of a complex order. If you discontinue this order the
following orders will be discontinued too (unless the stop date has already
been reached).

Press Return to continue...

CAPTOPRIL TAB                    C 03/26 03/27 N
Give: 25MG PO QD

CAPTOPRIL TAB                    C 03/26 03/29 N
Give: 100MG PO TID

Press Return to continue...

Do you want to discontinue this series of complex orders? Yes//

```

<This page is intentionally left blank.>

## 4.5.2. Edit

This action allows modification of any field shown on the order view that is preceded by a number in parenthesis (#).

### Example: Edit an Order

ACTIVE UNIT DOSE	Sep 13, 2000 15:20:42	Page:	1 of 2
ALASKA, FRED	Ward: 1 EAST		
PID: 123-45-6789	Room-Bed: B-12	Ht (cm): _____ (_____)	
DOB: 08/18/20 (80)		Wt (kg): _____ (_____)	
*(1) Orderable Item: AMPICILLIN CAP INJ			
Instructions:			
*(2) Dosage Ordered: 250MG		*(3) Start: 09/07/00 15:00	
Duration:		*(5) Stop: 09/21/00 24:00	
*(4) Med Route: ORAL			
(6) Schedule Type: CONTINUOUS			
*(8) Schedule: QID			
(9) Admin Times: 01-09-15-20			
*(10) Provider: INPATIENT-MEDS, PROVIDER [es]			
(11) Special Instructions:			
(12) Dispense Drug		U/D	Inactive Date
AMPICILLIN 500MG CAP		1	
+ Enter ?? for more actions			
DC Discontinue	ED Edit	AL	Activity Logs
HD Hold	RN Renew		
FL (Flag)	VF Verify		
Select Item(s): Next Screen//			

If a field marked with an asterisk (\*) to the left of the number is changed, the original order will be discontinued, and a new order containing the edited data will be created. The Stop Date/Time of the original order will be changed to the date/time the new edit order is accepted. The old and new orders are linked and may be viewed using the History Log function. When the screen is refreshed, the field(s) that was changed will now be shown in **blinking reverse video** and “This change will cause a new order to be created” will be displayed in the message window.

NON-VERIFIED UNIT DOSE	Sep 13, 2000 15:26:46	Page:	1 of 2
ALASKA, FRED	Ward: 1 EAST		
PID: 123-45-6789	Room-Bed: B-12	Ht (cm): _____ (_____)	
DOB: 08/18/20 (80)		Wt (kg): _____ (_____)	
*(1) Orderable Item: AMPICILLIN CAP INJ			
Instructions:			
*(2) Dosage Ordered: 250MG		*(3) Start: 09/13/00 20:00	
Duration:		*(5) Stop: 09/27/00 24:00	
*(4) Med Route: ORAL			
(6) Schedule Type: CONTINUOUS			
*(8) Schedule: QID			
(9) Admin Times: 01-09-15-20			
*(10) Provider: INPATIENT-MEDS, PHARMACIST			
(11) Special Instructions:			
(12) Dispense Drug		U/D	Inactive Date
AMPICILLIN 500MG CAP		1	
+ This change will cause a new order to be created.			
ED Edit	AC	ACCEPT	
Select Item(s): Next Screen//			

If the ORDERABLE ITEM or DOSAGE ORDERED fields are edited, the Dispense Drug data will not be transferred to the new order. If the Orderable Item is changed, data in the DOSAGE ORDERED field will not be transferred. New Start Date/Time, Stop Date/Time, Login Date/Time, and Entry Code will be determined for the new order. Changes to other fields (those without the asterisk) will be recorded in the order's activity log.

If the Dispense Drug or Orderable Item has a non-formulary status, this status will be displayed on the screen as “\*N/F\*” beside the Dispense Drug or Orderable Item.



**Note:** A Complex Order cannot be edited once it has been made active.

### 4.5.3. Verify

Orders must be accepted and verified before they can become active and are included on the pick list, BCMA Virtual Due List (VDL), etc. If AUTO-VERIFY is enabled for the nurse, new orders immediately become active after entry or finish (pending orders entered through CPRS). Orders verified by nursing prior to pharmacy verification are displayed on the profile under the active header marked with an arrow (->) to the right of the order number. When verify is selected and when the order has not been verified by the pharmacist, the nurse must enter any missing data and correct any invalid data before the verification is accepted.



**Note:** The ALLOW AUTO-VERIFY FOR USER field in the INPATIENT USER PARAMETERS file controls AUTO-VERIFY.

If the Dispense Drug or Orderable Item has a non-formulary status, this status will be displayed on the screen as “\*N/F\*” beside the Dispense Drug or Orderable Item.

#### Example: Verify an Order

```

NON-VERIFIED UNIT DOSE          Sep 07, 2000 13:57:03          Page: 1 of 2
ALASKA, FRED                    Ward: 1 EAST
  PID: 123-45-6789              Room-Bed: B-12          Ht (cm): _____ (_____)
  DOB: 08/18/20 (80)           Wt (kg): _____ (_____)

*(1)Orderable Item: PROPRANOLOL TAB
  Instructions:
*(2)Dosage Ordered:
  Duration:                      (3)Start: 09/07/00 17:00
*(4)  Med Route: ORAL
                                     (5) Stop: 09/21/00 24:00
  (6) Schedule Type: CONTINUOUS
*(8)  Schedule: QD
  (9)  Admin Times: 17
*(10) Provider: INPATIENT-MEDS, PROVIDER [es]
(11) Special Instructions:

(12) Dispense Drug                U/D          Inactive Date
  PROPRANOLOL 10MG U/D            1

+      Enter ?? for more actions
DC Discontinue          ED Edit          AL Activity Logs
HD (Hold)              RN (Renew)
FL (Flag)              VF Verify
Select Item(s): Next Screen// VF
...a few moments, please....

Pre-Exchange DOSES:
ORDER VERIFIED.
Enter RETURN to continue or '^' to exit:

```

#### 4.5.4. Hold

Only active orders may be placed on hold. Orders placed on hold will continue to show under the ACTIVE heading on the profiles until removed from hold. Any orders placed on hold through the pharmacy options cannot be released from hold using any of the CPRS options. An entry is placed in the order's Activity Log recording the user who placed/removed the order from hold and when the action was taken.

#### Example: Place an Order on Hold

```

ACTIVE UNIT DOSE                Feb 25, 2001@21:25:50                Page: 1 of 2
ALASKA,FRED                      Ward: 1 EAST
  PID: 123-45-6789                Room-Bed: B-12                Ht (cm): _____ (_____)
  DOB: 08/18/20 (80)              Wt (kg): _____ (_____)
-----
*(1)Orderable Item: ASPIRIN TAB                <DIN>
  Instructions:
*(2)Dosage Ordered: 650MG
  Duration:                                *(3)Start: 02/26/01 14:40
*(4)  Med Route: ORAL
                                           *(5) Stop: 02/28/01 24:00
  (6) Schedule Type: CONTINUOUS
*(8)  Schedule: QD
  (9)  Admin Times: 1440
*(10) Provider: INPATIENT-MEDS,PROVIDER [es]
(11) Special Instructions:
-----
(12) Dispense Drug                U/D                Inactive Date
  ASPIRIN BUFFERED 325MG TAB                2
+      Enter ?? for more actions
DC Discontinue                ED Edit                AL Activity Logs
HD Hold                        RN Renew
FL (Flag)                    VF (Verify)
Select Item(s): Next Screen// HD Hold

Do you wish to place this order 'ON HOLD'? Yes// <Enter> (Yes)
NATURE OF ORDER: WRITTEN// <Enter> W...
COMMENTS:
  1>TESTING
  2>
EDIT Option: . <Enter>
Enter RETURN to continue or '^' to exit: <Enter>

```

-----report continues-----

**Example: Place an Order on Hold (continued)**

HOLD UNIT DOSE	Feb 25, 2001@21:27:57	Page: 1 of 2
ALASKA,FRED Ward: 1 EAST		
PID: 123-45-6789	Room-Bed: B-12	Ht(cm): _____ (_____)
DOB: 08/18/20 (80)		Wt(kg): _____ (_____)
* (1) Orderable Item: ASPIRIN TAB <DIN>		
Instructions:		
* (2) Dosage Ordered: 650MG		* (3) Start: 02/26/01 14:40
Duration:		* (5) Stop: 02/28/01 24:00
* (4) Med Route: ORAL		
(6) Schedule Type: CONTINUOUS		
* (8) Schedule: QD		
(9) Admin Times: 1440		
* (10) Provider: INPATIENT-MEDS, PROVIDER [es]		
(11) Special Instructions:		
(12) Dispense Drug	U/D	Inactive Date
ASPIRIN BUFFERED 325MG TAB	2	
+ Enter ?? for more actions		
DC Discontinue	ED (Edit)	AL Activity Logs
HD Hold	RN (Renew)	
FL (Flag)	VF (Verify)	
Select Item(s): Next Screen// <Enter>		

HOLD UNIT DOSE	Feb 25, 2001@21:28:20	Page: 2 of 2
ALASKA,FRED Ward: 1 EAST		
PID: 123-45-6789	Room-Bed: B-12	Ht(cm): _____ (_____)
DOB: 08/18/20 (80)		Wt(kg): _____ (_____)
+ Enter ?? for more actions		
(7) Self Med: NO		
Entry By: INPATIENT-MEDS, PHARMACIST		Entry Date: 02/25/01 21:25
(13) Comments:		
TESTING		
+ Enter ?? for more actions		
DC Discontinue	ED (Edit)	AL Activity Logs
HD Hold	RN (Renew)	
FL (Flag)	VF (Verify)	
Select Item(s): Quit// <Enter>		

Unit Dose Order Entry	Feb 25, 2001@21:30:15	Page: 1 of 1
ALASKA,FRED Ward: 1 EAST		
PID: 123-45-6789	Room-Bed: B-12	Ht(cm): _____ (_____)
DOB: 08/18/20 (80)		Wt(kg): _____ (_____)
Sex: MALE		Admitted: 05/03/00
Dx: TESTING		Last transferred: *****
- - - - - A C T I V E - - - - -		
1	ASPIRIN TAB	C 02/26 02/28 H
	Give: 650MG ORAL QD	
+ Enter ?? for more actions		
PI Patient Information	SO Select Order	
PU Patient Record Update	NO New Order Entry	
Select Action: Quit//		

Notice that the order shows a status of “H” for hold in the right side of the Aspirin Tablet order.

If the Dispense Drug or Orderable Item has a non-formulary status, this status will be displayed on the screen as “\*N/F\*” beside the Dispense Drug or Orderable Item.

#### 4.5.5. Renew

Medication orders (referred to in this section as orders) that may be renewed include the following:

- All non-complex active Unit Dose and IV orders.
- Orders that have been discontinued due to ward transfer or treating specialty change.
- Expired orders containing an administration schedule (Unit Dose and scheduled IV orders) that have not had a scheduled administration time since the last BCMA action was taken.
- Expired orders not containing an administration schedule (continuous IV orders) that have had an expired status less than the time limit defined in the EXPIRED IV TIME LIMIT field in the PHARMACY SYSTEM file.



**Note:** Complex Orders may only be renewed if all associated child orders are renewable.

#### Renewing Active Orders

The following applies when the RN (Renew) action is taken on any order with a status of “Active”:

- A new Default Stop Date/Time is calculated for the order using the same calculation applied to new orders. The starting point of the Default Stop Date/Time calculation is the date and time that the order was signed in CPRS or the date and time that the RN (Renew) action was taken in Inpatient Medications.
- The RN (Renew) action does not create a new order.
- The Start Date/Time is not available for editing when an order is renewed.



**Note:** Orders having a schedule type of One-Time or On Call must have a status of “Active” in order to be renewed.

## **Renewing Discontinued Orders**

IV and Unit Dose orders that have been discontinued, either through the (DC) Discontinue action or discontinued due to edit, cannot be renewed.

IV and Unit Dose medication orders that have been discontinued due to ward transfer or treating specialty change will allow the (RN) Renew action.

## **Renewing Expired Unit Dose Orders**

The following applies to expired Unit Dose orders having a schedule type of Continuous or PRN.

1. The RN (Renew) action will not be available on an order with a status of “Expired” if either of the following two conditions exist:
  - a. If the difference between the current system date and time and the last scheduled administration time is greater than the frequency of the schedule. This logic will be used for schedules with standard intervals (for example, Q7H).
  - b. If the current system date and time is greater than the time that the next dose is due. This logic is used for schedules with non-standard intervals (for example, Q6H – 0600-1200-1800).
2. A new Default Stop Date/Time is calculated for the order using the same calculation applied to new orders. The starting point of the Default Stop Date/Time calculation is the date and time that the order was signed in CPRS or the date and time that the RN (Renew) action was taken in Inpatient Medications.
3. The (RN) Renew action does not create a new order.
4. The Start Date/Time is not available for editing when an order is renewed.
5. The renewed order has a status of “Active.”

## **Renewing Expired Scheduled IV Orders**

The following applies to only IV orders that have a scheduled administration time.

1. The RN (Renew) action is not available on a scheduled IV order with a status of “Expired” if either of the following two conditions exist:
  - a. If the difference between the current system date and time and the last scheduled administration time is greater than the frequency of the schedule. This logic is used for schedules with standard intervals (for example, Q7H).
  - b. If the current system date and time is greater than the time that the next dose is due. This logic is used for schedules with non-standard intervals (for example, Q6H – 0600-1200-1800).
2. A new Default Stop Date/Time is calculated for the order using the same calculation applied to new orders. The starting point of the Default Stop Date/Time calculation is the date and time that the order was signed in CPRS or the date and time that the RN (Renew) action was taken in Inpatient Medications.
3. The RN (Renew) action does not create a new order.
4. The Start Date/Time is not available for editing when an order is renewed.
5. The renewed order has a status of “Active.”

## Renewing Expired Continuous IV Orders

The following applies to IV orders that do not have a scheduled administration time.

1. For Continuous IV orders having a status of “Expired,” the “Expired IV Time Limit” system parameter controls whether or not the RN (Renew) action is available. If the number of hours between the expiration date/time and the current system date and time is less than this parameter, the RN (Renew) action is allowed. This parameter has a range of 0 to 24 hours, and may be changed using the *PARameters Edit Menu* [PSJ PARAM EDIT MENU] option.
2. If the RN (Renew) action is taken on a renewable continuous IV order, a new Default Stop Date/Time is calculated using existing Default Stop Date/Time calculations. The starting point of the Default Stop Date/Time calculation is the date and time that the order was signed in CPRS or the date and time that the RN (Renew) action was taken in Inpatient Medications.
3. The RN (Renew) action does not create a new order.
4. The Start Date/Time is not available for editing when an order is renewed.
5. The renewed order has a status of “Active.”

## Renewing Complex Orders

A Complex Order consists of one or more associated Inpatient Medications orders, known as “child” orders, created from CPRS using the Complex dose tab in the Inpatient Medications ordering dialog. The child orders are linked together using the conjunctions AND and THEN to create combinations of dosages, medication routes, administration schedules, and order durations.



### Note:

Only Complex Orders created with the conjunction AND will be available for renewal.

Orders created by checking the “Give additional dose now” box in CPRS, when ordered in conjunction with a Complex Order, will not be available for renewal.

When the (RN) Renew action is selected for a Complex Order, the user must answer an additional prompt, as illustrated in the following example.

## Example: Renew a Complex Order

ACTIVE UNIT DOSE	Feb 25, 2004@21:25:50	Page: 1 of 2
ALASKA, FRED	Ward: 1 EAST	
PID: 123-45-6789	Room-Bed: B-12	Ht (cm): _____ (_____)
DOB: 08/18/20 (80)		Wt (kg): _____ (_____)
* (1) Orderable Item: ASPIRIN TAB <DIN>		
Instructions:		
* (2) Dosage Ordered: 650MG		
Duration:		* (3) Start: 03/26/01 14:40
* (4) Med Route: ORAL		* (5) Stop: 03/28/01 24:00
(6) Schedule Type: CONTINUOUS		
* (8) Schedule: QD		
(9) Admin Times: 1440		
* (10) Provider: INPATIENT-MEDS, PROVIDER [es]		
(11) Special Instructions:		
(12) Dispense Drug	U/D	Inactive Date
ASPIRIN BUFFERED 325MG TAB	2	
+ Enter ?? for more actions		
DC Discontinue	ED (Edit)	AL Activity Logs
HD Hold	RN Renew	
FL Flag	VF (Verify)	
Select Item(s): Next Screen// RN Renew		
This order is part of a complex order. If you RENEW this order the following orders will be RENEWED too.		
Press Return to continue...		
DIGOXIN TAB	C	03/26 03/29 A
Give: 200MG PO BID		
DIGOXIN TAB	C	03/26 03/28 A
Give: 100MG PO TID		
Press Return to continue...		
RENEW THIS COMPLEX ORDER SERIES? YES//		

## Viewing Renewed Orders

The following outlines what the user may expect following the renewal process:

1. The patient profile will contain the most recent renewal date in the Renewed field.
2. The patient detail will contain the most recent renewal date and time in the Renewed field.
3. The Activity Log will display the following:
  - ORDER EDITED activity, including the previous Stop Date/Time and the previous Provider (if a new Provider is entered at the time the order is renewed).
  - ORDER RENEWED BY PHARMACIST activity, including the pharmacist that renewed the order and the date and time that the RN (Renew) action was taken.

**Example: Renewed Order in Profile View**

Inpatient Order Entry	Feb 25, 2004@21:25:50	Page: 1 of 1
ALASKA,FRED Ward: 1 EAST		
PID: 123-45-6789	Room-Bed: B-12	Ht(cm): _____ (_____)
DOB: 08/18/20 (83)		Wt(kg): _____ (_____)
Sex: MALE		Admitted: 05/03/00
Dx: TESTING		Last transferred: *****

---

- - - - - A C T I V E - - - - -

1	ASPIRIN TAB 650	C	03/26	03/28	A	03/27
	Give: 650MG PO QD					

Enter ?? for more actions

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

**Example: Renewed Order in Detailed Order View**

ACTIVE UNIT DOSE	Feb 25, 2004@21:25:50	Page: 1 of 2
ALASKA,FRED Ward: 1 EAST		
PID: 123-45-6789	Room-Bed: B-12	Ht(cm): _____ (_____)
DOB: 08/18/20 (80)		Wt(kg): _____ (_____)

---

\* (1) Orderable Item: ASPIRIN TAB <DIN>  
 Instructions:  
 \* (2) Dosage Ordered: 650MG  
 Duration:  
 \* (3) Start: 03/26/04 14:40  
 \* (4) Med Route: ORAL Renewed: 03/27/04 11:00  
 \* (5) Stop: 03/28/04 24:00  
 (6) Schedule Type: CONTINUOUS  
 \* (8) Schedule: QD  
 (9) Admin Times: 1440  
 \* (10) Provider: INPATIENT-MEDS, PROVIDER [es]  
 (11) Special Instructions:  
 (12) Dispense Drug U/D Inactive Date  
 ASPIRIN BUFFERED 325MG TAB 2

---

+ Enter ?? for more actions

DC Discontinue	ED (Edit)	AL Activity Logs
HD Hold	RN Renew	
FL Flag	VF (Verify)	

Select Item(s): Next Screen//

ACTIVE UNIT DOSE	Feb 25, 2004@21:28:20	Page: 2 of 2
ALASKA,FRED Ward: 1 EAST		
PID: 123-45-6789	Room-Bed: B-12	Ht(cm): _____ (_____)
DOB: 08/18/20 (80)		Wt(kg): _____ (_____)

---

+ (7) Self Med: NO

Entry By: INPATIENT-MEDS, PHARMACIST Entry Date: 03/25/04 21:25  
 Renewed By: INPATIENT-MEDS, PHARMACIST  
 (13) Comments:  
 TESTING

---

Enter ?? for more actions

DC Discontinue	ED (Edit)	AL Activity Logs
HD Hold	RN (Renew)	
FL (Flag)	VF (Verify)	

Select Item(s): Quit// <Enter>

## Orders That Change Status During Process of Renew

Orders that are active during the renewal process but become expired during the pharmacy finishing process follow the logic described in Renewing Expired Unit Dose Orders, Renewing Expired Scheduled IV Orders, and Renewing Expired Continuous IV Orders.

### 4.5.6. Activity Log

This action allows viewing of a long or short activity log, dispense log, or a history log of the order. A short activity log only shows actions taken on orders and does not include field changes. The long activity log shows actions taken on orders and does include the requested Start and Stop Date/Time values. If a history log is selected, it will find the first order, linked to the order where the history log was invoked. Then the log will display an order view of each order associated with it, in the order that they were created. When a dispense log is selected, it shows the dispensing information for the order.

#### Example: Activity Log

```
ACTIVE UNIT DOSE          Sep 21, 2000 12:44:25          Page: 1 of 2
ALASKA,FRED              Ward: 1 EAST
  PID: 123-45-6789        Room-Bed: B-12          Ht (cm): _____ (_____)
  DOB: 08/18/20 (80)     Wt (kg): _____ (_____)

*(1)Orderable Item: AMPICILLIN CAP INJ
  Instructions:
*(2)Dosage Ordered: 250MG
  Duration:
*(3)Start: 09/07/00 15:00
*(4)  Med Route: ORAL
*(5) Stop: 09/21/00 24:00
(6) Schedule Type: CONTINUOUS
*(8)  Schedule: QID
(9)  Admin Times: 01-09-15-20
*(10) Provider: INPATIENT-MEDS,PROVIDER [es]
(11) Special Instructions:

(12) Dispense Drug          U/D          Inactive Date
      AMPICILLIN 500MG CAP          1

+      Enter ?? for more actions
DC Discontinue          ED Edit          AL Activity Logs
HD Hold                RN Renew
FL (Flag)              VF Verify
Select Item(s): Next Screen// AL Activity Logs

  1 - Short Activity Log
  2 - Long Activity Log
  3 - Dispense Log
  4 - History Log

Select LOG to display: 2 Long Activity Log
  Date: 09/07/00 14:07      User: INPATIENT-MEDS,PHARMACIST
Activity: ORDER VERIFIED BY PHARMACIST

  Date: 09/07/00 14:07      User: INPATIENT-MEDS,PHARMACIST
Activity: ORDER VERIFIED
  Field: Requested Start Date
Old Data: 09/07/00 09:00

  Date: 09/07/00 14:07      User: INPATIENT-MEDS,PHARMACIST
Activity: ORDER VERIFIED
  Field: Requested Stop Date
Old Data: 09/07/00 24:00

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

#### 4.5.7. Finish



Nurses who hold the PSJ RNFINISH key will have the ability to finish and verify Unit Dose orders placed through CPRS.



Nurses who hold the PSJI RNFINISH key will have the ability to finish and verify IV orders placed through CPRS.

When an order is placed or renewed by a provider through CPRS, the nurse or pharmacist needs to finish and/or verify this order. The same procedures are followed to finish the renewed order as to finish a new order with the following exceptions:

The PENDING RENEWAL orders may be speed finished from within the Unit Dose *Order Entry* option. The user may enter an **SF**, for speed finish, at the “Select ACTION:” prompt and then select the pending renewals to be finished. A prompt is issued for the Stop Date/Time. This value is used as the Stop Date/Time for the pending renewals selected. All other fields will retain the values from the renewed order.

#### Example: Finish an Order Without a Duration

```
PENDING IV (ROUTINE)          Sep 07, 2000 16:11:42          Page: 1 of 2
ALASKA, FRED                  Ward: 1 EAST
PID: 123-45-6789              Room-Bed: B-12          Ht(cm): _____ (_____)
DOB: 08/18/20 (80)           Wt(kg): _____ (_____)

(1) Additives:                                     Type:
(2) Solutions:
    Duration: (4) Start: *****
(3) Infusion Rate:                                REQUESTED START: 09/07/00 09:00
*(5) Med Route: IVPB (6) Stop: *****
*(7) Schedule: QID                               Last Fill: *****
(8) Admin Times: 01-09-15-20                    Quantity: 0
*(9) Provider: INPATIENT-MEDS, PROVIDER [es] Cum. Doses:
*(10) Orderable Item: AMPICILLIN INJ
    Instructions:
(11) Other Print:
    Provider Comments: THIS IS AN INPATIENT IV EXAMPLE.
+ Enter ?? for more actions
DC Discontinue FL (Flag)
ED Edit FN Finish
Select Item(s): Next Screen// FN Finish
COMPLETE THIS ORDER AS IV OR UNIT DOSE? IV// IV
Copy the Provider Comments into Other Print Info? Yes// YES
IV TYPE: PB
CHOOSE FROM:
    A ADMIXTURE
    C CHEMOTHERAPY
    H HYPERAL
    P PIGGYBACK
    S SYRINGE
Enter a code from the list above.
```

-----report continues-----

**Example: Finish an Order Without a Duration (continued)**

```
Select one of the following:
  A      ADMIXTURE
  C      CHEMOTHERAPY
  H      HYPERAL
  P      PIGGYBACK
  S      SYRINGE

IV TYPE: PIGGYBACK
      **AUTO STOP 7D**

This patient is already receiving an order for the following drug in the same
class as AMPICILLIN INJ 2GM:

      AMPICILLIN CAP INJ          C  09/07  09/21  A
      Give: 250MG PO QID

Do you wish to continue entering this order? NO// Y
Select ADDITIVE: AMPICILLIN// <Enter>
ADDITIVE: AMPICILLIN// <Enter>
Restriction/Guideline(s) exist.  Display? : (N/D): No// D

Dispense Drug Text:

      Refer to PBM/MAP PUD treatment guidelines
      RESTRICTED TO NEUROLOGY
      (The units of strength for this additive are in GM)
      Strength: 1 GM
      Select ADDITIVE: <Enter>
      Select SOLUTION: 0.9
      1   0.9% NACL          500 ML
      2   0.9% NACL          100 ML
      3   0.9% NACL          50 ML
      4   0.9% NaCl         250 ML
          BT
      CHOOSE 1-4: 2 0.9% NACL          100 ML
      INFUSION RATE: <Enter>
```

-----report continues-----



**Note:** When the CPRS patch, OR\*3\*141, is installed on the user's system AND the order is electronically signed through the CPRS package, the electronically signed abbreviation, [es] in brackets, will appear next to the Provider's Name on the order.

**Example: Finish an Order Without a Duration (continued)**

```

PENDING IV (ROUTINE)          Sep 07, 2000 16:23:46          Page: 1 of 2
ALASKA,FRED                   Ward: 1 EAST
  PID: 123-45-6789            Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)         Wt(kg): _____ (_____)

(1) Additives:                                     Type: PIGGYBACK   <DIN>
    AMPICILLIN 1 GM
(2) Solutions:
    0.9% NACL 100 ML
      Duration: (4) Start: 09/07/00 15:00
(3) Infusion Rate: REQUESTED START: 09/07/00 09:00
*(5) Med Route: IVPB (6) Stop: 09/14/00 16:54
*(7) Schedule: QID Last Fill: *****
(8) Admin Times: 01-09-15-20 Quantity: 0
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses:
*(10)Orderable Item: AMPICILLIN INJ
      Instructions:
(11) Other Print: THIS IS AN INPATIENT IV EXAMPLE.
+ Enter ?? for more actions
AC Accept ED Edit
Select Item(s): Next Screen// AC
  
```

```

Orderable Item: AMPICILLIN INJ
Give: IVPB QID

6789 1 EAST 09/07/00
ALASKA,FRED B-12

AMPICILLIN 1 GM
0.9% NACL 100 ML

Dose due at: _____

THIS IS AN INPATIENT IV EXAMPLE
QID
01-09-15-20
M2***
Fld by: _____ Chkd by: _____
1[1]

Start date: SEP 7,2000 15:00 Stop date: SEP 14,2000 16:54

Is this O.K.? YES// <Enter>
  
```

The Requested Start date/time value is added to the order view to indicate the date/time requested by the provider to start the order. This date/time is the CPRS expected first dose when no duration is received from CPRS.

**Example: Finish an Order With a Duration**

```

PENDING IV (ROUTINE)          Sep 07, 2000 16:11:42          Page: 1 of 2
ALASKA,FRED                  Ward: 1 EAST
  PID: 123-45-6789           Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)        Wt(kg): _____ (_____)

(1) Additives:                                     Type:
(2) Solutions:
    Duration: 10 DAYS                               (4) Start: *****
(3) Infusion Rate:
*(5) Med Route: IVPB                               (6) Stop: *****
*(7) Schedule: QID                                 Last Fill: *****
(8) Admin Times: 01-09-15-20                       Quantity: 0
*(9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses:
*(10)Orderable Item: AMPICILLIN INJ
    Instructions:
(11) Other Print:
    Provider Comments: THIS IS AN INPATIENT IV EXAMPLE.
+ Enter ?? for more actions
DC Discontinue          FL (Flag)
ED Edit                FN Finish
Select Item(s): Next Screen// FN Finish
COMPLETE THIS ORDER AS IV OR UNIT DOSE? IV// IV
Copy the Provider Comments into Other Print Info? Yes// YES
IV TYPE: PB
CHOOSE FROM:
    A ADMIXTURE
    C CHEMOTHERAPY
    H HYPERAL
    P PIGGYBACK
    S SYRINGE
Enter a code from the list above.

Select one of the following:
    A ADMIXTURE
    C CHEMOTHERAPY
    H HYPERAL
    P PIGGYBACK
    S SYRINGE

IV TYPE: PIGGYBACK
      **AUTO STOP 7D**

This patient is already receiving an order for the following drug in the same
class as AMPICILLIN INJ 2GM:

    AMPICILLIN CAP INJ          C 09/07 09/21 A
    Give: 250MG PO QID

Do you wish to continue entering this order? NO// Y
Select ADDITIVE: AMPICILLIN// <Enter>
ADDITIVE: AMPICILLIN// <Enter>
Restriction/Guideline(s) exist. Display? : (N/D): No// D

Dispense Drug Text:

    Refer to PBM/MAP PUD treatment guidelines
    RESTRICTED TO NEUROLOGY
    (The units of strength for this additive are in GM)
    Strength: 1 GM
    Select ADDITIVE: <Enter>

```

-----report continues-----

**Example: Finish an Order With a Duration (continued)**

```
Select SOLUTION: 0.9
  1  0.9% NACL          500 ML
  2  0.9% NACL          100 ML
  3  0.9% NACL          50 ML
  4  0.9% NaCl         250 ML
      BT
CHOOSE 1-4: 2  0.9% NACL          100 ML
INFUSION RATE:  <Enter>
```

```
PENDING IV (ROUTINE)          Sep 07, 2000 16:23:46          Page: 1 of 2
ALASKA,FRED                   Ward: 1 EAST
  PID: 123-45-6789            Room-Bed: B-12          Ht(cm): _____ (_____)
  DOB: 08/18/20 (80)         Wt(kg): _____ (_____)

(1) Additives:                                Type: PIGGYBACK    <DIN>
    AMPICILLIN 1 GM
(2) Solutions:
    0.9% NACL 100 ML
    Duration: 10 DAYS
(3) Infusion Rate:
* (5) Med Route: IVPB
* (7) Schedule: QID
(8) Admin Times: 01-09-15-20
* (9) Provider: INPATIENT-MEDS,PROVIDER [es] Cum. Doses:
* (10) Orderable Item: AMPICILLIN INJ
    Instructions:
(11) Other Print: THIS IS AN INPATIENT IV EXAMPLE.
+ Enter ?? for more actions
AC Accept                      ED Edit
Select Item(s): Next Screen// AC
```

-----report continues-----



**Note:** When the CPRS patch, OR\*3\*141, is installed on the user's system AND the order is electronically signed through the CPRS package, the electronically signed abbreviation, [es] in brackets, will appear next to the Provider's Name on the order.

### Example: Finish an Order With a Duration (continued)

```
Orderable Item: AMPICILLIN INJ
Give: IVPB QID

6789 1 EAST 09/07/00
ALASKA,FRED B-12

AMPICILLIN 1 GM
0.9% NAACL 100 ML

Dose due at: _____

THIS IS AN INPATIENT IV EXAMPLE
QID
01-09-15-20
M2***
Fld by: _____ Chkd by: _____
1[1]

Start date: SEP 7,2000 09:00 Stop date: SEP 17,2000 09:00

Is this O.K.? YES// <Enter>
```

The calculated Start Date/Time (Calc Start) and the Stop Date/Time (Calc Stop) will display according to how the following Inpatient Ward Parameters settings are configured:

- DAYS UNTIL STOP DATE/TIME:
- DAYS UNTIL STOP FOR ONE-TIME:
- SAME STOP DATE ON ALL ORDERS:
- TIME OF DAY THAT ORDERS STOP:
- DEFAULT START DATE CALCULATION:

The CPRS Expected First Dose will display as the default Start Date/Time when a duration is received from CPRS.

The default Stop Date/Time is derived from the CPRS Expected First Dose and the duration, when the duration is available from CPRS.



**Note:** When an order is placed through CPRS prior to the next administration time of the schedule for the order, the Expected First Dose will be today at the next administration time. However, if the order is placed after the last administration time of the schedule for the order, the Expected First Dose will be the next administration time. This Expected First Dose date/time is seen through CPRS and is always based on the logic of using "next administration time", regardless of what the site has set for the ward parameter. The Expected First Dose displayed in CPRS displays as Requested Start Date/Time on the order view if no duration is received from CPRS. The Expected First Dose displays as the default Start Date/Time on the order view when a duration is received.

<This page is intentionally left blank.>

If the Dispense Drug or Orderable Item has a non-formulary status, this status will be displayed on the screen as “\*N/F\*” beside the Dispense Drug or Orderable Item.

A prompt is added to the finishing process, “COMPLETE THIS ORDER AS IV OR UNIT DOSE?” to determine if the user should complete the order as either an IV or Unit Dose order. The prompt will be displayed only if the user selected the *Inpatient Order Entry* option to finish the order. Also, the prompt will appear only if the correct combination of the entry in the IV FLAG in the MEDICATION ROUTES file and the entry in the APPLICATION PACKAGES’ USE field in the DRUG file for the order’s Dispense Drug are found. The following table will help explain the different scenarios:

IV FLAG in the MEDICATION ROUTES file	Dispense Drug’s Application Use	Which Order View screen will be displayed to the user	Special Processing
IV	IV	IV	None
IV	Unit Dose	Unit Dose	Prompt user to finish order as IV or Unit Dose
IV	IV and Unit Dose	IV	Prompt user to finish order as IV or Unit Dose
Non-IV	IV	IV	Prompt user to finish order as IV or Unit Dose
Non-IV	Unit Dose	Unit Dose	None
Non-IV	IV and Unit Dose	Unit Dose	Prompt user to finish order as IV or Unit Dose

#### 4.5.8. Flag



This option is only available to those users who hold the PSJ RPHARM key.

The flag action is available to alert the users that the order is incomplete or needs clarification. Flagging is applied to any orders that need more information or corrections from the clinician. When the user flags the order, an alert is sent to the specified user defining the information that is needed to process the medication order. The specified user can send a return alert with the needed information. The Activity Log will record the flagging activities including acknowledgement that the alert was viewed. The flag action can be performed in either CPRS or in Inpatient Medications.

When a flagged order appears on the order view, the order number on the right hand side will be highlighted using reverse video. The nurse, or any user without the PSJ RPHARM key, does not have the ability to flag or un-flag orders; however, they can view the flagged or un-flagged comments via the Activity Log.

### Example: Flagged Order

Unit Dose Order Entry	Aug 22, 2002@07:44:06	Page: 1 of 1
GEORGIA, PAUL Ward: 1 EAST		
PID: 123-45-6789	Room-Bed: B-5	Ht (cm): _____ (_____)
DOB: 02/14/54 (48)		Wt (kg): _____ (_____)
Sex: MALE		Admitted: 03/26/99
Dx: Sick		Last transferred: *****

  

- - - - - A C T I V E - - - - -						
1	DOXEPIN CAP, ORAL	C	08/09	11/05	A	
	Give: 200MG PO Q8H					
2	WARFARIN TAB	C	08/07	11/05	A	
	Give: 4MG PO TU-TH@2000					
3	WARFARIN TAB	C	08/14	11/05	A	
	Give: 7MG PO QPM					

Enter ?? for more actions

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

### 4.5.9. Speed Actions

From the list of orders in the patient's profile, the nurse can select one or more of the orders on which to take action. The nurse can quickly discontinue this patient's orders by selecting Speed Discontinue, or quickly renewing an order by selecting Speed Renew. Other "quick" selections include Speed Finish and Speed Verify.



**Note:** Any orders placed through the Med Order Button cannot be Speed Discontinued.

### 4.6. Discontinue All of a Patient's Orders

[PSJU CA]

The *Discontinue All of a Patient's Orders* option allows a nurse to discontinue all of a patient's orders. Also, it allows a ward clerk to mark all of a patient's orders for discontinuation. If the ALLOW USER TO D/C ORDERS parameter is turned on to take action on active orders, then the ward clerk will also be able to discontinue orders. This ALLOW USER TO D/C ORDERS parameter is set using the *Inpatient User Parameter's Edit* option under the *PARAMeter's Edit Menu* option, which is under the *Supervisor's Menu* option.

This option is then used to discontinue the selected orders. If a non-verified or pending order is discontinued, it is deleted completely from the system.

## 4.7. Hold All of a Patient's Orders [PSJU HOLD ALL]

The *Hold All of a Patient's Orders* option allows a nurse to place all of a patient's active orders on hold in order to temporarily stop the medication from being dispensed, or take all of the patient's orders off of hold to restart the dispensing of the medication.

The option will take no action on individual orders that it finds already on hold. When this option is used to put all orders on hold, the system will print labels, for each medication order newly put on hold, indicating on the label that the medication is on hold. Also, the profile will notify the user that the patient's orders have been placed on hold; the letter **H** will be placed in the Status/Info column on the profile for each formerly active order.

When the option is used to take all orders off of hold, the system will reprint labels for the medication orders that were taken off hold and indicate on the label that the medication is off hold. Again, this option will take no action on individual orders that it finds were not on hold. The profile will display to the user that the patient's orders have been taken off hold.

### Example 1: Hold All of a Patient's Orders

```
Select Unit Dose Medications Option: Hold All of a Patient's Orders
Select PATIENT: IDAHO, PETER          123-45-6789   02/22/42   A-6
DO YOU WANT TO PLACE THIS PATIENT'S ORDERS ON HOLD? Yes// <Enter> (Yes)
HOLD REASON: SURGERY SCHEDULED FOR 9:00AM
...a few moments, please.....DONE!
```

To take the orders off of hold, choose this same option and the following will be displayed:

### Example 2: Take All of a Patient's Orders Off of Hold

```
Select Unit Dose Medications Option: Hold All of a Patient's Orders
Select PATIENT: IDAHO, PETER          123-45-6789   02/22/42   A-6
THIS PATIENT'S ORDERS ARE ON HOLD.
DO YOU WANT TO TAKE THIS PATIENT'S ORDERS OFF OF HOLD? Yes// <Enter> (Yes).....
.....DONE!
```



**Note:** Individual orders can be placed on hold or taken off of hold through the *Order Entry* and *Non-Verified/Pending Orders* options.

## 4.8. Inpatient Profile

[PSJ PR]

The *Inpatient Profile* option allows the user to view the Unit Dose and IV orders of a patient simultaneously. The user can conduct the Inpatient Profile search by patient, ward, or ward group. If the selection to sort is by ward, the administration teams may be specified. The default for the administration team is ALL and multiple teams may be entered. If selecting by ward or ward group, the profile may be sorted by patient name or room-bed.

When the user accesses this option from the Unit Dose module for the first time within a session, a prompt is displayed to select the IV room. When only one active IV room exists, it will be selected automatically. The user is then given the label and report devices defined for the IV room chosen. If no devices have been defined, the user will be given the opportunity to choose them. If this option is exited and then re-entered within the same session, the current label and report devices are shown.

In the following description, viewing a profile by patient is discussed, however, ward and ward group are handled similarly.

After the user selects the patient for whom a profile view is needed, the length of profile is chosen. The user can choose to view a long or short profile or, if the user decides not to view a profile for the chosen patient, “NO Profile” can be selected. When **NO Profile** is chosen, the system will return to the “Select PATIENT:” prompt and the user may choose a new patient.

Once the length of profile is chosen, the user can print the patient profile (by accepting the default or typing **P** at the “SHOW PROFILE only, EXPANDED VIEWS only, or BOTH: Profile//” prompt), an expanded view of the patient profile (by typing **E**), or both (by typing **B**). The expanded view lists the details of each order for the patient. The activity logs of the orders can also be printed when the expanded view or both, the expanded view and profile, are chosen.

The advantage of this option is that by viewing the combined Unit Dose/IV profile of a patient, the user can quickly determine if any corrections or modifications need to be made for existing or future orders based on Unit Dose or IV medications already being received by the patient. Sometimes the nurse must revise a prospective order for a patient based on the Unit Dose or IV medications already prescribed for the patient.



**Note:** For Unit Dose orders, the long activity log shows all activities of an order, while the short activity log excludes the field changes, and shows only the major activities. For IV orders, the short and long activity logs give the user the same results.

### Example: Inpatient Profile

```
Select Unit Dose Medications Option: IPF Inpatient Profile
You are signed on under the BIRMINGHAM ISC IV ROOM
Current IV LABEL device is: NT TELNET TERMINAL
Current IV REPORT device is: NT TELNET TERMINAL

Select by WARD GROUP (G), WARD (W), or PATIENT (P): Patient
Select PATIENT: ALASKA,FRED          123-45-6789   08/18/20   1 EAST
Select another PATIENT: <Enter>
SHORT, LONG, or NO Profile? SHORT// <Enter> SHORT
Show PROFILE only, EXPANDED VIEWS only, or BOTH: PROFILE// BOTH
Show SHORT, LONG, or NO activity log? NO// SHORT
Select PRINT DEVICE: 0;80 NT/Cache virtual TELNET terminal
```

```

                I N P A T I E N T   M E D I C A T I O N S           09/21/00  12:33
                WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEM
-----
ALASKA,FRED                      Ward: 1 EAST
PID: 123-45-6789                 Room-Bed: B-12                Ht(cm): _____ (_____)
DOB: 08/18/20 (80)                Wt(kg): _____ (_____)
Sex: MALE                          Admitted: 05/03/00
Dx: TESTING
Allergies: No Allergy Assessment
ADR:
-----
                A C T I V E -----
1  -> AMPICILLIN CAP INJ          C 09/07  09/21  A
    Give: 250MG PO QID
-----
                N O N - V E R I F I E D -----
2    DOXEPIN CAP,ORAL            ? ***** ***** N
    Give: 11CC PO Q24H
-----
                P E N D I N G -----
3    MULTIVITAMINS INJ          ? ***** ***** P
    Give: Doctor's order.
-----
                N O N - A C T I V E -----
4    AMPICILLIN 1 GM             C 09/07  09/14  E
    in 0.9% NAACL 100 ML QID
-----
```

-----report continues-----

**Example: Inpatient Profile (continued)**

```

Patient: ALASKA,FRED                               Status: ACTIVE
Orderable Item: AMPICILLIN CAP INJ
Instructions:
Dosage Ordered: 250MG
    Duration:                                       Start: 09/07/00 15:00
    Med Route: ORAL (PO)                          Stop: 09/21/00 24:00
Schedule Type: CONTINUOUS
Schedule: QID
Admin Times: 01-09-15-20
Provider: INPATIENT-MEDS,PROVIDER [es]

Dispense Drugs          U/D    Units  Units  Inactive
                               Disp'd Ret'd   Date
-----
AMPICILLIN 500MG CAP    1      0      0

ORDER NOT VERIFIED
Entry By: INPATIENT-MEDS,PROVIDER                 Entry Date: 09/07/00 13:37
Enter RETURN to continue or '^' to exit:

    Date: 09/07/00 14:07    User: INPATIENT-MEDS,PHARMACIST
Activity: ORDER VERIFIED BY PHARMACIST
-----
Patient: ALASKA,FRED                               Status: NON-VERIFIED
Orderable Item: DOXEPIN CAP,ORAL
Instructions:
Dosage Ordered: 11CC
    Duration:                                       Start: 09/20/00 09:00
    Med Route: ORAL (PO)                          Stop: 10/04/00 24:00
Schedule Type: NOT FOUND
Schedule: Q24H
(No Admin Times)
Provider: INPATIENT-MEDS,PROVIDER [es]
Special Instructions: special for DOXEPIN

Dispense Drugs          U/D    Units  Units  Inactive
                               Disp'd Ret'd   Date
-----
DOXEPIN 100MG U/D      1      0      0
DOXEPIN 25MG U/D      1      0      0

ORDER NOT VERIFIED
Entry By: INPATIENT-MEDS,PROVIDER                 Entry Date: 09/19/00 09:55
Enter RETURN to continue or '^' to exit:
-----
Patient: ALASKA,FRED                               Status: PENDING
Orderable Item: MULTIVITAMINS INJ
Instructions: Doctor's order.
Dosage Ordered:
    Duration:                                       Start: *****
    Med Route: IV PIGGYBACK (IVPB)                Stop: *****
Schedule Type: NOT FOUND
Schedule: QID
(No Admin Times)
Provider: INPATIENT-MEDS,PROVIDER [es]

Dispense Drugs          U/D    Units  Units  Inactive
                               Disp'd Ret'd   Date
-----

Provider Comments:
THIS IS AN INPATIENT IV EXAMPLE.

ORDER NOT VERIFIED
Self Med: NO
Entry By: INPATIENT-MEDS,PROVIDER                 Entry Date: 09/07/00 14:12
    
```

## 4.9. Order Check

Order checks (allergy/adverse drug reactions, drug-drug interactions, duplicate drug, and duplicate class) are performed when a new medication order is placed through either the Inpatient Medications or CPRS applications. They are also performed when medication orders are renewed or during the finishing processes. This functionality will ensure the user is alerted to possible adverse drug reactions and will reduce the possibility of a medication error due to the omission of an order check when a non-active medication order is renewed.

The following actions will initiate an order check:

- Action taken through Inpatient Medications to enter a medication order will initiate order checks (allergy, drug-drug interaction, duplicate drug, and duplicate class) against existing medication orders.
- Action taken through Inpatient Medications to finish a medication order placed through CPRS will initiate order checks (allergy, drug-drug interaction, duplicate drug, and duplicate class) against existing medication orders.
- Action taken through IV Menu to finish a medication order placed through CPRS will initiate order checks (allergy, drug-drug interaction, duplicate drug, and duplicate class) against existing medication orders.
- Action taken through Inpatient Medications to renew a medication order will initiate order checks (allergy, drug-drug interaction, duplicate drug, and duplicate class) against existing medication orders.
- Action taken through IV Menu to renew a medication order will initiate order checks (allergy, drug-drug interaction, duplicate drug, and duplicate class) against existing medication orders.

The following are the different items used for the order checks:

- Checks each Dispense Drug within the Unit Dose order for allergy/adverse drug reactions.
- Checks each Dispense Drug within the Unit Dose order against existing orders for drug-drug interaction, duplicate drug, and duplicate class.
- Checks each additive within an IV order for drug-drug interaction, duplicate drug, and duplicate class against solutions or other additives within the order.
- Checks each IV order solution for allergy/adverse reactions.
- Checks each IV order solution for drug-drug interaction against other solutions or additives within the order.
- Checks each IV order additive for allergy/adverse reaction.
- Checks each IV order additive for drug-drug interaction, duplicate drug, and duplicate class against existing orders for the patient.
- Checks each IV order solution for drug-drug interaction against existing orders for the patient.

Override capabilities are provided based on the severity of the order check, if appropriate.

Order Checks warnings will be displayed/processed in the following order:

- Duplicate drug or class
- Critical or significant drug-drug interactions
- Critical or significant drug-allergy interactions

These checks will be performed at the Dispense Drug level. All pending, non-verified, active, renewed, active Outpatient orders, and Non-VA Meds documented in CPRS will be included in the check. Order checks for IV orders will use the Dispense Drugs linked to each additive/solution in the order. If the order is entered by the Orderable Item only, these checks will be performed at the time the Dispense Drug(s) is specified. The checks performed include:

- Duplicate Drug - If the patient is already receiving an order containing the Dispense Drug selected for the new order, the duplicate order will be displayed and the user will be asked whether or not to continue. Entry of duplicate drugs will be allowed. Only Additives will be included in the duplicate drug check for IV orders. The solutions are excluded from this check.
- Duplicate Class - If the patient is already receiving an order containing a Dispense Drug in the same class as one of the Dispense Drugs in the new order, the order containing the drug in that class will be displayed and the user will be asked whether or not to continue. Entry of drugs in the same class will be allowed.
- Drug-Drug Interactions - Drug-drug interactions will be either critical or significant. If the Dispense Drug selected is identified as having an interaction with one of the drugs the patient is already receiving, the order the new drug interacts with will be displayed.
- Drug-Allergy Interactions - Drug-allergy interactions will be either critical or significant. If the Dispense Drug selected is identified as having an interaction with one of the patient's allergies, the allergy the drug interacts with will be displayed.



**Note:** For a Significant Interaction, the user who holds the PSJ RPHARM key is allowed to enter an intervention, but one is not required. For a Critical Interaction, the user who holds the PSJ RPHARM key must enter an intervention before continuing.

## 5. Maintenance Options

All of these maintenance options are located on the *Unit Dose Medications* menu.

### 5.1. Edit Inpatient User Parameters

[PSJ UEUP]

The *Edit Inpatient User Parameters* option allows users to edit various Inpatient User parameters. The prompts that will be encountered are as follows:

- “PRINT PROFILE IN ORDER ENTRY:”

Enter **YES** for the opportunity to print a profile after entering Unit Dose orders for a patient.

- “INPATIENT PROFILE ORDER SORT:”

This is the sort order in which the Inpatient Profile will show inpatient orders. The options will be sorted either by medication or by start date of order. Entering the words “**Medication Name**” (or the number **0**) will show the orders within schedule type (continuous, one-time, and then PRN) and then alphabetically by drug name. Entering the words “**Start Date of Order**” (or the number **1**) will show the order chronologically by start date, with the most recent dates showing first and then by schedule type (continuous, one-time, and then PRN).



**Note:** The Profile first shows orders by status (active, non-verified, and then non-active).

- “LABEL PRINTER:”

Enter the device on which labels are to be printed.

- “USE WARD LABEL SETTINGS:”

Enter **YES** to have the labels print on the printer designated for the ward instead of the printer designated for the pharmacy.

## 5.2. Edit Patient's Default Stop Date

[PSJU CPDD]



This option is locked with the PSJU PL key.

The “UD DEFAULT STOP DATE/TIME:” prompt accepts the date and time entry to be used as the default value for the STOP DATE/TIME of the Unit Dose orders during order entry and renewal processes. This value is used only if the corresponding ward parameter is enabled. The order entry and renewal processes will sometimes change this date and time.



**Note:** If the Unit Dose order, being finished by the user, is received from CPRS and has a duration assigned, the UD DEFAULT STOP DATE/TIME is displayed as the Calc Stop date/time.

When the SAME STOP DATE ON ALL ORDERS parameter is set to yes, the module will assign a default stop date for each patient. This date is initially set when the first order is entered for the patient, and can change when an order for the patient is renewed. This date is shown as the default value for the stop date of each order entered for the patient. However, if a day or dose limit exists for the selected Orderable Item, and the limit is less than the default stop date, the earlier stop date and time will be displayed.

## 6. Output Options

Most of the Output Options are located under the *Reports Menu* option on the *Unit Dose Medications* menu. The other reports are located directly on the *Unit Dose Medications* menu.

### 6.1. PAtient Profile (Unit Dose)

[PSJU PR]

The *PAtient Profile (Unit Dose)* option allows a user to print a profile (list) of a patient's orders for the patient's current or last (if patient has been discharged) admission, to any device. If the user's terminal is selected as the printing device, this option will allow the user to select any of the printed orders to be shown in complete detail, including the activity logs, if any. The user may print patient profiles for a ward group, ward, or by patient.

#### Example: Patient Profile

```
Select Unit Dose Medications Option: patient Profile (Unit Dose)

Select by WARD GROUP (G), WARD (W), or PATIENT (P): P Patient
Select PATIENT: ALASKA,FRED          123-45-6789   08/18/20   1 EAST
Select another PATIENT: <Enter>

SHORT, LONG, or NO Profile? SHORT// <Enter> SHORT
Show PROFILE only, EXPANDED VIEWS only, or BOTH: PROFILE// <Enter>
Select PRINT DEVICE: <Enter> NT/Cache virtual TELNET terminal
```

```
                U N I T   D O S E   P R O F I L E                09/13/00  16:20
                WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEM
-----
ALASKA,FRED                                Ward: 1 EAST
PID: 123-45-6789      Room-Bed: B-12      Ht(cm): _____ (_____)
DOB: 08/18/20 (80)    Wt(kg): _____ (_____)
Sex: MALE              Admitted: 05/03/00
Dx: TESTING
Allergies: No Allergy Assessment
ADR:
----- A C T I V E -----
 1 -> AMPICILLIN CAP INJ                C 09/07  09/21  A  NF
      Give: 250MG PO QID
 2 -> HYDROCORTISONE CREAM, TOP         C 09/07  09/21  A  NF
      Give: 1% TOP QD
 3 -> PROPRANOLOL 10MG U/D              C 09/07  09/21  A  NF
      Give: PO QD

View ORDERS (1-3): 1
```

-----report continues-----

### Example: Patient Profile (continued)

```
-----
Patient: ALASKA, FRED                               Status: ACTIVE
Orderable Item: AMPICILLIN CAP INJ
Instructions:
Dosage Ordered: 250MG
Duration:                                           Start: 09/07/00 15:00
Med Route: ORAL (PO)                               Stop: 09/21/00 24:00
Schedule Type: CONTINUOUS
Schedule: QID
Admin Times: 01-09-15-20
Provider: INPATIENT-MEDS, PROVIDER [w]

Dispense Drugs          U/D  Units  Units  Inactive
                               Disp'd Ret'd  Date
-----
AMPICILLIN 500MG CAP    1    0      0
ORDER NOT VERIFIED
Self Med: NO
Entry By: INPATIENT-MEDS, PROVIDER                Entry Date: 09/07/00 13:37
-----
```

## 6.2. Reports Menu

### [PSJU REPORTS]

The *Reports Menu* option contains various reports generated by the Unit Dose package.



**Note:** All of these reports are QUEUABLE, and it is strongly suggested that these reports be queued when run.

### Example: Reports Menu

```
Select Reports Menu Option: ?

7      7 Day MAR
14     14 Day MAR
24     24 Hour MAR
AP1    Action Profile #1
AP2    Action Profile #2
A       AUthorized Absence/Discharge Summary
E       Extra Units Dispensed Report
F       Free Text Dosage Report
I       INpatient Stop Order Notices
M       Medications Due Worksheet
P       Patient Profile (Extended)
```

### 6.2.1. 24 Hour MAR

#### [PSJU 24H MAR]

The *24 Hour MAR* option creates a report that can be used to track the administration of a patient's medications over a 24-hour period. The 24 Hour MAR report includes:

- Date/time range covered by the MAR using a four-digit year format
- Institution Name
- Patient demographic data
- Time line
- Information about each order

The order information consists of:

- Order date
- Start date
- Stop date
- Schedule type (a letter code next to the administration times)
- Administration times (will be blank if an IV order does not have a schedule)
- Drug name
- Strength (if different from that indicated in drug name)
- Medication route abbreviation
- Schedule
- Verifying pharmacist's and nurse's initials

The MAR is printed by ward group (**G**), by ward (**W**), or by patient (**P**). If the user chooses to print by patient, the opportunity to select more than one patient will be given. The system will keep prompting, "Select another PATIENT:". If an up caret (^) is entered, the user will return to the report menu. When all patients are entered, press **<Enter>** at this prompt to continue.



**Note:** If the user chooses to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the MAR may be sorted by administration time, patient name or room-bed.

There are six medication choices. The user may select multiple choices of medications to be printed on the 24 Hour MAR. Since the first choice is ALL Medications, the user will not be allowed to combine this with any other choices. The default choice is "Non-IV Medications only" if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. Selection by Ward group.
3. Selected by patients and patients are from different wards.

The MAR is separated into two sheets. The first sheet is for continuous medications and the second sheet is for one-time and PRN medications. When the 24 Hour MAR with orders is run, both sheets will print for each patient, even though the patient might only have one type of order. The user can also print blank MARs and designate which sheets to print. The user can print continuous medication sheets only, PRN sheets only, or both. The blank MARs contain patient demographics, but no order data. Order information can be added manually or with labels.

Each sheet of the 24 Hour MAR consists of three parts:

1. The top part of each sheet contains the patient demographics.
2. The main body of the MAR contains the order information and an area to record the medication administration.

- a. The order information prints on the left side of the main body, and is printed in the same format as on labels. Labels can be used to add new orders to this area of the MAR (Labels should never be placed over order information already on the MAR). Renewal dates can be recorded on the top line of each order.
  - b. The right side of the main body is where the actual administration is to be recorded. It is marked in one-hour increments for simplicity.
3. The bottom of the form allows space for signatures/titles, initials for injections, allergies, injection sites, omitted doses, reason for omitted doses, and initials for omitted doses.

At the “Enter START DATE/TIME for 24 Hour MAR:” prompt, indicate the date and the time of day, in military time, the 24 Hour MAR is to start, including leading and trailing zeros. The time that is entered into this field will print on the 24 Hour MAR as the earliest time on the time line. If the time is not entered at this prompt, the time will default to the time specified in the ward parameter, “START TIME OF DAY FOR 24 HOUR MAR:”. If the ward parameter is blank, then the time will default to 0:01 a.m. system time.

Please keep in mind that the MAR is designed to print on stock 8 ½” by 11” paper at 16 pitch (6 lines per inch).



**Note:** It is strongly recommended that this report be queued to print at a later time.

#### Example: 24 Hour MAR

```
Select Reports Menu Option: 24 24 Hour MAR
Select the MAR forms: 3// ?
  Select one of the following:
      1      Print Blank MARs only
      2      Print Non-Blank MARs only
      3      Print both Blank and Non-Blank MARs
Select the MAR forms: 3// <Enter> Print both Blank and Non-Blank MARs

Enter START DATE/TIME for 24 hour MAR: 090700@1200 (SEP 07, 2000@12:00)

Select by WARD GROUP (G), WARD (W), or PATIENT (P): PATIENT

Select PATIENT:  ALASKA, FRED      123-45-6789  08/18/20  1 EAST

Select another PATIENT: <Enter>

Enter medication type(s): 2,3,6// ?
1. All medications
2. Non-IV medications only
3. IVPB (Includes IV syringe orders with a med route of IV or IVPB.
   All other IV syringe orders are included with non-IV medications).
4. LVPs
5. TPNs
6. Chemotherapy medications (IV)

A combination of choices can be entered here except for option 1.
e.g. Enter 1 or 2-4,5 or 2.

Enter medication type(s): 2,3,6// 1
Select PRINT DEVICE: 0,132 NT/Cache virtual TELNET terminal
```

-----report follows-----





**Example: 24 Hour MAR (continued)**

CONTINUOUS SHEET		24 HOUR MAR		09/07/2000 12:00 through 09/08/2000 11:59																							
WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEM																											
Name: ALASKA, FRED		Weight (kg): _____ (_____)		Printed on 09/20/2000 16:15																							
PID: 123-45-6789 DOB: 08/18/1920 (80)		Height (cm): _____ (_____)		Ward: 1 EAST																							
Sex: MALE Dx: TESTING				Room-Bed: B-12																							
Allergies: No Allergy Assessment ADR:				Admitted: 05/03/2000 13:29																							
Order	Start	Stop	Admin Times	12	13	14	15	16	17	18	19	20	21	22	23	24	01	02	03	04	05	06	07	08	09	10	11
09/07	09/07 15:00	09/21/00 24:00(A6789)	01 09				15				20						01								09		
AMPICILLIN CAP INJ			C 15																								
Give: 250MG PO QID			20																								
RPH: PI RN: _____																											
09/07	09/07 15:00	09/14/00 16:54(A6789)	01 09				15				20						01								09		
AMPICILLIN 1 GM			C 15																								
in 0.9% NAACL 100 ML			20																								
IVPB QID																											
See next label for continuation																											
THIS IS AN INPATIENT IV EXAMPLE																											
RPH: PI RN: _____																											
09/07	09/07 17:00	09/07/00 12:00(A6789)	C 17																								
HYDROCORTISONE CREAM, TOP																											
Give: 1% TOP QD																											
RPH: PI RN: _____																											
09/07	09/07 17:00	09/07/00 12:34(A6789)	C 17																								
HYDROCORTISONE CREAM, TOP																											
Give: 1% 0 QD																											
RPH: MLV RN: _____																											
09/07	09/07 17:00	09/07/00 12:50(A6789)	C 17																								
HYDROCORTISONE CREAM, TOP																											
Give: 1% TOP QD																											
THIS IS AN INPATIENT IV EXAMPLE																											
RPH: MLV RN: _____																											
SIGNATURE/TITLE	INIT	ALLERGIES	INJECTION SITES	MED/DOSE OMITTED	REASON	INIT																					
-----	-----	-----	Indicate RIGHT (R) or LEFT (L)	-----	-----	-----																					
-----	-----	-----	1. DELTOID	-----	-----	-----																					
-----	-----	-----	2. ABDOMEN	-----	-----	-----																					
-----	-----	-----	3. ILIAC CREST	-----	-----	-----																					
-----	-----	-----	4. GLUTEAL	-----	-----	-----																					
-----	-----	-----	5. THIGH	-----	-----	-----																					
-----	-----	-----	PRN: E=Effective	-----	-----	-----																					
-----	-----	-----	N=Not Effective	-----	-----	-----																					
ALASKA, FRED		123-45-6789	Room-Bed: B-12	PAGE: 1	VA FORM 10-2970																						

-----report continues-----



## 6.2.2. 7 Day MAR

### [PSJU 7D MAR

The *7 Day MAR* option creates a report form that can be used to track the administration of patients' medications.

The 7 Day MAR report includes:

- Date/time range covered by the MAR using a four-digit year format
- Institution Name
- Patient demographic data
- Time line
- Information about each order

The order information consists of:

- Order date
- Start date
- Stop date
- Schedule type (a letter code next to the administration times)
- Administration times (will be blank if an IV order does not have a schedule)
- Drug name
- Strength (if different from that indicated in drug name)
- Medication route abbreviation
- Schedule
- Verifying pharmacist's and nurse's initials

The MAR is printed by ward group (**G**), by ward (**W**), or by patient (**P**). If the user chooses to print by patient, the opportunity to select more than one patient will be given. The system will keep prompting, "Select another PATIENT:". If an up caret (^) is entered, the user will return to the report menu. When all patients are entered, press <Enter> at this prompt to continue.



**Note:** If the user chooses to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the MAR may be sorted by administration time, patient name, or room-bed.

There are six medication choices. The user may select multiple choices of medications to be printed on the 7 Day MAR. Since the first choice is ALL Medications, the user will not be allowed to combine this with any other choices. The default choice is "Non-IV Medications only" if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. Selection by Ward group.
3. Selected by patients and patients are from different wards.

The *7 Day MAR* option also allows the nurse to choose whether to print one of the two sheets, continuous, PRN, or both. The MAR is separated into two sheets. The first sheet is for continuous medications and the second sheet is for one-time and PRN medications. When the 7 Day MAR with orders is run, both sheets will print for each patient, even though the patient might only have one type of order. The user can also print blank MARs and designate which sheets to print. The user can print continuous medication sheets only, PRN sheets only, or both. The blank MARs contain patient demographics, but no order data. Order information can be added manually or with labels.

Each sheet of the 7 Day MAR consists of three parts:

1. The top part of each sheet contains the patient demographics.
2. The main body of the MAR contains the order information and an area to record the medication administration.
  - a. The order information prints on the left side of the main body, printed in the same format as on labels. Labels can be used to add new orders to this area of the MAR (Labels should never be placed over order information already on the MAR). Renewal dates can be recorded on the top line of each order.
  - b. The right side of the main body is where the actual administration is to be recorded. On the continuous medication sheet, the right side will be divided into seven columns, one for each day of the range of the MAR. Asterisks will print at the bottom of the columns corresponding to the days on which the medication is not to be given (e.g., Orders with a schedule of Q3D would only be given every three days, so asterisks would appear on days the medication should not be given).
3. The bottom of the form is designed to duplicate the bottom of the current CMR (VA FORM 10-2970), the back of the current PRN and ONE TIME MED RECORD CMR (VA FORM 10-5568d). The MAR is provided to record other information about the patient and his or her medication(s). It is similar to the bottom of the 24 Hour MAR, but lists more injection sites and does not allow space to list allergies.

For IV orders that have no schedule, \*\*\*\*\* will print on the bottom of the column corresponding to the day the order is to expire. On the continuous medication sheet only, there might be additional information about each order under the column marked notes. On the first line, SM will print if the order has been marked as a self-med order. The letters HSM will print if the order is marked as a hospital supplied self-med. On the second line, WS will print if the order is found to be a ward stock item, CS will print if the item is a Controlled Substance and/or NF will print if the order is a non-formulary. If the order is printed in more than one block, the RPH and RN initial line will print on the last block.

The answer to the prompt, “Enter START DATE/TIME for 7 Day MAR:” determines the date range covered by the 7 Day MAR. The stop date is automatically calculated. Entry of time is not required, but if a time is entered with the date, only those orders that expire after the date and time selected will print. If no time is entered, all orders that expire on or after the date selected will print.

Please keep in mind that the MAR is designed to print on stock 8 ½” by 11” paper at 16 pitch (6 lines per inch).



**Note:** It is strongly recommended that this report be queued to print at a later time.

### Example: 7 Day MAR

```
Select Reports Menu Option: 7 7 Day MAR
Select the MAR forms: 3// <Enter> Print both Blank and Non-Blank MARs

Select TYPE OF SHEETS TO PRINT: BOTH// <Enter>

Enter START DATE/TIME for 7 day MAR: 090700@1200 (SEP 07, 2000@12:00:00)

Select by WARD GROUP (G), WARD (W), or PATIENT (P): PATIENT

Select PATIENT: ALASKA, FRED 123-45-6789 08/18/20 1 EAST

Select another PATIENT: <Enter>

Enter medication type(s): 2,3,6// 1

Select PRINT DEVICE: 0;132 NT/Cache virtual TELNET terminal
```

-----report follows-----





**Example: 7 Day MAR (continued)**

CONTINUOUS SHEET		7 DAY MAR		09/07/2000 through 09/13/2000							
WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEMS				Printed on 09/20/2000 16:14				Ward: 1 EAST			
Name: ALASKA, FRED		Weight (kg): _____ (_____)						Room-Bed: B-12			
PID: 123-45-6789 DOB: 08/18/1920 (80)		Height (cm): _____ (_____)						Admitted: 05/03/2000 13:29			
Sex: MALE Dx: TESTING		Allergies: No Allergy Assessment ADR:									
Order	Start	Stop	Admin Times	09/07	09/08	09/09	09/10	09/11	09/12	09/13	notes
09/07	09/07 15:00	09/21/00 24:00(A6789)	01 09 C 15 20	*****							
AMPICILLIN CAP INJ Give: 250MG PO QID  RPH: PI RN: _____											
09/07	09/07 15:00	09/14/00 16:54(A6789)	01 09 C 15 20	*****							
AMPICILLIN 1 GM in 0.9% NAACL 100 ML IVPB QID See next label for continuation  RPH: PI RN: _____											
THIS IS AN INPATIENT IV EXAMPLE											
RPH: PI RN: _____											
09/07	09/07 17:00	09/07/00 12:34(A6789)	C 17	*****	*****	*****	*****	*****	*****	*****	
HYDROCORTISONE CREAM, TOP Give: 1% QD  RPH: MLV RN: _____											
09/07	09/07 17:00	09/07/00 12:50(A6789)	C 17	*****	*****	*****	*****	*****	*****	*****	
HYDROCORTISONE CREAM, TOP Give: 1% TOP QD THIS IS AN INPATIENT IV EXAMPLE RPH: MLV RN: _____											
09/07	09/07 17:00	09/07/00 12:50(A6789)	C 17	*****	*****	*****	*****	*****	*****	*****	
HYDROCORTISONE CREAM, TOP Give: 1% TOP QD THIS IS AN INPATIENT IV EXAMPLE RPH: MLV RN: _____											
SIGNATURE/TITLE	INIT	INJECTION SITES		MED/DOSE OMITTED	REASON	INIT					
		Indicate RIGHT (R) or LEFT (L)									
		(IM) (SUB Q)									
		1. DELTOID	6. UPPER ARM								
		2. VENTRAL GLUTEAL	7. ABDOMEN								
		3. GLUTEUS MEDIUS	8. THIGH								
		4. MID(ANTERIOR) THIGH	9. BUTTOCK								
		5. VASTUS LATERALIS	10. UPPER BACK								
		PRN: E=Effective N=Not Effective									
ALASKA, FRED		123-45-6789	Room-Bed: B-12	LAST PAGE: 1		VA FORM 10-2970					

### 6.2.3. 14 Day MAR [PSJU 14D MAR]

The *14 Day MAR* option creates a report form that can be used to track the administration of patients' medications.

The 14 Day MAR report includes:

- Date/time range covered by the MAR using a four-digit year format
- Institution Name
- Patient demographic data
- Time line
- Information about each order

The order information consists of:

- Order date
- Start date
- Stop date
- Schedule type (a letter code next to the administration times)
- Administration times (will be blank if an IV order does not have a schedule)
- Drug name
- Strength (if different from that indicated in drug name)
- Medication route abbreviation
- Schedule
- Verifying pharmacist's and nurse's initials

The MAR is printed by ward group (**G**), by ward (**W**), or by patient (**P**). If the user chooses to print by patient, the opportunity to select more than one patient will be given. The system will keep prompting, "Select another PATIENT:". If an up caret (^) is entered, the user will return to the report menu. When all patients are entered, press <Enter> at this prompt to continue.



**Note:** If the user chooses to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the MAR may be sorted by administration time, patient name or room-bed.

There are six medication choices. The user may select multiple choices of medications to be printed on the 14 Day MAR. Since the first choice is ALL Medications, the user will not be allowed to combine this with any other choices. The default choice is "Non-IV Medications only" if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. Selection by Ward group.
3. Selected by patients and patients are from different wards.

The *14 Day MAR* option allows the nurse to choose whether to print continuous, PRN, or both. The MAR is separated into two sheets. The first sheet is for continuous medications and the second sheet is for one-time and PRN medications. When the 14 Day MAR with orders is run, both sheets will print for each patient, even though the patient might only have one type of order. The user can also print blank MARs and designate which sheets to print. The user can print continuous medication sheets only, PRN sheets only, or both. The blank MARs contain patient demographics, but no order data. Order information can be added manually or with labels.

Each sheet of the MAR consists of three parts:

1. The top part of each sheet contains the patient demographics.
2. The main body of the MAR contains the order information and an area to record the medication administration.
  - a. The order information prints on the left side of the main body, printed in the same format as on labels. Labels can be used to add new orders to this area of the MAR (Labels should never be placed over order information already on the MAR). Renewal dates can be recorded on the top line of each order.
  - b. The right side of the main body is where the actual administration is to be recorded. On the continuous medication sheet, the right side will be divided into 14 columns, one for each day of the range of the MAR. Asterisks will print at the bottom of the columns corresponding to the days on which the medication is not to be given (e.g., Orders with a schedule of Q3D would only be given every three days, so asterisks would appear on two days out of three).
3. The bottom of the MAR is provided to record other information about the patient and his or her medication(s). It is similar to the bottom of the 24-hour MAR, but lists more injection sites.

For IV orders that have no schedule, \*\*\*\* will print on the bottom of the column corresponding to the day the order is to expire. On the continuous medication sheet only, there might be additional information about each order under the column marked notes. On the first line, SM will print if the order has been marked as a self-med order. The letters HSM will print if the order is marked as a hospital supplied self-med. On the second line, WS will print if the order is found to be a ward stock item, CS will print if the item is a Controlled Substance and/or NF will print if the order is a non-formulary. If the order is printed in more than one block, the RPH and RN initial line will print on the last block.

The answer to the prompt, “Enter START DATE/TIME for 14 Day MAR:” determines the date range covered by the 14 Day MAR. The stop date is automatically calculated. Entry of time is not required, but if a time is entered with the date, only those orders that expire after the date and time selected will print. If no time is entered, all orders that will expire on or after the date selected will print.

Please keep in mind that the MAR is designed to print on stock 8 ½” by 11” paper at 16 pitch (6 lines per inch).



**Note:** It is strongly recommended that this report be queued to print at a later time.





**Example: 14 Day MAR (continued)**

CONTINUOUS SHEET		14 DAY MAR														09/07/2000 through 09/20/2000			
WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEMS																Printed on 09/20/2000 16:11			
Name: ALASKA, FRED		Weight (kg): _____ (_____)																Ward: 1 EAST	
PID: 123-45-6789 DOB: 08/18/1920 (80)		Height (cm): _____ (_____)																Room-Bed: B-12	
Sex: MALE Dx: TESTING																Admitted: 05/03/2000 13:29			
Allergies: No Allergy Assessment ADR:																			
Order	Start	Stop	Admin Times	SEP 07	08	09	10	11	12	13	14	15	16	17	18	19	20	notes	
09/07	09/07 15:00	09/21/00 24:00 (A6789)	01 09 C 15 20	****															
AMPICILLIN CAP INJ Give: 250MG PO QID																			
RPH: PI RN: _____																			
09/07	09/07 15:00	09/14/00 16:54 (A6789)	01 09 C 15 20	****								****	****	****	****	****	****		
AMPICILLIN 1 GM in 0.9% NAACL 100 ML IVPB QID See next label for continuation																			
THIS IS AN INPATIENT IV EXAMPLE																			
RPH: PI RN: _____																			
09/07	09/07 17:00	09/07/00 12:34 (A6789)	C 17	****	****	****	****	****	****	****	****	****	****	****	****	****	****		
HYDROCORTISONE CREAM, TOP Give: 1% 0 QD																			
RPH: MLV RN: _____																			
09/07	09/07 17:00	09/07/00 12:50 (A6789)	C 17	****	****	****	****	****	****	****	****	****	****	****	****	****	****		
HYDROCORTISONE CREAM, TOP Give: 1% TOP QD THIS IS AN INPATIENT IV EXAMPLE																			
RPH: MLV RN: _____																			
09/07	09/07 17:00	09/07/00 12:50 (A6789)	C 17	****	****	****	****	****	****	****	****	****	****	****	****	****	****		
HYDROCORTISONE CREAM, TOP Give: 1% TOP QD THIS IS AN INPATIENT IV EXAMPLE																			
RPH: MLV RN: _____																			
SIGNATURE/TITLE	INIT	INJECTION SITES		MED/DOSE OMITTED		REASON		INIT											
		Indicate RIGHT (R) or LEFT (L)																	
		(IM) (SUB Q)																	
		1. DELTOID	6. UPPER ARM																
		2. VENTRAL GLUTEAL	7. ABDOMEN																
		3. GLUTEUS MEDIUS	8. THIGH																
		4. MID(ANTERIOR) THIGH	9. BUTTOCK																
		5. VASTUS LATERALIS	10. UPPER BACK																
		PRN: E=Effective N=Not Effective																	
ALASKA, FRED		123-45-6789 Room-Bed: B-12		LAST PAGE: 1		VA FORM 10-2970													

## 6.2.4. Action Profile #1 [PSJU AP-1]

The *Action Profile #1* option creates a report form that contains all of the active inpatient medication orders for one or more patients. These patients may be selected by ward group, ward, or by patient. If selection by ward is chosen, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the profile may be sorted by patient name or room-bed.

There are six medication choices. The user may select multiple choices of medications to be printed on the Action Profile #1 report. Since the first choice is ALL Medications, the user will not be allowed to combine this with any other choices. The default choice is “Non-IV Medications only” if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. Selection by Ward group.
3. Selected by patients and patients are from different wards.

The form is printed so the attending provider will have a method of periodically reviewing these active medication orders. If the user chooses to run this option by patient, the opportunity is given to select as many patients as needed, but only those that have active orders will print.

Also on this profile, the provider can renew, discontinue, or not take any action regarding the active orders for each patient. A new order will be required for any new medication prescribed or for any changes in the dosage or directions of an existing order. If no action is taken, a new order is not required.

If the user chooses to enter a start and stop date, only patients with active orders occurring between those dates will print (for the ward or wards chosen). The start and stop dates must be in the future (**NOW** is acceptable). Time is required only if the current date of **TODAY** or **T** is entered.

It is recommended that the action profiles be printed on two-part paper, if possible. Using two-part paper allows a copy to stay on the ward and the other copy to be sent to the pharmacy.



**Note:** This report uses a four-digit year format.

### Example: Action Profile #1

```
Select Reports Menu Option: AP1 Action Profile #1
Select by WARD GROUP (G), WARD (W), or PATIENT (P): Patient
Select PATIENT: ALASKA, FRED          123-45-6789   08/18/20   1 EAST
Select another PATIENT: <Enter>
Enter medication type(s): 2,3,6// 1
...this may take a few minutes...(you should QUEUE this report)...
Select PRINT DEVICE: <Enter> NT/Cache virtual TELNET terminal
Enter RETURN to continue or '^' to exit: <Enter>
```

-----*report follows*-----

**Example: Action Profile #1 (continued)**

UNIT DOSE ACTION PROFILE #1                      09/11/2000 11:01  
 WHOEVER YOU WANT IT TO BE HEALTHCARE SYSTEMS  
 (Continuation of VA FORM 10-1158)                      Page: 1

---

This form is to be used to REVIEW/RENEW/CANCEL existing active medication orders for inpatients. Review the active orders listed and beside each order circle one of the following:

R - to RENEW the order  
 D - to DISCONTINUE the order  
 N - to take NO ACTION (the order will remain active until the stop date indicated)

A new order must be written for any new medication or to make any changes in dosage or directions on an existing order.

---

ALASKA, FRED    Ward: 1 EAST  
 PID: 123-45-6789                      Room-Bed: B-12                      Ht(cm): \_\_\_\_\_ (\_\_\_\_\_)  
 DOB: 08/18/1920 (80)                      Wt(kg): \_\_\_\_\_ (\_\_\_\_\_)  
 Sex: MALE    Admitted: 05/03/2000  
 Dx: TESTING  
 Allergies: No Allergy Assessment  
 ADR:

---

No.	Action	Drug	A C T I V E	ST	Start	Stop	Status/Info
1	R D N	AMPICILLIN 1 GM in 0.9% NAACL 100 ML QID Special Instructions: THIS IS AN INPATIENT IV EXAMPLE		C	09/07	09/14	A
2	R D N	AMPICILLIN CAP INJ Give: 250MG PO QID		C	09/07	09/21	A
3	R D N	HYDROCORTISONE CREAM, TOP Give: 1% TOP QD		C	09/07	09/21	A
4	R D N	MULTIVITAMINS 5 ML in 0.9% NAACL 1000 ML 20 ml/hr		C	09/07	09/12	A
5	R D N	PROPRANOLOL 10MG U/D Give: PO QD		C	09/07	09/21	A

  

\_\_\_\_\_

Date AND Time

  
  

MULTIDISCIPLINARY REVIEW  
(WHEN APPROPRIATE)

\_\_\_\_\_

PHYSICIAN'S SIGNATURE

  
  

\_\_\_\_\_

PHARMACIST'S SIGNATURE

  
  

\_\_\_\_\_

NURSE'S SIGNATURE

ADDITIONAL MEDICATION ORDERS:

---



---



---



---



---

\_\_\_\_\_

Date AND Time

\_\_\_\_\_

PHYSICIAN'S SIGNATURE

ALASKA, FRED    123-45-6789    08/18/1920

## 6.2.5. Action Profile #2 [PSJU AP-2]

The *Action Profile #2* option is similar to the *Action Profile #1* option (see previous report) with the added feature that the nurse can show only expiring orders, giving in effect, stop order notices (see *INpatient Stop Order Notices*).

The user can run the *Action Profile #2* option by ward group, ward, or by patient. If this option is run by patient, the opportunity to select as many patients as desired is given, but the user will not get a report if the patient has no active orders.

If the option for a ward or a ward group is chosen, a prompt to choose the ward or ward group for which the user wants to run the option is displayed. The user will be asked to sort (print) Action Profiles by team or treating provider. Start and stop dates will be prompted next. Only those patients with at least one active order that has a stop date between the dates chosen will print. If entered, the start and stop dates must be in the future (**NOW** is acceptable). Time is required only if the current date of **TODAY** or **T** is entered. A future date does not require time to be entered.

At the “Print (A)ll active orders, or (E)xpiring orders only? A//” prompt, the user can choose to print all active orders for the patient(s) selected, or print only orders that will expire within the date range selected for the patient(s) selected.

It is recommended that the action profiles be printed on two-part paper, if possible. Using two-part paper allows a copy to stay on the ward and the other copy to be sent to the pharmacy.



**Note:** This report uses a four-digit year format.

### Example: Action Profile #2

```
Select Reports Menu Option: AP2 Action Profile #2
Select by WARD GROUP (G), WARD (W), or PATIENT (P): PATIENT
Select PATIENT: ALASKA, FRED          123-45-6789    08/18/20    1 EAST
Select another PATIENT: <Enter>
Enter START date/time: NOW// <Enter> (SEP 11, 2000@11:02)
Enter STOP date/time: SEP 11,2000@11:02// T+7 (SEP 18, 2000)
Print (A)ll active orders, or (E)xpiring orders only? A// <Enter> (ALL)

Enter medication type(s): 2,3,6// 1
Select PRINT DEVICE: <Enter>    NT/Cache virtual TELNET terminal
...this may take a few minutes...(you really should QUEUE this report)...
Enter RETURN to continue or '^' to exit: <Enter>
```

-----report follows-----



## 6.2.6. Authorized Absence/Discharge Summary [PSJU DS]

The *Authorized Absence/Discharge Summary* option creates a report to allow the user to determine what action to take on a patient's Unit Dose orders if the patient is discharged from the hospital or will leave the hospital for a designated period of time (authorized absence). The form is printed so that the provider can place the active orders of a patient on hold, not take any action on the order or continue the order upon discharge or absence. If the provider wishes to continue the order upon discharge, then he or she can identify the number of refills, the quantity and the number of days for the order to remain active. If no action is taken on the order, it will expire or be discontinued.

The user can run the Authorized Absence Discharge Summary by ward group, ward, or by patient. If the user chooses to run this report by patient, the opportunity is given to select as many patients as desired, but only patients with active orders will print.

If the option by ward or ward groups is chosen, the user will be prompted for start and stop date. Entry of these dates is not required, but if a start and stop date is entered, a discharge summary will print only for those patients that have at least one order that will be active between those dates. If the user does not enter a start date, all patients with active orders will print (for the ward or ward group chosen). If a clinic visit has been scheduled, the date will print. If more than one has been scheduled, only the first one will print. It is recommended that this report be queued to print when user demand for the system is low.

For co-payment purposes, information related to the patient's service connection is shown on the first page of the form (for each patient). If the patient is a service-connected less than 50% veteran, the provider is given the opportunity to mark each non-supply item order as either SERVICE CONNECTED (SC) or NON-SERVICE CONNECTED (NSC).



**Note:** This report uses a four-digit year format.

### Example: Authorized Absence/Discharge Summary

```
Select Reports Menu Option: Authorized Absence/Discharge Summary
Print BLANK Authorized Absence/Discharge Summary forms? NO// <Enter>

Select by WARD GROUP (G), WARD (W), or PATIENT (P): Patient
Select PATIENT: IDAHO,PETER          123-45-6789    02/22/42    1 West
Select another PATIENT: <Enter>
...this may take a few minutes...(you should QUEUE this report)...
Select PRINT DEVICE: <Enter> TELNET
```

-----*report follows*-----

**Example: Authorized Absence/Discharge Summary (continued)**

```

AUTHORIZED ABSENCE/DISCHARGE ORDERS      09/19/2000  12:43
VAMC: REGION 5 (660)
VA FORM: 10-7978M
Effective Date:                               Page: 1
=====
Instructions to the physician:
  A. A prescription blank (VA FORM 10-2577F) must be used for:
    1. all class II narcotics
    2. any medications marked as 'nonrenewable'
    3. any new medications in addition to those entered on this form.
  B. If a medication is not to be continued, mark "TAKE NO ACTION".
  C. To continue a medication, you MUST:
    1. enter directions, quantity, and refills
    2. sign the order, enter your DEA number, and enter the date AND time.
=====
IDAHO,PETER                               Ward: 1 West
PID: 123-45-6789      Room-Bed: A-6      Ht(cm): 167.64 (04/21/1999)
DOB: 02/22/1942 (58)   Team: * NF *      Wt(kg): 85.00 (04/21/1999)
Sex: MALE
Dx: TEST PATIENT
Allergies: CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE, CHOCOLATE,
           NUTS, STRAWBERRIES, DUST
NV Aller.: AMOXICILLIN, AMPICILLIN, TAPE, FISH, FLUPHENAZINE DECANOATE
ADR:
=====

*** THIS PATIENT HAS NON-VERIFIED ORDERS. ***

___ AUTHORIZED ABSENCE <96 HOURS    ___ AUTHORIZED ABSENCE >96 HOURS
   NUMBER OF DAYS: _____ (NO REFILLS allowed on AA/PASS meds)

___ REGULAR DISCHARGE    ___ OPT NSC    ___ SC

SC Percent: %
Disabilities: NONE STATED

Next scheduled clinic visit:
=====
No.      Medication                               Schedule      Cost per
                               Type           Dose
-----
  1 ACETAMINOPHEN 650 MG SUPP                CONTINUOUS    0.088
   Inpt Dose: 650MG PO QD

___ TAKE NO ACTION (PATIENT WILL NOT RECEIVE MEDICATION)

Outpatient Directions: _____

___SC ___NSC Qty: _____ Refills: 0 1 2 3 4 5 6 7 8 9 10 11

_____  

Physician's Signature      DEA #      Date AND Time
Enter RETURN to continue or '^' to exit:
=====

```

-----report continues-----

**Example: Authorized Absence/Discharge Summary (continued)**

AUTHORIZED ABSENCE/DISCHARGE ORDERS		Page: 2
VAMC: REGION 5 (660)		
VA FORM: 10-7978M		
IDAHO, PETER	123-45-6789	02/22/1942

---

No.	Medication	Schedule Type	Cost per Dose
2	BENZOYL PEROXIDE 10% GEL (2OZ) Inpt Dose: APPLY SMALL ABOUT TOP QD Special Instructions: TEST	CONTINUOUS	3.78
<p>___ TAKE NO ACTION (PATIENT WILL NOT RECEIVE MEDICATION)</p> <p>Outpatient Directions: _____</p> <p>___SC ___NSC Qty: _____ Refills: 0 1 2 3 4 5 6 7 8 9 10 11</p>			
_____ Physician's Signature		_____ DEA #	_____ Date AND Time
3	RANITIDINE 150MG Inpt Dose: 150MG PO QID	CONTINUOUS	0.5
<p>___ TAKE NO ACTION (PATIENT WILL NOT RECEIVE MEDICATION)</p> <p>Outpatient Directions: _____</p> <p>___SC ___NSC Qty: _____ Refills: 0 1 2 3 4 5 6 7 8 9 10 11</p>			
_____ Physician's Signature		_____ DEA #	_____ Date AND Time
4	THEO-24 200MG Inpt Dose: 400MG PO QID Special Instructions: TESTING	CONTINUOUS	0.086
<p>___ TAKE NO ACTION (PATIENT WILL NOT RECEIVE MEDICATION)</p> <p>Outpatient Directions: _____</p> <p>___SC ___NSC Qty: _____ Refills: 0 1 2 3 4 5 6 7 8 9 10 11</p>			
_____ Physician's Signature		_____ DEA #	_____ Date AND Time
=====			
OTHER MEDICATIONS:			
5 Medication: _____			
Outpatient Directions: _____			
___SC ___NSC Qty: _____ Refills: 0 1 2 3 4 5 6 7 8 9 10 11			
_____ Physician's Signature		_____ DEA #	_____ Date AND Time
-----			
6 Medication: _____			
Outpatient Directions: _____			
___SC ___NSC Qty: _____ Refills: 0 1 2 3 4 5 6 7 8 9 10 11			
_____ Physician's Signature		_____ DEA #	_____ Date AND Time

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

-----report continues-----

**Example: Authorized Absence/Discharge Summary (continued)**

```
AUTHORIZED ABSENCE/DISCHARGE INSTRUCTIONS 09/19/2000 12:43
VAMC: REGION 5 (660)
VA FORM: 10-7978M
Effective Date:
=====
IDAHO,PETER                               Ward: 1 West
PID: 123-45-6789      Room-Bed: A-6      Ht(cm): 167.64 (04/21/1999)
DOB: 02/22/1942 (58)   Team: * NF *      Wt(kg): 85.00 (04/21/1999)
Sex: MALE              Admitted: 09/16/1999
Dx: TEST PATIENT
Allergies: CARAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE, CHOCOLATE,
           NUTS, STRAWBERRIES, DUST
NV Aller.: AMOXICILLIN, AMPICILLIN, TAPE, FISH, FLUPHENAZINE DECANOATE
ADR:
=====
Next scheduled clinic visit:
=====
DIETARY INSTRUCTIONS: (Check One)
__ NO RESTRICTIONS __ RESTRICTIONS (Specify) _____
_____
_____
=====
PHYSICAL ACTIVITY LIMITATIONS: (Check One)
__ NO RESTRICTIONS __ RESTRICTIONS (Specify) _____
_____
_____
=====
SPECIAL INSTRUCTIONS: (list print information, handouts, or other
instructions pertinent to patient's condition)_____
_____
_____
=====
DIAGNOSES: _____
_____
_____
Enter RETURN to continue or '^' to exit: <Enter>
```

-----report continues-----

**Example: Authorized Absence/Discharge Summary (continued)**

```
AUTHORIZED ABSENCE/DISCHARGE INSTRUCTIONS 09/19/2000 12:43
VAMC: REGION 5 (660)
VA FORM: 10-7978M
Effective Date:
=====
IDAHO,PETER                               Ward: 1 West
PID: 123-45-6789      Room-Bed: A-6      Ht(cm): 167.64 (04/21/1999)
DOB: 02/22/1942 (58)   Team: * NF *      Wt(kg): 85.00 (04/21/1999)
Sex: MALE              Admitted: 09/16/1999
Dx: TEST PATIENT
Allergies: CAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE, CHOCOLATE,
           NUTS, STRAWBERRIES, DUST
NV Aller.: AMOXICILLIN, AMPICILLIN, TAPE, FISH, FLUPHENAZINE DECANOATE
ADR:
=====

Next scheduled clinic visit:

_____|_____|
Nurse's Signature                      Date AND Time

_____|_____|
Physician's Signature                  Date AND Time

=====
>>>> I HAVE RECEIVED AND UNDERSTAND <<<<<
>>>> MY DISCHARGE INSTRUCTIONS      <<<<<
=====

_____|_____|
Patient's Signature                    Date And Time

IDAHO,PETER                            123-45-6789                            02/22/1942
```

## 6.2.7. Extra Units Dispensed Report [PSJU EUDD]

The *Extra Units Dispensed Report* option allows the user to print a report showing the amounts, date dispensed, and the initials of the person who entered the dispensed drug. This can be printed by ward group, ward, or by patient. If the user chooses to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the profile may be sorted by patient name or room-bed.

### Example: Extra Units Dispensed Report

```
Select Reports Menu Option: EXtra Units Dispensed Report

Enter Start Date and Time: T@1000 (SEP 19, 2000@10:00)
Enter Ending Date and Time: T@2400 (SEP 19, 2000@24:00)

Select by WARD GROUP (G), WARD (W), or PATIENT (P): Patient

Select PATIENT: IDAHO,PETER 2-22-42 123456789 YES ACTIVE DUTY

Select another PATIENT: <Enter>
Select output device: 0;80 TELNET

this may take a while...(you should QUEUE the Extra Units Dispensed report)
```

```
EXTRA UNITS DISPENSED REPORT PAGE: 1
REPORT FROM: 09/19/00 10:00 TO: 09/19/00 24:00

IDAHO,PETER Room_Bed: A-6
123-45-6789 Ward: 1 West

DRUG NAME UNIT DATE DISP.
DATE DISPENSED BY
ACETAMINOPHEN 650 MG SUPP 3 09/19/00 12:54 MV
5 09/19/00 12:54 MV
..... 8
BENZOYL PEROXIDE 10% GEL (2OZ) 2 09/19/00 12:58 PM
..... 2
RANITIDINE 150MG 3 09/19/00 12:54 MV
3 09/19/00 12:58 PM
..... 6
TOTAL FOR IDAHO,PETER..... 16

Press Return to continue...
```

### 6.2.8. Free Text Dosage Report [PSJU DOSAGE REPORT]

The *Free Text Dosage Report* option creates a report to track commonly ordered free text dosages over a date range. This report evaluates Unit Dose orders that were active during the specified dates against the DISPENSE DRUG file. If the applicable Possible Dosages or Local Possible Dosages do not match the Dosage Ordered, then this is considered a Free Text Dosage Entry and is contained in this report. This report includes the:

- Dispense Drug
- Free Text Dosage Entry
- Total number of occurrences of each Free Text Dosage Entry
- Number of occurrences by the Provider Name

Each entry in the Free Text Dosage Report consists of at least two lines of display. The first line shows the Dispense Drug name, followed by the drug internal entry number in parentheses. The first line continues with the Free Text Dosage Entry and the total number of occurrences of this entry. The second line shows the name of the Providers that used this Free Text Dosage Entry during the requested date range, and the number of times Providers used this free text dosage. Since all Providers are listed, multiple lines will be displayed.

Unit Dose orders that were active during the specified date range and have free text dosages are included in this report. The user is prompted to enter the “Beginning Date:” and an “Ending Date:” for the report to print. If no value is entered in either of the two prompts, the report will not print. The date range will be listed in the “Period:” section of the report header with the beginning date appearing as the first date and the ending date appearing as the second date.



**Note:** It is strongly recommended that this report be queued to print at a later time.

#### Example: Free Text Dosage Report

```
Select Reports Menu Option: FREE Text Dosage Report
Beginning Date: T-100 (SEP 29, 2001)
Ending Date: T (JAN 07, 2002)
DEVICE: HOME// 0;80 NT/Cache virtual TELNET terminal
Working - please wait.....
```

-----report follows-----

**Example: Free Text Dosage Report (continued)**

Inpatient Free Text Dosage Entry Report			Page 1
Period: Sep 29, 2001 to Jan 07, 2002			
Drug	Free Text Entry		Count
Provider:Count			
-----			
A-METHYL-PARA-TYROSINE CAPS,25 (5098)	100MG		1
INPATIENT-MEDS, PROVIDER:1			
ACETAMINOPHEN 325MG C.T. (263)	1000MG		1
BOISE, WILLIAM:1			
	100MG		2
JACKSON, ROBERT:1	MONTPELIER, MELINDA A.:1		
	100mg		1
MONTPELIER, MELINDA A.:1			
	300MG		1
BOISE, WILLIAM:1			
	325MG		7
MONTPELIER, MELINDA A.:1	INPATIENT-MEDS, PROVIDER:4		
INPATIENT-MEDS, PHARMACIST:2			
Press Return to Continue or ^ to Exit:			

## 6.2.9. INpatient Stop Order Notices [PSJ EXP]

The *INpatient Stop Order Notices* option produces a list of patients' medication orders that are about to expire. Action must be taken (using VA FORM 10-1158) if these medications are to be re-ordered. This option will list both Unit Dose orders and IV orders. The user may choose to print All, which is the default, or either the Unit Dose or IV orders.

Special Instructions for Unit Dose orders and Other Print Information for IV orders are listed on the report. IV orders are sorted by the Orderable Item of the first additive or solution in the order. The Orderable Item with each additive and solution is displayed along with the strength/volume specified. The schedule type for all IV orders is assumed to be continuous.

If the user chooses to print by ward, the selection to sort by administration teams is displayed. ALL teams, which is the default, multiple teams, or one administration team may be chosen.

### Example: Inpatient Stop Order Notices

```
Select Reports Menu Option: INpatient Stop Order Notices
Select by WARD GROUP (G), WARD (W), or PATIENT (P): PATIENT
Select PATIENT:      IDAHO,PETER      123-45-6789   02/22/42   1 West
Enter start date: T   (SEP 19, 2000)
Enter stop date: T+7 (SEP 26, 2000)
List IV orders, Unit Dose orders, or All orders: ALL// <Enter>
Select PRINT DEVICE: 0;80 TELNET
...this may take a few minutes...
                    ...you really should QUEUE this report, if possible...
Enter RETURN to continue or '^' to exit: <Enter>
-----report follows-----
```



## 6.2.10. Medications Due Worksheet [PSJ MDWS]

The *Medications Due Worksheet* option creates a report that lists active medications (Unit Dose and IV) that are due within a selected 24-hour period. The user will be able to select by ward group, ward, or individual patients. If the user chooses to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the Medications Due Worksheet may be sorted by administration time, patient name, or room-bed. However, if the user chooses to select by patient, multiple patients can be entered.

For IV orders that have no schedule, the projected administration times will be calculated based on the order's volume, flow rate, and start time. An asterisk (\*) will be printed for the administration times instead of the projected administration times.

If the MAR ORDER SELECTION DEFAULT prompt for the ward parameter is defined, the default will be displayed at the "Enter medication type(s):" prompt.

The default choice is 2 or Non-IV Medications only if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. Selection by Ward group.
3. Selected by patients and patients are from different wards.

The PRN medication orders will be printed if the user enters **YES** at the "Would you like to include PRN Medications (Y/N)? NO//"  
prompt. PRN orders will be listed after all continuous and one-time orders are printed.

### Example: Medications Due Worksheet

```
Select Reports Menu Option: MEDications Due Worksheet
Would you like to include PRN Medications (Y/N)? NO// YES
Enter Start Date and Time: T@1000 (SEP 19, 2000@10:00)
Enter Ending Date and Time: T@2400 (SEP 19, 2000@24:00)
Select by WARD GROUP (G), WARD (W), or PATIENT (P): Patient
Select PATIENT: IDAHO,PETER 2-22-42 123456789 YES ACTIVE DUTY
Select another PATIENT: <Enter>
Enter medication type(s): 2// 1
Select output device: 0;80 TELNET
```

-----*report follows*-----

**Example: Medications Due Worksheet (continued)**

```
MEDICATIONS DUE WORKSHEET For: IDAHO,PETER                               Page: 1
Report from: 09/19/00 10:00 to: 09/19/00 24:00                         Report Date: 09/19/00
Continuous/One time Orders for: ALL MEDS

For date: 09/19/00

IDAHO,PETER      A-6      12:00 09/18 | 09/18 12:00 | 09/22/00 22:00
123-45-6789
1 West
RANITIDINE TAB
Give: 150MG PO QID
RN/LPN Init: _____

09/18 | 09/18 12:00 | 09/22/00 22:00
THEOPHYLLINE CAP,SA
Give: 400MG PO QID
TESTING
RN/LPN Init: _____

* 09/19 | 09/19 12:00 | 09/22/00 18:00
AMPICILLIN 100 GM
in
0.45% NAACL 1000 ML 8MG/HR
IV 8MG/HR@1
RN/LPN Init: _____

15:00 09/18 | 09/18 12:00 | 09/22/00 22:00
RANITIDINE TAB
Give: 150MG PO QID
RN/LPN Init: _____

09/18 | 09/18 12:00 | 09/22/00 22:00
THEOPHYLLINE CAP,SA
Give: 400MG PO QID
TESTING
RN/LPN Init: _____

20:00 09/18 | 09/18 12:00 | 09/22/00 22:00
RANITIDINE TAB
Give: 150MG PO QID
RN/LPN Init: _____

09/18 | 09/18 12:00 | 09/22/00 22:00
THEOPHYLLINE CAP,SA
Give: 400MG PO QID
TESTING
RN/LPN Init: _____

* Projected admin. times based on order's volume, flow rate, and start time.
Enter RETURN to continue or '^' to exit:
```

## 6.2.11. Patient Profile (Extended) [PSJ EXTP]

The *Patient Profile (Extended)* option creates a report to allow the viewing of all the orders on file for a patient. The user can view all of the orders that have not been purged or enter a date to start searching from.

### Example: Patient Profile (Extended)

```
Select Reports Menu Option: PATient Profile (Extended)
Select PATIENT:      ALASKA,FRED          123-45-6789  11/01/61   1 EAST
Date to start searching from (optional):  083101
Select another PATIENT: <Enter>
Show PROFILE only, EXPANDED VIEWS only, or BOTH: PROFILE// BOTH
Show SHORT, LONG, or NO activity log? NO// SHORT
Select PRINT DEVICE: <Enter>  DECSERVER
```

```

                I N P A T I E N T   M E D I C A T I O N S           02/28/02  14:12
                    VAMC:  ALBANY, NY (500)
-----
ALASKA,FRED                      Ward: 1 EAST
PID: 123-45-6789                 Room-Bed: B-12           Ht(cm): _____ (_____)
DOB: 08/18/20 (81)              Wt(kg): _____ (_____)
Sex: MALE                        Admitted: 05/03/00
Dx: TESTING                      Last transferred: *****
Allergies: No Allergy Assessment
ADR:
-----
                A C T I V E -----
1  MULTIVITAMINS 2 ML              C 02/28/02  03/30/02  A
   in 0.9% SODIUM CHLORIDE 100 ML QID
2  BACLOFEN TAB                    C 02/20/02  03/06/02  A
   Give: 10MG PO QD
   PATIENT SPITS OUT MEDICINE
3  PREDNISONE TAB                  C 02/25/02  03/11/02  A
   Give: 5MG PO TU-TH-SA@09
4  RESERPINE TAB                   C 02/20/02  03/06/02  A
   Give: 1MG PO QD
5  PANCREATIN CAP,ORAL            O 02/21/02  03/23/02  A
   Give: 1 CAPSULE PO ONCE
-----
                N O N - A C T I V E -----
6  CEFTAZIDIME INJ                 ? ***** ***** N
   Give: 1 GM IV QD
7  TRACE ELEMENTS INJ              ? ***** ***** N
   Give: 1 ML IV QID
-----
                N O N - A C T I V E -----
8  in DEXTROSE 5% 1000 ML 1 ml/hr  ? ***** ***** P
9  CEFAZOLIN INJ                   ? ***** ***** P
   Give: 1GM/1VIAL IVPB ONE TIME
10 PENICILLIN INJ,SUSP              ? ***** ***** P
   Give: 600000UNT/1ML IM BID
11 PENICILLIN INJ,SUSP              ? ***** ***** P
   Give: 600000UNT/1ML IM QD
-----
                N O N - A C T I V E -----
12 CEFAZOLIN 1 GM                   C 11/02/01  12/07/01  E
   in 5% DEXTROSE 1000 ML QID
13 zC2TESTDRUG 1 LITER              C 12/14/01  12/21/01  E
   in 5% DEXTROSE 1000 ML QD
Enter RETURN to continue or '^' to exit:
-----report continues-----

```

**Example: Patient Profile (Extended) (continued)**

```

Patient: ALASKA,FRED                               Status: ACTIVE
*(1) Additives:                                     Order number: 29           Type: PIGGYBACK
      MULTIVITAMINS 2 ML
(2) Solutions:
      0.9% SODIUM CHLORIDE 100 ML
      Duration:                                     *(4) Start: 02/28/02 13:56
(3) Infusion Rate: INFUSE OVER 125 MIN.
*(5) Med Route: IV                                  *(6) Stop: 03/30/02 24:00
*(7) Schedule: QID                                  Last Fill: *****
(8) Admin Times: 09-13-17-21                       Quantity: 0
*(9) Provider: PROVIDER,PAULA [w]                  Cum. Doses:
*(10) Orderable Item: MULTIVITAMINS INJ
      Instructions:
(11) Other Print:

(12) Remarks :
      Entry By: ALBANY,ALBERT                       Entry Date: 02/28/02 13:56

ACTIVITY LOG:
# DATE      TIME      REASON      USER
=====
1 FEB 28,2002 13:58:30 VERIFY      ALBANY,ALBERT
  Comment: ORDER VERIFIED BY PHARMACIST
-----

Patient: ALASKA,FRED                               Status: ACTIVE
Orderable Item: BACLOFEN TAB
Instructions:
Dosage Ordered: 10MG
      Duration:                                     Start: 02/20/02 15:20
      Med Route: ORAL (PO)                          Stop: 03/06/02 24:00
Schedule Type: CONTINUOUS
      Schedule: QD
      Admin Times: 1440
      Provider: PROVIDER,PAULA [w]
Special Instructions: PATIENT SPITS OUT MEDICINE

Dispense Drugs                                     U/D   Units  Units  Inactive
                                                Disp'd Ret'd  Date
-----
BACLOFEN 10MG TABS                               1     0     0
Entry By: TULSA,LARRY                             Entry Date: 02/20/02 15:20

ACTIVITY LOG:
# DATE      TIME      REASON      USER
=====
      (THE ORDERABLE ITEM IS CURRENTLY LISTED AS INACTIVE.)
      Date: 02/20/02 15:20      User: TULSA,LARRY
Activity: ORDER ENTERED AS ACTIVE BY PHARMACIST
-----

Patient: ALASKA,FRED                               Status: ACTIVE
Orderable Item: PREDNISONE TAB
Instructions:
Dosage Ordered: 5MG
      Duration:                                     Start: 02/25/02 10:58
      Med Route: ORAL (PO)                          Stop: 03/11/02 24:00
Schedule Type: CONTINUOUS
      Schedule: TU-TH-SA@09
      Admin Times: 09
      Provider: PROVIDER,PAULA [w]

Dispense Drugs                                     U/D   Units  Units  Inactive
                                                Disp'd Ret'd  Date
-----
PREDNISONE 5MG TAB                               1     0     0
Self Med: NO
Entry By: PHOENIX,SALLY                           Entry Date: 02/25/02 10:58

ACTIVITY LOG:
# DATE      TIME      REASON      USER
=====
      Date: 02/25/02 10:58      User: PHOENIX,SALLY
Activity: ORDER VERIFIED BY PHARMACIST

```

### 6.3. Align Labels (Unit Dose) [PSJU AL]

*Align Labels (Unit Dose)* option allows the user to align the label stock on a printer so that Unit Dose order information will print within the physical boundaries of the label.

#### Example: Align Labels (Unit Dose)

```
Select Unit Dose Medications Option: ALIGn Labels (Unit Dose)

Select LABEL PRINTER: <Enter> TELNET
\----- FIRST LINE OF LABEL -----/
<----->
<----- LABEL BOUNDARIES ----->
<----->
/-----LAST LINE OF LABEL-----\

XX/XX | XX/XX | XX/XX/XX XX:XX (PXXXX) | A T PATIENT NAME
ROOM-BED
DRUG NAME TEAM SCHEDULE TYPE | D I XXX-XX-XXXX DOB (AGE)
DOSAGE ORDERED MED ROUTE SCHEDULE | M M SEX DIAGNOSIS
SPECIAL INSTRUCTIONS | I E ACTIVITY DATE/TIME ACTIVITY
WS HSM NF RPH:_____ RN:_____ | N S WARD GROUP
WARD

Are the labels aligned correctly? Yes// Y (Yes)
```

### 6.4. Label Print/Reprint [PSJU LABEL]

*Label Print/Reprint* option allows the user to print new unprinted labels and/or reprint the latest label for any order containing a label record. When entering this option, the nurse will be informed if there are any unprinted new labels from auto-cancelled orders (i.e., due to ward or service transfers). The nurse will be shown a list of wards to choose from if these labels are to be printed at this time. The nurse can delete these auto-cancel labels; however, deletion will be for all of the labels.

Next, the nurse will be instructed if there are any unprinted new labels. The nurse can then decide whether to print them now or later.

The nurse can choose to print the labels for a ward group, ward, or for an individual patient. If ward group or ward is chosen, the label start date will be entered and the labels will print on the specified printer device. When the option to print by individual patient is chosen, an Inpatient Profile will be displayed and the nurse can then choose the labels from the displayed Unit Dose and IV orders to be printed on a specified printer.

## 7. Inquiries Option

All of the Inquiries Options are located under the *INquiries Menu* option on the *Unit Dose Medications* menu.

### INquiries Menu [PSJU INQMGR]

The *INquiries Menu* option allows the user to view information concerning standard schedules and drugs. No information in this option can be edited, so there is no danger of disrupting the Unit Dose module's operation. The *INquiries Menu* contains the following sub-options:

#### Example: Inquiries Menu

```
Select Unit Dose Medications Option: INquiries Menu
Select INquiries Menu Option: ?
    Dispense Drug Look-Up
    Standard Schedules
```

### 7.1. Dispense Drug Look-Up [PSJU INQ DRUG]

The *Dispense Drug Look-Up* option allows the user to see what drugs are in the DRUG file and any Unit Dose information pertaining to them.

At the "Select DRUG:" prompt, the nurse can answer with drug number, quick code, or VA drug class code (for IV, solution print name, or additive print name). Information about the selected drug will be displayed.

### Example: Dispense Drug Look-Up

```
Select Unit Dose Medications Option: INquiries Menu
Select INquiries Menu Option: DIspense Drug Look-Up
Select DRUG: ASP
1  ASPIRIN 10 GRAIN SUPPOSITORIES          CN103      02-18-98      INPATIENT
2  ASPIRIN 325MG                          CN103      N/F           *90-DAY FILL*
3  ASPIRIN 325MG E.C.                      CN103      *90-DAY FILL*
4  ASPIRIN 325MG E.C. U/D                  CN103      N/F           TAB
5  ASPIRIN 325MG U/D                      CN103
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 5  ASPIRIN 325MG U/D          CN103

FORMULARY ITEM
A UNIT DOSE DRUG

DAY (nD) or DOSE (nL) LIMIT:
UNIT DOSE MED ROUTE:
UNIT DOSE SCHEDULE TYPE:
UNIT DOSE SCHEDULE:
CORRESPONDING OUTPATIENT DRUG:
ATC MNEMONIC:
ATC CANISTER: WEST WING          12
                SOUTH WING       12
                JUNK ONE          12
                TESSS             12
                11;PS(57.5,       12
                13;PS(57.5,       12
                14;PS(57.5,       12
                15;PS(57.5,       12
                16;PS(57.5,       12
                17;PS(57.5,       12
                18;PS(57.5,       12
                21;PS(57.5,       12
                22;PS(57.5,       12

Select DRUG:
```

## 7.2. Standard Schedules [PSJU INQ STD SCHD]

It is extremely important for all users to know the method of schedule input. When the user enters a standard schedule, the system will echo back the corresponding Administration times.

At the “Select STANDARD SCHEDULE:” prompt, enter an administration schedule abbreviation to view information pertaining to that schedule. An explanation of the selected schedule will be displayed. To view a list of the available administration schedule abbreviations, enter a question mark (?) at the prompt “Select STANDARD SCHEDULE:”.

### Example: Standard Schedules

```
Select INquiries Menu Option: STandard Schedules
Select STANDARD SCHEDULE: q4H          01-05-09-13-17-21
Schedule: Q4H                               Type: CONTINUOUS
Standard Admin Times: 01-05-09-13-17-21
Select STANDARD SCHEDULE:
```

## 8. Glossary

### Action Prompt

There are three types of “Action” prompts that occur during order entry. One type of requesting action on the order is the standard ListMan action prompt. The following actions are valid:

<b>+</b>	<b>Next Screen</b>
<b>-</b>	<b>Previous Screen</b>
<b>UP</b>	<b>Up a Line</b>
<b>DN</b>	<b>Down a Line</b>
<b>&gt;</b>	<b>Shift View to Right</b>
<b>&lt;</b>	<b>Shift View to Left</b>
<b>FS</b>	<b>First screen</b>
<b>LS</b>	<b>Last Screen</b>
<b>GO</b>	<b>Go to Page</b>
<b>RD</b>	<b>Re Display Screen</b>
<b>PS</b>	<b>Print Screen</b>
<b>PT</b>	<b>Print List</b>
<b>SL</b>	<b>Search List</b>
<b>Q</b>	<b>Quit</b>
<b>ADPL</b>	<b>Auto Display (on/off)</b>

The second type of “Action” prompts is the Inpatient Medications Patient/Order actions. These actions are:

<b>PU</b>	<b>Patient Record Updates</b>
<b>DA</b>	<b>Detailed Allergy/ADR List</b>
<b>VP</b>	<b>View Profile</b>
<b>NO</b>	<b>New Orders Entry</b>
<b>IN</b>	<b>Intervention Menu</b>
<b>PI</b>	<b>Patient Information</b>
<b>SO</b>	<b>Select Order</b>
<b>DC</b>	<b>Discontinue</b>
<b>ED</b>	<b>Edit</b>

<b>FL</b>	<b>Flag</b>
<b>VF</b>	<b>Verify</b>
<b>HD</b>	<b>Hold</b>
<b>RN</b>	<b>Renew</b>
<b>AL</b>	<b>Activity Logs</b>
<b>OC</b>	<b>On Call</b>
<b>NL</b>	<b>Print New IV Labels</b>
<b>RL</b>	<b>Reprint IV Labels</b>
<b>RC</b>	<b>Recycled IV</b>
<b>DT</b>	<b>Destroyed IV</b>
<b>CA</b>	<b>Cancelled IV</b>

The third type of “Action” prompts is the Hidden actions. These actions are:

<b>LBL</b>	<b>Label Patient/Report</b>
<b>JP</b>	<b>Jump to a Patient</b>
<b>OTH</b>	<b>Other Pharmacy Options</b>
<b>MAR</b>	<b>MAR Menu</b>
<b>DC</b>	<b>Speed Discontinue</b>
<b>RN</b>	<b>Speed Renew</b>
<b>SF</b>	<b>Speed Finish</b>
<b>SV</b>	<b>Speed Verify</b>
<b>CO</b>	<b>Copy</b>
<b>N</b>	<b>Mark Not to be Given</b>
<b>I</b>	<b>Mark Incomplete</b>
<b>DIN</b>	<b>Drug Restr/Guide</b>

### **Active Order**

Any order which has not expired or been discontinued. Active orders also include any orders that are on hold or on call.

<b>Activity Reason Log</b>	The complete list of all activity related to a patient order. The log contains the action taken, the date of the action, and the user who took the action.
<b>Activity Ruler</b>	The activity ruler provides a visual representation of the relationship between manufacturing times, doses due, and order start times. The intent is to provide the on-the-floor user with a means of tracking activity in the IV room and determining when to call for doses before the normal delivery. The activity ruler can be enabled or disabled under the <i>Site Parameters (IV)</i> option.
<b>Additive</b>	A drug that is added to an IV solution for the purpose of parenteral administration. An additive can be an electrolyte, a vitamin or other nutrient, or an antibiotic. Only an electrolyte or multivitamin type additives can be entered as IV fluid additives in CPRS.
<b>ADMINISTRATION SCHEDULE File</b>	File #51.1. This file contains administration schedule names and standard dosage administration times. The name is a common abbreviation for an administration schedule type (e.g., QID, Q4H, PRN). The administration time entered is in military time, with each time separated from the next by a dash, and times listed in ascending order.
<b>Administering Teams</b>	Nursing teams used in the administration of medication to the patients. There can be a number of teams assigned to take care of one ward, with specific rooms and beds assigned to each team.
<b>Admixture</b>	An admixture is a type of intravenously administered medication comprised of any number of additives (including zero) in one solution. It is given at a specified flow rate; when one bottle or bag is empty, another is hung.
<b>APSP INTERVENTION File</b>	File #9009032.4. This file is used to enter pharmacy interventions. Interventions in this file are records of occurrences where the pharmacist had to take some sort of action involving a particular prescription or order. A record would record the provider involved, why an intervention was necessary, what action was taken by the pharmacists, etc.

<b>Average Unit Drug Cost</b>	The total drug cost divided by the total number of units of measurement.
<b>BCMA</b>	A <b>VISTA</b> computer software package named Bar Code Medication Administration. This package validates medications against active orders prior to being administered to the patient.
<b>Calc Start Date</b>	Calculated Start Date. This is the date that would have been the default Start Date/Time for an order if no duration was received from CPRS. Due to the existence of a duration, the default Start Date/Time of the order becomes the <u>expected first dose</u> .
<b>Calc Stop Date</b>	Calculated Stop Date. This is the date that would have been the default Stop Date/Time for an order if no duration was received from CPRS. Due to the existence of a duration, the default Stop Date/Time of the order becomes the <u>expected first dose</u> plus the duration.
<b>Chemotherapy</b>	Chemotherapy is the treatment or prevention of cancer with chemical agents. The chemotherapy IV type administration can be a syringe, admixture, or a piggyback. Once the subtype (syringe, piggyback, etc.) is selected, the order entry follows the same procedure as the type that corresponds to the selected subtype (e.g., piggyback type of chemotherapy follows the same entry procedure as regular piggyback IV).
<b>Chemotherapy “Admixture”</b>	The Chemotherapy “Admixture” IV type follows the same order entry procedure as the regular admixture IV type. This type is in use when the level of toxicity of the chemotherapy drug is high and is to be administered continuously over an extended period of time (e.g., hours or days).
<b>Chemotherapy “Piggyback”</b>	The Chemotherapy “Piggyback” IV type follows the same order entry procedure as the regular piggyback IV type. This type of chemotherapy is in use when the chemotherapy drug does not have time constraints on how fast it must be infused into the patient. These types are normally administered over a 30 - 60 minute interval.

**Chemotherapy “Syringe”**

The Chemotherapy “Syringe” IV type follows the same order entry procedure as the regular syringe IV type. Its administration may be continuous or intermittent. The pharmacist selects this type when the level of toxicity of the chemotherapy drug is low and needs to be infused directly into the patient within a short time interval (usually 1-2 minutes).

**Child Orders**

One or more Inpatient Medication Orders that are associated within a Complex order and are linked together using the conjunctions AND and OR to create combinations of dosages, medication routes, administration schedules, and order durations.

**Complex Order**

An order that is created from CPRS using the Complex order dialog and consists of one or more associated Inpatient Medication orders, known as "child" orders.

**Continuous IV Order**

Inpatient Medications IV order not having an administration schedule. This includes the following IV types: Hyperals, Admixtures, Non-Intermittent Syringe, and Non-Intermittent Syringe or Admixture Chemotherapy.

**Continuous Syringe**

A syringe type of IV that is administered continuously to the patient, similar to a hyperal IV type. This type of syringe is commonly used on outpatients and administered automatically by an infusion pump.

**Coverage Times**

The start and end of coverage period designates administration times covered by a manufacturing run. There must be a coverage period for all IV types: admixtures and primaries, piggybacks, hyperals, syringes, and chemotherapy. For one type, admixtures for example, the user might define two coverage periods; one from 1200 to 0259 and another from 0300 to 1159 (this would mean that the user has two manufacturing times for admixtures).

<b>CPRS</b>	A <b>VISTA</b> computer software package called Computerized Patient Record Systems. CPRS is an application in <b>VISTA</b> that allows the user to enter all necessary orders for a patient in different packages from a single application. All pending orders that appear in the Unit Dose and IV modules are initially entered through the CPRS package.
<b>Cumulative Doses</b>	The number of IV doses actually administered, which equals the total number of bags dispensed less any recycled, destroyed, or cancelled bags.
<b>Default Answer</b>	The most common answer, predefined by the system to save time and keystrokes for the user. The default answer appears before the two slash marks (//) and can be selected by the user by pressing <Enter>.
<b>Dispense Drug</b>	The Dispense Drug is pulled from DRUG file (#50) and usually has the strength attached to it (e.g., Acetaminophen 325 mg). Usually, the name alone without a strength attached is the Orderable Item name.
<b>Delivery Times</b>	The time(s) when IV orders are delivered to the wards.
<b>Dosage Ordered</b>	After the user has selected the drug during order entry, the dosage ordered prompt is displayed.
<b>DRUG ELECTROLYTES file</b>	File #50.4. This file contains the names of anions/cations, and their concentration units.
<b>DRUG file</b>	File #50. This file holds the information related to each drug that can be used to fill a prescription.
<b>Duration</b>	The length of time between the Start Date/Time and Stop Date/Time for an Inpatient Medications order. The default duration for the order can be specified by an ordering clinician in CPRS by using the Complex Dose tab in the Inpatient Medications ordering dialog.
<b>Electrolyte</b>	An additive that disassociates into ions (charged particles) when placed in solution.
<b>Entry By</b>	The name of the user who entered the Unit Dose or IV order into the computer.

<b>Hospital Supplied Self Med</b>	Self medication, which is to be supplied by the Medical Center’s pharmacy. Hospital supplied self med is only prompted for if the user answers Yes to the SELF MED: prompt during order entry.
<b>Hyperalimentation (Hyperal)</b>	Long term feeding of a protein-carbohydrate solution. Electrolytes, fats, trace elements, and vitamins can be added. Since this solution generally provides all necessary nutrients, it is commonly referred to as Total Parenteral Nutrition (TPN). A hyperal is composed of many additives in two or more solutions. When the labels print, they show the individual electrolytes in the hyperal order.
<b>Infusion Rate</b>	The designated rate of flow of IV fluids into the patient.
<b>INPATIENT USER PARAMETERS file</b>	File #53.45. This file is used to tailor various aspects of the Inpatient Medications package with regards to specific users. This file also contains fields that are used as temporary storage of data during order entry/edit.
<b>INPATIENT WARD PARAMETERS file</b>	File #59.6. This file is used to tailor various aspects of the Inpatient Medications package with regards to specific wards.
<b>Intermittent Syringe</b>	A syringe type of IV that is administered periodically to the patient according to an administration schedule.
<b>Internal Order Number</b>	The number on the top left corner of the label of an IV bag in brackets ([ ]). This number can be used to speed up the entry of returns and destroyed IV bags.
<b>IV ADDITIVES file</b>	File #52.6. This file contains drugs that are used as additives in the IV room. Data entered includes drug generic name, print name, drug information, synonym(s), dispensing units, cost per unit, days for IV order, usual IV schedule, administration times, electrolytes, and quick code information.
<b>IV CATEGORY file</b>	File #50.2. This file allows the user to create categories of drugs in order to run “tailor-made” IV cost reports for specific user-defined categories of drugs. The user can group drugs into categories.

<b>IV Label Action</b>	A prompt, requesting action on an IV label, in the form of “Action ( )”, where the valid codes are shown in the parentheses. The following codes are valid: P – Print a specified number of labels now. B – Bypass any more actions. S – Suspend a specified number of labels for the IV room to print on demand.
<b>IV Room Name</b>	The name identifying an IV distribution area.
<b>IV SOLUTIONS file</b>	File #52.7. This file contains drugs that are used as primary solutions in the IV room. The solution must already exist in the DRUG file (#50) to be selected. Data in this file includes: drug generic name, print name, status, drug information, synonym(s), volume, and electrolytes.
<b>IV STATS file</b>	File #50.8. This file contains information concerning the IV workload of the pharmacy. This file is updated each time the <i>COmpile IV Statistics</i> option is run and the data stored is used as the basis for the AMIS (IV) report.
<b>Label Device</b>	The device, identified by the user, on which computer-generated labels will be printed.
<b>Local Possible Dosages</b>	Free text dosages that are associated with drugs that do not meet all of the criteria for Possible Dosages.
<b>LVP</b>	Large Volume Parenteral — Admixture. A solution intended for continuous parenteral infusion, administered as a vehicle for additive(s) or for the pharmacological effect of the solution itself. It is comprised of any number of additives, including zero, in one solution. An LVP runs continuously, with another bag hung when one bottle or bag is empty.
<b>Manufacturing Times</b>	The time(s) that designate(s) the general time when the manufacturing list will be run and IV orders prepared. This field in the <i>SIte Parameters (IV)</i> option (IV ROOM file (#59.5)) is for documentation only and does not affect IV processing.

<b>MEDICATION ADMINISTERING TEAM file</b>	File #57.7. This file contains wards, the teams used in the administration of medication to that ward, and the rooms/beds assigned to that team.
<b>MEDICATION INSTRUCTION file</b>	File #51. This file is used by Unit Dose and Outpatient Pharmacy. It contains the medication instruction name, expansion, and intended use.
<b>MEDICATION ROUTES file</b>	File #51.2. This file contains medication route names. The user can enter an abbreviation for each route to be used at their site. The abbreviation will most likely be the Latin abbreviation for the term.
<b>Medication Routes/ Abbreviations</b>	Route by which medication is administered (e.g., oral). The MEDICATION ROUTES file (#51.2) contains the routes and abbreviations, which are selected by each VAMC. The abbreviation cannot be longer than five characters to fit on labels and the MAR. The user can add new routes and abbreviations as appropriate.
<b>Non-Formulary Drugs</b>	The medications that are defined as commercially available drug products not included in the VA National Formulary.
<b>Non-VA Meds</b>	Term that encompasses any Over-the-Counter (OTC) medications, Herbal supplements, Veterans Health Administration (VHA) prescribed medications but purchased by the patient at an outside pharmacy, and medications prescribed by providers outside VHA. All Non-VA Meds must be documented in patients' medical records.
<b>Non-Verified Orders</b>	Any order that has been entered in the Unit Dose or IV module that has not been verified (made active) by a nurse and/or pharmacist. Ward staff may not verify a non-verified order.
<b>Orderable Item</b>	An Orderable Item name has no strength attached to it (e.g., Acetaminophen). The name with a strength attached to it is the Dispense Drug name (e.g., Acetaminophen 325mg).

<b>Order Sets</b>	An Order Set is a set of N pre-written orders. (N indicates the number of orders in an Order Set is variable.) Order Sets are used to expedite order entry for drugs that are dispensed to all patients in certain medical practices and procedures.
<b>Order View</b>	Computer option that allows the user to view detailed information related to one specific order of a patient. The order view provides basic patient information and identification of the order variables.
<b>Parenteral</b>	Introduced by means other than the digestive track.
<b>Patient Profile</b>	A listing of a patient's active and non-active Unit Dose and IV orders. The patient profile also includes basic patient information, including the patient's name, social security number, date of birth, diagnosis, ward location, date of admission, reactions, and any pertinent remarks.
<b>Pending Order</b>	A pending order is one that has been entered by a provider through CPRS without Pharmacy or Nursing finishing the order. Once Pharmacy or Nursing has finished and verified the order, it will become active.
<b>PHARMACY SYSTEM file</b>	File # 59.7. This file contains data that pertains to the entire Pharmacy system of a medical center, and not to any one site or division.
<b>Piggyback</b>	Small volume parenteral solution for intermittent infusion. A piggyback is comprised of any number of additives, including zero, and one solution; the mixture is made in a small bag. The piggyback is given on a schedule (e.g., Q6H). Once the medication flows in, the piggyback is removed; another is not hung until the administration schedule calls for it.
<b>Possible Dosages</b>	Dosages that have a numeric dosage and numeric dispense units per dose appropriate for administration. For a drug to have possible dosages, it must be a single ingredient product that is matched to the VA PRODUCT file (#50.68). The VA PRODUCT file (#50.68) entry must have a numeric strength and the dosage form/unit combination must be such that a numeric strength combined with the unit can be an appropriate dosage selection.

<b>Pre-Exchange Units</b>	The number of actual units required for this order until the next cart exchange.
<b>Primary Solution</b>	A solution, usually an LVP, administered as a vehicle for additive(s) or for the pharmacological effect of the solution itself. Infusion is generally continuous. An LVP or piggyback has only one solution (primary solution). A hyperal can have one or more solutions.
<b>Print Name</b>	Drug generic name as it is to appear on pertinent IV output, such as labels and reports. Volume or Strength is not part of the print name.
<b>Print Name{2}</b>	Field used to record the additives contained in a commercially purchased premixed solution.
<b>Profile</b>	The patient profile shows a patient's orders. The Long profile includes all the patient's orders, sorted by status: active, non-verified, pending, and non-active. The Short profile will exclude the patient's discontinued and expired orders.
<b>Prompt</b>	A point at which the system questions the user and waits for a response.
<b>Provider</b>	Another term for the physician involved in the prescription of an IV or Unit Dose order for a patient.
<b>PSJI MGR</b>	The name of the <i>key</i> that allows access to the supervisor functions necessary to run the IV medications software. Usually given to the Inpatient package coordinator.
<b>PSJI PHARM TECH</b>	The name of the <i>key</i> that must be assigned to pharmacy technicians using the IV module. This key allows the technician to finish IV orders, but not verify them.
<b>PSJI PURGE</b>	The <i>key</i> that must be assigned to individuals allowed to purge expired IV orders. This person will most likely be the IV application coordinator.
<b>PSJI RNFINISH</b>	The name of the <i>key</i> that is given to a user to allow the finishing of IV orders. This user must also be a holder of the PSJ RNURSE key.
<b>PSJI USR1</b>	The <i>primary menu option</i> that may be assigned to nurses.

<b>PSJI USR2</b>	The <i>primary menu option</i> that may be assigned to technicians.
<b>PSJU MGR</b>	The name of the <i>primary menu</i> and of the <i>key</i> that must be assigned to the pharmacy package coordinators and supervisors using the Unit Dose module.
<b>PSJU PL</b>	The name of the <i>key</i> that must be assigned to anyone using the Pick List options.
<b>PSJ PHARM TECH</b>	The name of the <i>key</i> that must be assigned to pharmacy technicians using the Unit Dose module.
<b>PSJ RNFINISH</b>	The name of the <i>key</i> that is given to a user to allow the finishing of a Unit Dose order. This user must also be a holder of the PSJ RNURSE key.
<b>PSJ RNURSE</b>	The name of the <i>key</i> that must be assigned to nurses using the Unit Dose module.
<b>PSJ RPHARM</b>	The name of the <i>key</i> that must be assigned to a pharmacist to use the Unit Dose module. If the package coordinator is also a pharmacist he/she must also be given this key.
<b>Quick Code</b>	An abbreviated form of the drug generic name (from one to ten characters) for IV orders. One of the three drug fields on which lookup is done to locate a drug. Print name and synonym are the other two. Use of quick codes will speed up order entry, etc.
<b>Report Device</b>	The device, identified by the user, on which computer-generated reports selected by the user will be printed.
<b>Schedule</b>	The frequency of administration of a medication (e.g., QID, QD, QAM, STAT, Q4H).

<b>Schedule Type</b>	Codes include: <b>O</b> - one time (i.e., STAT - only once), <b>P</b> - PRN (as needed; no set administration times). <b>C</b> - continuous (given continuously for the life of the order; usually with set administration times). <b>R</b> - fill on request (used for items that are not automatically put in the cart - but are filled on the nurse's request. These can be multidose items (e.g., eye wash, kept for use by one patient and is filled on request when the supply is exhausted)). And <b>OC</b> - on call (one time with no specific time to be given, i.e., 1/2 hour before surgery).
<b>Scheduled IV Order</b>	Inpatient Medications IV order having an administration schedule. This includes the following IV Types: IV Piggyback, Intermittent Syringe, IV Piggyback Chemotherapy, and Intermittent Syringe Chemotherapy.
<b>Self Med</b>	Medication that is to be administered by the patient to himself.
<b>Standard Schedule</b>	Standard medication administration schedules stored in the ADMINISTRATION SCHEDULE file (#51.1).
<b>Start Date/Time</b>	The date and time an order is to begin.
<b>Status</b>	<b>A</b> - active, <b>E</b> - expired, <b>R</b> - renewed (or reinstated), <b>D</b> - discontinued, <b>H</b> - on hold, <b>I</b> - incomplete, or <b>N</b> - non-verified, <b>U</b> - unreleased, <b>P</b> - pending, <b>O</b> - on call, <b>DE</b> - discontinued edit, <b>RE</b> - reinstated, <b>DR</b> - discontinued renewal.
<b>Stop Date/Time</b>	The date and time an order is to expire.
<b>Stop Order Notices</b>	A list of patient medications that are about to expire and may require action.
<b>Syringe</b>	Type of IV that uses a syringe rather than a bottle or bag. The method of infusion for a syringe-type IV may be continuous or intermittent.
<b>Syringe Size</b>	The syringe size is the capacity or volume of a particular syringe. The size of a syringe is usually measured in number of cubic centimeters (ccs).

<b>TPN</b>	Total Parenteral Nutrition. The intravenous administration of the total nutrient requirements of the patient. The term TPN is also used to mean the solution compounded to provide those requirements.
<b>Units per Dose</b>	The number of Units (tablets, capsules, etc.) to be dispensed as a Dose for an order. Fractional numbers will be accepted.
<b>VA Drug Class Code</b>	A drug classification system used by VA that separates drugs into different categories based upon their characteristics. IV cost reports can be run for VA Drug Class Codes.
<b>VDL</b>	Virtual Due List. This is a Graphical User Interface (GUI) application used by the nurses when administering medications.
<b>WARD GROUP file</b>	File #57.5. This file contains the name of the ward group, and the wards included in that group. The grouping is necessary for the pick list to be run for specific carts and ward groups.
<b>Ward Group Name</b>	An arbitrarily chosen name used to group wards for the pick list and medication cart.
<b>WARD LOCATION file</b>	File #42. This file contains all of the facility ward locations and their related data, i.e., Operating beds, Bedsection, etc. The wards are created/edited using the <i>Ward Definition</i> option of the ADT module.

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