

INPATIENT MEDICATIONS

**NURSE’S USER MANUAL**

Version 5.0

January 2005

(Revised June 2010)

Department of Veterans Affairs Office of Enterprise 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** |
| 06/2010 | i-vi, 22-23, 23a-23b, 24,24a-24b,74a-74b,74e-74f,133, 136-13777, 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.REDACTED |
| 12/2009 | 60a, 60bvi | 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. REDACTED |
| 07/2009 | 48 | PSJ\*5\*215 | When Dispense Drug is edited for an active Unit Dose, an entry is added to the activity log.REDACTED |
| 02/2009 | 125 | PSJ\*5\*196 | Update to IV DurationREDACTED |
| 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.REDACTED |
| 10/2007 | iv, 74a- 74d5, 12,16- 17, 26, | PSJ\*5\*175 | 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 |

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Revised Pages** | **Patch Number** | **Description** |
|  | 34-38, | PSJ\*5\*160 | for remote data interoperability performed when entering |
| 41-42, |  | patient’s chart; and list of remote allergies added to Patient |
| 72-73 |  | Information screen. |
|  |  | REDACTED |
| 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.REDACTED |
| 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.REDACTED |
| 12/2005 | 1, | PSJ\*5\*146 | Remote Data Interoperability (RDI) Project: Removed document |
|  | 73-74b |  | revision dates in Section 1. Introduction. Updated Section 4.9.Order Checks, to include new functionality for remote order |
|  |  |  | checking. |
|  |  |  | REDACTED |
| 01/2005 | All | PSJ\*5\*111 | Reissued entire document to include updates for Inpatient Medications Orders for Outpatients and Non-Standard Schedules.REDACTED |

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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 | Output Options |

Summary

Extra Units Dispensed Report Output Options

Free Text Dosage Report Output Options

INpatient Stop Order Notices Output Options

Medications Due Worksheet Output Options

Patient Profile (Extended) Output Options

Pages vii and viii are no longer needed and have been eliminated.

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

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

ORDERABLE ITEM NAME DOSE FORM

Give: DOSAGE ORDERED MEDICATION ROUTE SCHEDULE

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

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

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

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

* **“UNITS PER DOSE:”** (Regular)

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

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

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

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

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

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

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

This is the date and time the order is to begin. 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.

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

If the order is entered by the Orderable Item only, these checks will be performed at the time the Dispense Drug(s) is specified. The checks performed include:

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

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

Pages 74b – 74d referred to the duplicate order check enhancement option that is no longer in the package and has been removed from this manual.

### 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.

# 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.

## 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: **PA**tient 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

Give: 500MG PO QID

1. -> HYDROCORTISONE CREAM,TOP Give: 1% TOP QDAILY
2. -> PROPRANOLOL 10MG U/D

Give: PO QDAILY

C 09/07 09/21 A NF

C 09/07 09/21 A

NF

C 09/07 09/21 A

NF

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

 **report continues**

**Example: Patient Profile (continued)**

Patient: PSJPATIENT1,ONE

Orderable Item: AMPICILLIN CAP Instructions:

Dosage Ordered: 500MG Duration:

Med Route: ORAL (PO) Schedule Type: CONTINUOUS

Schedule: QID

Admin Times: 01-09-15-20 Provider: PSJPROVIDER,ONE

Dispense Drugs AMPICILLIN 500MG CAP

ORDER NOT VERIFIED

Self Med: NO

Entry By: PSJPROVIDER,ONE

Status: ACTIVE

Start: 09/07/00 15:00

Stop: 09/21/00 24:00

[w]

U/D

1

Units Disp'd

0

Units Ret'd

0

Inactive Date

Entry Date: 09/07/00 13:37

## 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)

**Example: Action Profile #1**

Select Reports Menu Option: **AP1** Action Profile #1

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

Select PATIENT: **PSJPATIENT1,ONE**

Select another PATIENT: **<Enter>**

000-00-0001 08/18/20 1 EAST

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 orderD - to DISCONTINUE the orderN - 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 EASTPID: 000-00-0001 Room-Bed: B-12 Ht(cm): ( ) DOB: 08/18/1920 (80) Wt(kg): ( )Sex: MALE Admitted: 05/03/2000Dx: TESTINGAllergies: 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 QIDSpecial Instructions: THIS IS AN INPATIENT IV EXAMPLE |
| 2 R D N AMPICILLIN CAP C 09/07 09/21 A Give: 500MG PO QID |
| 1. R D N HYDROCORTISONE CREAM,TOP C 09/07 09/21 A Give: 1% TOP QDAILY
2. 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 SIGNATUREPSJPATIENT1,ONE 000-00-0001 08/18/1920 |

### 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


### 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: **AU**thorized Absence/Discharge Summary Print BLANK Authorized Absence/Discharge Summary forms? NO// **<Enter>**

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

* + - 1. 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.
			2. If a medication is not to be continued, mark "TAKE NO ACTION".
			3. 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

SC Percent: % 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:

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

Physician's Signature DEA # Date AND Time

Enter RETURN to continue or '^' to exit:

 **report continues**

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

AUTHORIZED ABSENCE/DISCHARGE 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

DOB: 02/22/1942 (58) Team: \* NF \* Sex: MALE

Ht(cm): 167.64 (04/21/1999)

Wt(kg): 85.00 (04/21/1999)

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

### 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: **EX**tra 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): **P**atient **<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 24:00PSJPATIENT2,TWO Room\_Bed: A-6 000-00-0002 Ward: 1 West |
| DRUG NAME | UNIT | DATE DISPENSED | DISP. 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... |

### 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 1Inpatient Free Text Dosage Entry Report Period: Sep 29, 2001 to Jan 07, 2002Drug Free Text Entry Count Provider:Count |  |
| A-METHYL-PARA-TYROSINE CAPS,25 (5098) 100MG PSJPROVIDER,ONE:1 | 1 |
| ACETAMINOPHEN 325MG C.T. (263) 1000MG PSJPROVIDER,TWO:1100MG PSJPROVIDER,THREE:1 PSJPROVIDER,FOUR:1100mgPSJPROVIDER,FOUR:1300MGPSJPROVIDER,TWO:1325MG PSJPROVIDER,ONE:1 PSJPROVIDER,TWO:4 PSJPROVIDER,FIVE:2 | 12117 |
| Press Return to Continue or ^ to Exit: |  |

### 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: **IN**patient Stop Order Notices

Select by GROUP (G), WARD (W), CLINIC (C), or PATIENT (P): **P**ATIENT **<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 24:00TO CONTINUE MEDICATIONS, PLEASE REORDER ON VA FORM 10-1158. |
| PSJPATIENT2,TWO Ward: 1 WestPID: 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: 09/16/99Dx: TEST PATIENTAllergies: CARAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE, CHOCOLATE, NUTS, STRAWBERRIES, DUSTNV 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 Ain 0.45% NACL 100 ML QID PSJPROVIDER,ONEIV |
| PENTAMIDINE ISETHIONATE 1 MG C 09/19 09/22/00 18:00 Ain 0.45% NACL 1000 ML 8 MG/HR PSJPROVIDER,ONEIV 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,ONESpecial Instructions: TEST |
| RANITIDINE TAB C 09/18 09/22/00 22:00 AGive: 150MG PO BID PSJPROVIDER,ONE |
| THEOPHYLLINE CAP,SA C 09/18 09/22/00 22:00 AGive: 400MG PO QID PSJPROVIDER,ONESpecial Instructions: TESTING |
| PSJPATIENT2,TWO 000-00-0002 1 West A-6 |

### 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: **MED**ications 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): **P**atient **<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

Report from: 09/19/00 10:00 to: 09/19/00 24:00 Continuous/One time Orders for: ALL MEDS

Page: 1 Report Date: 09/19/00

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

AMPICILLIN 1 GM

in

0.45% NACL 1000 ML QID IV QID

RN/LPN Init:

18:00

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

THEOPHYLLINE CAP,SA Give: 400MG PO QID TESTING

RN/LPN Init:

20:00 09/18 | 09/18 12:00 | 09/22/00

RANITIDINE TAB Give: 150MG PO BID

RN/LPN Init:

22:00

22:00

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:

### 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: **PAT**ient 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

1. PENICILLIN INJ,SUSP ? \*\*\*\*\*\*\*\* \*\*\*\*\*\*\*\* P Give: 600000UNT/1ML IM BID
2. 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**

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