INPATIENT MEDICATIONS

NURSE'S USER MANUAL

Version 5.0
January 2005

(Revised September 2012)

Department of Veterans Affairs
Product Development

Revision History

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

Date	Revised Pages	Patch Number	Description
09/2012	i-iii, 12, 12a-12b, 14, 14a-14b, 16d-16f, 24b-24d, 26-27, 27a-27b, 30, 30a-30b, 59, 59a-59b 131	PSJ*5*267	Added No Allergy Assessment logic Updated Special Instructions/Other Print Info (R. Singer, PM; B. Thomas, Tech Writer)
01/2012	i-iv v-vi 10 20 23 35 47, 53, 60 74d 74f-74g 74k 74l 124, 127, 131, 133, 134 137-140	PSJ*5*254	 Updated Table of Contents Added Order Checks/Interventions (OCI) to "Hidden Actions" section Defined OCI Indicator Updated Schedule Type text Updated text under Interventions Menu Updated Pharmacy Interventions for Edit, Renew, and Finish orders Added note to Drug-Drug Interactions Added note to Drug-Allergy Interactions Added "Display Pharmacist Intervention" section Defined Historical Overrides/Interventions Updated Glossary Updated Index (R. Singer, PM; C. Bernier, Tech Writer)
09/2011	65	PSJ*5*235	Updated 'Note' section regarding Expected First Dose Scott PM, G. Werner Tech Writer)
07/2011	Cover Page i, 16 140	PSJ*5*243	Removed the acronym PD on Cover page Update Revision History Update Index Revised the existing display in the *Non-Verified/Pending Orders* [PSJU VBW] option from a pure alphabetic listing of patient names, to a categorized listing by priority. Added "priority" to Index. (N. Goyal, PM; E. Phelps/John Owczarzak, Tech Writers)

Date	Revised Pages	Patch Number	Description
04/2011	i v-vi 12 13 15-16d 18 20 26-27 33-34b 35-39 40-40d 46 67 71 72-73 74 74a-74c 74d-74f 74f-74g 105 119-120 121-122 123-136 137-140	PSJ*5*181	Updated Revision History Updated Table of Contents New Example: Patient Information Screen New Example: Non-Verified/Pending Orders Updated: Example: Short Profile, HOURS OF RECENTLY DC/EXPIRED field (#7) and INPATIENT WARD PARAMETERS file (#59.6) information, and Example: Profile. Updated “Select DRUG:” New Example: Dispense Drug with Possible Dosages and New Example: Dispense Drug with Local Possible Dosages New Example: New Order Entry New Example: New Order Entry (Clinic Location) New Examples of all the New Interventions Updated the View Profile and New Example: Profile View New Medication Profile Discontinue Type Codes New Example: Flagged Order New Example: Inpatient Profile Updated Order Checks New Example: Local Outpatient Order Display and New Example: Remote Outpatient Order Display Duplicate Therapy Drug-Drug Interaction CPRS Order Checks Updated Example: Authorized Absence/Discharge Summary (continued) CPRS Order checks: How they work Error Messages Glossary - fix page numbering Index - new entries and fix page numbering (C.Flegel, S. Heiress, Tech Writer)

Date	Revised Pages	Patch Number	Description
06/2010	i-vi, 22-23, 23a-23b, 24, 24a-24b, 74a-74b, 74e-74f, 133, 136-137 77, 100, 103, 108-110, 112, 114	PSJ*5*113	Added new Order Validation Requirements. Removed Duplicate Order Check Enhancement functionality, PSJ*5*175 (removed in a prior patch). Miscellaneous corrections. (R. Singer, DM, B. Thomas, Tech Writer)
12/2009	60a, 60b vi	PSJ*5*222	Added description of warning displayed when finishing a Complex Unit Dose Order with overlapping admin times. Corrected page numbers in Table of Contents. (E. Wright, PM; R. Sutton, Tech Writer)
07/2009	48	PSJ*5*215	When Dispense Drug is edited for an active Unit Dose, an entry is added to the activity log. (G. Tucker, PM; S. B. Scudder, Tech Writer)
02/2009	125	PSJ*5*196	Update to IV Duration (A. Scott, PM; G. Werner, Tech Writer)
08/2008	19-37, 58-59, 65, 134	PSJ*5*134	Inpatient Medication Route changes added, plus details on IV type changes for infusion orders from CPRS, pending renewal functions, and expected first dose changes. (S. Templeton, PM; G. O'Connor, Tech Writer)
10/2007	iv, 74a-74d 5, 12, 16- 17, 26, 34-38, 41-42, 72-73	PSJ*5*175 PSJ*5*160	Modified outpatient header text for display of duplicate orders. Added new functionality to Duplicate Drug and Duplicate Class definitions. Modifications for remote allergies, to ensure all allergies are included when doing order checks using VA Drug Class; Analgesic order checks match against specific class only; check for remote data interoperability performed when entering patient's chart; and list of remote allergies added to Patient Information screen. (R. Singer, PM; E. Phelps/C. Varney, Tech Writer)
07/2007	79a-79b, 86a-86b, 92a-92b	PSJ*5*145	On 24-Hour, 7-Day, and 14-Day MAR Reports, added prompt to include Clinic Orders when printing by Ward or Ward Group. Also added prompt to include Ward Orders when printing by Clinic or Clinic Group. (R. Singer, PM; E. Phelps, Tech. Writer)

Date	Revised Pages	Patch Number	Description
05/2007	24	PSJ*5*120	Modified Inpatient Medications V. 5.0 to consider the duration the same way as all other stop date parameters, rather than as an override. (R. Singer, PM; E. Phelps, Tech. Writer)
12/2005	1, 73-74b	PSJ*5*146	Remote Data Interoperability (RDI) Project: Removed document revision dates in Section 1. Introduction. Updated Section 4.9. Order Checks, to include new functionality for remote order checking. (E. Williamson, PM; M. Newman, Tech. Writer)
01/2005	All	PSJ*5*111	Reissued entire document to include updates for Inpatient Medications Orders for Outpatients and Non-Standard Schedules. (S. Templeton, PM, R. Singer, PM, M. Newman, Tech. Writer)

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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
	Clinic Stop Dates	Maintenance 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
	Order Entry	Order Options
	PAtient Profile (Unit Dose)	Output Options
	Reports Menu…	Output Options
	24 Hour MAR	Output Options
	7 Day MAR	Output Options
	14 Day MAR	Output Options
	Action Profile #1	Output Options
	Action Profile #2	Output Options
	AUthorized Absence/Discharge Summary	Output Options
	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

(This page included for two-sided copying.)

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
Pharmacist's User Manual V. 5.0
Supervisor's User Manual V. 5.0
Technical Manual/Security Guide V. 5.0
Pharmacy Ordering Enhancements (POE) Phase 2 Release Notes V. 1.0
Pharmacy Ordering Enhancements (POE) Phase 2 Installation Guide V. 1.0

(This page included for two-sided copying.)

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 group (**G)**, by ward (**W),** clinic (**C)**, or 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: PSJPHARMACIST,ONE
```

- **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: 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.

- 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.

3. List Manager

The new screen, which was designed using List Manager, has dramatically changed from the previous version.

This new screen will give the user:

- More pertinent information
- Easier accessibility to vital reports and areas of a patient's chart the user may wish to see.

Please take the time to read over the explanation of the screen and the actions that can now be executed at the touch of a button. This type of preparation before using List Manager is effective in saving time and effort.

Inpatient List Manager

Screen Title **CWAD* Indicator**

```
Patient Information             Sep 15, 2000 11:32:08                Page:    1 of
1
PSJPATIENT2,TWO                  Ward: 1 West                          <A>
   PID: 000-00-0002          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
              Remote:
   Adverse Reactions:
 Inpatient Narrative: Inpatient narrative for PSJPATIENT2
Outpatient Narrative: This patient doesn't like waiting at the pickup window.
He gets very angry.

----------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//
```

Header Area

List Area (scrolling region)

Message Window

Action Area

* Crises, Warnings, Allergies, and Directives (CWAD)

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/Adverse Drug Reaction (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>". 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.

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

Synonym	Action	Description
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.

Synonym	Action	Description
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

Synonym	Action	Description
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 (Automated Tablet Counter)
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.

Synonym	Action	Description
DC	Speed Discontinue	Speed discontinue one or more orders (This is also available in the *Inpatient Order Entry* and *Order Entry (IV) options*.)
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.

Synonym	Action	Description
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
OCI	Order Checks/Interventions	Indicates there are associated CPRS Overrides and/or Pharmacist Interventions. When the OCI indicator displays on the Order Detail screen, the user can type "OCI" to display associated CPRS Provider Overrides and/or Pharmacist Interventions.

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)
          PIck 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 in the following sections.

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 Medications 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., P0001).

Before the Patient Information screen displays, if the patient selected has no allergy assessment on file, the following prompt displays to the pharmacist/user:

"NO ALLERGY ASSESSMENT exists for this patient! Would you like to enter one now?"

- If the pharmacist/user enters 'YES,' he/she is prompted to enter the allergy information.
- If the pharmacist/user enters 'NO,' a pharmacist intervention is created, with a type of 'NO ALLERGY ASSESSMENT.' The pharmacist/user is then prompted for Provider and Recommendation information.

Note: If the selected patient is Sensitive, Discharged, both Sensitive and Discharged, or Deceased, there are variations in the Order Entry process and in the prompts that display to the pharmacist/user.

Example: Pharmacist Answers ‘Yes’ and Enters Allergy Information

```
Select PATIENT: PSJPATIENT1, ONE

NO ALLERGY ASSESSMENT exists for this patient!

Would you like to enter one now? No//  YES   (Yes)
Does this patient have any known allergies or adverse reactions? : Yes
          This patient has no allergy/adverse reaction data.

Enter Causative Agent: LATEX

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


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


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


Now checking the National Drug File - Trade Names (#50.67)
```

```
Now checking the INGREDIENTS (#50.416) file for matches...

         ...OK? Yes// Y  (Yes)

   LATEX   OK? Yes//   (Yes)
```

Example: Pharmacist Answers 'No' and Intervention is Created

```
Select PATIENT: PSJPATIENT1, ONE

NO ALLERGY ASSESSMENT exists for this patient!

Would you like to enter one now? No// N  (No)

Now creating Pharmacy Intervention

PROVIDER:

     Select one of the following:

          1         UNABLE TO ASSESS
          2         OTHER

RECOMMENDATION: ^

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

Press Return to continue...
```

The Patient Information Screen is displayed:

Example: Patient Information Screen

```
Patient Information           Feb 10, 2011@10:44:55          Page:    1 of    1
TESTYPATNM,TEST                   Ward: GEN MED                          A
   PID: 666-00-0423           Room-Bed:               Ht(cm): ______ (________)
   DOB: 01/01/50 (61)                                 Wt(kg): ______ (________)
   Sex: MALE                                     Admitted: 02/13/07
    Dx: OBSERVATION                       Last transferred: ********

Allergies - Verified: PENICILLIN, ASPIRIN
        Non-Verified:

   Adverse Reactions:
 Inpatient Narrative:
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.

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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.

If this is the first time into this option, the first prompt will be: Select IV ROOM NAME. If not, then 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, Clinic Group, and Clinic. The Pending IV, Pending Unit Dose, Non-Verified IV, and Non-Verified Unit Dose totals are then listed by Ward Group, Clinic Group, and Clinic. The nurse can then specify whether to display Non-Verified Orders, Pending Orders or both.

A ward group indicates inpatient nursing units (wards) that have been defined as a group within Inpatient Medications to facilitate processing of orders. A clinic group is a combination of outpatient clinics that have been defined as a group within Inpatient Medications to facilitate processing of orders.

Example: Non-Verified/Pending Orders

```
Non-Verified/Pending Orders
Select IV ROOM NAME:    TST ISC ROOM

You are signed on under the TST ISC ROOM IV ROOM

Enter IV LABEL device: HOME//   COMPUTER ROOM


Enter IV REPORT device: HOME//   COMPUTER ROOM

Display an Order Summary? NO// YES

Searching for Pending and Non-Verified orders..................................

                  Pending/Non-Verified Order Totals by Ward Group/Clinic Location

                                  Pending                Non-Verified
Ward Group/Clinic Location    IV        UD             IV          UD

Ward Groups

GEN MED                        5         5              0           3
TST 1 Group                    1         3              0           0
TST 3                          0         2              0           0
^OTHER                         5        27              1           5

Clinics

45 CLINIC PATTERN              5         0              0           0


1) Non-Verified Orders
2) Pending Orders

Select Order Type(s) (1-2):
```

Note: The Ward Group of ^OTHER includes all orders from wards that do not belong to a ward group. Use the *Ward Group Sort* option to select ^OTHER.

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 group (**G**), ward (**W**), clinic (**C**), patient (**P**), or priority (**PR**). When group is selected, a prompt to select by ward group (**W**) or clinic group (**C**) displays.

If ward or ward groups is selected, patients will be listed by wards, then by priority, then by teams, and then by patient name. Patients that have one or more STAT pending orders will be listed first, followed by patients with one or more ASAP pending orders, and then all other patients that have only ROUTINE pending orders. Within each priority, the patient listing is sorted alphabetically by team and then by patient name.

When priority is selected, only patients with the selected priority will display, listed by team and then by patient name.

Before the Patient Information screen displays, if the patient selected has no allergy assessment on file, the following prompt displays to the pharmacist/user:

"NO ALLERGY ASSESSMENT exists for this patient! Would you like to enter one now?"

- If the pharmacist/user enters 'YES,' he/she is prompted to enter the allergy information.
- If the pharmacist/user enters 'NO,' a pharmacist intervention is created, with a type of 'NO ALLERGY ASSESSMENT.' The pharmacist/user is then prompted for Provider and Recommendation information.

Note: If the selected patient is Sensitive, Discharged, both Sensitive and Discharged, or Deceased, there are variations in the process and in the prompts that display to the pharmacist/user.

Example: Pharmacist Answers 'Yes' and Enters Allergy Information

```
Select PATIENT: PSJPATIENT1, ONE

NO ALLERGY ASSESSMENT exists for this patient!

Would you like to enter one now? No//  YES   (Yes)
Does this patient have any known allergies or adverse reactions? : Yes
          This patient has no allergy/adverse reaction data.

Enter Causative Agent: LATEX

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


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

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


Now checking the National Drug File - Trade Names (#50.67)
Now checking the INGREDIENTS (#50.416) file for matches...

         ...OK? Yes// Y  (Yes)

   LATEX   OK? Yes//   (Yes)
```

Example: Pharmacist Answers 'No' and Intervention is Created

```
Select PATIENT: PSJPATIENT1, ONE

NO ALLERGY ASSESSMENT exists for this patient!

Would you like to enter one now? No// N  (No)

Now creating Pharmacy Intervention

PROVIDER:

     Select one of the following:
          1         UNABLE TO ASSESS
          2         OTHER

RECOMMENDATION: ^

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

Press Return to continue...

1) Unit Dose Orders
2) IV Orders

Select Package(s) (1-2): 1-2

Select by GROUP (G), WARD (W), CLINIC (C), PATIENT (P), or PRIORITY (PR): PATIENT <Enter>

Select by WARD GROUP (W) or CLINIC GROUP (C): WARD <Enter>

Select PATIENT:    PSJPATIENT1,ONE        000-00-0001  08/18/20    B-12 1 EAST

Select PATIENT: <Enter>
```

A profile prompt is displayed asking the nurse to choose a profile for the patient. The nurse 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.

(This page included for two-sided copying)

Example: Short Profile

```
Select Unit Dose Medications Option:  Non-Verified/Pending Orders
Display an Order Summary? NO// y  YES

Searching for Pending and Non-Verified orders..................................
.......................................................


                Pending/Non-Verified Order Totals by Ward Group/Clinic Location

                                 Pending                Non-Verified
Ward Group/Clinic Location    IV        UD             IV          UD

Ward Groups

BCMA                         56        75             10          30
GEN MED                       5         5              0           0
TEST AGAIN                    1        18              2           4
TST 1 GROUP                   1         4              0           0
TST 2 GROUP                   0        10              0           0
TST 3                         0         2              0           0
^OTHER                        6        32              0           4

Clinics

45 CLINIC PATTERN             5         0              0           0
BARBARA'S CLINIC              1         0              0           0
BECKY'S CLINIC                1         0              0           0


1) Non-Verified Orders
2) Pending Orders


Select Order Type(s) (1-2): 1

1) Unit Dose Orders
2) IV Orders


Select Package(s) (1-2): 1

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

Select by WARD GROUP (W) or CLINIC GROUP (C): wARD

Select WARD GROUP: bcma
PHARMACY
...a few moments, please....................................

ORDERS NOT VERIFIED BY A PHARMACIST - BCMA

 No.   TEAM                     PATIENT
-------------------------------------------------------------------------------
   1  Not Found            BCMA,EIGHTY-PATIENT (0080)
   2  Not Found            BCMA,EIGHTYEIGHT-PATIENT (0088)
   3  Not Found            BCMA,EIGHTYFIVE-PATIENT (0085)
   4  Not Found            BCMA,EIGHTYSIX-PATIENT (0086)
   5  Not Found            BCMA,EIGHTYTHREE-PATIENT (0083)
   6  Not Found            BCMA,EIGHT (0008)
   7  Not Found            BCMA,FIFTEEN-PATIENT (0015)
   8  Not Found            BCMA,FIFTYTHREE-PATIENT (0053)
   9  Not Found            BCMA,FIFTYTWO-PATIENT (0052)
  10  Not Found            BCMA,FORTYTWO-PATIENT (0042)
  11  Not Found            BCMA,FOUR-PATIENT (0004)
  12  Not Found            BCMA,FOURTEEN-PATIENT (0014)
  13  Not Found            BCMA,NINETY-PATIENT (0090)
  14  Not Found            BCMA,NINETYTWO-PATIENT (0092)
  15  Not Found            BCMA,ONE HUNDRED-PATIENT (0100)
```

```
  16  Not Found            BCMA,SEVENTYSEVEN-PATIENT (0077)
  17  Not Found            BCMA,SIXTEEN-PATIENT (0016)
  18  Not Found            BCMA,TEN-PATIENT (0010)
Select 1 - 18: 1
Do you want to print a profile for the patient? NO// y  YES

SHORT, LONG, or NO Profile?  SHORT//   SHORT

Select PRINT DEVICE: home;80;9999  COMPUTER ROOM

                I N P A T I E N T   M E D I C A T I O N S       03/16/11  10:32
                         VAMC:  ZZ ALBANY-PRRTP (500PA)
 - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 BCMA,EIGHTY-PATIENT                Ward: BCMA
    PID: 666-33-0080      Room-Bed: 12-B            Ht(cm): 167.64 (03/30/09)
    DOB: 04/07/35  (75)                             Wt(kg):  90.00 (03/30/09)
    Sex: FEMALE                                   Admitted: 02/07/02
     Dx: HIGH FEVER
 Allergies: CODEINE, ASPIRIN, CAFFEINE, STRAWBERRIES
       ADR:
 - - - - - - - - - - - - - - N O N - V E R I F I E D - - - - - - - - - - - - - -
   1     ENOXAPARIN 30MG/0.3ML/SYR INJ           ?  *****  *****  N
           Give: XXX SC XXX@09-13
   2     MULTIVITAMINS/MINERALS TAB              ?  *****  *****  N
           Give: ONE TABLET PO QAM
   3     PREDNISONE TAB                          ?  *****  *****  N
           Give: 2000MG PO NOW
 - - - - - - - - - - - - - - -  P E N D I N G - - - - - - - - - - - - - - - - -
   4     DOCUSATE NA CAP,ORAL                    ?  *****  *****  P
           Give: 100MG PO QAM
   5     ACETAMINOPHEN TAB                       ?  *****  *****  P
           Give: 325MG PO Q6H
   6     in CISPLATIN 250MG IN 0.9% NACL 250 ML   ?  *****  *****  P
   7     in CISPLATIN 250MG IN 0.9% NACL 250 ML 10?  *****  *****  P
   8     in CISPLATIN 250MG IN 0.9% NACL 250 ML 10?  *****  *****  P
   9     in DOPAMINE 400MG/D5W 1600MCG/ML 250 ML  ?  *****  *****  P
  10     in DOPAMINE IN 200ML D5W 200 ML 50MCG/KG/?  *****  *****  P
  11     HEPARIN/SODIUM CHLORIDE INJ,SOLN         ?  *****  *****  P
           Give:  IV CONTINUOUS DRIP

View ORDERS (1-11): 1

     ----------------------------------------------------------------------
Patient: BCMA,EIGHTY-PATIENT                    Status: NON-VERIFIED
Orderable Item: ENOXAPARIN 30MG/0.3ML/SYR INJ
  Instructions:
Dosage Ordered: XXX
      Duration:                                  Start: 04/05/10  13:00
     Med Route: SUBCUTANEOUS (SC)
                                                  Stop: 07/14/10  24:00
 Schedule Type: NOT FOUND
      Schedule: XXX@09-13
   (No Admin Times)
      Provider: PHARMACIST,ONE [w]
                                                 Units   Units   Inactive
 Dispense Drugs                            U/D  Disp'd  Ret'd   Date
-------------------------------------------------------------------------------
 ENOXAPARIN 30MG/0.3ML INJ SYRINGE 0.3ML   1    0       0

ORDER NOT VERIFIED
Self Med: NO

Entry By: PHARMACIST,ONE                            Entry Date: 04/05/10  14:36
Enter RETURN to continue or '^' to exit:

Select profile type for order processing.

SHORT, LONG, or NO Profile?  SHORT//   SHORT
```

```
Non-Verified/Pending Orders   Mar 16, 2011@10:33:08          Page:    1 of    2
BCMA,EIGHTY-PATIENT               Ward: BCMA                          A
   PID: 666-33-0080           Room-Bed: 12-B          Ht(cm): 167.64 (03/30/09)
   DOB: 04/07/35 (75)                                 Wt(kg): 90.00 (03/30/09)
   Sex: FEMALE                                   Admitted: 02/07/02
    Dx: HIGH FEVER                        Last transferred: ********
-------------------------------------------------------------------------------
 - - - - - - - - - - - - - - - N O N - V E R I F I E D - - - - - - - - - - - - - -
   1    ENOXAPARIN 30MG/0.3ML/SYR INJ            C  04/05  07/14 N
          Give: XXX SC XXX@09-13
   2    MULTIVITAMINS/MINERALS TAB               C  09/21  12/20 N
          Give: ONE TABLET PO QAM
   3    PREDNISONE TAB                           O  09/21  10/21 N
          Give: 2000MG PO NOW
 - - - - - - - - - - - - - - - -  P E N D I N G - - - - - - - - - - - - - - - -
   4    DOCUSATE NA CAP,ORAL                     ?  *****  ***** P
          Give: 100MG PO QAM
   5    ACETAMINOPHEN TAB                        ?  *****  ***** P
          Give: 325MG PO Q6H
+---------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 RENEWALS, PENDING COMPLEX, PENDING, RECENTLY DISCONTINUED/EXPIRED), 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.

Example: Short Profile

```
Inpatient Order Entry         Jun 12, 2006@23:12:54          Page:    1 of    1
PSJPATIENT11, ONE              Ward: 2ASM
   PID: 000-55-3421           Room-Bed: 102-1         Ht(cm): ______ (________)
   DOB: 12/02/23 (82)                                 Wt(kg): 100.00 (06/24/03)
   Sex: MALE                                     Admitted: 12/11/01
    Dx: HE IS A PAIN.                     Last transferred: 12/11/01

 - - - - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - -
   1    CEFAZOLIN 1 GM                           C  06/12  06/22  H
        in 5% DEXTROSE 50 ML Q8H
   2    CIMETIDINE TAB                           C  06/12  07/12  A
          Give: 300MG PO BID
   3    FUROSEMIDE TAB                           C  06/01  06/15  HP
          Give: 40MG PO QAM
- - - - - - - - - - - - - - N O N - V E R I F I E D - - - - - - - - - - - - - -
   4    CAPTOPRIL TAB                            C  06/14  06/28  N
          Give: 25MG PO BID

- - - - - - - - - - - - - P E N D I N G   R E N E W A L S - - - - - - - - - - - -
   5    HALOPERIDOL TAB                          ?  *****  *****  P    06/14
          Give: 5MG PO BID
- - - - - - - - - - - - - - - - - -  P E N D I N G  - - - - - - - - - - - - - - -
   6    HEPARIN/DEXTROSE INJ,SOLN                ?  *****  *****  P
          Give:  IV
   7    LACTULOSE SYRUP                          ?  *****  *****  P NF
          Give: 10GM/15ML PO BID PRN

- - - - - - - - - - - RECENTLY DISCONTINUED/EXPIRED (LAST X HOURS) - - - - - - - - - -
   8    FOLIC ACID TAB             C  06/14  06/16  D
          Give: 1MG PO QAM
   9    GENTAMICIN 80 MG                         C  06/12  06/12  D
        in 5% DEXTROSE 100 ML Q8H
  10    ISONIAZID TAB                            C  04/03  04/17  DF
```

```
          Give: 300MG PO QD
  11    POTASSIUM CHLORIDE 10MEQ                C  06/12  06/12  DA
        in 5% DEXTROSE 1000 ML Q8H
  12    POTASSIUM CHLORIDE 40 MEQ               C  06/12  06/12  DD
        in 5% DEXTROSE 250 ML 120 ml/hr
  13    PROPRANOLOL TAB                         C  06/15  06/20  DP
          Give: 40MG PO Q6H
  14    THIAMINE TAB                            C  04/03  04/17  E
          Give: 100MG PO BID

X – Represents the value set in either the ward or system parameter

       Enter ?? for more actions
PI  Patient Information                 SO  Select Order
PU  Patient Record Update               NO  New Order Entry
```

The HOURS OF RECENTLY DC/EXPIRED field (#7) has been created in the INPATIENT WARD PARAMETERS file (#59.6). The Inpatient Medications profiles will display the recently discontinued/expired orders that fall within the number of hours specified in this field. The value defined in this field will take precedence over the Inpatient System parameter. The inpatient ward parameter allows for a minimum value of one (1) hour and a maximum value of one hundred twenty (120) hours. The Inpatient Ward Parameters Edit [PSJ IWP EDIT] option allows the user to edit this new ward parameter. If this parameter is not set the software will use the value in the HOURS OF RECENTLY DC/EXPIRED field (#26.8) in the PHARMACY SYSTEM file (#59.7). If neither parameter is set the software will default to twenty-four (24) hours.

The HOURS OF RECENTLY DC/EXPIRED field (#26.8) has been created in the PHARMACY SYSTEM file (#59.7). The Inpatient Medications profiles will display the recently discontinued/expired orders that fall within the number of hours specified in this field. This parameter allows for a minimum value of one (1) hour and a maximum value of one hundred twenty (120) hours. The Systems Parameters Edit [PSJ SYS EDIT] option includes the ability for a user to edit this inpatient site parameter. If neither parameter is set the software will default to twenty-four (24) hours.

On the medication profile in the status column the codes and the action they represent are as follows: Order Status: The current status of the order. These statuses include:

- A Active
- N Non-Verified
- O On Call (IV orders only)
- I Incomplete
- HP Placed on hold by provider through CPRS
- H Placed on hold via backdoor Pharmacy
- E Expired
- DP Discontinued by provider through CPRS
- DE Discontinued due to edit via backdoor Pharmacy (Unit Dose orders only)
- D Discontinued via backdoor Pharmacy (IV & UD); discontinued due to edit via backdoor Pharmacy (IV)

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

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

Example Profile

```
Inpatient Order Entry         Jun 12, 2006@23:12:54          Page:    1 of    1
PSJPATIENT11, ONE              Ward: 2ASM
   PID: 000-55-3421           Room-Bed: 102-1         Ht(cm): ______ (________)
   DOB: 12/02/23 (82)                                 Wt(kg): 100.00 (06/24/03)
   Sex: MALE                                     Admitted: 12/11/01
    Dx: HE IS A PAIN.                     Last transferred: 12/11/01

 - - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - -
   1    CEFAZOLIN 1 GM                          C  06/12  06/22  H
        in 5% DEXTROSE 50 ML Q8H
   2    CIMETIDINE TAB                          C  06/12  07/12  A
          Give: 300MG PO BID
   3    FUROSEMIDE TAB                          C  06/01  06/15  HP
          Give: 40MG PO QAM
- - - - - - - - - - - - - - N O N - V E R I F I E D - - - - - - - - - - - - - -
   4    CAPTOPRIL TAB                           C  06/14  06/28  N
          Give: 25MG PO BID

- - - - - - - - - - - - P E N D I N G   R E N E W A L S - - - - - - - - - - - -
   5    HALOPERIDOL TAB                         ?  *****  *****  P    06/14
          Give: 5MG PO BID
- - - - - - - - - - - - - - - -  P E N D I N G  - - - - - - - - - - - - - - - -
   6    HEPARIN/DEXTROSE INJ,SOLN               ?  *****  *****  P
          Give:  IV
   7    LACTULOSE SYRUP                         ?  *****  *****  P NF
          Give: 10GM/15ML PO BID PRN

- - - - - - - - - - - RECENTLY DISCONTINUED/EXPIRED (LAST 24 HOURS) - - - - - - - -
   8    FOLIC ACID TAB             C  06/14  06/16  D
          Give: 1MG PO QAM
   9    GENTAMICIN 80 MG                        C  06/12  06/12  D
        in 5% DEXTROSE 100 ML Q8H
  10    ISONIAZID TAB                           C  04/03  04/17  DF
          Give: 300MG PO QD
  11    POTASSIUM CHLORIDE 10MEQ                C  06/12  06/12  DA
        in 5% DEXTROSE 1000 ML Q8H
  12    POTASSIUM CHLORIDE 40 MEQ               C  06/12  06/12  DD
        in 5% DEXTROSE 250 ML 120 ml/hr
  13    PROPRANOLOL TAB                         C  06/15  06/20  DP
          Give: 40MG PO Q6H
  14    THIAMINE TAB                            C  04/03  04/17  E
          Give: 100MG PO BID

       Enter ?? for more actions
PI  Patient Information                 SO  Select Order
PU  Patient Record Update               NO  New Order Entry
```

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 Medications module.

When the user accesses the *Inpatient Order Entry* option from the Unit Dose Medications 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: PSJPATIENT1
```

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., P0001).

Before the Patient Information screen displays, if the patient selected has no allergy assessment on file, the following prompt displays to the pharmacist/user:

"NO ALLERGY ASSESSMENT exists for this patient! Would you like to enter one now?"

- If the pharmacist/user enters 'YES,' he/she is prompted to enter the allergy information.
- If the pharmacist/user enters 'NO,' a pharmacist intervention is created, with a type of 'NO ALLERGY ASSESSMENT.' The pharmacist/user is then prompted for Provider and Recommendation information.

Note: If the selected patient is Sensitive, Discharged, both Sensitive and Discharged, or Deceased, there are variations in the Order Entry process and in the prompts that display to the pharmacist/user.

Example: Pharmacist Answers ‘Yes’ and Enters Allergy Information

```
Select PATIENT: PSJPATIENT1, ONE

NO ALLERGY ASSESSMENT exists for this patient!

Would you like to enter one now? No//  YES   (Yes)
```

```
Does this patient have any known allergies or adverse reactions? : Yes
          This patient has no allergy/adverse reaction data.

Enter Causative Agent: LATEX

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


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


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


Now checking the National Drug File - Trade Names (#50.67)


Now checking the INGREDIENTS (#50.416) file for matches...

         ...OK? Yes// Y  (Yes)

   LATEX   OK? Yes//   (Yes)
```

Example: Pharmacist Answers 'No' and Intervention is Created

```
Select PATIENT: PSJPATIENT1, ONE

NO ALLERGY ASSESSMENT exists for this patient!

Would you like to enter one now? No// N  (No)

Now creating Pharmacy Intervention

PROVIDER:

     Select one of the following:

          1         UNABLE TO ASSESS
          2         OTHER

RECOMMENDATION: ^

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

Press Return to continue...
```

The Patient Information Screen is displayed:

Example: Patient Information Screen

```
Patient Information           Sep 12, 2000 10:36:38          Page:    1 of    1
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          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
 Remote:
 Adverse Reactions:
 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
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          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
 Remote:
 Adverse Reactions:
 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...// Narrative for Patient PSJPATIENT1
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--the apostrophe following the number indicates minutes).
- Time is REQUIRED in this response.

4.4.2. New Order Entry

Unit Dose

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.

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 therapy, drug-drug/drug-allergy interactions, dangerous meds for patient >64, Aminoglycoside ordered, and Glucophage lab results order checks. (See Section 4.9 Order Checks for more information.)

Note: No special order checks are performed for specific drugs (e.g., Clozapine). Orders for Clozapine or similar special meds entered through Inpatient Medications will not yield the same results that currently occur when the same order is entered through Outpatient Pharmacy (including eligibility checks and national rollup to the National Clozapine Coordinating Center (NCCC). Any patients requiring special monitoring should also have an order entered through Outpatient Pharmacy at this time.

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.

Order Checks/Interventions (OCI) Indicator:
When the OCI indicator displays on the Order Detail screen, it indicates there are associated CPRS Provider Overrides and/or Pharmacist Interventions for this order. The Order Checks/Interventions indicator **<OCI>** will display on the same line as the Orderable Item field, to the left of the drug text indicator **<DIN>** (if it exists).

```
*(1)Orderable Item: METRONIDAZOLE TAB                                <OCI><DIN>
      Instructions: 250MG
*(2)Dosage Ordered: 250MG
           Duration:                                     (3)Start: 07/11/11  15:33
*(4)     Med Route: ORAL                       REQUESTED START: 07/11/11  16:00
                                                        (5) Stop: 07/25/11  15:33
 (6) Schedule Type: CONTINUOUS
*(8)      Schedule: Q36H
 (9)   Admin Times:
*(10)     Provider: PSJPROVIDER,ONE[es]
 (11) Special Instructions:

 (12) Dispense Drug                                    U/D        Inactive Date
      METRONIDAZOLE 250MG TAB                          1
+         Enter ?? for more actions
+         Enter ?? for more actions
ED  Edit                                 AC  ACCEPT
Select Item(s): Next Screen// AC   ACCEPT
```

If the OCI indicator displays on the Order Detail screen, the user can type "OCI" to display the CPRS Provider Overrides and/or Pharmacist Interventions associated with the order, as well as any historical overrides and interventions, if applicable.

- **"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
  Lookup: GENERIC NAME
BACLOFEN 10 MG TAB  MS200
         ...OK? Yes//   (Yes)
```

```
Now Processing Enhanced Order Checks!   Please wait...

Press Return to continue......

Available Dosage(s)
  1. 5MG
  2. 10MG
  3. 15MG
  4. 20MG
  5. 30MG
  6. 40MG

Select from list of Available Dosages or Enter Free Text Dose:
```

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

Example: Dispense Drug with Local Possible Dosages

```
Select DRUG:  GENTAMICIN SULFATE 0.1% CREAM    DE101    DERM CLINIC ONLY
  ...OK? Yes//   (Yes)



Now Processing Enhanced Order Checks!   Please wait...

Press Return to continue......

Available Dosage(s)
  1.
  2. SMALL AMOUNT
  3. THIN FILM
  4. MODERATE AMOUNT
  5. LIBERAL AMOUNT

Select from list of Available Dosages or Enter Free Text Dose:
```

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
```

(This page included for two-sided copying.)

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 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 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)**

Inpatient Medications uses the medication route provided by CPRS as the default when finishing an IV order, and transmits any updates to an order’s medication route to CPRS.

Inpatient Medications determines the default medication route for a new order entered through Inpatient Medications, and sends the full Medication Route name for display on the BCMA VDL.

This is the administration route 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. Inpatient Medications applies the Medication Route provided by CPRS as the default when finishing an IV order.

- If no medication route is specified, Inpatient Medications will use the Medication Route provided by CPRS as the default when finishing an IV order.
- If updates are made to the medication route, Inpatient Medications will transmit any updates to an order’s Medication Route to CPRS.
- Inpatient Medications determines the default Medication Route for a new order.
- Inpatient Medications sends the full Medication Route name for display on the BCMA VDL.

- **Sequence of Schedule Type and Schedule Prompts:**

Prior to PSJ*5*113, the order of the prompts in Inpatient Medications order entry was Schedule Type followed by Schedule. The sequence of the prompts was changed so that the Schedule prompt falls before the Schedule Type prompt.

- Schedule Validation Requirement One

  When a schedule is selected at the Schedule Field, the system shall default the Schedule Type for the schedule entered from the Administration Schedule File into the order.

- Schedule Validation Requirement Two

If the user changes the schedule, a warning message will be generated stating that the administration times and the schedule type for the order will be changed to reflect the defaults for the new schedule selected. The warning message: “This change in schedule also changes the ADMIN TIMES and SCHEDULE TYPE of this order” shall appear.

- Schedule Validation Check Three

  If the schedule type is changed from Continuous to PRN during an edit, the system shall automatically remove any administration times that were associated with the schedule so that the order will not include administration times.

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

This defines the frequency the order is to be administered. Schedules must be selected from the ADMINISTRATION SCHEDULE file, with the following exceptions:

- Schedule containing PRN: (Ex. TID PC PRN). If the schedule contains PRN, the base schedule must be in the ADMINISTRATION SCHEDULE file.
- Day of week schedules (Ex. MO-FR or MO-FR@0900)
- Admin time only schedules (Ex. 09-13)

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.

- **“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 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.
- Schedules meant to cause orders to display as ON CALL in BCMA must be defined in the ADMINISTRATION SCHEDULE (#51.1) file with a schedule type equal to “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.

- **ADMINISTRATION TIME:"** (Regular)

This defines the time(s) of day the order is to be given. Administration times must be entered in a two or four digit format. If you need to enter multiple administration times, they must be separated by a dash (e.g., 09-13 or 0900-1300). 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.

- **Order Validation Checks:**

The following order validation checks will apply to Unit Dose orders and to intermittent IV orders.

Note: IV orders do not have Schedule Type.

- **Order Validation Check One**
  For intermittent IV orders, references to an order's Schedule Type will refer to either the TYPE OF SCHEDULE from the Administration Schedule file (#51.1), or PRN for schedule names in PRN format, or CONTINUOUS for schedule names in Day of Week format.

- **Order Validation Check Two**
  The system shall use the schedule type of the schedule from the Administration Schedule file independent of the schedule name when processing an order to determine if administration times are required for a particular order.

- **Order Validation Check Three**
  If an order has the Schedule Type of Continuous, the Schedule entered is NOT in Day of Week(Ex. MO-FR) or PRN (Ex. TID PC PRN) format, and the frequency associated with the schedule is one day (1440 minutes) or less, the system will not allow the number

of administration times associated with the order to be greater than the number of administration times calculated for that frequency. The system will allow for the number of administration times to be LESS than the calculated administration times for that frequency but not less than one administration time. (For example, an order with a schedule of BID is associated with a frequency of 720 minutes. The frequency is divided into 1440 minutes (24 hours) and the resulting calculated administration time is two. For this order, the number of administration times allowed may be no greater than two, but no less than one. Similarly, a schedule frequency of 360 minutes must have at least one administration time but cannot exceed four administration times.)

If an order has the Schedule Type of Continuous, the Schedule entered is NOT in Day of Week (Ex. MO-FR) or PRN (Ex. TID PC PRN) format, and the frequency associated with the schedule is **greater than one day** (1440 minutes) and evenly divisible by 1440, only one administration time is permitted. (For example, an order with a schedule frequency of 2880 minutes must have ONLY one administration time. If the frequency is greater than 1440 minutes and not evenly divisible by 1440, no administration times will be permitted.)

The system shall present warning/error messages to the user if the number of administration times is less than or greater than the maximum admin times calculated for the schedule or if no administration times are entered. If the number of administration times entered is less than the maximum admin times calculated for the schedule, the warning message: "The number of admin times entered is fewer than indicated by the schedule." shall appear. In this case, the user will be allowed to continue after the warning. If the number of administration times entered is greater than the maximum admin times calculated for the schedule, the error message: "The number of admin times entered is greater than indicated by the schedule." shall appear. In this case, the user will not be allowed to continue after the warning. If no admin times are entered, the error message: "This order requires at least one administration time." shall appear. The user will not be allowed to accept the order until at least one admin time is entered.

- **Order Validation Check Four**
  If an order has a Schedule Type of Continuous and is an Odd Schedule {a schedule whose frequency is not evenly divisible by or into 1440 minutes (1 day)}, the system shall prevent the entry of administration times. For example, Q5H, Q17H – these are not evenly divisible by 1440. In these cases, the system shall prevent access to the administration times field. No warning message is presented.

- **Order Validation Check Five**
  If an order has a Schedule Type of Continuous with a non-odd frequency of greater than one day, (1440 minutes) the system shall prevent more than one administration time, for example, schedules of Q72H, Q3Day, and Q5Day.

  If the number of administration times entered exceeds one, the error message: "This order requires one admin time" shall appear. If no administration times are entered, the error

message: “This order requires at least one administration time.” shall appear. The user will not be allowed to accept the order until at least one admin time is entered.

- **Order Validation Check Six**
  If an order has a Schedule Type of One Time, or if an order is entered with a schedule that is defined in the schedule file as One Time, the system shall prevent the user from entering more than one administration time.

  If more than one administration time is entered, the error message: “This is a One Time Order - only one administration time is permitted.” shall appear. No administration times are required.

- **Order Validation Check Seven**
  For an order with a Schedule Type of Continuous where no doses/administration times are scheduled between the order’s Start Date/Time and the Stop Date/Time, the system shall present a warning message to the user and not allow the order to be accepted or verified until the Start/Stop Date Times, schedule, and/or administration times are adjusted so that at least one dose is scheduled to be given.

  If the stop time will result in no administration time between the start time and stop time, the error message: “There must be an admin time that falls between the Start Date/Time and Stop Date/Time.” shall appear.

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

These are the Special Instructions (using abbreviations whenever possible) needed for the administration of this order. This field allows unlimited characters 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.

The following menu choices regarding copying of provider comments are available:

- Y Yes (copy) – This will copy Provider Comments into the Special Instructions field.
- N No (don’t copy) – This will bypass copying Provider Comments
- ! Copy and flag for display in a BCMA Message Box – This will copy Provider Comments into the Special Instructions field and flag for display in a BCMA Message Box
- E Copy and Edit – This will copy Provider Comments into the Special Instructions field and open in a word processing window for editing.

Example: Special Instructions

```
PROVIDER COMMENTS:
This text is Provider Comments.

     Select one of the following:

          Y         Yes (copy)
          N         No (don't copy)
          !         Copy and flag for display in a BCMA Message Box
          E         Copy and Edit

Copy the Provider Comments into Special Instructions (Yes/No/!/E): e Copy and Edit

SPECIAL INSTRUCTIONS:
This text is Provider Comments.

  EDIT? NO// y YES

==[ WRAP ]==[ INSERT ]========< SPECIAL INSTRUCTIONS >=======[ <PF1>H=Help ]====
For Low Magnesium***Magnesium <2.4 give 11gm; Mag <2.2 give 2 gm: mag < 2
give 3 gm; Mag < 1.8 give 2 x 2gm** Then Recheck Magnesium

=======T=======T=======T=======T=======T=======T=======T=======T=======T>======

Would you like to flag the Special Instructions field for display in a BCMA
Message box?


     Select one of the following:

          Y         Yes
          N         No

Flag the Special Instructions (Yes/No):
```

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."

Note: The up arrow character "^" is not allowed in Special Instructions. If detected, the following prompts appear:

Example: Prompts when "^" is detected in Special Instructions

```
SPECIAL INSTRUCTIONS:
  No existing text
  Edit? NO// Yes  YES

==[ WRAP ]==[ INSERT ]========< SPECIAL INSTRUCTIONS >=======[ <PF1>H=Help ]====

for low magnesium *** <2.4 give 1 gm; Mag <2.2gm; Mag <2 give 3gm; Mag
<1.8 give 2 x 2gm**. Then recheck magnesium^          Y         Yes (copy)

<=======T=======T=======T=======T=======T=======T=======T=======T=======T>======


SPECIAL INSTRUCTIONS must not contain embedded uparrow "^".

Press Return to continue editing SPECIAL INSTRUCTIONS...
```

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

This is the date and time the order is to begin. For Inpatient Medications orders, the Start Date/Time is initially assigned 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.

- **“EXPECTED FIRST DOSE:” (Regular and Abbreviated)**

Inpatient Medications no longer displays an expected first dose for orders containing a schedule with a schedule type of One-time. The system also no longer displays an expected first dose for orders containing a schedule with a schedule type of On-call. The Inpatient Medications application performs the following actions.

- Modifies order entry to allow entry of a Day-of-Week schedule in the following format: days@schedule name. For example, MO-WE-FR@BID or TU@Q6H.
- Translates the schedule into the appropriate administration times. For example, MO-WE-FR@BID is translated to MO-WE-FR@10-22.
- Modifies the expected first dose calculation to accept the new format of schedules. For example, MO-WE-FR@BID or MO@Q6H.
- Accepts the new formatted schedules from CPRS. For example, MO-WE-FR@BID or TU@Q6H.

Translates a schedule received in the new format from CPRS into the appropriate schedule and administration times.

- **“STOP DATE/TIME:” (Regular)**

This is the date and time the order will automatically expire. 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, (3) the DAY (nD) or DOSE (nL) LIMIT field (found in the PHARMACY ORDERABLE ITEM file) for the orderable item associated with this order or (4) the duration received from CPRS (if applicable). The Site Manager or Application Coordinator can change any fields. This package initially calculates a default Stop Date/Time, depending on the INPATIENT WARD PARAMETERS file except for one-time orders and Inpatient orders for Outpatients.

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

Nature of Order	Description	Prompted for Signature in CPRS	Chart Copy Printed?
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           Apr 26, 2012@12:34:57          Page:    1 of    1
PSJPATIENT1,ONE                   Ward: GENERAL                       A
   PID: 000-00-0202           Room-Bed: GENMED-2      Ht(cm): ______ (________)
   DOB: 05/16/70 (41)                                 Wt(kg): ______ (________)
   Sex: FEMALE                                   Admitted: 10/12/10
    Dx: LUNG CANCER                       Last transferred: ********

Allergies - Verified: LATEX
        Non-Verified:

   Adverse Reactions:
 Inpatient Narrative:
Outpatient Narrative:
          Enter ?? for more actions
DA Detailed Allergy/ADR List            IN Intervention Menu
VP View Profile
Select Action: View Profile//    View Profile

SHORT, LONG, or NO Profile?  SHORT// NO PROFILE

Inpatient Order Entry         Apr 26, 2012@12:35:21          Page:    1 of    2
PSJPATIENT1,ONE                   Ward: GENERAL                       A
   PID: 000-00-0202           Room-Bed: GENMED-2      Ht(cm): ______ (________)
   DOB: 05/16/70 (41)                                 Wt(kg): ______ (________)
   Sex: FEMALE                                   Admitted: 10/12/10
    Dx: LUNG CANCER                       Last transferred: ********

Select from list of Available Dosages or Enter Free Text Dose: 2  SLIDING SCALE

You entered SLIDING SCALE is this correct? Yes// YES
MED ROUTE: SUBCUTANEOUS//   SQ
     1   SUBCUTANEOUS        SQ
     2   SUBCUTANEOUS        SC
     3   SUBCUTANEOUS ABDOMEN        SUBCUT ABD
CHOOSE 1-3: 1  SUBCUTANEOUS      SQ
SCHEDULE: TID
     1   TID    09-13-17
     2   TID    01-02-03-04
CHOOSE 1-2: 1      09-13-17
```

Example: New Order Entry (continued)

```
SCHEDULE TYPE: CONTINUOUS//   CONTINUOUS
ADMIN TIMES: 09-13-17//
SPECIAL INSTRUCTIONS:
  No existing text
  Edit? NO// YES

==[ WRAP ]==[ INSERT ]========< SPECIAL INSTRUCTIONS >=======[ <PF1>H=Help ]====
BELOW.

VERY INSULIN SENSITIVE:
FOR BG= 159-199 [GIVE 1 UNIT]
FOR BG= 200-249 [GIVE 2 UNITS]
FOR BG= 250-299 [GIVE 3 UNITS]
FOR BG= 300-349 [GIVE 4 UNITS]
FOR BG= >349    [GIVE 5 UNITS] AND CONTACT HO

NORMAL INSULIN SENSITIVE:
FOR BG= 159-199 [GIVE 1 UNIT]
FOR BG= 200-249 [GIVE 3 UNITS]
FOR BG= 250-299 [GIVE 4 UNITS]
FOR BG= 300-349 [GIVE 7 UNITS]
FOR BG= >349    [GIVE 8 UNITS] AND CONTACT HO

VERY INSULIN RESISTANT:
FOR BG= 159-199 [GIVE 2 UNITS]
FOR BG= 200-249 [GIVE 4 UNITS]
<=======T=======T=======T=======T=======T=======T=======T=======T=======T>======


                              Apr 26, 2012@12:50:48

Would you like to flag the Special Instructions field for display in a BCMA
Message box?


     Select one of the following:

          Y         Yes
          N         No

Flag the Special Instructions (Yes/No): YES  Yes
START DATE/TIME: APR 26,2012@12:51//   APR 26,2012@12:51
STOP DATE/TIME: MAY 10,2012@12:51//    MAY 10,2012@12:51
Expected First Dose: APR 26,2012@13:00
PROVIDER: McCOY, BONES//
```

```
NON-VERIFIED UNIT DOSE        Apr 26, 2012@12:50:48          Page:    1 of    3
PSJPATIENT1,ONE                   Ward: GENERAL                     A
   PID: 000-00-0202           Room-Bed: GENMED-2      Ht(cm): ______ (________)
   DOB: 05/16/70 (41)                                 Wt(kg): ______ (________)

 (1)Orderable Item: INSULIN,ASPART,HUMAN 100UNT/ML INJ
      Instructions:
 (2)Dosage Ordered: SLIDING SCALE
          Duration:                                   (3)Start: 04/26/12  12:51
 (4)     Med Route: SUBCUTANEOUS
                                                      (5) Stop: 05/10/12  12:51
 (6) Schedule Type: CONTINUOUS
(8)      Schedule: TID
 (9)   Admin Times: 09-13-17
 (10)     Provider: McCOY, BONES
```

Example: New Order Entry (continued)

```
(11) Special Instructions!:  (see below)
      CHECK INSULIN SENSITIVITY DESIGNATED BY PROVIDER AND ADMINISTER SCALE AS
      BELOW.
      VERY INSULIN SENSITIVE:
      FOR BG= 159-199 [GIVE 1 UNIT]
+         Enter ?? for more actions
ED  Edit                                AC  ACCEPT
Select Item(s): Next Screen// AC   ACCEPT
NATURE OF ORDER: WRITTEN//        W

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

```
NON-VERIFIED UNIT DOSE        Apr 26, 2012@12:50:54          Page:    1 of    4
PSJPATIENT1,ONE                   Ward: GENERAL                       A
   PID: 000-00-0202           Room-Bed: GENMED-2      Ht(cm): ______ (________)
   DOB: 05/16/70 (41)                                 Wt(kg): ______ (________)

*(1)Orderable Item: INSULIN,ASPART,HUMAN 100UNT/ML INJ
      Instructions:
*(2)Dosage Ordered: SLIDING SCALE
          Duration:                                   (3)Start: 04/26/12  12:51
*(4)     Med Route: SUBCUTANEOUS
                                                      (5) Stop: 05/10/12  12:51
 (6) Schedule Type: CONTINUOUS
*(8)      Schedule: TID
 (9)   Admin Times: 09-13-17
*(10)     Provider: McCOY, BONES [w]
 (11) Special Instructions:  (see below)
      CHECK INSULIN SENSITIVITY DESIGNATED BY PROVIDER AND ADMINISTER SCALE AS
      BELOW.
      VERY INSULIN SENSITIVE:
+         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:

ORDER VERIFIED.

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

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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:"**

IV types are admixture, piggyback, hyperal, syringe, and 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 IV type order uses a syringe rather than a bottle or a bag. Chemotherapy is the treatment and prevention of cancer with chemical agents.

When an order is received from CPRS, Inpatient Medications will accept and send updates to IV Types from CPRS. When an IV type of Continuous is received, Inpatient Medications defaults to an IV type of Admixture. However, when an IV type of Intermittent is received, Inpatient Medications defaults to an IV type of 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).

When an order is received from CPRS, Inpatient Medications accepts infusion rates in both ml/hr and as “infuse over time.” In the Order View screen, for orders with an IV Type considered Intermittent, the infusion rate will display as “infuse over” followed by the time. For example, infuse over 30 minutes.

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:"** (Regular and Abbreviated)

Inpatient Medications uses the medication route provided by CPRS as the default when finishing an IV order, and transmits any updates to an order's medication route to CPRS.

Inpatient Medications determines the default medication route for a new order entered through Inpatient Medications, and sends the full Medication Route name for display on the BCMA VDL.

This is the administration route 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. Inpatient Medications applies the Medication Route provided by CPRS as the default when finishing an IV order.

- If no medication route is specified, Inpatient Medications will use the Medication Route provided by CPRS as the default when finishing an IV order.
- If updates are made to the medication route, Inpatient Medications will transmit any updates to an order's Medication Route to CPRS.
- Inpatient Medications determines the default Medication Route for a new order.
- Inpatient Medications sends the full Medication Route name for display on the BCMA VDL.

- **"SCHEDULE:"**

This prompt occurs on piggyback and intermittent syringe orders. Schedules must be selected from the ADMINISTRATION SCHEDULE file, with the following exceptions:

- Schedule containing PRN: (Ex. TID PC PRN). If the schedule contains PRN, the base schedule must be in the ADMINISTRATION SCHEDULE file.
- Day of week schedules (Ex. MO-FR or MO-FR@0900)
- Admin time only schedules (Ex. 09-13)

- **"ADMINISTRATION TIME:"**

This is free text. The pharmacist might want to enter the times of dose administration using military time such as 03-09-15-21. Administration times must be entered in a two or four digit format. If multiple administration times are needed, they must be separated by a dash (e.g., 09-13 or 0900-1300). This field must be left blank for odd schedules, (e.g., Q16H).

- **"OTHER PRINT INFO:"**

The system allows a word processing entry of unlimited free text. 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.*

The following menu choices regarding copying of provider comments are available:

- Y Yes (copy) – This will copy Provider Comments into the Other Print Info field.

- N No (don't copy) – This will bypass copying Provider Comments.
- ! Copy and flag for display in a BCMA Message Box – This will copy Provider Comments into the Other Print Info field and flag for display in a BCMA Message Box.
- E Copy and Edit – This will copy Provider Comments into the Other Print Info field and open in a word processing window for editing.

The system enables the nurse to review the provider comments received from CPRS during the finishing of an IV order. A maximum of 60 characters of text is printed on the IV label from Other Print Info. When Other Print Info exceeds 60 characters, the message: "Instructions too long. See Order View or BCMA for full text." appears on the IV label.

Before the nurse enters Other Print Info information, the message: "WARNING, IF OTHER PRINT INFO exceeds one line of 60 characters, 'Instructions too long. See Order View or BCMA for full text.' prints on the IV label instead of the full text."

After the nurse enters Other Print Info information, if the entry exceeds one line of 60 characters, the message: "WARNING OTHER PRINT INFO exceeds one line of 60 characters, 'Instructions too long. See Order View or BCMA for full text.' prints on the IV label instead of the full text."

Example: Other Print Info

```
OTHER PRINT INFO
This text is Other Print Info

Would you like to flag the Other Print Info field for display in a BCMA

Message box?


     Select one of the following:

          Y         Yes

          N         No


Flag the Other Print Info (Yes/No): y  Yes
```

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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.

- **"EXPECTED FIRST DOSE:" (Regular and Abbreviated)**

Inpatient Medications no longer displays an expected first dose for orders containing a schedule with a schedule type of One-time. The system also no longer display an expected first dose for orders containing a schedule with a schedule type of On-call. The Inpatient Medications application performs the following actions.

- Modifies order entry to allow entry of a Day-of-Week schedule in the following format: days@schedule name. For example, MO-WE-FR@BID or TU@Q6H.
- Translates the schedule into the appropriate administration times. For example, MO-WE-FR@BID is translated to MO-WE-FR@10-22.
- Modifies the expected first dose calculation to accept the new format of schedules. For example, MO-WE-FR@BID or MO@Q6H.
- Accepts the new formatted schedules from CPRS. For example, MO-WE-FR@BID or TU@Q6H.
- Translates a schedule received in the new format from CPRS into the appropriate schedule and administration times.

- **"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.

Note: While entering an order, the nurse can quickly delete the order by typing a caret (^) at any one of the prompts listed above except at the "STOP DATE/TIME:" prompt. Once the user has passed this prompt, if the order still needs to be deleted, a caret (^) can be entered at the "Is this O.K.:" prompt.

Example: New Order Entry

```
Select ADDITIVE: MULT
     1   MULTIVITAMIN INJ

     2   MULTIVITAMINS

CHOOSE 1-2: 2  MULTIVITAMINS

(The units of strength for this additive are in ML)
Strength: 2 2 ML
Select ADDITIVE:
Select SOLUTION: 0.9
     1   0.9% SODIUM CHLORIDE    100 ML
              BCMA
     2   0.9% SODIUM CHLORIDE    50 ML
              BCMA
CHOOSE 1-2: 1  0.9% SODIUM CHLORIDE    100 ML
                BCMA


Now Processing Enhanced Order Checks!  Please wait...
==========================================================================================
This patient is receiving the following orders(s) that have a Drug
Interaction with MULTIVITAMINS 2 ML:

WARFARIN INJ            C  02/22  03/01   N
Give: 5MG/1VIAL PO 3ID

***Significant***  Vitamin E may increase the pharmacologic effects of
anticoagulants.
==========================================================================================


Display Professional Interaction Monograph(s)? NO// YES
DEVICE: HOME// COMPUTER ROOM



Professional Monograph
Drug Interaction with WARFARIN and MULTIVITAMINS

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

MONOGRAPH TITLE:  Selected Anticoagulants/Alpha Tocopheryl

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

MECHANISM OF ACTION:  Unknown.

CLINICAL EFFECTS:  Vitamin E may increase the pharmacologic effects of
anticoagulants.

PREDISPOSING FACTORS:  None determined.

PATIENT MANAGEMENT:  Coadministration of vitamin E and anticoagulants

Press Return to continue...

should be avoided.  If both drugs are administered, monitor
hypoprothrombinemic response to warfarin and adjust the dose of the
anticoagulants as indicated. The time of highest risk for a coumarin-type
drug interaction is when the precipitant drug is initiated or
discontinued.  Contact the prescriber before initiating, altering the
dose or discontinuing either drug.
```

```
DISCUSSION:  Vitamin E doses of 800 International Units/day and more
have been reported to increase the hypoprothrombinemic effect of
warfarin: while doses of 42 International units/day of vitamin E for 30
days have increased the hypoprothrombinemic effect of dicumarol.
Agenerase brand of amprenavir capsules and oral solution contain a
significant amount of vitamin E.  Each 150 mg capsule contains 109
International Units vitamin E, with a total of 1744 International Units
of vitamin E in the recommended daily adult dose.  Each mL of oral
solution contains 46 International Units of vitamin E.

REFERENCES:

1.Corrigan JJ Jr, Marcus FI.  Coagulopathy associated with vitamin E
ingestion.  JAMA 1974 Dec 2:230(9):1300-1.

Press Return to continue...

2.Schrogie JJ. Letter: Coagulopathy and fat-soluble vitamins.  JAMA 1976
Apr 7:232(1):19.
3.Corrigan JJ Jr, Ulfers LL.  Effect of vitamin E on prothrombin levels
in warfarin-induced vitamin K deficiency.  Am J Clin Nutr 1981 Sep:
34(9):1701-5.
4.Anonymous. Vitamin K, vitamin E and the coumarin drugs.  Nutr Rev 1982
Jun: 40(6):180-2.
5.Agenerase (amprenavir) Capsules US prescribing information.
GlaxoSmithKline February, 2004.

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Do you want to Intervene with MULTIVITAMINS 2 ML? NO//
INFUSION RATE: 125   INFUSE OF 125 MINUTES
MED ROUTE: IV//
SCHEDULE: QID
ADMINISTRATION TIMES: 09-13-17-21//
REMARKS:
OTHER PRINT INFO:
START DATE/TIME: FEB 26,2010@18:51//   (FEB 26, 2010@18:51)
STOP DATE/TIME: MAR 27,2010@23:59
PROVIDER: PROVIDER,ONE
     1   PROVIDER,ONE      NEW YORK OP 10BA1/ADP   Scholar Extra
ordinaire
     2   PROVIDER,ONEHUNDRED     TZB        10BA1/ADP   Scholar Extraord
ordinaire
     3   PROVIDER,ONEHUNDREDFIVE          10BA1/ADP   Scholar Extraor
dordinaire
     4   PROVIDER,ONEHUNDREDNINETYONE              BM     10BA1/ADP   Schol
ar Extraordinaire
     5   PROVIDER,ONEHUNDREDSIXTYSEVEN               10BA1/ADP    Scholar E
xtraordinaire
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1   PROVIDER,ONE     NEW YORK OP  10BA1/ADP   Scholar E
xtraordinaire

Orderable Item:  MULTIVITAMINS INJ
Give:  IV QID

100716
[1]0808  7A GEN MED  02/25/10
EIGHT,INPATIENT  726-B

MULTIVITAMINS 2 ML
0.9% SODIUM CHLORIDE 100 ML

INFUSE OVER 125 MINUTES
QID
09-13-17-21
1[1]

Start date; FEB 25,2010 18:51   Stop date: MAR 27,2010 23:59
```

```
Expected First Dose:  FEB 25,2010@21:00

Is this O.K.:  YES// YES
NATURE OF ORDER: WRITTEN//    W
...transcribing this non-verified order....
NON-VERIFIED IV               Feb 25, 2010@18:54:08          Page:    1 of    2
EIGHT,INPATIENT                   Ward: 7A GEN
   PID: 666-00-0808           Room-Bed: 726-B         Ht(cm): ______ (________)
   DOB: 01/01/50 (61)                                 Wt(kg): ______ (________)
-------------------------------------------------------------------------------
*(1)  Additives:              Type: PIGGYBACK
       MULTIVITAMINS 2 ML
 (2)  Solutions:
       0.9% SODIUM CHLORIDE 100 ML
           Duration:                            (4)     Start: 02/26/10  18:51
 (3)  Infusion Rate: INFUSE OVER 125 MINUTES
*(5)      Med Route: IV                         (6)      Stop: 03/27/10  23:59
*(7)       Schedule: QID                            Last Fill: ********
 (8)    Admin Times: 09-13-17-21                    Quantify: 0
*(9)       Provider: PROVIDER,ONE [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//
```

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.

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.

Note: Interventions can also be dynamically created in response to Order Checks for critical drug-drug interactions and allergy/ADRs. Refer to Section 4.3 Order Checks.

If a change is made to an intervention associated to an inpatient order made in response to critical drug-drug and/or allergy/ADR, the changes are reflected and displayed whenever interventions display.

New interventions entered via the Intervention Menu are at the patient level and are not associated with a particular order. Consequently, new entries made through this menu are not reflected in the OCI listing, the BCMA Display Order detail report, and do not cause highlighting in BCMA.

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

Example: New Intervention

```
Patient Information           Feb 11, 2011@11:17:44          Page:    1 of    1
BCMAPATIENT,FIVE                  Ward: 3 NORTH
   PID: 000-00-5555           Room-Bed: 1-2           Ht(cm): ______ (________)
   DOB: 09/16/45 (65)                                 Wt(kg): ______ (________)
   Sex: MALE                                     Admitted: 12/05/08
    Dx: FLUID IN LUNGS                    Last transferred: ********

 Allergies/Reactions: NKA
 Inpatient Narrative:
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


                             --- Intervention Menu ---

DI   Delete Pharmacy Intervention       PO   Print Pharmacy Intervention
ED   Edit Pharmacy Intervention         VP   View Pharmacy Intervention
NE   Enter Pharmacy Intervention

Select Item(s): NE   Enter Pharmacy Intervention
Select APSP INTERVENTION INTERVENTION DATE: T   FEB 11, 2011
  Are you adding 'FEB 11, 2011' as a new APSP INTERVENTION (the 526TH)? No// Y
  (Yes)
   APSP INTERVENTION PATIENT:    PRETST,PATTHREE        8-1-61    000009677
NO     NSC VETERAN
   Combat Vet Status: ELIGIBLE                           End Date: 02/12/2015
```

```
   APSP INTERVENTION DRUG:    CIMETIDINE 200MG TAB         GA301
PROVIDER: PHARMACIST,LINDA J              LP
INSTITUTED BY: PHARMACY//   PHARMACY
INTERVENTION: ?
 Answer with APSP INTERVENTION TYPE, or NUMBER
 Do you want the entire 22-Entry APSP INTERVENTION TYPE List? N  (No)
INTERVENTION: ALLERGY
RECOMMENDATION: NO CHANGE
WAS PROVIDER CONTACTED: NO  NO
RECOMMENDATION ACCEPTED: Y  YES
FINANCIAL COST:
REASON FOR INTERVENTION:
  No existing text
  Edit? NO//
ACTION TAKEN:
  No existing text
  Edit? NO//
CLINICAL IMPACT:
```

(This page included for two-sided copying.)

```
 No existing text
  Edit? NO//
FINANCIAL IMPACT:
  No existing text
  Edit? NO//
Select APSP INTERVENTION INTERVENTION DATE:
```

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

Example: Edit an Intervention

```
Patient Information           Feb 11, 2011@11:52:02          Page:    1 of    1
PRETST,PATTHREE                   Ward:
   PID: 000-00-9677           Room-Bed:               Ht(cm): ______ (________)
   DOB: 08/01/61 (49)                                 Wt(kg): ______ (________)
   Sex: MALE                                     Admitted:
    Dx:                                   Last transferred: ********

 Allergies/Reactions: NKA
 Inpatient Narrative:
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

                            --- Intervention Menu ---

DI   Delete Pharmacy Intervention       PO   Print Pharmacy Intervention
ED   Edit Pharmacy Intervention         VP   View Pharmacy Intervention
NE   Enter Pharmacy Intervention

Select Item(s): ED   Edit Pharmacy Intervention

Select INTERVENTION:T   SEP 22, 2000       PRETST,PATTHREE    WARFARIN 10MG
INTERVENTION DATE: SEP 22,2000// <Enter>
PATIENT: PRETST,PATTHREE// <Enter>
PROVIDER: PSJPROVIDER,ONE // <Enter>
PHARMACIST: PSJNURSE,ONE // <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: <Enter>
FINANCIAL COST:
REASON FOR INTERVENTION:
  No existing text
Edit? NO//
ACTION TAKEN:
  No existing text
Edit? NO//
CLINICAL IMPACT:
  No existing text
Edit? NO//
FINANCIAL IMPACT:
  No existing text
Edit? NO//
```

- **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           Feb 11, 2011@11:52:02          Page:    1 of    1
PRETST,PATTHREE                   Ward:
   PID: 000-00-9677           Room-Bed:               Ht(cm): ______ (________)
   DOB: 08/01/61 (49)                                 Wt(kg): ______ (________)
   Sex: MALE                                     Admitted:
    Dx:                                   Last transferred: ********

 Allergies/Reactions: NKA
 Inpatient Narrative:
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

                            --- Intervention Menu ---

DI   Delete Pharmacy Intervention       PO   Print Pharmacy Intervention
ED   Edit Pharmacy Intervention         VP   View Pharmacy Intervention
NE   Enter Pharmacy Intervention

Select Item(s): de   Delete Pharmacy Intervention
You may only delete entries entered on the current day.

Select APSP INTERVENTION INTERVENTION DATE: t   FEB 11, 2011
     1   2-11-2011       PRETST,PATTHREE     CIMETIDINE 200MG TAB
     2   2-11-2011       PRETST,PATTHREE     CIMETIDINE 200MG TAB
CHOOSE 1-2: 1  2-11-2011     PRETST,PATTHREE     CIMETIDINE 200MG TAB
SURE YOU WANT TO DELETE THE ENTIRE ENTRY? y  YES
Select APSP INTERVENTION INTERVENTION DATE:
```

- **View**: This option is used to display Pharmacy Interventions in a captioned format.

Example: View an Intervention

```
Patient Information           Feb 11, 2011@11:52:02          Page:    1 of    1
PRETST,PATTHREE                   Ward:
   PID: 000-00-9677           Room-Bed:               Ht(cm): ______ (________)
   DOB: 08/01/61 (49)                                 Wt(kg): ______ (________)
   Sex: MALE                                     Admitted:
    Dx:                                   Last transferred: ********

 Allergies/Reactions: NKA
 Inpatient Narrative:
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
```

```
                            --- Intervention Menu ---

DI   Delete Pharmacy Intervention       PO   Print Pharmacy Intervention
ED   Edit Pharmacy Intervention         VP   View Pharmacy Intervention
NE   Enter Pharmacy Intervention

Select Item(s): VP   View Pharmacy Intervention
Select APSP INTERVENTION INTERVENTION DATE: T   FEB 11, 2011       PRETST,PATTHR
EE     CIMETIDINE 200MG TAB
ANOTHER ONE:
INTERVENTION DATE: FEB 11, 2011         PATIENT: PRETST,PATTHREE
  PROVIDER: PROVIDER,LINDA J            PHARMACIST: PHARMACIST,CHRIS
  DRUG: CIMETIDINE 200MG TAB            INSTITUTED BY: PHARMACY
  INTERVENTION: ALLERGY                 RECOMMENDATION: NO CHANGE
  WAS PROVIDER CONTACTED: NO            RECOMMENDATION ACCEPTED: YES

Select APSP INTERVENTION INTERVENTION DATE:
```

- **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

```
Select Unit Dose Medications Option:  Inpatient Order Entry

Select PATIENT:    BCMA,EIGHTEEN-PATIENT  666-33-0018  04/07/35    7A GEN MED

Patient Information           Mar 16, 2011@12:37:20          Page:    1 of    1
BCMA,EIGHTEEN-PATIENT             Ward: 7A GEN                          A
   PID: 666-33-0018           Room-Bed:               Ht(cm): 175.26 (12/15/08)
   DOB: 04/07/35 (75)                                 Wt(kg): 100.00 (12/15/08)
   Sex: FEMALE                                  Admitted: 01/31/02
    Dx: UPSET                             Last transferred: 06/04/10
--------------------------------------------------------------------------------
Allergies - Verified: AMPICILLIN, PENICILLIN, STRAWBERRIES
        Non-Verified:

   Adverse Reactions:
 Inpatient Narrative:
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

                            --- Intervention Menu ---

DI   Delete Pharmacy Intervention       PO   Print Pharmacy Intervention
ED   Edit Pharmacy Intervention         VP   View Pharmacy Intervention
NE   Enter Pharmacy Intervention

Select Item(s): PO   Print Pharmacy Intervention
  * Previous selection: INTERVENTION DATE from Jun 1,2010
  START WITH INTERVENTION DATE: Jun 1,2010// T-1  (MAR 15, 2011)
  GO TO INTERVENTION DATE: LAST// T  (MAR 16, 2011)
DEVICE: home;80;9999  COMPUTER ROOM
PHARMACY INTERVENTION LISTING                  MAR 16,2011  12:37    PAGE 1
--------------------------------------------------------------------------------
```

```
INTERVENTION: CRITICAL DRUG INTERACTION

INTERVENTION DATE: MAR 16,2011         PATIENT:  BCMA,EIGHTEEN-PATIENT
PROVIDER: PROVIDER,ONE                 PHARMACIST:  PHARMACIST,TWO
DRUG: INDINAVIR SULFATE 400MG CAP      INSTITUTED BY:  PHARMACY
RECOMMENDATION: NO CHANGE
WAS PROVIDER CONTACTED:                RECOMMENDATION ACCEPTED:
PROVIDER CONTACTED:

INTERVENTION DATE: MAR 16,2011         PATIENT:  BCMA,EIGHTEEN-PATIENT
PROVIDER: PROVIDER,ONE                 PHARMACIST:  PHARMACIST,TWO
DRUG: SIMVASTATIN 20MG TAB             INSTITUTED BY:  PHARMACY
RECOMMENDATION: NO CHANGE
WAS PROVIDER CONTACTED:                RECOMMENDATION ACCEPTED:
PROVIDER CONTACTED:
                                                 ----------------------------
SUBTOTAL                                                        0
SUBCOUNT                                         2
                                                 ----------------------------
TOTAL                                                           0
COUNT                                            2

Patient Information           Mar 16, 2011@12:37:57          Page:    1 of    1
BCMA,EIGHTEEN-PATIENT             Ward: 7A GEN                          A
   PID: 666-33-0018           Room-Bed:               Ht(cm): 175.26 (12/15/08)
   DOB: 04/07/35 (75)                                 Wt(kg): 100.00 (12/15/08)
   Sex: FEMALE                                   Admitted: 01/31/02
    Dx: UPSET                              Last transferred: 06/04/10
-------------------------------------------------------------------------------
Allergies - Verified: AMPICILLIN, PENICILLIN, STRAWBERRIES
        Non-Verified:

   Adverse Reactions:
 Inpatient Narrative:
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//
```

4.4.5. 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 displays recently discontinued or expired orders based on parameter values found in the System parameter and inpatient ward parameter files.

Example: Profile View

```
Inpatient Order Entry         Oct 19, 2010@16:41:35          Page:    1 of    3
PSJPATIENT,ELEVEN                Ward: 7AS
   PID: 666-00-2921           Room-Bed:               Ht(cm): ______ (________)
   DOB: 08/09/54 (56)                                 Wt(kg): ______ (________)
   Sex: MALE                                     Admitted: 06/09/10
    Dx: RESPIRATORY DISTRESS             Last transferred: ********

 - - - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - - -
   1  ->AMIODARONE TAB                           C  10/19  11/18 A
          Give: 400MG PO TID
   2    CIMETIDINE TAB                           C  10/19  11/18 R
          Give: 300MG PO QHS
 - - - - - - - - - - - - - - N O N - V E R I F I E D - - - - - - - - - - - - - -
   3    LOVASTATIN TAB                           C  10/19  11/18 N  NF
          Give: 20MG PO QPM
 - - - - - - - - - -  N O N - V E R I F I E D  C O M P L E X - - - - - - - - - -
   4    HALOPERIDOL TAB                          C  10/19  11/18 N
          Give: 10MG PO BID
        HALOPERIDOL TAB                           C  10/19  11/18 N
         Give: 15MG PO QHS
 - - - - - - - - - - - - P E N D I N G   R E N E W A L S - - - - - - - - - - - -
   5    CIMETIDINE TAB                           ?  *****  ***** P     10/19
          Give: 300MG PO QHS
 - - - - - - - - - - - - - P E N D I N G  C O M P L E X - - - - - - - - - - - -
   6    PREDNISONE TAB                           ?  *****  ***** P
          Give: 20MG PO QAM
        PREDNISONE TAB                            ?  *****  ***** P
          Give: 10MG PO QOD
        PREDNISONE TAB                            ?  *****  ***** P
          Give: 5MG PO QD
 - - - - - - - - - - - - - - - -  P E N D I N G - - - - - - - - - - - - - - - - -
7    ACETAMINOPHEN TAB                          ?  *****  ***** P
          Give: 650MG PO Q4H PRN
 - - - - - - - -  RECENTLY DISCONTINUED/EXPIRED (LAST 120 HOURS) - - - - - - - -
   8    ASPIRIN TAB,EC                           C  10/19  10/19 D
          Give: 325MG PO QHS
   9  ->NAPROXEN TAB                             C  10/19  10/19 D
          Give: 250MG PO BID
+         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 RENEWALS, PENDING COMPLEX, PENDING, RECENTLY DISCONTINUED/EXPIRED), 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.

Example: Short Profile

```
Inpatient Order Entry         Jun 12, 2006@23:12:54          Page:    1 of    1
PSJPATIENT11, ONE              Ward: 2ASM
   PID: 000-55-3421           Room-Bed: 102-1         Ht(cm): ______ (________)
   DOB: 12/02/23 (82)                                 Wt(kg): 100.00 (06/24/03)
   Sex: MALE                                   Admitted: 12/11/01
    Dx: HE IS A PAIN.                     Last transferred: 12/11/01

 - - - - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - - -
   1    CEFAZOLIN 1 GM                          C  06/12  06/22  H
        in 5% DEXTROSE 50 ML Q8H
   2    CIMETIDINE TAB                          C  06/12  07/12  A
          Give: 300MG PO BID
   3    FUROSEMIDE TAB                          C  06/01  06/15  HP
          Give: 40MG PO QAM
- - - - - - - - - - - - - - N O N - V E R I F I E D - - - - - - - - - - - - - - -
   4    CAPTOPRIL TAB                           C  06/14  06/28  N
          Give: 25MG PO BID

- - - - - - - - - - - - - P E N D I N G   R E N E W A L S - - - - - - - - - - - - -
   5    HALOPERIDOL TAB                         ?  *****  *****  P    06/14
          Give: 5MG PO BID
- - - - - - - - - - - - - - - - - -  P E N D I N G  - - - - - - - - - - - - - - - -
   6    HEPARIN/DEXTROSE INJ,SOLN               ?  *****  *****  P
          Give:  IV
   7    LACTULOSE SYRUP                         ?  *****  *****  P NF
          Give: 10GM/15ML PO BID PRN

- - - - - - - - - - - RECENTLY DISCONTINUED/EXPIRED (LAST X HOURS) - - - - - - - - - -
   8    FOLIC ACID TAB             C  06/14  06/16  D
          Give: 1MG PO QAM
   9    GENTAMICIN 80 MG                        C  06/12  06/12  D
        in 5% DEXTROSE 100 ML Q8H
  10    ISONIAZID TAB                           C  04/03  04/17  DF
          Give: 300MG PO QD
  11    POTASSIUM CHLORIDE 10MEQ                C  06/12  06/12  DA
        in 5% DEXTROSE 1000 ML Q8H
  12    POTASSIUM CHLORIDE 40 MEQ               C  06/12  06/12  DD
        in 5% DEXTROSE 250 ML 120 ml/hr
  13    PROPRANOLOL TAB                         C  06/15  06/20  DP
          Give: 40MG PO Q6H
  14    THIAMINE TAB                            C  04/03  04/17  E
          Give: 100MG PO BID

X – Represents the value set in either the ward or system parameter

       Enter ?? for more actions
PI  Patient Information                 SO  Select Order
PU  Patient Record Update               NO  New Order Entry
```

Sets of Complex Orders with a status of “Pending” or “Non-Verified” will be grouped together in the Profile View. They appear as one numbered list item, as shown in the following examples. Once these orders are made active, they will appear individually in the Profile View, with a status of “Active”.

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 its 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).

The HOURS OF RECENTLY DC/EXPIRED field (#7) has been created in the INPATIENT WARD PARAMETERS file (#59.6). The Inpatient Medications profiles will display the recently discontinued/expired orders that fall within the number of hours specified in this field. The value defined in this field will take precedence over the Inpatient System parameter. The inpatient ward parameter allows for a minimum value of one (1) hour and a maximum value of one hundred twenty (120) hours. The Inpatient Ward Parameters Edit [PSJ IWP EDIT] option allows the user to edit this new ward parameter. If this parameter is not set the software will use the value in the HOURS OF RECENTLY DC/EXPIRED field (#26.8) in the PHARMACY SYSTEM file (#59.7). If neither parameter is set the software will default to twenty-four (24) hours.

The HOURS OF RECENTLY DC/EXPIRED field (#26.8) has been created in the PHARMACY SYSTEM file (#59.7). The Inpatient Medications profiles will display the recently discontinued/expired orders that fall within the number of hours specified in this field. This parameter allows for a minimum value of one (1) hour and a maximum value of one hundred twenty (120) hours. The Systems Parameters Edit [PSJ SYS EDIT] option includes the ability for a user to edit this inpatient site parameter. If neither parameter is set the software will default to twenty-four (24) hours.

On the medication profile in the status column the codes and the action they represent are as follows:
Order Status: The current status of the order. These statuses include:

- A Active
- N Non-Verified
- O On Call (IV orders only)
- I Incomplete
- HP Placed on hold by provider through CPRS
- H Placed on hold via backdoor Pharmacy
- E Expired
- DP Discontinued by provider through CPRS
- DE Discontinued due to edit via backdoor Pharmacy (Unit Dose orders only)
- D Discontinued via backdoor Pharmacy (IV & UD); discontinued due to edit via backdoor Pharmacy (IV)

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

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

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

Example: Pending Complex Order in Profile View

```
Inpatient Order Entry         Mar 07, 2004@13:03:55          Page:    1 of    1
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          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 QDAILY
        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
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          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 QDAILY
        CAPTOPRIL TAB                                C  03/28  03/29  N
          Give: 50MG PO BID
        CAPTOPRIL TAB                                C  03/30  03/31  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//
```

(*This page included for two-sided copying.)*

Example: Active Complex Order in Profile View

```
Inpatient Order Entry         Mar 07, 2004@15:00:05          Page:    1 of    1
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          Room-Bed: B-12        Ht(cm): ______ (________)
   DOB: 08/18/20 (81)                              Wt(kg): ______ (________)
   Sex: MALE                                     Admitted: 03/03/04
    Dx: TESTING                           Last transferred: ********

- - - - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - - - -
  1     CAPTOPRIL TAB                             C  03/26  03/27  A
          Give: 25MG PO QDAILY
  2     CAPTOPRIL TAB                             C  03/28  03/29  A
          Give: 50MG PO BID
  3     CAPTOPRIL TAB                             C  03/30  03/31  A
          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//
```

4.4.6. Patient Information

The Patient Information screen is displayed for the selected patient. The header contains the patient's demographic data, while the list area contains Allergy/Adverse Reaction data, including remote data and Pharmacy Narratives. If an outpatient is selected, all future appointments in clinics that allow Inpatient Medications orders will display in the list area, too.

Example: Patient Information

```
Patient Information           Sep 13, 2000 15:04:31          Page:    1 of    1
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          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
 Remote:
 Adverse Reactions:
 Inpatient Narrative: Narrative for Patient PSJPATIENT1
 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//
```

Example: Patient Information Screen for Outpatient Receiving Inpatient Medications

```
Patient Information           May 12, 2003 14:27:13          Page:    1 of    1
PSJPATIENT3,THREE           Last Ward: 1 West
   PID: 000-00-0003     Last Room-Bed:             Ht(cm): ______ (________)
   DOB: 02/01/55 (48)                              Wt(kg): ______ (________)
   Sex: FEMALE                              Last Admitted: 01/13/98
    Dx: TESTING                                Discharged: 01/13/98

 Allergies/Reactions: No Allergy Assessment
 Remote:
 Adverse Reactions:
 Inpatient Narrative:
 Outpatient Narrative:

Clinic:                  Date/Time of Appointment:
Clinic A                 May 23, 2003/9:00 am
Flu Time Clinic          June 6, 2003/10:00 am
          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 (i.e., short or long).

Example: Selecting an Order

```
Inpatient Order Entry         Mar 07, 2002@13:01:56          Page:    1 of    1
PSJPATIENT1,ONE                 Ward: 1 EAST
   PID: 000-00-0001          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 0.9% SODIUM CHLORIDE 1000 ML 125 ml/hrC  03/07  03/07  E
   2    in 5% DEXTROSE 50 ML 125 ml/hr           C  03/06  03/06  E
   3    CEPHAPIRIN 1 GM                          C  03/04  03/09  A
        in DEXTROSE 5% IN N. SALINE 100 ML QID
   4    ASPIRIN CAP,ORAL                         O  03/07  03/07  E
          Give: 650MG PO NOW
 - - - - - - - - - - - - - - - -  P E N D I N G  - - - - - - - - - - - - - - - -
   5    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// 1
```

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

Example: Select an Order (continued)

```
ACTIVE UNIT DOSE              Mar 07, 2002@13:10:46          Page:    1 of    2
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          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: PSJPROVIDER,ONE [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.

In the order display for an outpatient with inpatient orders, the clinic location and the appointment date and time will display in the screen header area in the same location that the ward and room-bed information displays for an admitted patient.

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

Example: Order View For An Outpatient With Inpatient Orders

```
ACTIVE UNIT DOSE              Nov 28, 2003@10:55:47          Page:    1 of    2
PSJPATIENT3,THREE             Clinic: CLINIC (PAT)
   PID: 000-00-0003      Clinic Date: 10/31/03 08:00  Ht(cm): ______ (________)
   DOB: 02/01/55 (48)                                 Wt(kg): ______ (________)

*(1)Orderable Item: CAPTOPRIL TAB                                        <DIN>
      Instructions:
*(2)Dosage Ordered: 25MG
                                                     *(3)Start: 10/31/03  08:00
*(4)     Med Route: ORAL (BY MOUTH)
                                                     *(5) Stop: 11/29/03  12:56
 (6) Schedule Type: CONTINUOUS
*(8)      Schedule: BID
 (9)   Admin Times: 08-20
*(10)     Provider: PSJPROVIDER,ONE [s]              DURATION:
 (11) Special Instructions:

 (12) Dispense Drug                                  U/D        Inactive Date
      CAPTOPRIL 25MG TABS                            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//
```

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.

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
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          Room-Bed: B-12        Ht(cm): ______ (________)
   DOB: 08/18/20 (80)                              Wt(kg): ______ (________)

*(1) Additives:              Order number: 65           Type: ADMIXTURE    <DIN>
       POTASSIUM CHLORIDE 40 MEQ
*(2) Solutions:
       0.9% SODIUM CHLORIDE 1000 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: PSJPROVIDER,ONE         [w]  Cum. Doses: 43
 (10)   Other Print:

 (11)  Remarks :
       Entry By: PSJPROVIDER,ONE                  Entry Date: 03/19/01  11:30
          Enter ?? for more actions
DC   Discontinue          RN   Renew                FL   Flag
ED   Edit               OC   On Call
HD   Hold                 AL  Activity Logs
Select Item(s): Quit// DC   Discontinue
NATURE OF ORDER: WRITTEN//  <Enter>      W
Requesting PROVIDER: PSJPROVIDER,ONE //   <Enter>                PROV
REASON FOR ACTIVITY: TESTING
```

```
DISCONTINUED IV               Mar 20, 2001@16:38:28          Page:    1 of    1
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          Room-Bed: B-12        Ht(cm): ______ (________)
   DOB: 08/18/20 (80)                              Wt(kg): ______ (________)

*(1) Additives:              Order number: 65           Type: ADMIXTURE    <DIN>
       POTASSIUM CHLORIDE 40 MEQ
*(2) Solutions:
       0.9% SODIUM CHLORIDE 1000 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: PSJPROVIDER,ONE         [w]  Cum. Doses: 43
 (10)   Other Print:

 (11)  Remarks :
       Entry By: PSJPROVIDER,ONE                  Entry Date: 03/19/01  11:30
          Enter ?? for more actions
DC   (Discontinue)          RN   (Renew)                FL   Flag
ED   (Edit)                   OC   (On Call)
HD   (Hold)                 AL   Activity Logs
Select Item(s): Quit// <Enter>    QUIT
```

When an action of DC (Discontinue) is taken on one child order that is part of a Complex Order, a message will display informing the user that the order is part of a Complex Order, and the user is prompted to confirm that the action will be taken on all of the associated child orders.

Example: Discontinue a Complex Order

```
ACTIVE UNIT DOSE              Feb 25, 2004@21:25:50          Page:    1 of    2
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          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: QDAILY
  (9)   Admin Times: 1440
*(10)      Provider: PSJPROVIDER,ONE  [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>


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... <Enter>


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


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

Press Return to continue... <Enter>

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

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
PSJPATIENT1,ONE                   Ward: 1 EAST
   PID: 000-00-0001          Room-Bed: B-12        Ht(cm): ______ (________)
   DOB: 08/18/20 (80)                              Wt(kg): ______ (________)

 *(1)Orderable Item: AMPICILLIN CAP
       Instructions:
 *(2)Dosage Ordered: 500MG
           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: PSJPROVIDER,ONE [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.

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: The first time a field marked with an asterisk (*) is selected for editing, if CPRS Provider Overrides and/or Pharmacist Interventions exist for the order, entering Y (Yes) at the prompt: "Order Check Overrides/Interventions exist for this order. Display? (Y/N)? Y//" displays the following:

> Heading information first, followed by a summary of the Current CPRS Order Checks overridden by the Provider, as well as the Overriding Provider, plus title, Override Entered By, plus title, Date/Time Entered, and the Override Reason.

Example: Edit an Order with Provider Overrides/Interventions

```
==========================================================================
       ** Current Provider Overrides for this order **
==========================================================================

Overriding Provider: PSJPROVIDER,ONE (PROVIDER)
Override Entered By: PSJPROVIDER,ONE (PROVIDER)
  Date/Time Entered: 07/11/11 09:45
    Override Reason: testing functionality of PO & PI

  CRITICAL drug-drug interaction: TAMOXIFEN CITRATE 10MG TAB and WARFARIN NA
  (GOLDEN STATE) 1MG TAB [ACTIVE] - The concurrent use of tamoxifen or
  toremifene may increase the effects of anticoagulants. - Monograph Available

  SIGNIFICANT drug-drug interaction: TAMOXIFEN CITRATE 10MG TAB and
  THIORIDAZINE HCL 10MG TAB [UNRELEASED] - Concurrent use of inhibitors of CYP
  P-450-2D6 may decrease the effectiveness of tamoxifen in preventing breast
  cancer recurrence.  Concurrent use of amiodarone or thioridazine may increase
  the risk of potentially life-threatening cardiac arrhythmias, including
  torsades de pointes. - Monograph Available

Press RETURN to Continue or '^' to Exit :


==========================================================================
        ** Current Pharmacist Interventions for this order **
==========================================================================

Intervention Date/Time: 07/11/11 09:50
 Pharmacist: PSJPHARMACIST,ONE                Drug: TAMOXIFEN CITRATE 10MG TAB
 Instituted By: PHARMACY
 Intervention: CRITICAL DRUG INTERACTION
 Originating Package: INPATIENT
```

Once a Complex Order is made active, the following fields may <u>not</u> 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.

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Example: Edit an Order (continued)

```
NON-VERIFIED UNIT DOSE        Sep 13, 2000 15:26:46          Page:    1 of    2
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          Room-Bed: B-12        Ht(cm): ______ (________)
   DOB: 08/18/20 (80)                              Wt(kg): ______ (________)

 *(1)Orderable Item: AMPICILLIN CAP
       Instructions:
 *(2)Dosage Ordered: 500MG
           Duration:                                 *(3)Start: 09/13/00  20:
 *(4)     Med Route: ORAL
                                                     *(5) Stop: 09/27/00  24:00
  (6) Schedule Type: CONTINUOUS
 *(8)      Schedule: QID
  (9)   Admin Times: 01-09-15-20
*(10)      Provider: PSJPROVIDER,ONE
 (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 is edited, an entry in the order's activity log is made to record the change.

4.5.3. Verify

Orders must be accepted and verified before they can become active and are included on the pick list, BCMA 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.

When an action of VF (Verify) is taken on one child order that is part of a Complex Order, a message will display informing the user that the order is part of a Complex Order, and the user is prompted to confirm that the action will be taken on all of the associated child orders.

Note: Orders that have been accepted by the pharmacist will appear on the BCMA VDL if verified by a nurse.

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

Note: The user will not be allowed to finish an order that contains a schedule that is considered to be non-standard. Schedules must be selected from the ADMINISTRATION SCHEDULE file, with the following exceptions:

a. Schedule containing PRN: (Ex. TID PC PRN). If the schedule contains PRN, the base schedule must be in the ADMINISTRATION SCHEDULE file.

b. Day of week schedules (Ex. MO-FR or MO-FR@0900)

c. Admin time only schedules (Ex. 09-13)

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
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          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: PSJPROVIDER,ONE [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.

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: Place an Order on Hold

```
ACTIVE UNIT DOSE              Feb 25, 2001@21:25:50          Page:    1 of    2
PSJPATIENT1,ONE                   Ward: 1 EAST
   PID: 000-00-0001          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:
 *(4)     Med Route: ORAL
                                                    *(5) Stop: 02/28/01  24:00
  (6) Schedule Type: CONTINUOUS
 *(8)      Schedule: QDAILY
  (9)   Admin Times: 1440
*(10)      Provider: PSJPROVIDER,ONE [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----------

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

Example: Place an Order on Hold (continued)

```
HOLD UNIT DOSE                Feb 25, 2001@21:27:57          Page:    1 of    2
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          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: QDAILY
  (9)   Admin Times: 1440
*(10)      Provider: PSJPROVIDER,ONE [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
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          Room-Bed: B-12        Ht(cm): ______ (________)
   DOB: 08/18/20 (80)                              Wt(kg): ______ (________)
+
(7)Self Med:  NO

Entry By: PSJPROVIDER,ONE                      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
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          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 QDAILY



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

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 Orders with CPRS Overrides/Pharmacist Interventions

When renewing an order, if CPRS Provider Overrides and/or Pharmacy Interventions exist for the order, entering Y (Yes) at the prompt: "Order Check Overrides/Interventions exist for this order. Display? (Y/N)? Y//" displays the heading information first, followed by a summary of the Current CPRS Order Checks overridden by the Provider.

If current Pharmacist Interventions exist, they will display with the following fields (if populated), Heading, Intervention Date/Time, Provider, Pharmacist, Drug, Instituted By, Intervention, Recommendation, and Originating Package.

Example: Renew an Order with Provider Overrides/Interventions

```
==========================================================================
        ** Current Provider Overrides for this order **
==========================================================================

Overriding Provider: PSJPROVIDER,ONE (PROVIDER)
Override Entered By: PSJPROVIDER,ONE (PROVIDER)
  Date/Time Entered: 07/11/11 09:45
    Override Reason: testing functionality of PO & PI

  CRITICAL drug-drug interaction: TAMOXIFEN CITRATE 10MG TAB and WARFARIN NA
  (GOLDEN STATE) 1MG TAB [ACTIVE] - The concurrent use of tamoxifen or
  toremifene may increase the effects of anticoagulants. - Monograph Available

  SIGNIFICANT drug-drug interaction: TAMOXIFEN CITRATE 10MG TAB and
  THIORIDAZINE HCL 10MG TAB [UNRELEASED] - Concurrent use of inhibitors of CYP
  P-450-2D6 may decrease the effectiveness of tamoxifen in preventing breast
  cancer recurrence.  Concurrent use of amiodarone or thioridazine may increase
  the risk of potentially life-threatening cardiac arrhythmias, including
```

```
  torsades de pointes. - Monograph Available

Press RETURN to Continue or '^' to Exit :

==========================================================================
        ** Current Pharmacist Interventions for this order **
==========================================================================

Intervention Date/Time: 07/11/11 09:50
 Pharmacist: PSJPHARMACIST,ONE                Drug: TAMOXIFEN CITRATE 10MG TAB
 Instituted By: PHARMACY
 Intervention: CRITICAL DRUG INTERACTION
 Originating Package: INPATIENT
```

Note: When Renewing an Order in Inpatient Medications, if Current CPRS Provider Overrides do not exist and Pharmacist Interventions do exist for the order, the following displays:

```
==========================================================================
        ** Current Provider Overrides for this order **
==========================================================================

No Provider Overrides to display
```

```
==========================================================================
        ** Current Pharmacist Interventions for this order **
==========================================================================

Intervention Date: 07/11/11 14:55
 Provider: PSJPROVIDER,ONE                Pharmacist: PSJPHARMACIST,ONE
 Drug: WARFARIN NA (GOLDEN STATE) 1MG TAB
 Instituted By: PHARMACY
 Intervention: CRITICAL DRUG INTERACTION
 Recommendation: OTHER                      Originating Package: INPATIENT
 Other For Recommendation:
  TEST INTERVENTION FOR CRITICAL DRUG-DRUG
```

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.

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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 – 0600-1200-1800-2400).
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* 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

When an action of RN (Renew) is taken on one child order that is part of a Complex Order, a message will display informing the user that the order is part of a Complex Order, and the user is prompted to confirm that the action will be taken on all of the associated child orders.

Notes:

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.

Example: Renew a Complex Order

```
ACTIVE UNIT DOSE              Feb 25, 2004@21:25:50          Page:    1 of    2
PSJPATIENT1,ONE                   Ward: 1 EAST
   PID: 000-00-0001           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: QDAILY
  (9)   Admin Times: 1440
*(10)      Provider: PSJPROVIDER,ONE [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...  <Enter>

        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...  <Enter>

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
PSJPATIENT1,ONE                 Ward: 1 EAST
   PID: 000-00-0001          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 QDAILY




          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
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          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: QDAILY
  (9)   Admin Times: 1440
*(10)      Provider: PSJPROVIDER,ONE [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
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          Room-Bed: B-12        Ht(cm): ______ (________)
   DOB: 08/18/20 (80)                              Wt(kg): ______ (________)
+
(7)Self Med: NO

Entry By: PSJPROVIDER,ONE                        Entry Date: 03/25/04  21:25
Renewed By: PSJPROVIDER,ONE
(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>
```

Discontinuing a Pending Renewal

When a pharmacist attempts to discontinue a pending renewal, the following message displays.

This order is in a pending status. If this pending order is discontinued, the original order will still be active.

If this occurs, a pharmacist may discontinue a pending order, both orders, or exit the discontinue function. When a pending renewal is discontinued, the order will return to its previous status.

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, history log, or instructions history 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. If an instructions history log is selected, it will find the first order linked to the order where the history log was invoked from, then show each incremental change to the instructions in the order 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
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          Room-Bed: B-12        Ht(cm): ______ (________)
   DOB: 08/18/20 (80)                              Wt(kg): ______ (________)

*(1)Orderable Item: AMPICILLIN CAP
       Instructions:
 *(2)Dosage Ordered: 500MG
           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: PSJPROVIDER,ONE [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
   5 – Instructions History

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

    Date: 09/07/00  14:07     User: PSJPHARMACIST,ONE
Activity: ORDER VERIFIED
   Field: Requested Start Date
Old Data: 09/07/00  09:00

    Date: 09/07/00  14:07     User: PSJPHARMACIST,ONE
Activity: ORDER VERIFIED
```

```
   Field: Requested Stop Date
Old Data: 09/07/00  24:00

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

(This page included for two-sided copying.)

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.

Note: Order Checks happen during the finish process – refer to the Notes and Screen Example below.

When an action of FN (Finish) is taken on one child order that is part of a Complex Order, a message will display informing the user that the order is part of a Complex Order, and the user is prompted to confirm that the action will be taken on all of the associated child orders.

Note: Complex orders cannot be speed finished because it may not be appropriate to assign the same stop date to all components of a complex order.

Example: Complex Unit Dose Orders with Overlapping Administration Times

When finishing (FN) a complex unit dose drug order with overlapping admin times, after you select the order, a warning message is displayed with the warning and the overlapping admin times.

```
**WARNING**
The highlighted admin times for these portions of this complex order overlap.

Part 1 has a schedule of BID and admin time(s) of 10-22.
AND
Part 2 has a schedule of QDAY and admin time(s) of 10.

Please ensure the schedules and administration times are appropriate.

Press Return to continue...


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

To finish the order, you must correct the order so that there are no overlapping admin times.

Note: When finishing an order, if CPRS Order Checks/Provider Overrides and Pharmacist Interventions exist, they will display during the finish process. Heading information displays first, followed by a summary of the Current CPRS Order Checks overridden by the Provider, as well as the Overriding Provider, plus title, Override Entered By, plus title, Date/Time Entered, and the Override Reason.

Example: Finish an Order with Provider Overrides/Interventions

```
============================================================================
        ** Current Provider Overrides for this order **
============================================================================

Overriding Provider: PSJPROVIDER,ONE (PROVIDER)
Override Entered By: PSJPROVIDER,ONE (PROVIDER)
  Date/Time Entered: 07/11/11 17:40
    Override Reason: Provider gave permission to administer

  CRITICAL drug-drug interaction: METRONIDAZOLE 250MG TAB and WARFARIN NA
  (GOLDEN STATE) 1MG TAB [ACTIVE] - Concurrent use of anticoagulants with
  metronidazole or tinidazole may result in reduced prothrombin activity and/or
  increased risk of bleeding. - Monograph Available
```

Note: If no Current CPRS Provider Overrides were entered at the time the order was created in CPRS, they will NOT display during finishing, and no heading or messages will display when finishing the Pending order in Inpatient Medications.

(*This page included for two-sided copying.)*

Example: Finish an Order Without a Duration

```
PENDING IV (ROUTINE)          Sep 07, 2000 16:11:42          Page:    1 of    2
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          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: PSJPROVIDER,ONE [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         SYRINGEIV 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                          C  09/07  09/21  A
        Give: 500MG 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], 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
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          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: PSJPROVIDER,ONE [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

0001  1 EAST  09/07/00
PSJPATIENT1,ONE  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
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          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: PSJPROVIDER,ONE [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                        C  09/07  09/21  A
        Give: 500MG 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
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001          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                      (4)     Start: 09/07/00  09:00
 (3)  Infusion Rate:                             Calc Start: 09/07/00  08:13
*(5)      Med Route: IVPB                     (6)      Stop: 09/17/00  09:00
                                                   Calc Stop: 09/22/00  24:00
*(7)       Schedule: QID                           Last Fill: ********
 (8)    Admin Times: 01-09-15-20                   Quantity: 0
*(9)       Provider: PSJPROVIDER,ONE [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], 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

0001  1 EAST  09/07/00
PSJPATIENT1,ONE  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 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 for today, 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 today, the Expected First Dose will be at the next administration time. 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. Expected First Dose does not display for On-call or One-time orders.

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.

When more than one IV Additive/Solution is tied to the same Orderable Item, the user shall be presented with a list of selectable Additives and Solutions to choose from for that order.

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

```
Inpatient Order Entry         Feb 11, 2011@13:05:49          Page:    1 of    1
--------------------------------------------------------------------------------
ZZZRETFIVEEIGHTYSIX,PATIENT       Ward: ALB-PRR                        A
   PID: 000-00-1234           Room-Bed:               Ht(cm): 187.96 (05/03/10)
   DOB: 04/07/70 (40)                                 Wt(kg): 74.00 (05/03/10)
   Sex: MALE                                     Admitted: 07/02/97
    Dx: SICK                              Last transferred: ********
--------------------------------------------------------------------------------
 - - - - - - - - - - - - - - - -  P E N D I N G - - - - - - - - - - - - - - - -
   1    ACETAZOLAMIDE INJ                        ?  *****  ***** P
          Give: 500MG/1VIAL IV NOW
   2    ACETAZOLAMIDE INJ                        ?  *****  ***** P
          Give: 500MG/1VIAL IV Q12H
   3    VINCRISTINE INJ                          ?  *****  ***** P
          Give: 3MG/3ML IVP BID



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

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.

Note: Complex orders cannot be speed finished because it may not be appropriate to assign the same stop date to all components of a complex order.

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: PSJPATIENT2,TWO     000-00-0002   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:    PSJPATIENT2,TWO     000-00-0002   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!
.....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 ward group, ward, or patient. 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. To print Outpatients, the user should select the ward group ^OTHER or print by Patient.

When the user accesses this option from the Unit Dose Medications 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

Select by WARD GROUP (G), WARD (W), or PATIENT (P): Patient  <Enter>
```

```
Select PATIENT: PSJPATIENT11,ONE                 000-55-3421   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
```

```
Inpatient Order Entry         Jun 12, 2006@23:12:54          Page:    1 of    1
PSJPATIENT11, ONE              Ward: 2ASM
   PID: 000-55-3421           Room-Bed: 102-1         Ht(cm): ______ (________)
   DOB: 12/02/23 (82)                                 Wt(kg): 100.00 (06/24/03)
   Sex: MALE                                     Admitted: 12/11/01
    Dx: Breathing Difficulty             Last transferred: 12/11/01

 - - - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - -
   1    CEFAZOLIN 1 GM                          C  06/12  06/22  H
        in 5% DEXTROSE 50 ML Q8H
   2    CIMETIDINE TAB                          C  06/12  07/12  A
          Give: 300MG PO BID
   3    FUROSEMIDE TAB                          C  06/01  06/15  HP
          Give: 40MG PO QAM
- - - - - - - - - - - - - - N O N - V E R I F I E D - - - - - - - - - - - - - -
   4    CAPTOPRIL TAB                           C  06/14  06/28  N
          Give: 25MG PO BID

- - - - - - - - - - - - P E N D I N G   R E N E W A L S - - - - - - - - - - - -
   5    HALOPERIDOL TAB                         ?  *****  *****  P    06/14
          Give: 5MG PO BID
- - - - - - - - - - - - - - - -  P E N D I N G  - - - - - - - - - - - - - - - -
   6    HEPARIN/DEXTROSE INJ,SOLN               ?  *****  *****  P
          Give:  IV
   7    LACTULOSE SYRUP                         ?  *****  *****  P NF
          Give: 10GM/15ML PO BID PRN

- - - - - - - - - - - RECENTLY DISCONTINUED/EXPIRED (LAST 24 HOURS) - - - - - - - - - -
   8    FOLIC ACID TAB             C  06/14  06/16  D
          Give: 1MG PO QAM
   9    GENTAMICIN 80 MG                        C  06/12  06/12  D
        in 5% DEXTROSE 100 ML Q8H
  10    ISONIAZID TAB                           C  04/03  04/17  DF
          Give: 300MG PO QD
  11    POTASSIUM CHLORIDE 10MEQ                C  06/12  06/12  DA
        in 5% DEXTROSE 1000 ML Q8H
  12    POTASSIUM CHLORIDE 40 MEQ               C  06/12  06/12  DD
        in 5% DEXTROSE 250 ML 120 ml/hr
  13    PROPRANOLOL TAB                         C  06/15  06/20  DP
          Give: 40MG PO Q6H
  14    THIAMINE TAB                            C  04/03  04/17  E
          Give: 100MG PO BID

       Enter ?? for more actions
PI  Patient Information                 SO  Select Order
PU  Patient Record Update               NO  New Order Entry
                            Entry Date: 09/19/00  09:55
```

4.9. Order Checks

Order checks (allergy/adverse drug reactions, drug-drug interactions, duplicate therapy, dangerous medications for patient over 64 years of age, Glucophage lab results, and Aminoglycosides ordered) are performed when a new medication order is placed through Inpatient Medications or when various actions are taken on medication orders through the Inpatient Medications application. 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 acted upon.

Note: The check for remote data availability is performed when entering a patient's chart, rather than on each order.

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, and duplicate therapy) 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, and duplicate therapy) 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, and duplicate therapy) against existing medication orders.
- Action taken through Inpatient Medications to renew a medication order will initiate order checks (allergy, drug-drug interaction, and duplicate therapy) against existing medication orders.
- Action taken through IV Menu to renew a medication order will initiate order checks (allergy, drug-drug interaction, and duplicate therapy) against existing medication orders.
- Action taken through IV Menu to copy a medication order, thereby creating a new order.

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, and duplicate therapy.
- Checks each additive within an IV order for drug-drug interaction, and duplicate therapy 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 if they are defined as a PreMix.
- Checks each IV order additive for allergy/adverse reaction.
- Checks each IV order additive for drug-drug interaction, and duplicate therapy 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 will be displayed/processed in the following order:

- System Errors
- Allergy/ADR (local & remote)
- CPRS checks generated backdoor (3 new checks)
- Drug Level Errors
- Inpatient Critical Drug Interaction
- Local & Remote Outpatient Critical Drug Interactions
- Inpatient Significant Drug Interactions
- Local & Remote Outpatient Significant Drug Interactions
- Order Level Error Messages – Drug Interactions
- Duplicate Therapy –Inpatient, Local & Remote Outpatient
- Order Level Error Messages – Duplicate Therapy

These checks will be performed at the Dispense Drug level. Order checks for IV orders will use Dispense Drugs linked to each additive/solution in the IV order. All pending, non-verified, active and renewed Inpatient orders, active Outpatient orders, and active Non-Veterans Affairs (VA) Meds documented in CPRS will be included in the check. In addition, with the release of OR*3*238, order checks will be available using data from the Health Data Repository Historical (HDR-Hx) and the Health Data Repository Interim Messaging Solution (HDR-IMS). This will contain both Outpatient orders from other VAMCs as well as from Department of Defense (DoD) facilities, if available. Any remote Outpatient order that has been expired for 30 days or less will be included in the list of medications to be checked.

There is a slight difference in the display of local Outpatient orders compared with remote Outpatient orders. Below are examples of the two displays:

Example: Local Outpatient Order Display

```
Duplicate Drug in Local Rx:

                  Rx #: 2608
                  Drug: ASPIRIN 81MG EC TAB
                   SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
                   QTY: 30              Refills remaining: 11
              Provider: PSOPROVIDER,TEN            Issued: 03/24/08
                Status: Active             Last filled on: 03/24/08
     Processing Status: Released locally on 3/24/08@08:55:32  (Window)
                                               Days Supply: 30
```

Example: Remote Outpatient Order Display

```
Duplicate Drug in Remote Rx:

         LOCATION NAME: <NAME OF FACILITY>
                  Rx #: 2608
                  Drug: ASPIRIN 81MG EC TAB
                   SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
                   QTY: 30
              Provider: PSOPROVIDER,TEN            Issued: 03/24/08
                Status: Active             Last filled on: 03/24/08
                                               Days Supply: 30
```

In the Remote Outpatient Order Display example above, notice the name of the remote location has been added. In addition, the number of refills is not available.

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 Therapy** - If the patient is already receiving orders containing a Dispense Drug in the same class as one of the Dispense Drugs in the new order, the orders containing the drug in that class are displayed. Inpatient duplicate orders of this kind are displayed in a numbered list. The user is first asked whether or not to continue the current order. If the user selects to continue the order then the user is prompted with which, if any, numbered Inpatient duplicate orders to discontinue. The user may enter a range of numbers from the numbered list of duplicate orders or bypass the prompt by selecting **<Enter>** and continue with the order. Entry of orders with duplicate drugs of the same class will be allowed.

```
Inpatient Order Entry         Mar 16, 2011@12:10:42          Page:    1 of    2
BCMA,EIGHTEEN-PATIENT             Ward: 7A GEN                        A
   PID: 666-33-0018           Room-Bed:               Ht(cm): 175.26 (12/15/08)
   DOB: 04/07/35 (75)                                 Wt(kg): 100.00 (12/15/08)
   Sex: FEMALE                                   Admitted: 01/31/02
    Dx: UPSET                             Last transferred: 06/04/10
-------------------------------------------------------------------------------
- - - - - - - - - -  N O N - V E R I F I E D  C O M P L E X - - - - - - - - - -
   1    LITHIUM TAB,SA                           C  10/13  10/15 N
          Give: 450MG PO QID
        LITHIUM TAB,SA                           C  10/13  10/15 N
          Give: 10000MG PO Q4H
   2    RILUZOLE TAB                             C  10/13  10/15 N
          Give: 50MG PO BID
+---------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 DRUG: sim
    Lookup: DRUG  GENERIC NAME
     1   SIMETHICONE 40MG CHEW TAB           GA900     N/F
     2   SIMETHICONE 40MG/0.6ML DROPS           GA900
     3   SIMETHICONE 80MG CHEW TAB           GA900
     4   SIMVASTATIN 10MG TAB           CV350
     5   SIMVASTATIN 20MG TAB           CV350
Press <RETURN> to see more, '^' to exit this list, '^^' to exit all lists, OR
CHOOSE 1-5: 5  SIMVASTATIN 20MG TAB         CV350

Now Processing Enhanced Order Checks!  Please wait...
===============================================================================
This patient is receiving the following order(s) that have a CRITICAL Drug
Interaction with SIMVASTATIN 20MG TAB:

INDINAVIR CAP,ORAL                       C  03/16  03/17  A
Give: 400MG PO QDAY

Concurrent administration may result in elevated HMG levels, which may
increase the risk of myopathy, including rhabdomyolysis. (1-16)

===============================================================================
This patient is receiving the following order(s) that have a SIGNIFICANT Drug
Interaction with SIMVASTATIN 20MG TAB:

Local Rx #501932A (ACTIVE) for RISPERIDONE 0.5MG TAB
SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
Processing Status: Not released locally (Window)


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

```
Display Professional Interaction Monograph(s)? NO//

Do you want to Continue with SIMVASTATIN 20MG TAB? NO// y  YES

Now creating Pharmacy Intervention
For SIMVASTATIN 20MG TAB

PROVIDER:    PSJPROVIDER,ONE            TP
RECOMMENDATION: 8  NO CHANGE

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


Would you like to edit this intervention? N// no

================================================================================
This patient is already receiving the following INPATIENT and/or OUTPATIENT
order(s) for a drug in the same therapeutic class(es) as SIMVASTATIN 20MG
TAB:

Local Rx #501820A (ACTIVE) for SIMVASTATIN 10MG TAB
SIG: TAKE ONE TABLET BY MOUTH EVERY EVENING
Processing Status: Not released locally (Window)

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

Press Return to continue...

Available Dosage(s)
      1.    20MG
      2.    40MG
      3.    60MG

Select from list of Available Dosages or Enter Free Text Dose: 2  40MG

You entered 40MG is this correct? Yes//   YES
MED ROUTE: ORAL (BY MOUTH)//   PO
SCHEDULE: QPM//       2100
SCHEDULE TYPE: CONTINUOUS//   CONTINUOUS
ADMIN TIMES: 2100//
SPECIAL INSTRUCTIONS:
START DATE/TIME: MAR 16,2011@12:10//   MAR 16,2011@12:10
STOP DATE/TIME: MAR 18,2011@24:00//    MAR 18,2011@24:00
Expected First Dose: MAR 16,2011@21:00
PROVIDER: PHARMACIST,SEVENTEEN//         145


NON-VERIFIED UNIT DOSE        Mar 16, 2011@12:10:15          Page:    1 of    2
BCMA,EIGHTEEN-PATIENT             Ward: 7A GEN                        A
   PID: 666-33-0018           Room-Bed:               Ht(cm): 175.26 (12/15/08)
   DOB: 04/07/35 (75)                                 Wt(kg): 100.00 (12/15/08)
--------------------------------------------------------------------------------
 (1)Orderable Item: SIMVASTATIN TAB
      Instructions:
 (2)Dosage Ordered: 40MG
          Duration:                                   (3)Start: 03/16/11  12:10
 (4)     Med Route: ORAL (BY MOUTH)
                                                      (5) Stop: 03/18/11  24:00
 (6) Schedule Type: CONTINUOUS
 (8)      Schedule: QPM
 (9)   Admin Times: 2100
 (10)     Provider: PHARMACIST,SEVENTEEN
 (11) Special Instructions:

 (12) Dispense Drug                                  U/D        Inactive Date
      SIMVASTATIN 20MG TAB                           2
```

```
+---------Enter ?? for more actions-------------------------------------------
ED  Edit                                AC  ACCEPT
Select Item(s): Next Screen// ac   ACCEPT
NATURE OF ORDER: WRITTEN//        W

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

NON-VERIFIED UNIT DOSE        Mar 16, 2011@12:10:24          Page:    1 of    2
BCMA,EIGHTEEN-PATIENT             Ward: 7A GEN                        A
   PID: 666-33-0018           Room-Bed:               Ht(cm): 175.26 (12/15/08)
   DOB: 04/07/35 (75)                                 Wt(kg): 100.00 (12/15/08)
-------------------------------------------------------------------------------
*(1)Orderable Item: SIMVASTATIN TAB
      Instructions:
*(2)Dosage Ordered: 40MG
          Duration:                                   (3)Start: 03/16/11  12:10
*(4)     Med Route: ORAL (BY MOUTH)
                                                      (5) Stop: 03/18/11  24:00
 (6) Schedule Type: CONTINUOUS
*(8)      Schedule: QPM
 (9)   Admin Times: 2100
      SIMVASTATIN 20MG 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// vf   Verify
...a few moments, please.....

Pre-Exchange DOSES:

ORDER VERIFIED.

Enter RETURN to continue or '^' to exit:

Select DRUG:

Select IV TYPE:

Inpatient Order Entry         Mar 16, 2011@12:10:42          Page:    1 of    2
BCMA,EIGHTEEN-PATIENT             Ward: 7A GEN                        A
   PID: 666-33-0018           Room-Bed:               Ht(cm): 175.26 (12/15/08)
   DOB: 04/07/35 (75)                                 Wt(kg): 100.00 (12/15/08)
   Sex: FEMALE                                  Admitted: 01/31/02
    Dx: UPSET                             Last transferred: 06/04/10
-------------------------------------------------------------------------------
 - - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - -
   1    INDINAVIR CAP,ORAL                      C  03/16  03/17 A
          Give: 400MG PO QDAY
   2    SIMVASTATIN TAB                         C  03/16  03/18 A
          Give: 40MG PO QPM
 - - - - - - - - - -  N O N - V E R I F I E D  C O M P L E X - - - - - - - - - -
   3    LITHIUM TAB,SA                          C  10/13  10/15 N
          Give: 450MG PO QID
        LITHIUM TAB,SA                          C  10/13  10/15 N
          Give: 10000MG PO Q4H
   4    RILUZOLE TAB                            C  10/13  10/15 N
          Give: 50MG PO BID
+---------Enter ?? for more actions-------------------------------------------
PI  Patient Information                 SO  Select Order
PU  Patient Record Update               NO  New Order Entry
Select Action: Next Screen//
```

- **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.

  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.

  Note: If the user (who holds the PSJ RPHARM key), is prompted for an intervention and enters 9, which is OTHER, "OTHER FOR RECOMMENDATION" displays. This allows the user to enter unlimited free text as a response to the order check(s).

Example: Drug-Drug Interactions Display

```
Inpatient Order Entry         Mar 16, 2011@12:04:33          Page:    1 of    2
BCMA,EIGHTEEN-PATIENT             Ward: 7A GEN                        A
   PID: 666-33-0018           Room-Bed:               Ht(cm): 175.26 (12/15/08)
   DOB: 04/07/35 (75)                                 Wt(kg): 100.00 (12/15/08)
   Sex: FEMALE                                   Admitted: 01/31/02
    Dx: UPSET                              Last transferred: 06/04/10
-------------------------------------------------------------------------------
 - - - - - - - - - -  N O N - V E R I F I E D  C O M P L E X - - - - - - - - - -
   1    LITHIUM TAB,SA                          C  10/13  10/15 N
          Give: 450MG PO QID
        LITHIUM TAB,SA                          C  10/13  10/15 N
          Give: 10000MG PO Q4H
   2    RILUZOLE TAB                            C  10/13  10/15 N
          Give: 50MG PO BID
        RILUZOLE TAB                            C  10/15  10/16 N
          Give: 10000MG PO Q4H
 - - - - - - - - - - - - - P E N D I N G  C O M P L E X - - - - - - - - - - - -
   3    HALOPERIDOL TAB                         ?  *****  ***** P
          Give: 40MG PO BID
----------Enter ?? for more actions-------------------------------------------
PI  Patient Information                SO  Select Order
PU  Patient Record Update              NO  New Order Entry
Select Action: Quit// no   New Order Entry

Select DRUG: indinavi
    Lookup: DRUG  GENERIC NAME
INDINAVIR SULFATE 400MG CAP           AM800
         ...OK? Yes//   (Yes)

Now Processing Enhanced Order Checks!  Please wait...


Press Return to continue...

================================================================================
This patient is receiving the following order(s) that have a CRITICAL Drug
Interaction with INDINAVIR SULFATE 400MG CAP:

Local Rx #501820A (ACTIVE) for SIMVASTATIN 10MG TAB
SIG: TAKE ONE TABLET BY MOUTH EVERY EVENING
Processing Status: Not released locally (Window)

Concurrent administration may result in elevated HMG levels, which may
increase the risk of myopathy, including rhabdomyolysis. (1-16)

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

Display Professional Interaction Monograph(s)? NO//
```

```
Do you want to Continue with INDINAVIR SULFATE 400MG CAP? NO// y  YES

Now creating Pharmacy Intervention
For INDINAVIR SULFATE 400MG CAP

PROVIDER: PSJPROVIDER,ONE              TP
RECOMMENDATION: ?
    Answer with APSP INTERVENTION RECOMMENDATION, or NUMBER
   Choose from:
   1            CHANGE DRUG
   2            CHANGE FORM OR ROUTE OF ADMINISTRATION
   3            ORDER LAB TEST
   4            ORDER SERUM DRUG LEVEL
   5            CHANGE DOSE
   6            START OR DISCONTINUE A DRUG
   7            CHANGE DOSING INTERVAL
   8            NO CHANGE
   9            OTHER

RECOMMENDATION: 8  NO CHANGE

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


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


Available Dosage(s)
      1.    400MG
      2.    800MG

Select from list of Available Dosages or Enter Free Text Dose: 1  400MG

You entered 400MG is this correct? Yes//   YES
MED ROUTE: ORAL (BY MOUTH)//   PO
SCHEDULE: QDAY//
     1   QDAY    0900
     2   QDAY-DIG    1300
     3   QDAY-WARF    1300
CHOOSE 1-3: 1      0900
SCHEDULE TYPE: CONTINUOUS//   CONTINUOUS
ADMIN TIMES: 0900//
SPECIAL INSTRUCTIONS:
START DATE/TIME: MAR 16,2011@12:08//   MAR 16,2011@12:08
STOP DATE/TIME: MAR 17,2011@24:00//    MAR 17,2011@24:00
Expected First Dose: MAR 17,2011@09:00
PROVIDER: PHARMACIST,SEVENTEEN//         145

NON-VERIFIED UNIT DOSE        Mar 16, 2011@12:07:46          Page:    1 of    2
BCMA,EIGHTEEN-PATIENT             Ward: 7A GEN                          A
   PID: 666-33-0018           Room-Bed:               Ht(cm): 175.26 (12/15/08)
   DOB: 04/07/35 (75)                                 Wt(kg): 100.00 (12/15/08)
--------------------------------------------------------------------------------
 (1)Orderable Item: INDINAVIR CAP,ORAL
      Instructions:
 (2)Dosage Ordered: 400MG
          Duration:                                   (3)Start: 03/16/11  12:08
 (4)     Med Route: ORAL (BY MOUTH)
                                                      (5) Stop: 03/17/11  24:00
 (6) Schedule Type: CONTINUOUS
 (8)      Schedule: QDAY
 (9)   Admin Times: 0900
 (10)     Provider: PHARMACIST,SEVENTEEN
 (11) Special Instructions:

 (12) Dispense Drug                                  U/D        Inactive Date
      INDINAVIR SULFATE 400MG CAP                    1

+---------Enter ?? for more actions-----------------------------------------------
```

```
ED  Edit                                AC  ACCEPT
Select Item(s): Next Screen// ac   ACCEPT

Press Return to continue...


NATURE OF ORDER: WRITTEN//        W

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


NON-VERIFIED UNIT DOSE        Mar 16, 2011@12:08:04          Page:    1 of    2
BCMA,EIGHTEEN-PATIENT             Ward: 7A GEN                          A
   PID: 666-33-0018           Room-Bed:               Ht(cm): 175.26 (12/15/08)
   DOB: 04/07/35 (75)                                 Wt(kg): 100.00 (12/15/08)
-------------------------------------------------------------------------------
*(1)Orderable Item: INDINAVIR CAP,ORAL
       Instructions:
*(2)Dosage Ordered: 400MG
          Duration:                                   (3)Start: 03/16/11  12:08
*(4)     Med Route: ORAL (BY MOUTH)
                                                      (5) Stop: 03/17/11  24:00
 (6) Schedule Type: CONTINUOUS
*(8)      Schedule: QDAY
 (9)   Admin Times: 0900
*(10)     Provider: PHARMACIST,SEVENTEEN [w]
 (11) Special Instructions:

 (12) Dispense Drug                                  U/D        Inactive Date
      INDINAVIR SULFATE 400MG 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//    NEXT SCREEN
```

- **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: If the user (who holds the PSJ RPHARM key), is prompted for an intervention and enters 9, which is OTHER, "OTHER FOR RECOMMENDATION" displays. This allows the user to enter unlimited free text as a response to the order check(s).

Example: Remote Allergy/ADR – New Order Entry Backdoor – Both Ingredient and Drug Class Defined

```
Select Action: View Profile// NO   New Order Entry

Select DRUG: DILTIAZEM
  Lookup: GENERIC NAME
     1   DILTIAZEM (INWOOD) 120MG SA CAP           CV200
     2   DILTIAZEM (INWOOD) 180MG SA CAP           CV200
     3   DILTIAZEM (INWOOD) 240MG SA CAP           CV200
     4   DILTIAZEM (INWOOD) 300MG SA CAP           CV200
     5   DILTIAZEM (INWOOD) 360MG SA CAP           CV200
Press <RETURN> to see more, '^' to exit this list, '^^' to exit all lists, OR
CHOOSE 1-5: 1  DILTIAZEM (INWOOD) 120MG SA CAP         CV200

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

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

Do you want to Intervene NO// YES
```

```
Now creating Pharmacy Intervention
For DILTIAZEM (INWOOD) 120MG SA CAP

PROVIDER: PSJPROVIDER,ONE              OP         PROVIDER
RECOMMENDATION: 9  OTHER
OTHER FOR RECOMMENDATION:
  No existing text
  Edit? NO// YES

==[ WRAP ]==[ INSERT ]======< OTHER FOR RECOMMENDATION >=====[ <PF1>H=Help ]====
Discussed with doctor and okay to administer.

==============================================================================
```

Note: The "OTHER FOR RECOMMENDATION" text field is best used for the Pharmacist reason for overriding the order check(s). For critical drug-drug and allergy/ADR interactions, this information will display when the OCI 'Hidden Action' is used in Inpatient Medications. It will also be available for the nurse to view in the BCMA Display Order detail report

- **CPRS Order Check: Aminoglycoside Ordered**

```
Trigger:   Ordering session completion.
Mechanism: For each medication order placed during this ordering session,
the CPRS Expert System requests the pharmacy package to determine if the
medication belongs to the VA Drug Class 'Aminoglycosides'.  If so, the
patient's most recent BUN results are used to calculate the creatinine
clearance then OERR is notified and the warning message is displayed.
[Note: The creatinine clearance value displayed in some order check
messages is an estimate based on adjusted body weight if patient height is
> 60 inches.  Approved by the CPRS Clinical Workgroup 8/11/04, it is based
on a modified Cockcroft-Gault formula and was installed with patch
OR*3*221.
For more information:
http://www.ascp.com/public/pubs/tcp/1999/jan/cockcroft.shtml
CrCl (male) = (140 - age) x (adj body weight* in kg)
--------------------------------------
(serum creatinine) x 72
       * If patient height is not greater than 60 inches, actual body weight
is used.

CrCl (female) = 0.85 x CrCl (male)

To calculate adjusted body weight, the following equations are used:
Ideal body weight (IBW) = 50 kg x (for men) or 45 kg x (for women) + 2.3 x
(height in inches - 60)

Adjusted body weight (Adj. BW) if the ratio of actual BW/IBW > 1.3 =  (0.3 x
(Actual BW - IBW)) + IBW

Adjusted body weight if the ratio of actual BW/IBW is not > 1.3 = IBW or
Actual BW (whichever is less)]

Message:   Aminoglycoside - est. CrCl:  <value calculated from most recent
serum creatinine>. (CREAT: <result>  BUN: <result>).
Danger Lvl: This order check is exported with a High clinical danger level.
```

- **CPRS Order Check: Dangerous Meds for Patients >64**

```
DANGEROUS MEDS FOR PT > 64 – Yes
This is based on the BEERS list.  This order check only checks for three
drugs: Amitriptyline, Chlorpropamide and Dipyridamole. The workgroup felt
that the list of drugs should be expanded. A request can be sent to CPRS
for this.

Trigger: Acceptance of pharmacy orderable items amitriptyline,
chlorpropamide or dipyridamole.
Mechanism: The CPRS Expert System determines if the patient is greater than
64 years old.  It then checks the orderable item of the medication ordered
to determine if it is mapped as a local term to the national term DANGEROUS
MEDS FOR PTS > 64.
Message:   If the orderable item text contains AMITRIPTYLINE this message is
displayed:
   Patient is <age>.  Amitriptyline can cause cognitive impairment and loss
of balance in older patients.  Consider other antidepressant medications on
formulary.
   If the orderable item text contains CHLORPROPAMIDE this message is
displayed:
   Patient is <age>.  Older patients may experience hypoglycemia with
Chlorpropamide due do its long duration and variable renal secretion.  They
may also be at increased risk for Chlorpropamide-induced SIADH.
   If the orderable item text contains DIPYRIDAMOLE this message is
displayed:
   Patient is <age>.  Older patients can experience adverse reactions at
high doses of Dipyridamole (e.g., headache, dizziness, syncope, GI
intolerance.)  There is also questionable efficacy at lower doses.
Danger Lvl: This order check is exported with a High clinical danger level.
```

- **CPRS Order Check: Glucophage Lab Results**

```
Glucophage-Lab Results Interactions
Trigger: Selection of a Pharmacy orderable item.
Mechanism: The CPRS Expert System checks the pharmacy orderable item's
local text (from the Dispense Drug file [#50]) to determine if it contains
"glucophage" or "metformin". The expert system next searches for a serum
creatinine result within the past x number of days as determined by
parameter ORK GLUCOPHAGE CREATININE.   If the patient's creatinine result
was greater than 1.5 or does not exist, OE/RR is notified and the warning
message is displayed.
Message: Metformin– no serum creatinine within past <x> days.   else:
   Metformin – Creatinine results: <creatinine greater than 1.5 w/in past
<x> days>
Danger Lvl: This order check is exported with a High clinical danger level.
```

4.9.1. Order Validation Checks

The following order validation checks will apply to Unit Dose orders and to intermittent IV orders.

Note: IV orders do not have Schedule Type.

- **Order Validation Check One**
  For intermittent IV orders, references to an order's Schedule Type will refer to either the TYPE OF SCHEDULE from the Administration Schedule file (#51.1), or PRN for schedule names in PRN format, or CONTINUOUS for schedule names in Day of Week format.

- **Order Validation Check Two**
  The system shall use the schedule type of the schedule from the Administration Schedule file independent of the schedule name when processing an order to determine if administration times are required for a particular order.

- **Order Validation Check Three**
  If an order has the Schedule Type of Continuous, the Schedule entered is NOT in Day of Week (Ex. MO-FR) or PRN (Ex. TID PC PRN) format, and the frequency associated with the schedule is one day (1440 minutes) or less, the system will not allow the number of administration times associated with the order to be greater than the number of administration times calculated for that frequency. The system will allow for the number of administration times to be LESS than the calculated administration times for that frequency but not less than one administration time. (For example, an order with a schedule of BID is associated with a frequency of 720 minutes. The frequency is divided into 1440 minutes (24 hours) and the resulting calculated administration time is two. For this order, the number of administration times allowed may be no greater than two, but no less than one. Similarly, a schedule frequency of 360 minutes must have at least one administration time but cannot exceed four administration times.)

  If an order has the Schedule Type of Continuous, the Schedule entered is NOT in Day of Week (Ex. MO-FR) or PRN (Ex. TID PC PRN) format, and the frequency associated with the schedule is **greater than one day** (1440 minutes) and evenly divisible by 1440, only one administration time is permitted. (For example, an order with a schedule frequency of 2880 minutes must have ONLY one administration time. If the frequency is greater than 1440 minutes and not evenly divisible by 1440, no administration times will be permitted.)

  The system shall present warning/error messages to the user if the number of administration times is less than or greater than the maximum admin times calculated for the schedule or if no administration times are entered. If the number of administration times entered is less than the maximum admin times calculated for the schedule, the warning message: "The number of admin times entered is fewer than indicated by the schedule." shall appear. In this case, the user will be allowed to continue after the

warning. If the number of administration times entered is greater than the maximum admin times calculated for the schedule, the error message: “The number of admin times entered is greater than indicated by the schedule.” shall appear. In this case, the user will not be allowed to continue after the warning. If no admin times are entered, the error message: “This order requires at least one administration time.” shall appear. The user will not be allowed to accept the order until at least one admin time is entered.

- **Order Validation Check Four**
  If an order has a Schedule Type of Continuous and is an Odd Schedule {a schedule whose frequency is not evenly divisible by or into 1440 minutes (1 day)}, the system shall prevent the entry of administration times. For example, Q5H, Q17H – these are not evenly divisible by 1440. In these cases, the system shall prevent access to the administration times field. No warning message is presented.

- **Order Validation Check Five**
  If an order has a Schedule Type of Continuous with a non-odd frequency of greater than one day, (1440 minutes) the system shall prevent more than one administration time, for example, schedules of Q72H, Q3Day, and Q5Day.

  If the number of administration times entered exceeds one, the error message: “This order requires one admin time” shall appear. If no administration times are entered, the error message: “This order requires at least one administration time.” shall appear. The user will not be allowed to accept the order until at least one admin time is entered.

- **Order Validation Check Six**
  If an order has a Schedule Type of One Time, or if an order is entered with a schedule that is defined in the schedule file as One Time, the system shall prevent the user from entering more than one administration time.

  If more than one administration time is entered, the error message: “This is a One Time Order - only one administration time is permitted.” shall appear. No administration times are required.

- **Order Validation Check Seven**
  For an order with a Schedule Type of Continuous where no doses/administration times are scheduled between the order’s Start Date/Time and the Stop Date/Time, the system shall present a warning message to the user and not allow the order to be accepted or verified until the Start/Stop Date Times, schedule, and/or administration times are adjusted so that at least one dose is scheduled to be given.

  If the stop time will result in no administration time between the start time and stop time, the error message: “There must be an admin time that falls between the Start Date/Time and Stop Date/Time.” shall appear.

4.9.2. Display of Provider Overrides and Pharmacist Interventions

In Inpatient Medications, the first time a field preceded by an asterisk (*) is selected for editing and when renewing an order, if Current Pharmacist Interventions exist for the order, entering Y (Yes) at the prompt, “Order Check Overrides/Interventions exist for this order. Display? (Y/N)? Y//,” will display the following information when the fields are populated with data:

- Heading: **Current Pharmacist Interventions for this order**
- Intervention Date/Time
- Provider
- Pharmacist
- Drug,
- Instituted By
- Intervention
- Other For Recommendation
- Originating Package
- Was Provider Contacted
- Provider Contacted
- Recommendation Accepted
- Agree With Provider
- Rx #
- Division
- Financial Cost
- Other For Intervention
- Reason For Intervention
- Action Taken
- Clinical Impact
- Financial Impact

```
============================================================================
        ** Current Provider Overrides for this order **
============================================================================

Overriding Provider: PSJPROVIDER,ONE  (PROVIDER)
Override Entered By: PSJPROVIDER,ONE  (PROVIDER)
  Date/Time Entered: 7/12/11 09:13
    Override Reason: Testing 9 OTHER

  CRITICAL drug-drug interaction: METRONIDAZOLE 250MG TAB and WARFARIN NA
  (GOLDEN STATE) 2MG TAB [ACTIVE] - Concurrent use of anticoagulants with
  metronidazole or tinidazole may result in reduced prothrombin activity and/or
  increased risk of bleeding. - Monograph Available

  CRITICAL drug-drug interaction: METRONIDAZOLE 250MG TAB and WARFARIN(GOLDEN
  ST) 0.5MG(1/2X1MG) TAB [UNRELEASED] - Concurrent use of anticoagulants with
  metronidazole or tinidazole may result in reduced prothrombin activity and/or
  increased risk of bleeding. - Monograph Available

Press RETURN to Continue or '^' to Exit :


============================================================================
        ** Current Pharmacist Interventions for this order **
============================================================================

Intervention Date: 7/12/11 09:14
 Provider: PSJPROVIDER,ONE                  Pharmacist: PSJPHARMACIST,ONE
```

```
 Drug: METRONIDAZOLE 250MG TAB              Instituted By: PHARMACY
 Intervention: CRITICAL DRUG INTERACTION
 Recommendation: OTHER                      Originating Package: INPATIENT
 Other For Recommendation:
  INTERVENTION FOR CRITICAL DRUG-DRUG
Press RETURN to Continue or '^' to Exit :
```

Intervention TIME displays to the right of the date (e.g., 01/18/11 09:04)

If Historical Overrides/Interventions exist for an order, entering Y (Yes) at the prompt: “View Historical Overrides/Interventions for this order (Y/N)? Y//,” displays the Historical Pharmacist Intervention information:

```
==============================================================================
        ** Historical Pharmacist Interventions for this order **
==============================================================================

Intervention Date: 07/12/11 09:14
 Provider: PSJPROVIDER,ONE                  Pharmacist: PSJPHARMACIST,ONE
 Drug: METRONIDAZOLE 250MG TAB              Instituted By: PHARMACY
 Intervention: CRITICAL DRUG INTERACTION
 Recommendation: OTHER                      Originating Package: INPATIENT
 Other For Recommendation:
  Testing 9 OTHER


Press RETURN to Continue or '^' to Exit :

==============================================================================
        ** Historical Provider Overrides for this order **
==============================================================================

Overriding Provider: PSJPROVIDER,ONE (PROVIDER)
Override Entered By: PSJPROVIDER,ONE (PROVIDER)
  Date/Time Entered: 07/12/11 09:13
    Override Reason: Testing 9 OTHER

  CRITICAL drug-drug interaction: METRONIDAZOLE 250MG TAB and WARFARIN NA
  (GOLDEN STATE) 2MG TAB [ACTIVE] - Concurrent use of anticoagulants with
  metronidazole or tinidazole may result in reduced prothrombin activity and/or
  increased risk of bleeding. - Monograph Available

  CRITICAL drug-drug interaction: METRONIDAZOLE 250MG TAB and WARFARIN(GOLDEN
  ST) 0.5MG(1/2X1MG) TAB [UNRELEASED] - Concurrent use of anticoagulants with
  metronidazole or tinidazole may result in reduced prothrombin activity and/or
  increased risk of bleeding. - Monograph Available
```

Intervention TIME displays to the right of the date (e.g., 01/18/11 09:04. Current Pharmacist Intervention fields and labels also display, when the fields are populated.

Note: In Inpatient Medications, if no Current Pharmacist Interventions exist when editing a field preceded by an asterisk (*),the following displays:

```
==============================================================================
        ** Current Pharmacist Interventions for this order **
==============================================================================

No Pharmacist Interventions to display
```

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, by group (**G**), ward (**W**), clinic (**C**), or patient (**P**). When group is selected, a prompt to select by ward group (**W**) or clinic group (**C**) displays. 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.

Example: Patient Profile

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

Select by GROUP (G), WARD (W), CLINIC (C), or PATIENT (P): P  Patient <Enter>

Select PATIENT: PSJPATIENT1,ONE     000-00-0001   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
                       SAMPLE HEALTHCARE SYSTEM
- - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
PSJPATIENT1,ONE              Ward: 1 EAST
    PID: 000-00-0001      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                        C  09/07  09/21  A   NF
           Give: 500MG PO QID
   2  -> HYDROCORTISONE CREAM,TOP              C  09/07  09/21  A   NF
           Give: 1% TOP QDAILY
   3  -> PROPRANOLOL 10MG U/D                  C  09/07  09/21  A   NF
           Give:  PO QDAILY

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

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

Example: Patient Profile (continued)

```
     ----------------------------------------------------------------------
Patient: PSJPATIENT1,ONE                        Status: ACTIVE
Orderable Item: AMPICILLIN CAP
  Instructions:
Dosage Ordered: 500MG
      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: PSJPROVIDER,ONE  [w]
                                                 Units   Units   Inactive
 Dispense Drugs                             U/D  Disp'd  Ret'd   Date
-------------------------------------------------------------------------------
 AMPICILLIN 500MG CAP                       1    0       0

ORDER NOT VERIFIED
Self Med: NO
Entry By: PSJPROVIDER,ONE                            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
          AUthorized Absence/Discharge Summary
          Extra Units Dispensed Report
          Free Text Dosage Report
          INpatient Stop Order Notices
          Medications Due Worksheet
          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
- Ward/Clinic*
- Patient demographic data
- Time line
- Information about each order

*For Outpatients receiving Inpatient Medication orders in an appropriate clinic.

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 group (**G**), ward (**W**) , clinic (**C**) , or patient (**P**). When group is selected, a prompt to select by ward group (**W**) or clinic group (**C**) displays. 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 a 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, administration teams may be specified and the MAR may be sorted by administration team, and then by room-bed or patient name. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward group, the MAR may be sorted by room-bed or patient name. When the report is printed by clinic or clinic group, and the order is for an outpatient, the report leaves Room/Bed blank.

When selecting by Ward, Ward Group, Clinic, or Clinic Group, the following prompts are included. All orders for a patient are grouped together by the patient's name, regardless of location.

Select by Ward:

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

Include Clinic Orders?
```

Entering **YES** for Clinic Orders prints both ward and clinic orders for patients on a ward.
Entering **NO** for Clinic Orders prints only the ward orders.

Select by Ward Group:

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

Include Clinic Orders?
```

Entering **YES** for Clinic Orders prints both ward and clinic orders for patients in a Ward Group.
Entering **NO** for Clinic Orders prints only the ward orders for patients in a Ward Group.

Select by Clinic:

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

Include Ward Orders?
```

Entering **YES** for Ward Orders prints both clinic and ward orders for patients in a clinic.
Entering **NO** for Ward Orders prints only the clinic orders.

Select by Clinic Group:

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

Include Ward Orders?
```

Entering **YES** for Ward Orders prints both clinic and ward orders for patients in a Clinic Group.
Entering **NO** for Ward Orders prints only the clinic orders for patients in a Clinic Group.

(*This page included for two-sided copying)*

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 <u>never</u> 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 GROUP (G), WARD (W), CLINIC (C), or PATIENT (P): PATIENT <Enter>

Select PATIENT:    PSJPATIENT1,ONE      000-00-0001   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 continues----------

Example: 24 Hour MAR (continued)

```
CONTINUOUS SHEET                          24 HOUR MAR          09/07/2000  12:00  through  09/08/2000  11:59
SAMPLE HEALTHCARE SYSTEM                                                          Printed on   09/20/2000  16:15
     Name:  PSJPATIENT1,ONE                      Weight (kg): ______ (________)           Ward: 1 EAST
      PID:  000-00-0001  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:
                                Admin
Order  Start    Stop            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
-------------------------------------------------------------------------------------------------------------------
      |        |

      -------------------------------------------------------------------------------------------------------------
      |        |

      -------------------------------------------------------------------------------------------------------------
      |        |

      -------------------------------------------------------------------------------------------------------------
      |        |

      -------------------------------------------------------------------------------------------------------------
      |        |

      -------------------------------------------------------------------------------------------------------------
      |        |

-------------------------------------------------------------------------------------------------------------------
|  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|--------------------|------------|------|
-------------------------------------------------------------------------------------------------------------------
   PSJPATIENT1,ONE          000-00-0001  Room-Bed: B-12                                   VA FORM 10-2970
```

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

Example: 24 Hour MAR (continued)

```
ONE-TIME/PRN SHEET                          24 HOUR MAR          09/07/2000  12:00  through  09/08/2000  11:59
SAMPLE HEALTHCARE SYSTEM                                                          Printed on   09/20/2000  16:15
     Name: PSJPATIENT1,ONE                        Weight (kg): ______ (________)           Ward: 1 EAST
     PID:  000-00-0001  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:
                              Admin
Order  Start     Stop         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
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|   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|--------------------|------------|------|
-------------------------------------------------------------------------------------------------------------------
   PSJPATIENT1,ONE          000-00-0001  Room-Bed: B-12                                          VA FORM 10-5568d
```

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

Example: 24 Hour MAR (continued)

```
CONTINUOUS SHEET                                    24 HOUR MAR                    09/07/2000  12:00  through  09/08/2000  11:59
 SAMPLE HEALTHCARE SYSTEM                                                                  Printed on   09/20/2000  16:15
     Name: PSJPATIENT1,ONE                                      Weight (kg): ______ (________)              Ward: 1 EAST
     PID:  000-00-0001  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:
                                          Admin
Order   Start   Stop                      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
-----------------------------------------------------------------------------------------------------------------------------
      |           |                       |01    |
09/07 |09/07 15:00|09/21/00 24:00(A9111)  |09    |
AMPICILLIN CAP                          C|15    |         15             20             01                     09
Give: 500MG PO QID                        |20    |
                                          |      |
                       RPH: PI   RN: _____|      |
       -----------------------------------------------------------------------------------------------------------------------
      |           |                       |01    |
09/07 |09/07 15:00 |09/14/00 16:54(A9111) |09    |
AMPICILLIN 1 GM                         C|15    |         15             20             01                     09
in  0.9% NACL 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(A9111) |      |
HYDROCORTISONE CREAM,TOP                C|17    |
Give: 1% TOP QDAILY                          |      |
                                          |      |
                       RPH: PI   RN: _____|      |
       -----------------------------------------------------------------------------------------------------------------------
      |           |                       |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|
09/07 |09/07 17:00 |09/07/00 12:50 (A9111) |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|
METHYLPREDNISOLNE INJ                   C|09    |****|****|****|****|****|****|****|****|****|****|****|****|****|****|****|
Give: 500MG IV Q12H                       |21    |****|****|****|****|****|****|****|****|****|****|****|****|****|****|****|
THIS IS AN INPATIENT IV EXAMPLE           |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                        RPH: MLV  RN: _____|      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
       -----------------------------------------------------------------------------------------------------------------------
-
      |           |                       |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|
09/07 |09/07 17:00 |09/07/00 12:50 (A9111) |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|
METHYLPREDNISOLNE INJ                   C|17    |****|****|****|****|****|****|****|****|****|****|****|****|****|****|****|
Give: 1000MG IV QDAILY                    |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
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|------------------------|----------------|------|
-----------------------------------------------------------------------------------------------------------------------------
   PSJPATIENT1,ONE                      000-00-0001  Room-Bed: B-12                          PAGE: 1         VA FORM 10-2970
```

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

Example: 24 Hour MAR (continued)

```
ONE-TIME/PRN SHEET                          24 HOUR MAR          09/07/2000  12:00  through  09/08/2000  11:59
 SAMPLE HEALTHCARE SYSTEM                                                   Printed on   09/20/2000  16:15
     Name: PSJPATIENT1,ONE                    Weight (kg): ______ (________)           Ward: 1 EAST
     PID:  000-00-0001  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:
                                 Admin
Order  Start    Stop             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
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       |       |

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       |       |

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       |       |

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       |       |

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       |       |

       -------------------------------------------------------------------------------------------------------------
       |       |

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|   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|--------------------|------------|------|
-------------------------------------------------------------------------------------------------------------------
   PSJPATIENT1,ONE          000-00-0001     Room-Bed: B-12                   LAST PAGE: 2    VA FORM 10-5568d
```

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
- Ward/Clinic*
- Patient demographic data
- Time line
- Information about each order

*For Outpatients receiving Inpatient Medication orders in an appropriate clinic.

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 group (**G**), ward (**W**), clinic (**C**) , or patient (**P**). When group is selected, a prompt to select by ward group (**W**) or clinic group (**C**) displays. 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 a 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, administration teams may be specified and the MAR may be sorted by administration team, and then by room-bed or patient name. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward group, the MAR may be sorted by room-bed or patient name. When the report is printed by clinic or clinic group, and the order is for an outpatient, the report leaves Room/Bed blank.

When selecting by Ward, Ward Group, Clinic, or Clinic Group, the following prompts are included. All orders for a patient are grouped together by the patient's name, regardless of location.

Select by Ward:

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

Include Clinic Orders?
```

Entering **YES** for Clinic Orders prints both ward and clinic orders for patients on a ward.
Entering **NO** for Clinic Orders prints only the ward orders.

Select by Ward Group:

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

Include Clinic Orders?
```

Entering **YES** for Clinic Orders prints both ward and clinic orders for patients in a Ward Group.
Entering **NO** for Clinic Orders prints only the ward orders for patients in a Ward Group.

Select by Clinic:

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

Include Ward Orders?
```

Entering **YES** for Ward Orders prints both clinic and ward orders for patients in a clinic.
Entering **NO** for Ward Orders prints only the clinic orders.

Select by Clinic Group:

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

Include Ward Orders?
```

Entering **YES** for Ward Orders prints both clinic and ward orders for patients in a Clinic Group.
Entering **NO** for Ward Orders prints only the clinic orders for patients in a Clinic Group.

(*This page included for two-sided copying.)*

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 <u>never</u> 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 GROUP (G), WARD (W), CLINIC (C), or PATIENT (P): PATIENT <Enter>

Select PATIENT:    PSJPATIENT1,ONE        000-00-0001   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 continues----------

Example: 7 Day MAR (continued)

```
CONTINUOUS SHEET                          7 DAY MAR                          09/07/2000  through  09/13/2000
 SAMPLE HEALTHCARE SYSTEM                                                      Printed on  09/20/2000  16:14
      Name: PSJPATIENT1,ONE                     Weight (kg): ______ (________)           Loc: 1 EAST
      PID:  000-00-0001  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:
                             Admin
Order   Start     Stop       Times    09/07    09/08    09/09    09/10    09/11    09/12    09/13      notes
-------------------------------------------------------------------------------------------------------------
      |         |                   |________|________|________|________|________|________|________|
                                    |________|________|________|________|________|________|________|
                                    |________|________|________|________|________|________|________|
                                    |________|________|________|________|________|________|________|
                                    |________|________|________|________|________|________|________|
-------------------------------------------------------------------------------------------------------------
      |         |                   |________|________|________|________|________|________|________|
                                    |________|________|________|________|________|________|________|
                                    |________|________|________|________|________|________|________|
                                    |________|________|________|________|________|________|________|
                                    |________|________|________|________|________|________|________|
-------------------------------------------------------------------------------------------------------------
      |         |                   |________|________|________|________|________|________|________|
                                    |________|________|________|________|________|________|________|
                                    |________|________|________|________|________|________|________|
                                    |________|________|________|________|________|________|________|
                                    |________|________|________|________|________|________|________|
-------------------------------------------------------------------------------------------------------------
      |         |                   |________|________|________|________|________|________|________|
                                    |________|________|________|________|________|________|________|
                                    |________|________|________|________|________|________|________|
                                    |________|________|________|________|________|________|________|
                                    |________|________|________|________|________|________|________|
-------------------------------------------------------------------------------------------------------------
|  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 |--------------------|------------|------|
-------------------------------------------------------------------------------------------------------------
   PSJPATIENT1,ONE              000-00-0001  Room-Bed: B-12                                  VA FORM 10-2970
```

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

Example: 7 Day MAR (continued)

```
ONE-TIME/PRN SHEET                          7 DAY MAR                        09/07/2000  through  09/13/2000
     SAMPLE HEALTHCARE SYSTEM                                                   Printed on  09/20/2000  16:14
      Name: PSJPATIENT1,ONE                     Weight (kg): ______ (________)           Loc: 1 EAST
      PID:  000-00-0001  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                                          Order   Start       Stop
-----------------------------------------------------------------------------------------------------------------
      |          |                        |                   |       |           |
                                          |                   |
                                          |                   |
                                          |                   |
                                          |                   |
                                          |                   |
-----------------------------------------------------------------------------------------------------------------
      |          |                        |                   |       |           |
                                          |                   |
                                          |                   |
                                          |                   |
                                          |                   |
                                          |                   |
-----------------------------------------------------------------------------------------------------------------
|  DATE  |  TIME  |  MEDICATION/DOSE/ROUTE     | INIT |      REASON       |     RESULTS       |  TIME  | INIT |
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
|--------|--------|----------------------------|------|-------------------|-------------------|--------|------|
-----------------------------------------------------------------------------------------------------------------
|    SIGNATURE/TITLE        | INIT |          INJECTION SITES           |      SIGNATURE/TITLE          | 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 |-------------------------------|------|
-----------------------------------------------------------------------------------------------------------------
   PSJPATIENT1,ONE               000-00-0001  Room-Bed: B-12                                VA FORM 10-5568d
```

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

Example: 7 Day MAR (continued)

```
CONTINUOUS SHEET                                    7 DAY MAR                                    09/07/2000  through  09/13/2000
     SAMPLE HEALTHCARE SYSTEM                                                                       Printed on  09/20/2000
16:14
     Name: PSJPATIENT1,ONE                              Weight (kg): ______ (________)                     Loc: 1 EAST
     PID:  000-00-0001  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:
                                                 Admin
 Order   Start       Stop                        Times    09/07     09/08     09/09     09/10     09/11     09/12     09/13     notes
-----------------------------------------------------------------------------------------------------------------------------------------
-
      |           |                              |01    |*********|_________|_________|_________|_________|________|_________|
09/07 |09/07 15:00 |09/21/00 24:00(A9111)        |09    |*********|_________|_________|_________|_________|________|_________|
AMPICILLIN CAP                                 C|15    |_________|_________|_________|_________|_________|________|_________|
Give: 500MG PO QID                               |20    |_________|_________|_________|_________|_________|________|_________|
                                                 |      |_________|_________|_________|_________|_________|________|_________|
                          RPH: PI   RN: _____|      |         |         |         |         |         |        |         |
      -----------------------------------------------------------------------------------------------------------------------------
-
      |           |                              |01    |*********|_________|_________|_________|_________|_________|________|
09/07 |09/07 15:00 |09/14/00 16:54(A9111)        |09    |*********|_________|_________|_________|_________|_________|________|
AMPICILLIN 1 GM                                C|15    |_________|_________|_________|_________|_________|_________|________|
in  0.9% NACL 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 12:34(A9111)        |      |_________|_________|_________|_________|_________|_________|________|
HYDROCORTISONE CREAM,TOP                       C|17    |*********|*********|*********|*********|*********|*********|********|
Give: 1% 0 QDAILY                                |      |_________|_________|_________|_________|_________|_________|________|
                                                 |      |_________|_________|_________|_________|_________|_________|________|
                          RPH: MLV  RN: _____|      |         |         |         |         |         |         |        |
      -----------------------------------------------------------------------------------------------------------------------------
-
      |           |                              |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|
09/07 |09/07 17:00 |09/07/00 12:50 (A9111)       |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|
METHYLPREDNISOLNE INJ                          C|09    |****|****|****|****|****|****|****|****|****|****|****|****|****|****|****|
Give: 500MG IV Q12H                              |21    |****|****|****|****|****|****|****|****|****|****|****|****|****|****|****|
THIS IS AN INPATIENT IV EXAMPLE                  |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                           RPH: MLV  RN: _____|      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
      -----------------------------------------------------------------------------------------------------------------------------
-
      |           |                              |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|
09/07 |09/07 17:00 |09/07/00 12:50 (A9111)       |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|
METHYLPREDNISOLNE INJ                          C|17    |****|****|****|****|****|****|****|****|****|****|****|****|****|****|****|
Give: 1000MG IV QDAILY                           |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
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 |------------------------|----------------|---------
|
-----------------------------------------------------------------------------------------------------------------------------------------
-
   PSJPATIENT1,ONE                000-00-0001  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.

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

*For Outpatients receiving Inpatient Medication orders in an appropriate clinic.

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 group (**G**), ward (**W**), clinic (**C**) , or patient (**P**). When group is selected, a prompt to select by ward group (**W**) or clinic group (**C**) displays. 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 a 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, administration teams may be specified and the MAR may be sorted by administration team, and then by room-bed or patient name. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward group, the MAR may be sorted by room-bed or patient name. When the report is printed by clinic or clinic group, and the order is for an outpatient, the report leaves Room/Bed blank.

When selecting by Ward, Ward Group, Clinic, or Clinic Group, the following prompts are included. All orders for a patient are grouped together by the patient's name, regardless of location.

Select by Ward:

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

Include Clinic Orders?
```

Entering **YES** for Clinic Orders prints both ward and clinic orders for patients on a ward.
Entering **NO** for Clinic Orders prints only the ward orders.

Select by Ward Group:

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

Include Clinic Orders?
```

Entering **YES** for Clinic Orders prints both ward and clinic orders for patients in a Ward Group.
Entering **NO** for Clinic Orders prints only the ward orders for patients in a Ward Group.

Select by Clinic:

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

Include Ward Orders?
```

Entering **YES** for Ward Orders prints both clinic and ward orders for patients in a clinic.
Entering **NO** for Ward Orders prints only the clinic orders.

Select by Clinic Group:

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

Include Ward Orders?
```

Entering **YES** for Ward Orders prints both clinic and ward orders for patients in a Clinic Group.
Entering **NO** for Ward Orders prints only the clinic orders for patients in a Clinic Group.

(*This page included for two-sided copying.)*

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 <u>never</u> 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

```
Select Reports Menu Option:  14 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 14 day MAR: 090700@1200  (SEP 07, 2000@12:00:00)

Select by GROUP (G), WARD (W), CLINIC (C), or PATIENT (P): PATIENT <Enter>

Select PATIENT:    PSJPATIENT1,ONE     000-00-0001   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 continues----------

Example: 14 Day MAR Report (continued)

```
 CONTINUOUS SHEET                          14 DAY MAR                          09/07/2000  through  09/20/2000
     SAMPLE HEALTHCARE SYSTEM                                                    Printed on  09/20/2000  16:11
      Name: PSJPATIENT1,ONE                      Weight (kg): ______ (________)           Loc: 1 EAST
      PID:  000-00-0001  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:
                              Admin   SEP
Order   Start     Stop      Times   07   08   09   10   11   12   13   14   15   16   17   18   19   20  notes
-------------------------------------------------------------------------------------------------------------------
      |         |                  |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
-------------------------------------------------------------------------------------------------------------------
      |         |                  |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
-------------------------------------------------------------------------------------------------------------------
      |         |                  |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
-------------------------------------------------------------------------------------------------------------------
      |         |                  |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
-------------------------------------------------------------------------------------------------------------------
      |         |                  |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                   |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
-------------------------------------------------------------------------------------------------------------------
|     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 |--------------------|------------|------|
-------------------------------------------------------------------------------------------------------------------
   PSJPATIENT1,ONE            000-00-0001  Room-Bed: B-12                                    VA FORM 10-2970
```

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

Example: 14 Day MAR (continued)

```
ONE-TIME/PRN SHEET                              14 DAY MAR                    09/07/2000  through  09/20/2000
     SAMPLE HEALTHCARE SYSTEM                                                   Printed on  09/20/2000  16:11
      Name: PSJPATIENT1,ONE                      Weight (kg): ______ (________)           Ward: 1 EAST
      PID:  000-00-0001  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                                     Order   Start       Stop
-------------------------------------------------------------------------------------------------------------
      |           |                   |                   |       |           |
                                      |                   |
                                      |                   |
                                      |                   |
                                      |                   |
-------------------------------------------------------------------------------------------------------------
      |           |                   |                   |       |           |
                                      |                   |
                                      |                   |
                                      |                   |
                                      |                   |
-------------------------------------------------------------------------------------------------------------
|  DATE  |  TIME  |     MEDICATION/DOSE/ROUTE     | INIT |      REASON      |    RESULTS      |  TIME  | INIT |
|--------|--------|-------------------------------|------|------------------|-----------------|--------|------|
```

Example: 14 Day MAR (continued)

```
CONTINUOUS SHEET                                        14 DAY MAR                                  09/07/2000  through  09/20/2000
     SAMPLE HEALTHCARE SYSTEM                                                                          Printed on  09/20/2000  16:11
     Name:  PSJPATIENT1,ONE                                     Weight (kg): ______ (________)                Ward: 1 EAST
      PID:  000-00-0001  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:
                                          Admin   SEP
 Order   Start       Stop                 Times   07   08   09   10   11   12   13   14   15   16   17   18   19   20   notes
-----------------------------------------------------------------------------------------------------------------------------------
-
     |           |                        |01    |****|____|____|____|____|____|____|____|____|____|____|____|____|____|____|
09/07 |09/07 15:00 |09/21/00 24:00 (A9111)  |09    |****|____|____|____|____|____|____|____|____|____|____|____|____|____|____|
AMPICILLIN CAP                            C|15    |____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|
Give: 500MG PO QID                        |20    |____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                          |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                         RPH: PI   RN: _____|      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
      -----------------------------------------------------------------------------------------------------------------------------
-
     |           |                        |01    |****|____|____|____|____|____|____|____|****|****|****|****|****|****|
09/07 |09/07 15:00 |09/14/00 16:54 (A9111)  |09    |****|____|____|____|____|____|____|____|****|****|****|****|****|****|
AMPICILLIN 1 GM                           C|15    |____|____|____|____|____|____|____|____|****|****|****|****|****|****|
in  0.9% NACL 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 12:34 (A9111)  |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
HYDROCORTISONE CREAM,TOP                  C|17    |****|****|****|****|****|****|****|****|****|****|****|****|****|****|
Give: 1% 0 QDAILY                         |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                                          |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                         RPH: MLV  RN: _____|      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
      -----------------------------------------------------------------------------------------------------------------------------
-
     |           |                        |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
09/07 |09/07 17:00 |09/07/00 12:50 (A9111)  |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
METHYLPREDNISOLNE INJ                     C|09    |****|****|****|****|****|****|****|****|****|****|****|****|****|****|
Give: 500MG IV Q12H                       |21    |****|****|****|****|****|****|****|****|****|****|****|****|****|****|
THIS IS AN INPATIENT IV EXAMPLE           |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
                         RPH: MLV  RN: _____|      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
      -----------------------------------------------------------------------------------------------------------------------------
-
     |           |                        |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
09/07 |09/07 17:00 |09/07/00 12:50 (A9111)  |      |____|____|____|____|____|____|____|____|____|____|____|____|____|____|
METHYLPREDNISOLNE INJ                     C|17    |****|****|****|****|****|****|****|****|****|****|****|****|****|****|
Give: 1000MG IV QDAILY                    |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
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 |------------------------|----------------|--------
|
-----------------------------------------------------------------------------------------------------------------------------------
-
   PSJPATIENT1,ONE                 000-00-0001  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 (**G**), ward (**W**) , or patient (**P**). 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. Entering a Ward Group of ^OTHER will automatically sort by patient and print a report for Outpatients that are receiving Inpatient Medications and that meet the report parameters. 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.

Start and stop dates will be prompted next. If the user chooses to enter a start and stop date, only patients with active orders occurring between those dates will print. 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.

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 <Enter>

Select PATIENT: PSJPATIENT1,ONE      000-00-0001   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>
```

```
                          UNIT DOSE ACTION PROFILE #1         09/11/2000  11:01
                           SAMPLE HEALTHCARE SYSTEM
                       (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.
-------------------------------------------------------------------------------
 PSJPATIENT1,ONE              Ward: 1 EAST
    PID: 000-00-0001      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                                ST Start Stop  Status/Info
 - - - - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - -
  1  R D N AMPICILLIN 1 GM                            C  09/07 09/14 A
           in 0.9% NACL 100 ML QID
           Special Instructions: THIS IS AN INPATIENT IV EXAMPLE

  2  R D N AMPICILLIN CAP                            C  09/07 09/21 A
           Give: 500MG PO QID

  3  R D N HYDROCORTISONE CREAM,TOP                  C  09/07 09/21 A
           Give: 1% TOP QDAILY
  4  R D N MULTIVITAMINS 5 ML                        C  09/07 09/12 A
           in 0.9% NACL 1000 ML 20 ml/hr

  5  R D N PROPRANOLOL 10MG U/D                      C  09/07 09/21 A
           Give:  PO QDAILY


                _________________      ____________________________________
                Date AND Time          PHYSICIAN'S SIGNATURE


          MULTIDISCIPLINARY REVIEW
                (WHEN APPROPRIATE)     ____________________________________
                                       PHARMACIST'S SIGNATURE

                                         ________________________________________
                                         NURSE'S SIGNATURE
```

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

Example: Action Profile #1 Report (continued)

```
  ADDITIONAL MEDICATION ORDERS:
--------------------------------------------------------------------------------
--------------------------------------------------------------------------------
--------------------------------------------------------------------------------
--------------------------------------------------------------------------------
--------------------------------------------------------------------------------

                _________________      ____________________________________
                Date AND Time          PHYSICIAN'S SIGNATURE

 PSJPATIENT1,ONE                 000-00-0001                 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 group (**G**), ward (**W**), clinic (**C**), or patient (**P**). When group is selected, a prompt to select by ward group (**W**) or clinic group (**C**) displays. 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 then be asked to sort (print) Action Profiles by team (**T**) or treating provider (**P**). If Ward Group of ^OTHER is entered, the user will not be given a sort (print) option; it will automatically sort by treating provider and print a report of Outpatients that are receiving Inpatient Medications and that meet the report parameters.

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.

There are six medication choices. The user may select multiple choices of medications to be printed on the Action Profile #2 report. Since the first choice is ALL Medications, the user will not be allowed to combine this with any other choices.

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 GROUP (G), WARD (W), CLINIC (C), or PATIENT (P): PATIENT <Enter>

Select PATIENT: PSJPATIENT1,ONE        000-00-0001   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 continues----------

Example: Action Profile #2 (continued)

```
                          UNIT DOSE ACTION PROFILE #2         09/11/2000  11:03
                           SAMPLE HEALTHCARE SYSTEM
                       (Continuation of VA FORM 10-1158)               Page: 1
-------------------------------------------------------------------------------
   A new order must be written for any new medication or to make any changes
 in dosage or directions on an existing order.
-------------------------------------------------------------------------------
                                Team: NOT FOUND
 PSJPATIENT1,ONE                Ward: 1 EAST
    PID: 000-00-0001        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                          ST Start Stop  Status/Info
 - - - - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - -
1  AMPICILLIN 1 GM                             C  09/07 09/14 A
     in 0.9% NACL 100 ML QID
     Special Instructions: THIS IS AN INPATIENT IV EXAMPLE

     __TAKE NO ACTION     __DISCONTINUE     __RENEW   COST/DOSE: 1.32
  ---------------------------------------------------------------------------

2  AMPICILLIN CAP                              C  09/07 09/21 A
     Give: 500MG PO QID

     __TAKE NO ACTION     __DISCONTINUE     __RENEW   COST/DOSE: 0.731
  ---------------------------------------------------------------------------

3  HYDROCORTISONE CREAM,TOP                    C  09/07 09/21 A
     Give: 1% TOP QDAILY

     __TAKE NO ACTION     __DISCONTINUE     __RENEW   COST/DOSE: 0.86
  ---------------------------------------------------------------------------

4  MULTIVITAMINS 5 ML                          C  09/07 09/12 A
     in 0.9% NACL 1000 ML 20 ml/hr


     __TAKE NO ACTION     __DISCONTINUE     __RENEW   COST/DOSE: 468.795
  ---------------------------------------------------------------------------

                _________________       ________________________________________
                Date AND Time           PHYSICIAN'S SIGNATURE



          MULTIDISCIPLINARY REVIEW
                (WHEN APPROPRIATE)      ________________________________________
                                        PHARMACIST'S SIGNATURE

                                        ________________________________________
                                        NURSE'S SIGNATURE

   ADDITIONAL MEDICATION ORDERS:

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

                _________________       ________________________________________
                Date AND Time           PHYSICIAN'S SIGNATURE

  PSJPATIENT1,ONE                000-00-0001                 08/18/1920
```

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 <Enter>

Select PATIENT: PSJPATIENT2,TWO     000-00-0002   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 continues----------

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.
================================================================================
 PSJPATIENT2,TWO              Ward: 1 West
    PID: 000-00-0002      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:

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

                  *** 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

     Service Connected:
     Disabilities: NONE STATED

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

    ___ TAKE NO ACTION (PATIENT WILL NOT RECEIVE MEDICATION)

    Outpatient Directions: ____________________________________________________

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
 PSJPATIENT2,TWO                       000-00-0002         02/22/1942
-------------------------------------------------------------------------------
                                                     Schedule        Cost per
 No.      Medication                                 Type            Dose
-------------------------------------------------------------------------------
  2 BENZOYL PEROXIDE 10% GEL (2OZ)                   CONTINUOUS      3.78
    Inpt Dose: APPLY SMALL AMOUNT TOP QDAILY
    Special Instructions: TEST

    ___ TAKE NO ACTION (PATIENT WILL NOT RECEIVE MEDICATION)

    Outpatient Directions: ____________________________________________

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

    ___________________________________ _____________ ________________________
    Physician's Signature               DEA #         Date AND Time
-------------------------------------------------------------------------------
  3 RANITIDINE 150MG                                 CONTINUOUS      0.5
    Inpt Dose: 150MG PO BID

    ___ TAKE NO ACTION (PATIENT WILL NOT RECEIVE MEDICATION)

    Outpatient Directions: ____________________________________________

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

    ___________________________________ _____________ ________________________
    Physician's Signature               DEA #         Date AND Time
-------------------------------------------------------------------------------
  4 THEO-24 200MG                                    CONTINUOUS      0.086
    Inpt Dose: 400MG PO QID
    Special Instructions: TESTING DO

    ___ TAKE NO ACTION (PATIENT WILL NOT RECEIVE MEDICATION)

    Outpatient Directions: ____________________________________________

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

    ___________________________________ _____________ ________________________
    Physician's Signature               DEA #         Date AND Time
===============================================================================
    OTHER MEDICATIONS:

  5 Medication: ______________________________________________________

    Outpatient Directions: ____________________________________________

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: ____________________________________________

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:
================================================================================
 PSJPATIENT2,TWO              Ward: 1 West
    PID: 000-00-0002      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:
==============================================================================
 PSJPATIENT2,TWO              Ward: 1 West
    PID: 000-00-0002      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:


                    ____________________________________ ________________________
                    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


PSJPATIENT2,TWO                       000-00-0002                 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 <Enter>

Select PATIENT:    PSJPATIENT2,TWO   2-22-42    000000002     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


PSJPATIENT2,TWO                        Room_Bed: A-6
000-00-0002                                Ward: 1 West


DRUG NAME                                        UNIT  DATE            DISP.
                                                       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 PSJPATIENT2,TWO..................     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)

```
                                                                        Page 1
               Inpatient Free Text Dosage Entry Report
                 Period: Sep 29, 2001 to Jan 07, 2002
Drug                                    Free Text Entry                  Count
    Provider:Count
-------------------------------------------------------------------------------

A-METHYL-PARA-TYROSINE CAPS,25 (5098)   100MG                              1
    PSJPROVIDER,ONE:1

ACETAMINOPHEN 325MG C.T. (263)          1000MG                             1
    PSJPROVIDER,TWO:1
                                        100MG                              2
    PSJPROVIDER,THREE:1   PSJPROVIDER,FOUR:1
                                        100mg                              1
    PSJPROVIDER,FOUR:1
                                        300MG                              1
    PSJPROVIDER,TWO:1
                                        325MG                              7
    PSJPROVIDER,ONE:1   PSJPROVIDER,TWO:4
    PSJPROVIDER,FIVE: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.

The next prompt allows the user to select by group (**G**), ward (**W**), clinic (**C**), or patient (**P**). When group is selected, a prompt to select by ward group (**W**) or clinic group (**C**) displays.

Start and stop dates will be prompted next.

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 GROUP (G), WARD (W), CLINIC (C), or PATIENT (P): PATIENT <Enter>

Select PATIENT:    PSJPATIENT2,TWO   000-00-0002   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>
```

```
AS OF: 09/19/00  13:14                                                Page: 1


                    THE FOLLOWING MEDICATIONS WILL EXPIRE
                 FROM 09/19/00  00:01 THROUGH 09/26/00  24:00
          TO CONTINUE MEDICATIONS, PLEASE REORDER ON VA FORM 10-1158.

 PSJPATIENT2,TWO             Ward: 1 West
    PID: 000-00-0002      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
 Allergies: CARAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE, CHOCOLATE,
            NUTS, STRAWBERRIES, DUST
 NV Aller.: AMOXICILLIN, AMPICILLIN, TAPE, FISH, FLUPHENAZINE DECANOATE
       ADR:


 Medication                                ST Start  Stop           Status/Info
   Dosage                                                           Provider
-------------------------------------------------------------------------------

 AMPICILLIN 1 GM                        C  09/19 09/22/00  18:00 A
   in 0.45% NACL 100 ML QID                                PSJPROVIDER,ONE
 IV

 PENTAMIDINE ISETHIONATE 1 MG             C  09/19 09/22/00  18:00 A
   in 0.45% NACL 1000 ML 8 MG/HR                           PSJPROVIDER,ONE
 IV  8 MG/HR@1

 ACETAMINOPHEN 300/CODEINE 30 TAB         C  09/16 09/22/00  22:00 A
 Give: 2TABS PO QDAILY                                   PSJPROVIDER,ONE

 BENZOYL PEROXIDE GEL,TOP                 C  09/19 09/22/00  22:00 A
 Give: APPLY SMALL AMOUNT TOP QDAILY                     PSJPROVIDER,ONE
     Special Instructions: TEST

 RANITIDINE TAB                           C  09/18 09/22/00  22:00 A
 Give: 150MG PO BID                                         PSJPROVIDER,ONE

 THEOPHYLLINE CAP,SA                      C  09/18 09/22/00  22:00 A
 Give: 400MG PO QID                                         PSJPROVIDER,ONE
     Special Instructions: TESTING




PSJPATIENT2,TWO                 000-00-0002   1 West           A-6
```

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.

Note: If you specify ^OTHER as the ward group, it will select orders for outpatients in clinics that allow inpatient medication orders.

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 <Enter>

Select PATIENT:    PSJPATIENT2,TWO  2-22-42    000000002     YES     ACTIVE DUTY

Select another PATIENT: <Enter>
Enter medication type(s): 2// 1
Select output device: 0;80  TELNET
```

```
----------------------------------------report continues-------------------------------
```

Example: Medications Due Worksheet (continued)

```
MEDICATIONS DUE WORKSHEET For: PSJPATIENT2,TWO                    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

PSJPATIENT2,TWO      A-6         12:00 09/18 | 09/18  12:00 | 09/22/00  22:00
000-00-0002                            RANITIDINE TAB
1 West                                 Give: 150MG PO BID
                                       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 1 GM
                                       in
                                       0.45% NACL 1000 ML QID
                                       IV  QID
                                       RN/LPN Init: ________

                                 15:00 09/18 | 09/18  12:00 | 09/22/00  22:00
                                       RANITIDINE TAB
                                       Give: 150MG PO BID
                                       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 BID
                                       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.

```
Select Reports Menu Option: PATient Profile (Extended)

Select PATIENT:    PSJPATIENT1,ONE        000-00-0001  08/18/20    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)
 - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
PSJPATIENT1,ONE                Ward: 1 EAST
   PID: 000-00-0001         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 5 ML                      C  02/28/02  03/30/02  A
         in 0.9% SODIUM CHLORIDE 1000 ML Q8H
   2     BACLOFEN TAB                            C  02/20/02  03/06/02  A
           Give: 10MG PO QDAILY
           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 QDAILY
   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 QDAILY
   7     TRACE ELEMENTS INJ                      ?  ********  ********  N
           Give: 1 ML IV QDAILY
 - - - - - - - - - - - - - - - - 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 QDAILY
 - - - - - - - - - - - - - - - - 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 QDAILY
Enter RETURN to continue or '^' to exit: <Enter>
```

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

Example: Patient Profile (Extended) (continued)

```
     Patient: PSJPATIENT1,ONE                          Status: ACTIVE
*(1)  Additives:             Order number: 29           Type: PIGGYBACK
       MULTIVITAMINS 5 ML
 (2)  Solutions:
       0.9% SODIUM CHLORIDE 1000 ML
           Duration:                              *(4)     Start: 02/28/02  13:56
 (3)  Infusion Rate: INFUSE OVER 8 HOURS.
*(5)      Med Route: IV                        *(6)      Stop: 03/30/02  24:00
*(7)       Schedule: QDAILY                          Last Fill: ********
 (8)    Admin Times: 09-13-17-21                     Quantity: 0
*(9)       Provider: PSJPROVIDER,ONE  [w]          Cum. Doses:
*(10)Orderable Item: MULTIVITAMINS INJ
       Instructions:
 (11)   Other Print:

 (12)  Remarks :
       Entry By: PSJPROVIDER,ONE                   Entry Date: 02/28/02  13:56
ACTIVITY LOG:
#  DATE       TIME      REASON                     USER
==============================================================================
1  FEB 28,2002 13:58:30 VERIFY                     PSJPHARMACIST,ONE
   Comment: ORDER VERIFIED BY PHARMACIST
     -------------------------------------------------------------------
Patient: PSJPATIENT1,ONE                       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: QDAILY
   Admin Times: 1440
      Provider: PSJPROVIDER,ONE [w]
Special Instructions: PATIENT SPITS OUT MEDICINE
                                                 Units   Units   Inactive
 Dispense Drugs                            U/D  Disp'd  Ret'd   Date
------------------------------------------------------------------------------
 BACLOFEN 10MG TABS                        1    0       0

Entry By: PSJPROVIDER,ONE                           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: PSJPHARMACIST,ONE
Activity: ORDER ENTERED AS ACTIVE BY PHARMACIST
     -------------------------------------------------------------------
Patient: PSJPATIENT1,ONE                       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: PSJPROVIDER,ONE [w]
                                                 Units   Units   Inactive
 Dispense Drugs                            U/D  Disp'd  Ret'd   Date
------------------------------------------------------------------------------
 PREDNISONE 5MG TAB                        1    0       0
Self Med: NO
Entry By: PSJPROVIDER,ONE                           Entry Date: 02/25/02  10:58
ACTIVITY LOG:
#  DATE       TIME      REASON                     USER
==============================================================================
    Date: 02/25/02  10:58     User: PSJPHARMACIST,ONE
Activity: ORDER VERIFIED BY PHARMACIST
```

6.3. Align Labels (Unit Dose)

[PSJU AL]

The *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                    SCHEDULE TYPE| D I    XXX-XX-XXXX       DOB (AGE)
           TEAM
 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]

The *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 group (**G**), ward (**W**), clinic (**C**), or patient (**P**). When group is selected, a prompt to select by ward group (**W**) or clinic group (**C**) displays. If ward, ward group, clinic, or clinic group 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 Medications 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. CPRS Order Checks: How They Work

8.1. CPRS Order Checks Introduction

In CPRS, Order Checks occur by evaluating a requested order against existing patient data. Most order checks are processed via the CPRS Expert System. A few are processed within the Pharmacy, Allergy Tracking System, and Order Entry packages. Order Checks are a real-time process that occurs during the ordering session and is driven by responses entered by the ordering provider. Order Check messages are displayed interactively in the ordering session.

Order Checks review existing data and current events to produce a relevant message, which is presented to patient caregivers. Order Checks use the CPRS Expert System (OCX namespace), to define logical expressions for this evaluation and message creation. In addition to the expert system Order Checks have some hard-coded algorithms. For example, the drug-drug interaction order check is made via an entry point in the pharmacy package whereas Renal Functions for Patients Over 65 is defined as a rule in the CPRS Expert System.

8.2. Order Check Data Caching

Data caching was recently added to improve the speed of order checks. Before data caching, order checks could be slow because each order check retrieved data from the other VISTA packages—even if the order checks used the same data. With data caching, the first order check in an ordering session retrieves data from other VISTA packages, uses the data to evaluate whether it should display a warning, and then stores the retrieved data in the ^XTMP("OCXCACHE" global for five minutes. The order checks that occur in the next five minutes can use the cached data, if it is the appropriate data, instead of retrieving data from the other packages. After five minutes, the cached data expires, and order checks must retrieve new data from the VISTA packages.

For example, before data caching was implemented, if an order check took 3 seconds to retrieve data from other VISTA packages, and there were 12 order checks, clinicians might wait 36 seconds to sign orders. With data caching, the first order check might take 3 seconds to retrieve the data, but subsequent order checks could use the cache and might take only .03 seconds each. That would be 3.33 seconds compared to 36 seconds. The numbers in this example are for illustration only and do not reflect real system speed. However, data caching should speed up order checks.

To avoid using all available disk space for storing data from order checks, there are several ways to clear the ^XTMP("OCXCACHE" global. ORMTIME removes data from the global when it runs. The suggested frequency for running ORMTIME is every 30 minutes, but not every site runs it that frequently. Kernel clean up utilities also remove data from the cache when they run, which is usually every 24 hours. If needed, users that have access to the programmer's prompt can manually clear the cache from that prompt by using PURGE^OCXCACHE.

(*This page included for two-sided copying.)*

9. Error Messages

Error Level	Error Message	Reason	Why message is being displayed
System	No Enhanced Order Checks can be performed.	Vendor Database cannot be reached.	The connectivity to the vendor database has gone down. A MailMan message is sent to the G. PSS ORDER CHECKS mail group when the link goes down and when it comes back up.
System	No Enhanced Order Checks can be performed.	The connection to the vendor database has been disabled.	A user has executed the Enable/Disable Vendor Database Link [PSS ENABLE/DISABLE DB LINK] option and disabled the interface.
System	No Enhanced Order Checks can be performed	Vendor database updates are being processed	The vendor database (custom and standard data) is being updated using the DATUP (Data Update) process.
Drug	Enhanced Order Checks cannot be performed for Local or Local Outpatient Drug: <DRUG NAME>	Drug not matched to NDF	The local drug being ordered/ or on profile has not been matched to NDF. Matching the drug to a VA Product will eliminate this message.
Drug	Order Checks could not be done for Drug: <DRUG NAME>, please complete a manual check for Drug Interactions and Duplicate Therapy.		If this error message is displayed, it means that the VA product that the local drug being ordered/or on profile does not have a GCNSEQNO or in rare cases, the GCNSEQNO assigned to the VA Product does not match up with a GCNSEQNO in the vendor database.
Drug	Enhanced Order Checks cannot be performed for Orderable Item: <OI NAME>	No active Dispense Drug found	Highly unlikely that this error would be seen. At the time the order check was being performed the orderable item did not have an active dispense drug associated.
Drug	Enhanced Order Checks cannot be performed for Orderable Item: <OI NAME>	No active, marked for IV Fluid Order Entry IV Additive/Solution found	The orderable item associate with an IV Fluid order did not have an active IV Additive/IV Solution marked for IV fluid order entry use at the time the order check was executed. This is another error the user will probably not see.

9.1. Error Information

The text in the error message and reason column will be displayed to the user. The type of error is displayed in Column 1.

There are three levels of error messages:

System When such an error occurs, no drug interaction or duplicate therapy order checks will be performed. Other order checks that do not use the COTS database (FDB) will still be performed such as allergy/ADRs, duplicate drug (for outpatient only) and new CPRS order checks, etc.

Drug The second error level is for the drug and no drug interaction/duplicate therapy order checks will be performed for a specific drug. When you are processing an order, you may see a drug level error for a drug that is on the profile. This indicates that a drug interaction or duplicate therapy order check will not be performed for the drug in the order you are processing against this profile drug. Profile drug errors will only be shown once per patient session. So if you process several more orders, you will not see the error again. However, if you exit the option and at some later time reselect this patient to process new orders or take action on any existing orders, you will be shown the profile drug error once again.

If a drug level error occurs on the drug in the order you are processing, no profile drug errors will be displayed. No order checks (duplicate therapy or drug interaction) will occur for the processing drug (prospective drug). The only exception to this is when you are processing an IV order with multiple prospective drugs (i.e. multiple additives).

Order There is only one type of order level error for Drug Interactions and Duplicate Therapy Order checks that you will see. However, functionally it is treated as a drug level error and will be displayed with other drug level errors. Most of the order level errors that you will see will be generated when dosage order checks are performed.

10. Glossary

Action Prompts

There are three types of Inpatient Medications "Action" prompts that occur during order entry: ListMan, Patient/Order, and Hidden action prompts.

ListMan Action Prompts

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

Patient/Order Action Prompts

PU	Patient Record Updates
DA	Detailed Allergy/ADR List
VP	View Profile
NO	New Orders Entry
IN	Intervention Menu
PI	Patient Information
SO	Select Order
DC	Discontinue
ED	Edit
FL	Flag
VF	Verify
HD	Hold

Patient/Order Action Prompts (continued)

RN	Renew
AL	Activity Logs

	OC	On Call
	NL	Print New IV Labels
	RL	Reprint IV Labels
	RC	Recycled IV
	DT	Destroyed IV
	CA	Cancelled IV
Hidden Action Prompts	LBL	Label Patient/Report
	JP	Jump to a Patient
	OTH	Other Pharmacy Options
	MAR	MAR Menu
	DC	Speed Discontinue
	RN	Speed Renew
	SF	Speed Finish
	SV	Speed Verify
	CO	Copy
	N	Mark Not to be Given
	I	Mark Incomplete
	DIN	Drug Restr/Guide
	OCI	Order Check/Interventions

Active Order

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

Activity Reason Log

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.

Activity Ruler

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 *SIte Parameters (IV)* option.

Additive	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.
ADMINISTRATION SCHEDULE File	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.
Administering Teams	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.
Admixture	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.
APSP INTERVENTION File	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.
Average Unit Drug Cost	The total drug cost divided by the total number of units of measurement.
BCMA	A VistA computer software package named Bar Code Medication Administration. This package validates medications against active orders prior to being administered to the patient.

Calc Start Date	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 expected first dose.
Calc Stop Date	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 expected first dose plus the duration.
Chemotherapy	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).
Chemotherapy "Admixture"	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).
Chemotherapy "Piggyback"	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.
Clinic Group	A clinic group is a combination of outpatient clinics that have been defined as a group within Inpatient Medications to facilitate processing of orders.
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).
CPRS	A VistA computer software package called Computerized Patient Record Systems. CPRS is an application in VistA 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.
Critical Drug-Drug Interaction	One of two types of drug-drug interactions identified by order checks. The other type is a “significant” drug-drug interaction

Cumulative Doses	The number of IV doses actually administered, which equals the total number of bags dispensed less any recycled, destroyed, or cancelled bags.
Default Answer	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**>.
Dispense Drug	The Dispense Drug is pulled from the 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.
Delivery Times	The time(s) when IV orders are delivered to the wards.
Dosage Ordered	After the user has selected the drug during order entry, the dosage ordered prompt is displayed.
DRUG ELECTROLYTES file	File #50.4. This file contains the names of anions/cations, and their concentration units.
DRUG file	File #50. This file holds the information related to each drug that can be used to fill a prescription.
Duration	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.
Electrolyte	An additive that disassociates into ions (charged particles) when placed in solution.
Entry By	The name of the user who entered the Unit Dose or IV order into the computer.
Hospital Supplied Self Med	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.

Hyperalimentation (Hyperal)	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.
Infusion Rate	The designated rate of flow of IV fluids into the patient.
INPATIENT USER PARAMETERS file	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.
INPATIENT WARD PARAMETERS file	File #59.6. This file is used to tailor various aspects of the Inpatient Medications package with regards to specific wards.
Intermittent Syringe	A syringe type of IV that is administered periodically to the patient according to an administration schedule.
Internal Order Number	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.
IV ADDITIVES file	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.
IV CATEGORY file	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.
IV Duration	The duration of an order may be entered in CPRS at the IV DURATION OR TOTAL VOLUME field in the IV Fluids order dialog. The duration may be specified in terms of volume (liters or milliliters), or time (hours or days). Inpatient Medications uses this value to calculate a default stop date/time for the order at the time the order is finished.

IV Label Action

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.

IV Room Name

The name identifying an IV distribution area.

IV SOLUTIONS file

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.

IV STATS file

File #50.8. This file contains information concerning the IV workload of the pharmacy. This file is updated each time the *COmpile IV Statistics* option is run and the data stored is used as the basis for the AMIS (IV) report.

Label Device

The device, identified by the user, on which computer-generated labels will be printed.

Local Possible Dosages

Free text dosages that are associated with drugs that do not meet all of the criteria for Possible Dosages.

LVP

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.

Manufacturing Times

The time(s) that designate(s) the general time when the manufacturing list will be run and IV orders prepared. This field in the *SIte Parameters (IV)* option (IV ROOM file (#59.5)) is for documentation only and does not affect IV processing.

MEDICATION ADMINISTERING TEAM file

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.

MEDICATION INSTRUCTION file	File #51. This file is used by Outpatient Pharmacy and Unit Dose Special Instructions. (Not used by IV Other Print Info.) It contains the medication instruction name, expansion, and intended use.
MEDICATION ROUTES file	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.
Medication Routes/ Abbreviations	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.
Non-Formulary Drugs	The medications that are defined as commercially available drug products not included in the VA National Formulary.
Non-VA Meds	Term that encompasses any Over-the-Counter (OTC) medications, Herbal supplements, Veterans Health Administration (VHA) prescribed medications but purchased by the patient at an outside pharmacy, and medications prescribed by providers outside VHA. All Non-VA Meds must be documented in patients' medical records.
Non-Verified Orders	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.
Orderable Item	An Orderable Item name has no strength attached to it (e.g., Acetaminophen). The name with a strength attached to it is the Dispense Drug name (e.g., Acetaminophen 325mg).
Order Check	Order checks (drug-allergy/ADR interactions, drug-drug, duplicate drug, and duplicate drug class) are performed when a new medication order is placed through either the CPRS or Inpatient Medications applications. They are also performed when medication orders are renewed, when Orderable Items are edited, or during the finishing process in Inpatient Medications. This functionality will ensure the user is alerted to

possible adverse drug reactions and will reduce the possibility of a medication error.

Order Sets 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.

Order View 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.

Parenteral Introduced by means other than the digestive track.

Patient Profile 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.

PECS Pharmacy Enterprise Customization System. A Graphical User Interface (GUI) web-based application used to research, update, maintain, and report VA customizations of the commercial-off-the-shelf (COTS) vendor database used to perform Pharmacy order checks such as drug-drug interactions, duplicate therapy, and dosing.

Pending Order 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.

PEPS Pharmacy Enterprise Product System. A re-engineering of pharmacy data and its management practices developed to use a commercial off-the-shelf (COTS) drug database, currently First DataBank (FDB) Drug Information Framework (DIF), to provide the latest identification and safety information on medications.

Pharmacist Intervention	A recommendation provided by a pharmacist through the Inpatient Medications system's Intervention process acknowledging the existence of a critical drug-drug interaction and/or allergy/ADR interaction, and providing justification for its existence. There are two ways an intervention can be created, either via the Intervention Menu, or in response to Order Checks.
PHARMACY SYSTEM file	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.
Piggyback	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.
Possible Dosages	Dosages that have a numeric dosage and numeric dispense units per dose appropriate for administration. For a drug to have possible dosages, it must be a single ingredient product that is matched to the 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.
Pre-Exchange Units	The number of actual units required for this order until the next cart exchange.
Primary Solution	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.
Print Name	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.
Print Name{2}	Field used to record the additives contained in a commercially purchased premixed solution.

Profile	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.
Prompt	A point at which the system questions the user and waits for a response.
Provider	Another term for the physician/clinician involved in the prescription of an IV or Unit Dose order for a patient.
Provider Override Reason	A reason supplied by a provider through the CPRS system, acknowledging a critical drug-drug interaction and/or allergy/ADR interaction and providing justification for its existence.
PSJI MGR	The name of the *key* that allows access to the supervisor functions necessary to run the IV medications software. Usually given to the Inpatient Medications package coordinator.
PSJI PHARM TECH	The name of the *key* that must be assigned to pharmacy technicians using the IV module. This key allows the technician to finish IV orders, but not verify them.
PSJI PURGE	The *key* that must be assigned to individuals allowed to purge expired IV orders. This person will most likely be the IV application coordinator.
PSJI RNFINISH	The name of the *key* 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.
PSJI USR1	The *primary menu option* that may be assigned to nurses.
PSJI USR2	The *primary menu option* that may be assigned to technicians.
PSJU MGR	The name of the *primary menu* and of the *key* that must be assigned to the pharmacy package coordinators and supervisors using the Unit Dose Medications module.
PSJU PL	The name of the *key* that must be assigned to anyone using the Pick List options.

PSJ PHARM TECH	The name of the *key* that must be assigned to pharmacy technicians using the Unit Dose Medications module.
PSJ RNFINISH	The name of the *key* 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.
PSJ RNURSE	The name of the *key* that must be assigned to nurses using the Unit Dose Medications module.
PSJ RPHARM	The name of the *key* that must be assigned to a pharmacist to use the Unit Dose Medications module. If the package coordinator is also a pharmacist he/she must also be given this key.
Quick Code	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.
Report Device	The device, identified by the user, on which computer-generated reports selected by the user will be printed.
Schedule	The frequency of administration of a medication (e.g., QID, QDAILY, QAM, STAT, Q4H).
Schedule Type	Codes include: **O** - one time (i.e., STAT - only once), **P** - PRN (as needed; no set administration times). **C**- continuous (given continuously for the life of the order; usually with set administration times). **R** - 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 **OC** - on call (one time with no specific time to be given, i.e., 1/2 hour before surgery).
Scheduled IV Order	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.
Self Med	Medication that is to be administered by the patient to himself.

Standard Schedule	Standard medication administration schedules stored in the ADMINISTRATION SCHEDULE file (#51.1).
Start Date/Time	The date and time an order is to begin.
Status	**A** - active, **E** - expired, **R** - renewed (or reinstated), **D** - discontinued, **H** - on hold, **I** - incomplete, or **N** - non-verified, **U** – unreleased, **P** – pending, **O** – on call, **DE** – discontinued edit, **RE** – reinstated, **DR** – discontinued renewal.
Stop Date/Time	The date and time an order is to expire.
Stop Order Notices	A list of patient medications that are about to expire and may require action.
Syringe	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.
Syringe Size	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).
TPN	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.
Units per Dose	The number of Units (tablets, capsules, etc.) to be dispensed as a Dose for an order. Fractional numbers will be accepted.
VA Drug Class Code	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.
VDL	Virtual Due List. This is a Graphical User Interface (GUI) application used by the nurses when administering medications.
Ward Group	A ward group indicates inpatient nursing units (wards) that have been defined as a group within Inpatient Medications to facilitate processing of orders.

WARD GROUP file	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.
Ward Group Name	A field in the WARD GROUP file (#57.5) used to assign an arbitrary name to a group of wards for the pick list and medication cart.
WARD LOCATION file	File #42. This file contains all of the facility ward locations and their related data, i.e., Operating beds, Bed section, etc. The wards are created/edited using the *Ward Definition* option of the ADT module.

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