INPATIENT MEDICATIONS

PHARMACIST'S USER MANUAL

Version 5.0
January 2005

(Revised August 2008)

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
08/2008	iii, 20-27, 54, 68-76, 94-95, 104-106, 236, 240-241	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	iii, 124 a-d	PSJ*5*175	Modified outpatient header text for display of duplicate orders. Added new functionality to Duplicate Drug and Duplicate Class Order Check definitions. (R. Singer, PM; E. Phelps/C. Varney, Tech Writer)
	5, 17-18, 27-28, 30-34, 37-38, 65-68, 76-80, 83-84, 119-120, 123-124, 149-150, 195-196, 209-210	PSJ*5*160	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.
07/2007	155a-155b, 162a-162b, 168a-168b	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)
05/2007	25	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)

Date	Revised Pages	Patch Number	Description
12/2005	1, 124-124b	PSJ*5*146	Remote Data Interoperability (RDI) Project: Removed document revision dates in Section 1. Introduction. Updated Section 4.3. Order Checks to include new functionality for checking allergies, drug reactions, and interactions. (E. Williamson, PM; M. Newman, Tech. Writer)
03/2005	iv-v,1, 114-116, 223, 236-241	PSJ*5*112	Updated TOC to correct Index page number. (p. iv) In Unit Dose Menu Tree, changed Clinic Stop Dates to Clinic Definition. (p. v) In Section 1., Introduction, updated revision dates and added reference to Release Notes. (p. 1) In Sections 4.2.5.1., 4.2.5.3., and 4.2.5.3., added a sentence that refers to the IMO parameter NUMBER OF DAYS UNTIL STOP from the CLINIC DEFINITION file. (p.114-116) Updated Glossary; added definition for CLINIC DEFINITION File. (p. 223) Updated Index; added CLINIC DEFINITION file and Inpatient Medication Orders for Outpatients page number references; reflowed all following Index pages. (p. 236-241) (S. Templeton, PM, R. Singer, PM, M. Newman, Tech. Writer)
01/2005	All	PSJ*5*111	Reissued entire document to include updates for Inpatient Medication Orders for Outpatients and Non-Standard Schedules. (S. Templeton, PM, R. Singer, PM, M. Newman, Tech. Writer)

Table of Contents

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 pharmacist may enter a time, such as NOON, MIDNIGHT, or NOW.
- The pharmacist may enter NOW+3' (for current date and time Plus 3 minutes *Note--the Apostrophe following the number of minutes)
- Time is REQUIRED in this response.

4.1.4.2. New Order Entry

The New Order Entry action allows the pharmacist to enter new Unit Dose or 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 pharmacist 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 pharmacist 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)

Pharmacists select Unit Dose medications directly from the DRUG file. The Orderable Item for the selected drug will automatically be added to the order, and all Dispense Drugs entered for the order must be linked to that Orderable Item. If the Orderable Item is edited, data in the DOSAGE ORDERED field and the DISPENSE DRUG field will be deleted. If multiple Dispense Drugs are needed in an order, they may be entered by selecting the DISPENSE DRUG field from the edit list before accepting the new order. After each Dispense Drug is selected, it will be checked against the patient's current medications for duplicate drug or class, and drug-drug/drug-allergy interactions. (See Section 4.3 Order Checks for more information.)

Note: No special order checks are performed for specific drugs (e.g., Clozapine). Orders for Clozapine or similar special medications 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 National Clozapine Coordinating Center (NCCC) package). Any patients requiring special monitoring should also have an order entered through Outpatient Pharmacy at this time.

The pharmacist 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 physician 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 be entered automatically. 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 automatically be entered. After entry of all the orders in the order set, the software will prompt for more orders for the patient. At this point, the user can proceed exactly as in new order entry, and respond accordingly. When a drug is chosen, if an active drug text entry for the Dispense Drug and/or Orderable Item linked to this drug exists, then the prompt, "Restriction/Guideline(s) exist. Display?:" will be displayed along with the corresponding defaults. The drug text indicator will be <**DIN**> and will be displayed on the right hand corner on the same line as the Orderable Item. This indicator will be highlighted.

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

- **"DOSAGE ORDERED:"** (Regular and Abbreviated)

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

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

Example: Dispense Drug with Possible Dosages

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


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

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

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

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

Example: Dispense Drug with Local Possible Dosages

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


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

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

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

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

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

Example: Order View Information when Dosage Ordered is not Defined

```
DISPENSE DRUG NAME
Give: UNITS PER DOSE  MEDICATION ROUTE  SCHEDULE
```

When the user has chosen the drug and Dosage Ordered <u>is</u> 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 a pending order:

    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 an 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 Dispense Drug selected 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.

- **"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. If so, the Schedule Type is changed to ONE TIME.

- **"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.

> **Note:** Order entry will permit the entry of a Day-of-Week schedule in the following format: days@schedule name (e.g. MO-WE-FR@BID, TU@Q6H).

> **Note:** Inpatient Medications will translate a Day of Week schedule into appropriate administration times. For example: "MO-WE-FR@BID" is translated to "MO-WE-

FR@10-22". The schedule after the "@" will be a valid schedule from the ADMINISTRATION SCHEDULE file (#51.1).

- **"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 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. If the schedule for the order contains "PRN", all Administration Times for the order will be ignored. In new order entry, the default Administration Times are determined as described below:

- If Administration Times are defined for the selected Orderable Item, they will be shown as the default for the order.

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

- If Administration Times are defined for the Schedule, they will be shown as the default for the order.

- **"SPECIAL INSTRUCTIONS:"** (Regular and Abbreviated)

These are the Special Instructions (using abbreviations whenever possible) needed for the administration of this order. This field allows up to 180 characters and utilizes the abbreviations and expansions from the MEDICATION INSTRUCTION file. For new order entry, when Special Instructions are added, the user 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 pharmacist is given the option to copy the comments into this field. Should the pharmacist 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) <u>only</u>, the Provider Comments are automatically placed in the Special Instructions. 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.

- **"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 field except duration.

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:"**
This is the method the provider used to communicate the order to the user who entered or took action on the order. Nature of Orders 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

Nature of Order	Description	Prompted for Signature in CPRS?	Chart Copy Printed?
Policy	These are orders that are created as a matter of hospital policy	No	Yes

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

Example: New Order Entry

```
Patient Information          Feb 14, 2001 10:21:33        Page:    1 of    1
PSJPATIENT1,ONE                     Ward: 1 EAST
   PID: 000-00-0001        Room-Bed:           Ht(cm): _____ (_____)
   DOB: 08/18/20 (80)                          Wt(kg): _____ (_____)
   Sex: MALE                              Admitted: 11/07/00
    Dx: TEST                      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// NO   New Order Entry

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

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

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

Example: New Order Entry (continued)

```
NON-VERIFIED UNIT DOSE         Feb 14, 2001 10:23:37      Page:   1 of   2
PSJPATIENT1,ONE                     Ward: 1 EAST
   PID: 000-00-0001           Room-Bed:          Ht(cm): _____ (_____)
   DOB: 08/18/20 (80)                            Wt(kg): _____ (_____)


  (1)Orderable Item: POTASSIUM CHLORIDE TAB,SA
        Instructions:
  (2)Dosage Ordered: 10MEQ
         Duration:                        (3)Start: 02/14/01  16:00
  (4)    Med Route: ORAL
                                          (5) Stop: 02/23/01  24:00
  (6) Schedule Type: CONTINUOUS
  (8)      Schedule: BID
  (9)   Admin Times: 08-16
 (10)       Provider: PSJPROVIDER,ONE [w]
 (11) Special Instructions:

 (12) Dispense Drug                          U/D        Inactive Date
       POTASSIUM CHLORIDE 10 mEq U/D TABLET        1
+        Enter ?? for more actions
ED   Edit                        AC   ACCEPT
Select Item(s): Next Screen// AC   ACCEPT
NATURE OF ORDER: WRITTEN// <Enter>

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


NON-VERIFIED UNIT DOSE         Feb 14, 2001 10:24:52      Page:   1 of   2
PSJPATIENT1,ONE                     Ward: 1 EAST
   PID: 000-00-0001           Room-Bed:          Ht(cm): _____ (_____)
   DOB: 08/18/20 (80)                            Wt(kg): _____ (_____)


 *(1)Orderable Item: POTASSIUM CHLORIDE TAB,SA
        Instructions:
 *(2)Dosage Ordered: 10MEQ
         Duration:                        (3)Start: 02/14/01  16:00
 *(4)    Med Route: ORAL
                                          (5) Stop: 02/23/01  24:00
  (6) Schedule Type: CONTINUOUS
 *(8)      Schedule: BID
  (9)   Admin Times: 08-16
*(10)       Provider: PSJPROVIDER,ONE [w]
 (11) Special Instructions:

 (12) Dispense Drug                          U/D        Inactive Date
POTASSIUM CHLORIDE 10 mEq U/D TABLET             1
+        Enter ?? for more actions
DC  Discontinue       ED  Edit            AL  Activity Logs
HD  (Hold)            RN  (Renew)
FL  Flag             VF  Verify
Select Item(s): Next Screen// VF   Verify
...a few moments, please.....

Pre-Exchange DOSES: <Enter>

ORDER VERIFIED.

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

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 has a pending status. If this pending order is discontinued, the original order may
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.

4.2.3.1. 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 pharmacist to enter information in a free text format, up to 250 characters.

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 pharmacist, 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 pharmacist may enter a time, such as NOON, MIDNIGHT, or NOW.
- The pharmacist may enter   NOW+3' (for current date and time Plus 3 minutes *Note--the Apostrophe following the number of minutes)
- <u>Time is REQUIRED in this response.</u>

4.2.3.2.   New Order Entry

The New Order Entry action, from the *Inpatient Order Entry* option, allows the pharmacist to enter new Unit Dose and IV orders for the patient. 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 IV order entry, the pharmacist 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 pharmacist can expect to encounter while entering a new IV order for the patient.

- **"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 pharmacist 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 any 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 an opportunity to add one. The pharmacist 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 pharmacist can also specify the # of bags per day that will be needed. **Example:** 125 = 125 ml/hour (IV system will calculate bags needed per day), 125@2 = 125 ml/hour 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/hour 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:"**

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)

Note: Order entry will permit the entry of a Day-of-Week schedule in the following format: days@schedule name (e.g., MO-WE-FR@BID, TU@Q6H).

Note: Inpatient Medications will translate a Day of Week schedule into appropriate

administration times. For example: "MO-WE-FR@BID" is translated to "MO-WE-FR@10-22". The schedule after the "@" will be a valid schedule from the ADMINISTRATION SCHEDULE file (#51.1).

- **"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:"**

Free text is entered and can be up to 60 characters. For new order entry, when Other Print Info is added, the pharmacist 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 pharmacist is given the option to copy the comments into this field. Should the pharmacist choose to copy and flag these comments for display in a BCMA message box on the VDL, an exclamation mark "!" will appear in the order next to this field.

Note: For "DONE" Orders (CPRS Med Order) <u>only</u>, the Provider Comments are automatically placed in the Other Print Info. 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 <u>always</u> be the default start date/time for Ivs. This may be overridden by entering the desired date/time at the prompt.

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

- **"STOP DATE / TIME:"**

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

Application Coordinator can change these fields.

- **"NATURE OF ORDER:"**

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

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

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

- **"Select CLINIC LOCATION:"**

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

Note: While entering an order, the pharmacist 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

```
Inpatient Order Entry      Feb 28, 2002@13:48:47      Page:   1 of    3
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    BACLOFEN TAB                          C  02/20  03/06  A
          Give: 10MG PO QDAILY
          PATIENT SPITS OUT MEDICINE
   2    PREDNISONE TAB                        C  02/25  03/11  A

          Give: 5MG PO TU-TH-SA@09
   3    RESERPINE TAB                         C  02/20  03/06  A
          Give: 1MG PO QDAILY
   4 d->FUROSEMIDE 1 MG                        O  02/11  02/11  E
        in 5% DEXTROSE 50 ML NOW
   5 d->FUROSEMIDE 10 MG                       O  02/11  02/11  E
        in 5% DEXTROSE 50 ML STAT
+         Enter ?? for more actions
PI  Patient Information            SO  Select Order
PU  Patient Record Update          NO  New Order Entry
Select Action: Next Screen// NO   New Order Entry

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

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

After entering the data for the order, the system will prompt the pharmacist 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 pharmacist must edit the order to make corrections if all of these fields are not answered correctly. If the order contains no errors, but has a warning, the user will be allowed to proceed.

Example: New Order Entry (continued)

```
Orderable Item: MULTIVITAMINS INJ
Give: IV QID

754
[29]0001  1 EAST 02/28/02
PSJPATIENT1,ONE  B-12

MULTIVITAMINS 2 ML
0.9% SODIUM CHLORIDE 100 ML

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

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

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

```
NON-VERIFIED IV              Feb 28, 2002@13:56:44      Page:    1 of    2
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: ********

*(1)   Additives:                             Type: PIGGYBACK
      MULTIVITAMINS 2 ML
 (2)   Solutions:
      0.9% SODIUM CHLORIDE 100 ML
         Duration:                   (4)     Start: 02/28/02  13:56
 (3)  Infusion Rate: INFUSE OVER 125 MIN.
*(5)      Med Route: IV                (6)      Stop: 03/30/02  24:00
*(7)       Schedule: QID               Last Fill: ********
 (8)   Admin Times: 09-13-17-21           Quantity: 0
*(9)      Provider: PSJPROVIDER,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)
ED   Edit              AL   Activity Logs

Select Item(s): Next Screen// VF   Verify

      3      6      9     12     15     18     21     24
.:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:
                              P

                          N

Next delivery time is 1330 ***

Action (PB) B// <Enter>   BYPASS
```

When the order is correct and verified, and the Activity Ruler site parameter is turned on, the system will display a time line. The time line is a visual representation of the relationship between start of coverage times, doses due, and order start times. The letters **P**, **A**, **H**, **S**, or **C** show the start of coverage times for each IV type. If there is an asterisk (*****) after the letter, this means that the Ward List has been run for this start of coverage type. The caret (**^**) shows when the doses are due, and the **N** indicates current time in relation to the order. The next delivery time will also be listed.

The "Action (PBS)" prompt will appear next, with all of the valid actions listed in parentheses. The following are the codes for the possible actions:

- **P** – Print specified number of labels now.
- **B** – Bypass any more action (entering a caret (**^**) will also do this).
- **S** – Suspend a specified number of labels for the IV room to print on demand.

The **S** will only appear as a valid action if the USE SUSPENSE FUNCTIONS site parameter is answered with **1** or **YES**. The user can perform more than one action, but each action must be done one at a time. As each action is taken, those that operate on labels will reduce the total labels by that amount (e.g., eight labels are needed, three are suspended, then five are available to print).

4.2.3.3. 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.

4.2.3.4. 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 edit, delete, view, or printing of an existing intervention. Each kind of intervention will be discussed and an example will follow.

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

Example: New Intervention

```
Patient Information          Sep 22, 2000 08:03:07        Page:   1 of   1
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
Outpatient Narrative: This is the 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// IN   Intervention Menu

                  --- Pharmacy Intervention Menu ---

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

Select Item(s): NE   Enter Pharmacy Intervention
Select APSP INTERVENTION INTERVENTION DATE: T   SEP 22, 2000
  Are you adding 'SEP 22, 2000' as a new APSP INTERVENTION (the 155TH)? No// Y
  (Yes)
   APSP INTERVENTION PATIENT: PSJPATIENT2,TWO   02-22-42    000000002    N
SC VETERAN
   APSP INTERVENTION DRUG: WAR
     1   WARFARIN 10MG            BL100         TAB
     2   WARFARIN 10MG U/D           BL100          TAB **AUTO STOP 2D**
     3   WARFARIN 2.5MG           BL100         TAB
     4   WARFARIN 2.5MG U/D          BL100          TAB  **AUTO STOP 2D**
     5   WARFARIN 2MG          BL100        TAB
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1  WARFARIN 10MG        BL100         TAB
PROVIDER:   PSJPROVIDER,ONE     PROV
INSTITUTED BY: PHARMACY// <Enter>  PHARMACY
INTERVENTION:    ALLERGY
RECOMMENDATION:    NO CHANGE
WAS PROVIDER CONTACTED: N  NO
RECOMMENDATION ACCEPTED: Y  YES
REASON FOR INTERVENTION:
  1>
ACTION TAKEN:
  1>
CLINICAL IMPACT:
  1>
FINANCIAL IMPACT:
  1>
```

Example: Edit an Order and Create a New Order (continued)

```
     ------------------------------------------------------------------
     Patient: PSJPATIENT1,ONE                       Status: ACTIVE

*(1)  Additives:            Order number: 42           Type: PIGGYBACK
      MVI 1 ML
 (2)  Solutions:
      DEXTROSE 10% 1000 ML
         Duration: TST ISC ROOM          *(4)     Start: 04/02/01  20:56
 (3)  Infusion Rate: INFUSE OVER 8 HOURS.
*(5)     Med Route: IVPB                  *(6)      Stop: 04/03/01  24:00
*(7)      Schedule: QDAILY                     Last Fill: ********
 (8)   Admin Times: 1440                         Quantity: 0
*(9)      Provider: PSJPROVIDER,ONE [es]       Cum. Doses:
*(10)Orderable Item: MVI INJ
      Instructions:
 (11)   Other Print:

 (12)  Remarks :
      Entry By: PSJPROVIDER,ONE                Entry Date: 04/02/01  20:56
Enter RETURN to continue or '^' to exit: <Enter>
(A)ctivity (L)abel (H)istory:  ^
```

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

Change the Volume of a Solution

There are times when the pharmacist will need to change the volume of the solution for one specific order. The syringe type of order does have a separate volume prompt so the user will not have to add any steps. For other types, the user can simply enter an order and then edit it to change the volume, or use the following method:

An order calls for 25 ML of D5W, but when D5W is selected, there is no solution in the file with that volume.

- Choose the solution that is most like the one needed (e.g., D5W 50 ML). In this example, D5W 50 ML is now the selected solution.
- At the next prompt, enter the characters **<^SOL>** and choose the solution just entered.
- The next prompt is "SOLUTION: (DEFAULT) //". Enter the characters **<^VOL>.**
- The prompt "VOLUME: (DEFAULT) //" will be displayed.
- Change the volume for this specific order to the desired volume (the example below shows 25). The terminal dialog follows:

Example: Change the Volume of a Solution

```
Select SOLUTION:   D5W       50ML
INFUSION  RATE:    ^SOL
Select SOLUTION: D5W//   <Enter>
SOLUTION:  D5W //   <Enter>
VOLUME:  50 ML //   25       ML
```

4.2.4.3. Verify

Orders must be accepted and verified before they can become active and are included on the BCMA VDL. If AUTO-VERIFY is enabled for the pharmacist, 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, and are included on the BCMA VDL.

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.

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.

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

Note: AUTO-VERIFY is controlled by the ALLOW AUTO-VERIFY FOR USER field in the INPATIENT USER PARAMETERS file. For more information on the Auto-Verify function, see the Edit User Parameters section of the Pharmacy Supervisor Manual.

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 IV              Feb 28, 2002@13:56:44        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): _____ (_____)
  Sex: MALE                                     Admitted: 05/03/00
   Dx: TESTING                          Last transferred: ********

*(1)   Additives:                              Type: PIGGYBACK
        AMPICILLIN 1000 MG
 (2)   Solutions:
        0.9% SODIUM CHLORIDE 100 ML
           Duration:                  (4)      Start: 02/28/02  13:56
 (3)   Infusion Rate: INFUSE OVER 30 MIN.
*(5)      Med Route: IV                (6)      Stop: 03/30/02  24:00
*(7)       Schedule: QID                   Last Fill: ********
 (8)    Admin Times: 09-13-17-21           Quantity: 0
*(9)       Provider: PSJPROVIDER,ONE [es]  Cum. Doses:
*(10)Orderable Item: AMPICILLIN INJ
      Instructions:
 (11)   Other Print:

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


      3       6       9      12      15      18      21      24
..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:..:
                                P

                        N

Next delivery time is 1330 ***


Action (PB) B// <Enter>    BYPASS
```

Example: Verify a "DONE" Order (CPRS Med 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 d->in 0.9% SODIUM CHLORIDE 1000 ML 125 ml/hrC  03/07  03/07  E
  2 d->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 1000 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
```

```
EXPIRED IV (DONE)            Mar 07, 2002@13:02:26      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) Additives:              Order number: 483         Type: ADMIXTURE
*(2) Solutions:
      0.9% SODIUM CHLORIDE 1000 ML  *N/F*
          Duration:                    *(4)     Start: 03/07/02  12:59
*(3)   Infusion Rate: 125 ml/hr
*(5)      Med Route: IV                *(6)      Stop: 03/07/02  12:59
BCMA ORDER LAST ACTION: 03/07/02 12:59 Infusing
*(7)       Schedule:                        Last Fill: ********
 (8)    Admin Times:                        Quantity: 0
*(9)       Provider: PSJPROVIDER,ONE [es]    Cum. Doses:
 (10)   Other Print:
  Provider Comments: TESTING

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

-----------------------------------**report continues**-----------------------------------

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//
```

--**report continues**--

Example: Renewed Order in Detailed Order View (continued)

```
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 has a pending status. If this pending order is discontinued, the original order may
still be active.
```

If this occurs, a pharmacist may discontinue a pending order, both orders, or exit the discontinue function.

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.

4.2.4.6.   Activity Log

This action allows the viewing of an activity log, label log, or a history log of the order. An activity log provides a trace of every action taken on an order since the original entry. If a history log is selected, it will find the first order, linked to the order where the history log was invoked from, then show an order view of each order associated with it, in the order that they were created. When a label log is selected, it shows the print, tracking, and counting information on the labels for the order.

Example: Activity Log

```
ACTIVE IV                    Feb 20, 2002@15:55:14       Page:    1 of    2
PSJPATIENT4,FOUR                   Ward: 7A GEN
   PID: 000-00-0004           Room-Bed: 726-B       Ht(cm): _____ (_____)
   DOB: 10/10/49 (52)                               Wt(kg): _____ (_____)

*(1) Additives:          Order number: 445       Type: ADMIXTURE
     POTASSIUM CHLORIDE XXXXXXXXXXX 35 MEQ
*(2) Solutions:
     DEXTROSE 5% ½ NS 1000 ML
        Duration:                   *(4)    Start: 02/20/02  15:46
-----------------------------------report continues----------------------------------
```

Example: Activity Log (continued)

```
*(3)   Infusion Rate: 80 ml/hr
*(5)       Med Route: IV                      *(6)      Stop: 02/20/02  24:00
BCMA ORDER LAST ACTION: 02/20/02 15:50 Infusing*
*(7)        Schedule:                             Last Fill: 02/20/02  15:55
 (8)    Admin Times:                               Quantity: 1
*(9)        Provider: PSJPROVIDER,ONE [es]      Cum. Doses: 1
 (10)   Other Print:

 (11)  Remarks :
+         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// AL   Activity Logs
(A)ctivity (L)abel (H)istory: Activity Log

ACTIVITY LOG:
#  DATE       TIME     REASON                    USER
==============================================================================
1  FEB 20,2002 15:55:09 COMPLETE                 PSJPHARMACIST,ONE
   Comment: DISCONTINUED  (EDIT)

2  FEB 20,2002 15:55:12 VERIFY                   PSJPHARMACIST,ONE
   Comment: ORDER VERIFIED BY PHARMACIST


 (A)ctivity (L)abel (H)istory: Label Log

LABEL LOG:

#  DATE/TIME       ACTION        USER            #LABELS    TRACK        COUNT
================================================================================

1  FEB 20,2002@15:55:12
                  DISPENSED     PSJPHARMACIST,ONE    1       ORDER ACTION    YES

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

Unique IDs for this order:

Label Date/Time   Unique ID            Status    Count BCMA Action - Date/Time

02/20/02 15:55    739V443              YES


 (A)ctivity (L)abel (H)istory: History Log

DEVICE: HOME// <Enter>  NT/Cache virtual TELNET terminal   Right Margin: 80// <Enter>


     ----------------------------------------------------------------------
     Patient: PSJPATIENT4,FOUR                        Status: DISCONTINUED

*(1) Additives:          Order number: 444           Type: ADMIXTURE
     POTASSIUM CHLORIDE XXXXXXXXXXX 35 MEQ
*(2) Solutions:
     DEXTROSE 5% 1/2 NS 1000 ML
         Duration:                         *(4)     Start: 02/20/02  15:46
*(3)   Infusion Rate: 80 ml/hr            *(4)     Start: 02/20/02  15:46
*(5)       Med Route: IV                  *(6)      Stop: 02/20/02  15:55
BCMA ORDER LAST ACTION: 02/20/02 15:50 Infusing
*(7)        Schedule:                             Last Fill: 02/20/02  15:46
 (8)    Admin Times:                               Quantity: 2
*(9)        Provider: PSJPROVIDER,ONE [es]      Cum. Doses: 2
 (10)   Other Print:

 (11)  Remarks :
     Entry By: PSJPROVIDER,ONE                 Entry Date: 02/20/02  15:46
Enter RETURN to continue or '^' to exit: <Enter>

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

Example: Activity Log (continued)

```
     Patient: PSJPATIENT4,FOUR                        Status: ACTIVE

*(1) Additives:              Order number: 445          Type: ADMIXTURE
      POTASSIUM CHLORIDE XXXXXXXXXXX 35 MEQ
*(2) Solutions:
      DEXTROSE 5% 1/2 NS 1000 ML
         Duration:                          *(4)      Start: 02/20/02  15:46
*(3)  Infusion Rate: 80 ml/hr
*(5)     Med Route: IV                       *(6)      Stop: 02/20/02  24:00
BCMA ORDER LAST ACTION: 02/20/02 15:50 Infusing*
*(7)     Schedule:                                 Last Fill: 02/20/02  15:55
 (8)    Admin Times:                               Quantity: 1
*(9)     Provider: PSJPROVIDER,ONE [es]     Cum. Doses: 1
 (10)   Other Print:

 (11)  Remarks :
      Entry By: PSJPROVIDER,ONE                  Entry Date: 02/20/02  15:55
Enter RETURN to continue or '^' to exit: <Enter>
(A)ctivity (L)abel (H)istory:
```

4.2.4.7.   Finish

🔑 Users must hold the PSJ RPHARM key for the ability to finish orders placed through CPRS.

🔑 Pharmacy Technicians must hold the PSJI PHARM TECH key for the ability to finish orders placed through CPRS. These users are not allowed to verify orders, only finish orders.

When an order is placed or renewed by a provider through CPRS, the pharmacist needs to finish this order. The same procedures are followed to finish the renewed order as to finish a new order.

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.

✏️ **Note:** For more details on ordering, see **New Order Entry**.

4.2.4.8.   Expected First Dose Changes

Inpatient Medications no longer displays an expected first dose for an order containing a schedule with a schedule type of One-time. The system also no longer displays an expected first dose for an order containing a schedule with a schedule type of On-call.

11. Index

1

2

7

A

B

C

D

E

N

Nature of Order, 20, 26, 72
New Order Entry, 19, 68
    New IV Order Entry Example, 73
    New Unit Dose Order Entry Example, 27
Non-Formulary Status, 21, 43, 44, 47, 58, 69, 93, 95, 98, 111
Non-Standard Schedules, 126
Non-Verified/Pending Orders, 11, 13, 18, 19, 35, 61, 67, 81
Non-Verified/Pending Orders Example, 13
NUMBER OF DAYS UNTIL STOP, 114, 115, 116

O

On Call, 113
Order Actions, 40, 86
Order Checks, 19, 123, 124
    Drug-Allergy Interactions, 19, 123, 124, 125
    Drug-Drug Interactions, 19, 123, 124, 125
    Duplicate Class, 19, 123, 124, 125
    Duplicate Drug, 19, 123, 124, 125
Order Entry, 3, 6, 7, 11, 12, 19, 61, 63, 64
Order Lock, 11, 64
Order Options, 11
Order Set, 19, 20, 228
Orderable Item, 19, 20, 21, 23, 24, 25, 43, 44, 46, 47, 58, 69, 70, 93, 95, 98, 111, 125, 126, 130, 186, 202, 224, 228
Orientation, 3
Other Print Info, 71

P

Parenteral, 68, 114, 115, 221, 227, 229
Patient Action, 12, 16, 17, 18, 65, 66
Patient Information, 6, 12, 17, 37, 64, 66, 83, 219
Patient Information Example, 12, 37, 38, 65, 66, 83, 84
Patient Lock, 11, 19, 64, 68
Patient Profile (Extended), 190
Patient Profile (Extended) Report Example, 190
Patient Profile (Unit Dose), 117, 153
Patient Profile (Unit Dose) Example, 153
Patient Profile Report (IV), 117, 205
Patient Profile Report (IV) Example, 205
Patient Profiles, 11, 63
Patient Record Update, 18, 67
Patient Record Update Example, 18, 67
Pick List, 1, 44, 94, 129, 130, 131, 134, 135, 136, 138, 140, 141, 232
Pick List Menu, 3, 129
Pick List Menu Example, 129
Pick List Report, 129
Pick List Report Example, 131
Piggyback, 68, 69, 70, 115, 117, 118, 143, 146, 201, 222, 224, 229
Possible Dosages, 21, 22, 227, 229
Possible Dosages Example, 21
Pre-Exchange Units Report, 46
Production Options, 143
Profile (IV), 64, 117
Profile Report Example, 119, 120, 207
Provider, 20, 26, 112, 229
Provider Comments, 25, 71

(This page included for two-sided copying.)