OUTPATIENT PHARMACY (PSO)

PHARMACIST'S USER MANUAL

Version 7.0
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Department of Veterans Affairs
Product Development

Revision History

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

Date	Revised Pages	Patch Number	Description
09/12	i, iib, vii, viii, 83a – 83d, 89 – 91b, 99, 107a, 170m	PSO*7*386	Added section on HOLD and UNHOLD functionality. Updated Flagging and Unflagging Pending Orders. Updated Activity Log for HOLD/UNHOLD comments. Added PSO TECH ADV key information. (Niha Goyal, PM; John Owczarzak, Tech Writer)
03/12	i, viii, 8, 15, 24, 35-36, 41, 160, 170a, 170e-170l, 170m-170n, 177-178	PSO*7*367	To add functionality to Outpatient Pharmacy for the printing and storing of FDA Medication Guides. Updates to Index (N. Goyal, PM; B. Thomas, Tech Writer)
03/12	i, vii, 63,107a-107b,160-160b,171, 172, 173	PSO*7*354	Update to TOC Automated Dispensing Device (ADD) enhancement ADD, DNS, OPAI added to Glossary. (Niha Goyal, PM; John Owczarzak, Tech Writer)
02/12	i-ii, iia-iib, v-viii, 10, 13-14, 36-37, 43, 48a-48b, 50, 67, 67a-67n, 75, 111, 117-119, 122-123, 123a-123b, 125-128, 128a-128b, 130-134, 134a-134b, 135-138, 138a-138b, 139-140, 140a-140b, 141, 141a-141b, 142-146, 147-149, 149a, 150-154, 156a-156b, 157, 170e-170f,	PSO*7*385	Removed incorrect listing of View Additional Reject Info (ARI) action Added signature alerts Updated wording for ¾ Days Supply Hold Added rounding functionality for ¾ Days Supply Hold Added new actions Submit Multiple Actions (SMA) and Suspense Date Calculation (SMA) Added new option View ePharmacy Rx (VER) Corrected earlier formatting errors Corrected typos Updated Service Code values Updated changed security key names Added TRICARE and CHAMPVA examples of rejects on a new order Updated name of TRICARE CHAMPVA Bypass/Override Report Updated screen shots related to patch changes Updated wording based on reviewer feedback

	171-178		Added CHAMPVA functionality Added separate section to list changes to security keys Added CHAMPVA to Glossary (S. Spence, PM; C. Smith, Tech Writer)
10/11	i-ii, v-viii, 4, 7-10, 36, 56-58, 64, 66, 95, 118, 120-124, 126-127, 128-128b, 135-137, 139-145, 146-146b, 148, 149-149b, 150-153, 154-154b, 155-156, 165, 175-178	PSO*7*359	Added new action View Additional Reject Info (ARI) Expanded ECME Numbers to twelve digits Updated screen shots related to patch changes Added TRICARE to Glossary Corrected typos Corrected formatting errors from 11/10 reissue (S. Spence, PM; C. Smith, Tech Writer)
09/11	i,vi-vii, 30a-30f	PSO*7*382	Added information regarding the new [PSO HRC PROFILE/REFILL] option. (N. Goyal, PM; J. Owczarzak, Tech Writer)
04/11	i, viii, 8, 170a-170d, 177-179	PSO*7*343	To add functionality to Outpatient Pharmacy for the On-Demand Displaying of FDA Medication Guides. Display FDA Medication Guide [MG] added to Other OP Actions [OTH] Updates to Index (T. Leggett, PM; B. Thomas, Tech Writer)

04/11	i, vi, vii, viii, 5, 8, 10, 27-27b, 28, 30, 39-39nnn, 40, 54-54t, 58, 59, 60-60l, 78, 82, 159, 163, 167-180	PSO*7*251	The following changes are included in this patch: -Outpatient List Manager Screen Views -Added HP and H to Hold Status -Removed DC code; Added DF,DE,DP,DD and DA -Added to Hidden Action List: IN - Removed DC code; Added DF,DE,DP,DD and DA, and - Added HP and H to Hold Status -Replaced Medication Short Profile -Inserted enhanced Order checks, Outpatient Pharmacy generated order checks -Added IN to Screen Scrape -Modified New Order Screen Scrape -Inserted Drug Allergy Screens -Updated Glossary and Index to start on odd pages (G. Tucker, PM; G. Scorca, Tech Writer)
11/10	All	PSO*7*358	Added information regarding TRICARE Active Duty Bypass/Override details (S. Spence, PM; G. Johnson, Tech Writer)

(This page included for two-sided copying.)

Preface

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

(This page included for two-sided copying.)

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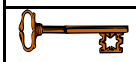
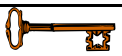
Chapter 1: Introduction

The Outpatient Pharmacy (OP) software provides a way to manage the medication regimen of veterans seen in the outpatient clinics and to monitor and manage the workload and costs in the Outpatient Pharmacy. The Pharmacy Ordering Enhancements (POE) project (patch PSO*7*46 for Outpatient Pharmacy) improves the flow of orders between Inpatient and Outpatient Pharmacy as well as between Computerized Patient Record System (CPRS) and backdoor pharmacy.

The primary benefits to the veteran are the assurance that he or she is receiving the proper medication and the convenience of obtaining refills easily. The clinicians and pharmacists responsible for patient care benefit from a complete, accurate, and current medication profile available at any time to permit professional evaluation of treatment plans. Utilization, cost, and workload reports provide management cost controlling tools while maintaining the highest level of patient care.

Documentation Conventions

This *Outpatient Pharmacy V. 7.0 Manager's User Manual* includes documentation conventions, also known as notations, which are used consistently throughout this manual. Each convention is outlined below.

Convention	Example
Menu option text is italicized.	There are eight options on the *Archiving* menu.
Screen prompts are denoted with quotation marks around them.	The "Dosage:" prompt displays next.
Responses in bold face indicate user input.	Select Orders by number: (1-6): **5**
<Enter> indicates that the Enter key (or Return key on some keyboards) must be pressed. **<Tab>** indicates that the Tab key must be pressed.	Type **Y** for Yes or **N** for No and press **<Enter>**. Press **<Tab>** to move the cursor to the next field.
Indicates especially important or helpful information.	Up to four of the last LAB results can be displayed in the message.
 Indicates that options are locked with a particular security key. The user must hold the particular security key to be able to perform the menu option.	 This option requires the security key PSOLOCKCLOZ.

Getting Help

?, ??, **???** One, two or three question marks can be entered at any of the prompts for online help. One question mark elicits a brief statement of what information is appropriate for the prompt. Two question marks provide more help, plus the hidden actions, and three question marks will provide more detailed help, including a list of possible answers, if appropriate.

Related Manuals

The following manuals are located on the VistA Documentation Library (VDL) at: http://www.va.gov/vdl.

Main Package Documentation:

- *Outpatient Pharmacy V. 7.0 Release Notes*
- *Outpatient Pharmacy V. 7.0 Manager's User Manual*
- *Outpatient Pharmacy V. 7.0 Pharmacist's User Manual*
- *Outpatient Pharmacy V. 7.0 Technician's User Manual*
- *Outpatient Pharmacy V. 7.0 User Manual – Supplemental*
- *Outpatient Pharmacy V. 7.0 Technical Manual/Security Guide*

Additional Documentation:

Additional documentation related to specific projects is also located on the VDL. For example, there may be several different Release Notes documents, which apply to specific projects. Also, there may be several sets of "Change Page" documents, which apply to changes made only for a specific package patch.

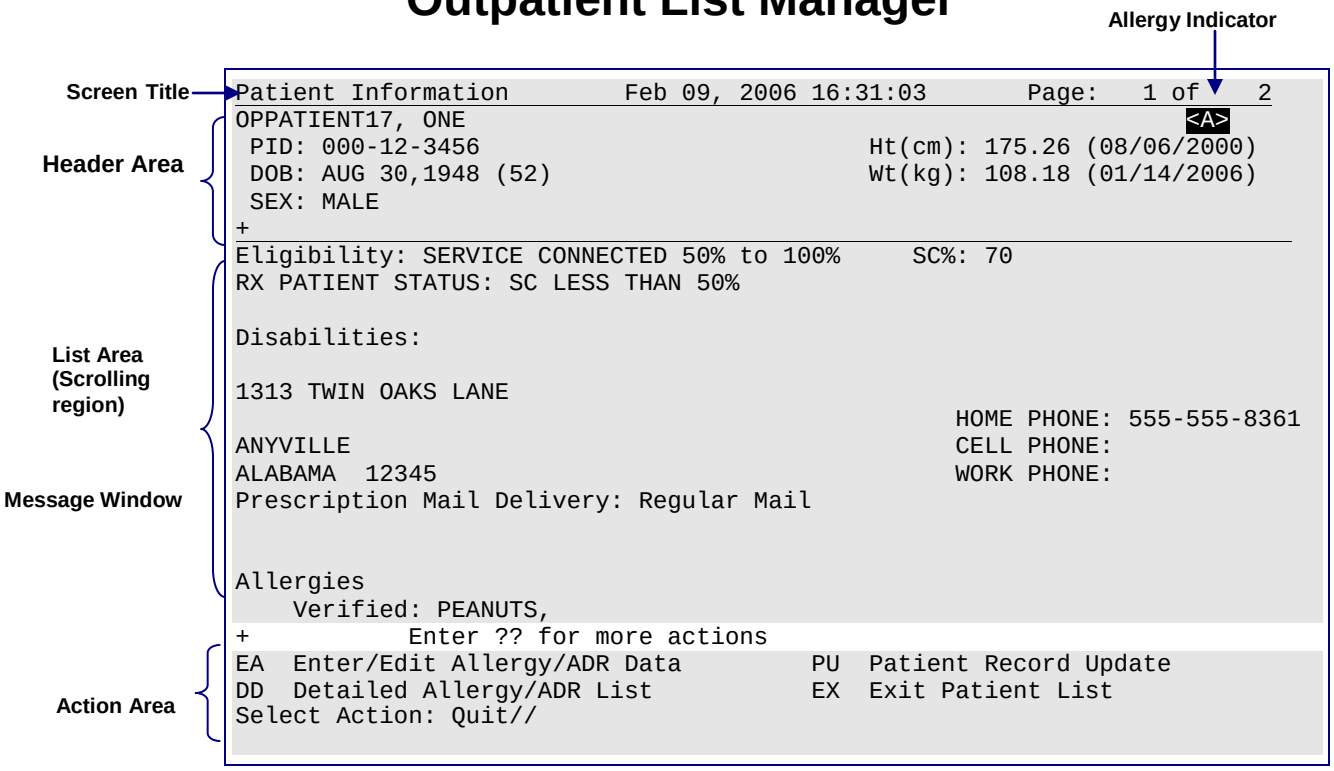
Chapter 2: List Manager

The screen displayed when processing an order has changed dramatically from the previous version of Outpatient Pharmacy (e.g., v. 6.0). The new screen was designed using List Manager.

This new screen gives more information and easier accessibility to vital reports and areas of a patient's chart.

Please take the time to read over the explanation of the screen and the actions that can now be executed at the touch of a key. This type of preparation before attempting to use List Manager will reduce the time and effort needed to become skilled in order processing with this new version of List Manager.

Outpatient List Manager



Screen title: The screen title changes according to what type of information List Manager is displaying (e.g., Patient Information, Medication Profile, New OP Order (ROUTINE), etc.).

Allergy indicator: This indicator displays when there has been information entered into the ALLERGY field for the patient. The indicator displays "NO ALLERGY ASSESSMENT" if there is no allergy assessment for the patient.

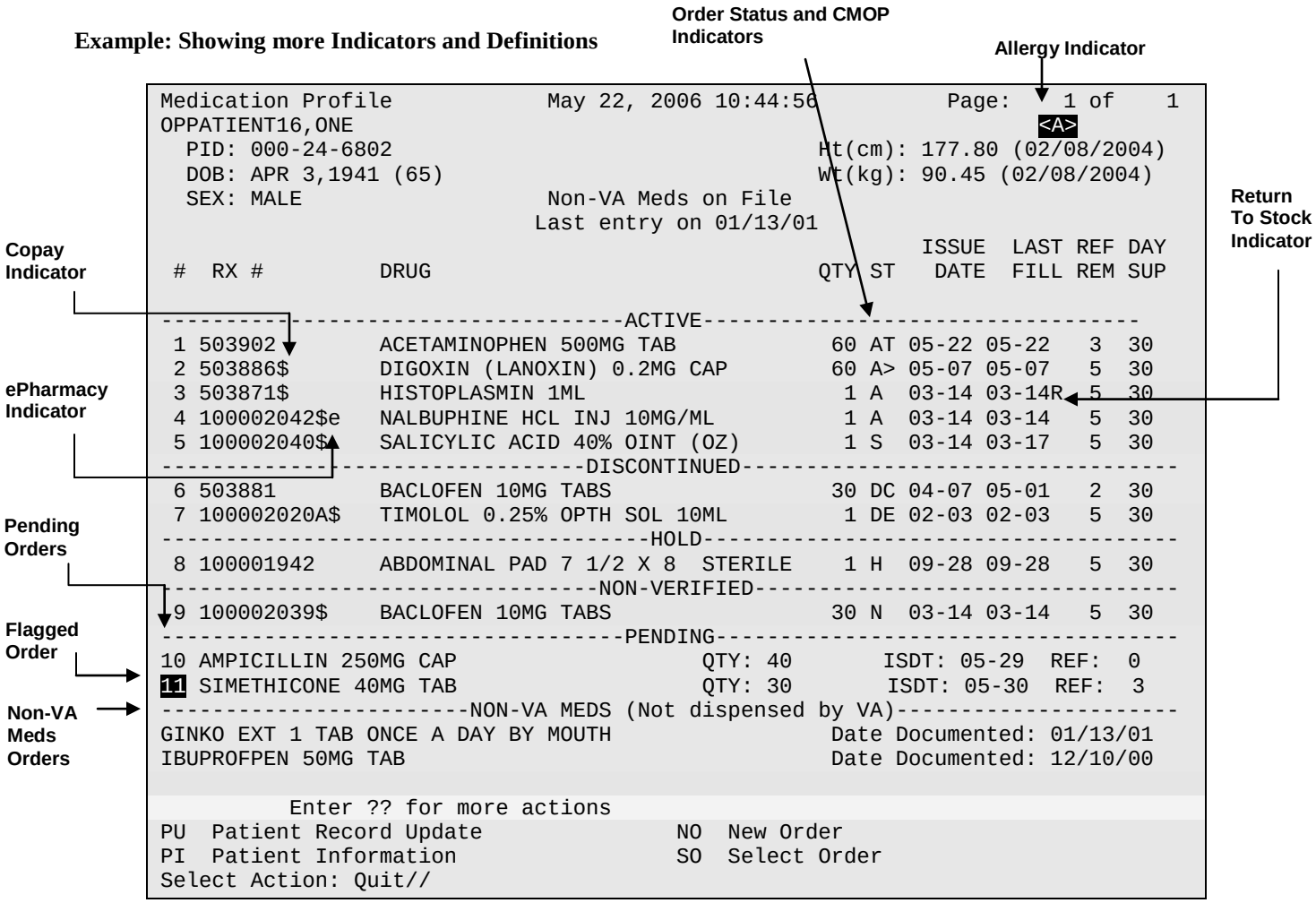
Header area: The header area is a "fixed" (non-scrollable) area that displays patient information.

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

Message window: This section displays a plus (+) sign, minus (-) sign, or informational text (i.e., Enter ?? for more actions). If a plus sign is entered at the action prompt, List Manager will "jump" forward a page. If a minus sign is displayed and entered at the action prompt, List Manager will "jump" back a screen. The plus and minus signs are only valid actions if they are displayed in the message window.

Action area: A list of actions display in this area of the screen. If a double question mark (??) is entered at the "Select Item(s)" prompt, a "hidden" list of additional actions that are available will be displayed.

Example: Showing more Indicators and Definitions



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

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

A	Active
S	Suspended
N	Non-Verified or Drug Interactions
HP	Placed on hold by provider through CPRS
H	Placed on hold via backdoor Pharmacy
E	Expired
DA	Auto discontinued due to admission
DP	Discontinued by provider through CPRS

The Status column may also reflect the type of Discontinue action performed on the order:

DF	Discontinued due to edit by a provider through CPRS
DE	Discontinued due to edit via backdoor Pharmacy
DC	Discontinued via backdoor Pharmacy
DD	Discontinued due to death

A "B" will be appended to the above statuses if the Bad Address Indicator was set and there was no active temporary address at the time of the last label activity.

CMOP Indicators: There are two separate indicators when the drug in an order is marked for Consolidated Mail Outpatient Pharmacy (CMOP) processing. This indicator is displayed after the Order Status if applicable.

>	Drug for the prescription is marked for CMOP
T	Displayed when the last fill is either in a Transmitted or Retransmitted CMOP state. (This indicator can overwrite the ">" indicator.

Copay Indicator: A "$" displayed to the right of the prescription number indicates the prescription is copay eligible.

ePharmacy Indicator An 'e' displayed to the right of the prescription number indicates that the prescription is electronic third-party billable.

Return to Stock Indicator: An "R" displayed to the right of the Last Fill Date indicates the last fill was returned to stock.

Pending Orders: Any orders entered through CPRS, or another outside source, that have not been finished by Outpatient Pharmacy.

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

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

Example: Showing Rejected Prescriptions

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

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


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

Using List Manager with Outpatient Pharmacy

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

For Outpatient Pharmacy, the List Manager does the following:

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

Entering Actions

Actions are entered by typing the name(s), or synonym(s) at the "Select Item(s)" prompt. In addition to the various actions that may be available specific to a particular option, List Manager provides generic actions applicable to any List Manager screen. A double question mark (??) may be entered at the "Select Action" prompt for a list of all actions available. The following is a list of generic List Manager actions with a brief description. The synonym for each action is shown in brackets following the action name. Entering the synonym is the quickest way to select an action.

Action	**Description**
Next Screen [+]	Move to the next screen (may be shown as a default).
Previous Screen [-]	Move to the previous screen.
Up a Line [UP]	Move up one line.
Down a Line [DN]	Move down one line.
Shift View to Right [>]	Move the screen to the right if the screen width is more than 80 characters.
Shift View to Left [<]	Move the screen to the left if the screen width is more than 80 characters.
First Screen [FS]	Move to the first screen.
Last Screen [LS]	Move to the last screen.

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

Outpatient Pharmacy Hidden Actions

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

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

Action	Description
Activity Logs [AL]	Displays the Activity Logs.
Copy [CO]	Allows the user to copy and edit an order.
DIN	Displays available drug restriction/guideline information for the Dispense Drug and Orderable Item associated with the selected medication order.
IN	Intervention Menu
Hold [HD]	Places an order on a hold status.
Other OP Actions [OTH]	Allows the user to choose from the following sub-actions: Progress Note [PN] Action Profile [AP] Print Medication Instructions [MI] Display Orders' Statuses [DO] Non-VA Meds Report [NV] Display FDA Medication Guide [MG] Reprint FDA Medication Guide [RM]]

Action	Description
Patient Information [PI]	Shows patient information, allergies, adverse reactions, and pending clinic appointments.
Pull Rx [PP]	Action taken to pull prescription(s) early from suspense.
Reprint [RP]	Reprints the label.
View Reject [REJ]	Allows the user to view and resolve the Refill Too Soon or Drug Utilization Review returned by the third party payer for a specific prescription/fill claim.
Unhold [UH]	Removes an order from a hold status.
Verify [VF]	Allows the pharmacist to verify an order a pharmacy technician has entered.

Speed Actions

These Outpatient Pharmacy actions are referred to as “speed actions” and appear on the Medication Profile screen. These actions can be applied to one or more orders at a time.

Action	Description
Reprint [RP]	Reprints the label.
Renew [RN]	A continuation of a medication authorized by the provider.
Refill [RF]	A second or subsequent filling authorized by the provider.
Reprint Signature [RS]	Reprints the signature log.
Discontinue [DC]	Status used when an order was made inactive either by a new order or by the request of a physician.
Release [RL]	Action taken at the time the order is filled and ready to be given to the patient.
Pull Rx [PP]	Action taken to pull prescription(s) early from suspense.
Inpat. Profile [IP]	Action taken to view an Inpatient Profile.
CM	Action taken to manually queue to CMOP.
Fill/Rel Date Disply [RDD]	Switch between displaying the FILL DATE column and the LAST RELD column.
Display Remote [DR]	Action taken to display a patient’s remote prescriptions.

Other Outpatient Pharmacy ListMan Actions

Action	Description
Exit [EX]	Exit processing pending orders.
AC	Accept.
BY	Bypass.
ED	Edit.
FN	Finish.

Other Screen Actions

Action	Description
Edit/Enter Allergy/ADR Data [EA]	Provides access to the Adverse Reaction Tracking package to allow entry and/or edit of allergy adverse reaction data for the patient. See the Adverse Reaction Tracking package documentation for more information on allergy/ADR processing.
Detailed Allergy Display [DA]	Displays a detailed listing of the selected item from the patient's allergy/ADR list. Entry to the Edit Allergy/ADR Data action is provided with this list also.
Patient Record Update [PU]	Allows editing of patient data such as SSN, birth date, address, phone, and outpatient narrative. Patient data can also be updated using the *Update Patient Record* menu option. If implementing Other Language Modifications, either can be used to set a patient's other language preference.
New Order [NO]	Allows new orders to be entered for the patient.
Exit Patient List [EX]	Exit patient’s Patient Information screen so that a new patient can be selected.

Chapter 3: Using the Pharmacist Menu

The options on the *Pharmacist Menu* are intended for use by pharmacists.

Example: Accessing the *Pharmacist Menu*

```
Select OPTION NAME: PSO USER1       Pharmacist Menu
Outpatient Pharmacy software - Version 7.0
```

The following options are available on the *Pharmacist Menu*:

- *Bingo Board User ...*
- *Change Label Printer*
- *Change Suspense Date*
- *DUE Supervisor ...*
- *Enter/Edit Clinic Sort Groups*
- *External Interface Menu ...*
- *Medication Profile*
- *Pharmacy Intervention Menu ...*
- *Print from Suspense File*
- *Process Drug/Drug Interactions*
- *Pull Early from Suspense*
- *Queue CMOP Prescription*
- *Release Medication*
- *Return Medication to Stock*
- *Rx (Prescriptions) ...*
- *Update Patient Record*
- *Verification ...*

Patient Lookup

The ability to look up a patient by prescription number or wand a barcode with the prescription has been added to the patient lookup prompt on the following options.

- *Bingo Board User* ... [PSO BINGO USER]
- *Medication Profile* [PSO P]
- *Rx (Prescriptions)* ... [PSO RX]
- *Update Patient Record* [PSO PAT]

The help text for patient lookup reads as follows.

```
Enter the prescription number prefixed by a # (ex. #XXXXXXX) or
Wand the barcode of the prescription. The format of the barcode is
NNN-NNNNNNN where the first 3 digits are your station number.
          - OR -
Answer with PATIENT NAME, or SOCIAL SECURITY NUMBER, or last 4 digits
of SOCIAL SECURITY NUMBER, or first initial of last name with last 4
digits of SOCIAL SECURITY NUMBER
Do you want the entire NNNNNNNN-Entry PATIENT List?
```

Chapter 4: Using the Bingo Board

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

Bingo Board User

[PSO BINGO USER]

The *Bingo Board User* menu enables use of the bingo board display. The options on this menu allow a patient's name or a number to be displayed, entered, or removed from the bingo board display located in the pharmacy area.

When the routing for an order is set to "Window", the entering of prescription orders stores information in the bingo board PATIENT NOTIFICATION (Rx READY) file. For new, renew, pull early from suspense, refill orders, barcode refill/renew, and finish process for orders entered via CPRS, the date and time is captured when the order is stored in this file. The same occurs for partials, except the time is captured when a prescription number is entered.

Releasing the prescription places the name or ticket number of the patient on the bingo board monitor if a display group exists and stores data in the WAITING TIME file. The options on this menu are used to manually enter, display, or remove a patients name or number from the monitor.

The following options are available on the *Bingo Board User* menu:

- *Enter New Patient*
- *Display Patient's Name on Monitor*
- *Remove Patient's Name from Monitor*
- *Status of Patient's Order*

Enter New Patient

[PSO BINGO NEW PATIENT]

Use this option to manually enter the name of a new patient on the bingo board. Each prescription number for the patient's order must also be entered.

A "Ticket #" prompt displays if ticket number was chosen as the method of display in the *Enter/Edit Display* option on the *Bingo Board Manager* menu. Enter the ticket number and at the next prompt enter each of the prescription numbers for that patient.

Display Patient's Name on Monitor

[PSO BINGO DISPLAY PATIENT]

Use this option to begin displaying the name or number of a patient whose prescription is ready. The message, "PRESCRIPTIONS ARE READY FOR:" appears as fixed text on the display screen. This option displays the following reminder for ECME billable prescriptions: "*** This Pharmacy Rx requires a patient signature! ***"

Remove Patient's Name from Monitor
[PSO BINGO DELETE PATIENT]

After the patient picks up the prescription, remove the name or ticket number from the display either manually or through the barcode reader.

It is recommended that a patient's name be removed from the monitor as soon as the prescription is picked up.

Status of Patient's Order
[PSO BINGO STATUS]

This option enables checking of the number of prescriptions a patient has ready, the division, time in/time out, and the prescription number(s). There are four possible statuses:

Status	Description
Pending	Active order input via CPRS that is in the PENDING OUTPATIENT ORDERS file.
Being Processed	Order that is in the PATIENT NOTIFICATION (Rx READY) file, but not displayed.
Ready For Pickup	Order that is in the PATIENT NOTIFICATION (Rx READY) file and is being displayed.
Picked Up	Order that has been picked up.

Example: Status of Patient's Order

```
Select Bingo Board User Option: Status of Patient's Order

Enter Patient Name: OPPATIENT17,ONE       08-30-48    000123456    NO   NSC
VETERAN

        OPPATIENT17,ONE has the following orders for 10/31/06


Being Processed: ***Entered on OCT 31, 2006***
     Division: GENERAL HOSPITAL            Time In: 10:27    Time Out:
     Rx #: 500416,

Pending:
     Orderable Item: ACETAMINOPHEN              Provider: OPPROVIDER24,TWO
     Entered By: OPCLERK28,FOUR                  Time In: 10/31/06@06:46
     Drug: ACETAMINOPHEN 325MG TAB UD           Routing: MAIL

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


Enter Patient Name: <Enter>
```

Chapter 5: Changing the Label Printer

This chapter describes the *Change Label Printer* option.

Change Label Printer

[PSO CHANGE PRINTER]

This option allows the user to change the printer to which labels are printed.

```
Select Outpatient Pharmacy Manager Option: Change Label Printer
Select LABEL PRINTER: LABELPRT2//  <Enter> LABELPRT2

OK to assume label alignment is correct? YES//<Enter>

ALBANY's FDA Medication Guide Printer(s) on file:

     BIRM1$PRT
     L8150$PRT

Select FDA MED GUIDE PRINTER: HOME// SUP

 1 SUPPORT LEXMARK LASERJET   SUP HALLWAY - LINE 111
 2 SUPPORT LINE PRINTER   ROOM 273
 3 SUPPORT TEST PRINTER   ROOM 269
Choose 1-3> 1  SUPPORT LEXMARK LASERJET  SUP HALLWAY - LINE 111    Right
Margin:
 96//

This device cannot be used for printing FDA Medication Guides.
Please, contact your IRM and ask them to update the Windows
Network Printer Name for this device.

Select FDA MED GUIDE PRINTER: HOME// L8150$PRT
```

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Chapter 6: Changing the Suspense Date

This chapter describes the *Change Suspense Date* option.

Change Suspense Date

[PSO PNDCHG]

This option allows the suspense date to be changed for a specific prescription or all prescriptions for a patient. The new suspense date will become the fill/refill date automatically. The opportunity is also given to delete a specific prescription, or all prescriptions for a patient, from suspense while in this option. If a refill is deleted from suspense that has not yet been printed, the refill information will be deleted from the prescription, and the various fill dates will be adjusted accordingly. This option does not produce a label.

When processing a drug/drug interaction, the profile will list the status of the interacting drugs as pending (P).

(This page included for two-sided copying.)

Chapter 7: Evaluating Drug Usage

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

DUE Supervisor

[PSOD SUPERVISOR]

This menu provides options to create a questionnaire based on the criteria of a Drug Usage Evaluation. An answer sheet can also be printed for the provider's use in answering the questionnaire. The answer sheet can be distributed to the clinic so that the provider may complete it when ordering a medication being evaluated. An answer sheet can also be generated (optional) when a patient's Action Profile prints, if the profile contains a medication being evaluated. The provider's responses can be entered into the DUE ANSWER SHEET file.

The following options are available on the *DUE Supervisor* menu:

- *1 Enter a New Answer sheet*
- *2 Edit an Existing Answer Sheet*
- *3 Create/Edit a Questionnaire*
- *4 Batch Print Questionnaires*
- *5 DUE Report*

Enter a New Answer Sheet

[PSOD CREATE ANSWER SHEET]

In this option the user enters answers to a DUE Questionnaire. This creates an answer sheet entry in the DUE ANSWER SHEET file. These answer sheets can be kept online for statistical and/or compliance studies. Answer sheets are stored in the file using a sequence number. This number is automatically generated by the computer and should be written on the hard copy of the answer sheet immediately so that it can be used later in editing or deleting the entry.

Edit an Existing Answer Sheet

[PSOD EDIT ANSWER SHEET]

Edit a DUE Answer Sheet entry using this option. Ordinarily, the sequence number is available when editing the Answer Sheet; however, the file can be searched if the provider, drug, or questionnaire is known by typing ^S at the "SEQUENCE NUMBER" prompt. The search displays all of the entries containing the combination of provider, drug, or questionnaire used in the search.

Create/Edit a Questionnaire

[PSOD DUE BUILD QUESTIONNAIRE]

To create a questionnaire, first select one or more drugs being evaluated. After selecting the drugs, create a set of questions to be used on the questionnaire. These questions do not have to be added to the DUE QUESTION file since they are being added through this option. The questionnaire must be marked as "Active" and "Active for Profiles" for the Answer Sheet to automatically print with the Action Profiles. A summary can be printed for the questionnaire using the *DUE Report* option. For this reason, when creating a questionnaire, the user should strive to make each question a yes, no, or unknown type question. Questions having a free text or numeric type answer are ignored in the summary.

The PRINT DUE QUESTIONNAIRE site parameter needs to be set to "YES" for the questionnaire to print with the Action Profile.

Batch Print Questionnaires

[PSOD BATCH PRINT QUESTIONNAIRE]

To print a blank for of a selected questionnaire, enter the number of copies and a printer device. These questionnaire answer sheets can be distributed to providers to complete when ordering medications being evaluated.

DUE Report

[PSOD DUE SORT AND PRINT]

This report displays entries from the DUE ANSWER SHEET file. A summary of this report, showing the number of answer sheets, number of questionnaires, and a breakdown of all yes/no/unknown type questions is available. This breakdown shows each question number and the number of times it was answered yes/no/unknown, or unanswered. For this reason, when creating a questionnaire, the user should strive to make each question a yes, no, or unknown type question. Questions having a free text or numeric type answer are ignored in the summary.

Chapter 8: Enter/Edit Clinic Sort Groups

This chapter describes the *Enter/Edit Clinic Sort Groups* option.

Enter/Edit Clinic Sort Groups

[PSO SETUP CLINIC GROUPS]

This option enables a group of clinics to be identified that will print together for the action/informational profiles.

Example: Enter/Edit Clinic Sort Groups

```
Select Pharmacist Menu Option: ENTer/Edit Clinic Sort Groups

Select Clinic Sort Group: ?
 Answer with OUTPATIENT CLINIC SORT GROUP NAME
Choose from:
   CLINIC 1
   Clinic 2

     You may enter a new OUTPATIENT CLINIC SORT GROUP, if you wish
     Answer must be 3-30 characters in length.
Select Clinic Sort Group: CLINIC 3
  Are you adding 'CLINIC 3' as
    a new OUTPATIENT CLINIC SORT GROUP (the 6TH)? Y  <Enter> (Yes)
NAME: CLINIC 3// <Enter>
Select SORT GROUPS: ?
 Answer with SORT GROUP SORT GROUPS
     You may enter a new SORT GROUP, if you wish
     Enter name of clinic to be included in the sort group.
 Answer with HOSPITAL LOCATION NAME, or ABBREVIATION
 Do you want the entire 122-Entry HOSPITAL LOCATION List? N  (No)
Select SORT GROUPS: 2 EAST
  Are you adding '2 EAST' as a new SORT GROUP (the 1ST for this OUTPATIENT
CLINIC SORT GROUP)? Y  (Yes)
Select SORT GROUPS: <Enter>
```

(This page included for two-sided copying.)

Chapter 9: Using the Interface Menu

This chapter describes the options on the *External Interface Menu*.

This menu is locked with the PSOINTERFACE lock. The PSOINTERFACE key should be assigned to all persons responsible for performing these functions.

External Interface Menu

[PSO EXTERNAL INTERFACE]

This menu contains the following options for using an external interface device.

- *Purge External Batches*
- *Reprint External Batches*
- *View External Batches*

Purge External Batches

[PSO INTERFACE PURGE]

This option purges entries from the PHARMACY EXTERNAL INTERFACE file.

Example: Purge External Batches

```
Select External Interface Menu Option: Purge External Batches
Enter cutoff date for purge of External Interface file:  022807  (FEB 28, 2007)

Purge entries that were not successfully processed?  NO// <Enter>

Purge queued to run in background.

Select External Interface Menu Option:
```

Reprint External Batches
[PSO INTERFACE REPRINT]

This option enables the reprinting of labels for batches of prescriptions that have been sent to the external interface.

Example: Reprint External Batches

```
Select External Interface Menu Option: Reprint External Batches

Enter a date/time range to see all batches sent to the External Interface.

Start date/time: 022807  (FEB 28, 2007)

End date/time: 030707  (MAR 07, 2007)

Gathering batches, please wait...


 BATCH    QUEUED TO PRINT ON:           PATIENT:         ALBANY
-------------------------------------------------------------------------------

  1       FEB 28,2007@08:06:14          OPPATIENT12,ONE
  2       FEB 28,2007@08:10:56          OPPATIENT12,ONE
  3       FEB 28,2007@08:19:20          OPPATIENT22,ONE
  4       FEB 28,2007@08:38:17          OPPATIENT28,ONE
  5       FEB 28,2007@08:50:32          OPPATIENT9,ONE
  6       FEB 28,2007@09:15:35          OPPATIENT9,ONE
  7       FEB 28,2007@09:33:48          OPPATIENT18,ONE
  8       FEB 28,2007@09:39:31          OPPATIENT1,ONE
  9       FEB 28,2007@10:36:51          OPPATIENT10,ONE
  10      FEB 28,2007@13:37:24          OPPATIENT4,ONE
  11      FEB 28,2007@13:46:07          OPPATIENT8,ONE

Select Batch(s) to reprint:  (1-11): 5,6

Batches selected for Reprint are:

Batch 5 Queued for FEB 28,2007@08:50:32 by OPPHARMACIST4,THREE
Batch 6 Queued for FEB 28,2007@09:15:35 by OPPHARMACIST4,THREE

Reprint the FDA Medication Guide? No// YES

Before Reprinting, would you like a list of these prescriptions? N// <Enter> O

Are you sure you want to Reprint labels? Y// <Enter> YES..

Select LABEL DEVICE: [Select Print Device]


LABEL(S) QUEUED TO PRINT!


Select External Interface Menu Option:
```

View External Batches
[PSO INTERFACE VIEW]

With this option, batches of prescriptions that have printed from the external interface can be viewed.

Example: View External Batches

```
Select External Interface Menu Option: View External Batches

Enter a date/time range to see all batches sent to the External Interface.

Start date/time: 022807  (FEB 28, 2007)

End date/time: 030707  (MAR 07, 2007)

Gathering batches, please wait...
```

```
 BATCH    QUEUED TO PRINT ON:           PATIENT:        BROWNS PLACE
-----------------------------------------------------------------------------
  1       FEB 28,2007@08:06:14          OPPATIENT12,ONE
  2       FEB 28,2007@08:10:56          OPPATIENT12,ONE
  3       FEB 28,2007@08:19:20          OPPATIENT22,ONE
  4       FEB 28,2007@08:38:17          OPPATIENT28,ONE
  5       FEB 28,2007@08:50:32          OPPATIENT9,ONE
  6       FEB 28,2007@09:15:35          OPPATIENT9,ONE
  7       FEB 28,2007@09:33:48          OPPATIENT18,ONE
  8       FEB 28,2007@09:39:31          OPPATIENT1,ONE
  9       FEB 28,2007@10:36:51          OPPATIENT10,ONE
  10      FEB 28,2007@13:37:24          OPPATIENT4,ONE
  11      FEB 28,2007@13:46:07          OPPATIENT8,ONE

Select Batch(s) to reprint:  (1-11): 5,6

Batches selected for Viewing are:

Batch 5 Queued for FEB 28,2007@08:50:32 by OPPHARMACIST4,THREE
Batch 6 Queued for FEB 28,2007@09:15:35 by OPPHARMACIST4,THREE

Print list to the screen or to a printer:  (S/P): Screen// <Enter>

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

```
RX #              NAME -> OPPATIENT9,ONE                    BATCH 5
-----------------------------------------------------------------------------
2820              NADOLOL 40MG TAB                          ACTIVE

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

```
RX #              NAME -> OPPATIENT9,ONE                    BATCH 6
-----------------------------------------------------------------------------
2821              MICONAZOLE NITRATE 2% LOT 60ML            ACTIVE
END OF LIST
```

(This page included for two-sided copying.)

Chapter 10: Using the Medication Profile

This chapter describes the Medication Profile, its different formats, and how it can be used in patient care.

Medication Profile

[PSO P]

The Medication Profile displays a profile of all prescriptions on file for a particular patient. The prescription display includes all Non-VA Med orders also. The user may view this information directly on the screen or request it to be printed. The medication profile is available in two formats: short or long.

Medication Profile: Short Format

The short format displays the following information:

- patient name
- eligibility
- reactions
- prescription number
- Sig
- quantity
- last fill date
- address
- DOB
- narrative
- prescriptions
- drug name
- status
- issue date
- refills remaining.

The short report format of the fields for Non-VA Med orders include the drug name or orderable item name, dosage, schedule and date documented.

The short format displays the status in an abbreviated form. The following is an explanation of the codes:

Code	Status/Description
A	Active
B	Bad Address Indicated
DF	Discontinued due to edit by a provider through CPRS
DE	Discontinued due to edit via backdoor Pharmacy
DP	Discontinued by provider through CPRS
DC	Discontinued
DD	Discontinued due to death
DA	Auto discontinued due to admission
E	Expired
HP	Placed on hold by provider through CPRS
H	Placed on hold via backdoor Pharmacy
N	Non Verified
P	Pending due to drug interactions
S	Suspended
$	Copay eligible
E	third-party electronically billable

R	Returned to stock prescription (next to last fill date)

For the *Patient Prescription Processing*, *Complete Orders from OERR*, and *Action Profile (132 COLUMN PRINTOUT)* options, if a temporary address has no end date, the following text is displayed in the Status column: “(Temp address from XXX 99,9999 till (no end date))”.

(This page included for two-sided copying.)

Example: Medication Profile – Short Format

```
Medication Profile            Jun 12, 2006@22:33:13          Page:    1 of    1
OPPATIENT16, ONE
  PID: 000-55-3421                                  Ht(cm): _______ (______)
  DOB: DEC 2, 1923 (82)                             Wt(kg): 100.00 (06/24/2003)
  SEX: MALE                  Non-VA Meds on File
                            Last entry on 1-20-05
                                                              ISSUE  LAST REF DAY
 #  RX #         DRUG                                 QTY ST   DATE  FILL REM SUP

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

            Enter ?? for more actions

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

Select Action: Quit//
```

Order #4 is highlighted (reverse video) to indicate that it has recently expired.
Orders #5,7,10 are highlighted (reverse video) to indicate that they were recently discontinued.
Hold Type display codes are shown in **red.**
Discontinue Type display codes are shown in **red.**

Medication Profile: Long Format

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

- physician's name
- fill date
- dates of refills/partial fills
- whether the prescription was filled at the pharmacy window or by mail
- clerk code
- total allowable refills
- which division filled it

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

Example: Medication Profile – Long Format

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

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

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


WEIGHT(Kg):                              HEIGHT(cm):
DISABILITIES:

ALLERGIES:_____________________________________________________________

ADVERSE REACTIONS:_____________________________________________________

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

Outpatient prescriptions are discontinued 72 hours after admission
```

```
                     Medication Profile Sorted by ISSUE DATE


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

----------example continues----------

```
-------------------------------------------------------------------------------
                        Non-VA MEDS (Not Dispensed by VA)
GINKO BILLOBA TAB
  Dosage: 1 TABLET
  Schedule: ONCE A DAY
  Route: MOUTH
  Status: Discontinued (10/08/03)
  Start Date: 09/03/03     CPRS Order #: 12232
  Documented By: OPCLERK21,FOUR on 09/03/03
  Statement of Explanation: Non-VA medication not recommended by VA provider.
```

```
ACETAMINPHEN 325MG CT
  Dosage: 325MG
  Schedule:
  Route:
  Status: Active
  Start Date: 09/03/03     CPRS Order #: 12234
  Documented By: OPCLERK21,FOUR on 09/03/03
  Statement of Explanation: Non-VA medication recommended by VA provider
                            Patient wants to buy from Non-VA pharmacy
```

The Intervention menu hidden action has been included in the Patient Information, the Medication Profile and Detailed Order ListMan screens when utilizing the following options:

- Patient Prescription Processing [PSO LM BACKDOOR ORDERS]
- Complete Orders from OERR [PSO LMOE FINISH]
- Edit Prescriptions [PSO RXEDIT]

See “Using The Pharmacy Intervention Menu” for more details.

Medication Profile and Refill

[PSO HRC PROFILE/REFILL]

This option was originally requested by the Health Resource Center (HRC) to provide a new standalone option similar to that of the ePharmacy Medication Profile (View Only) [PSO PMP] option for the Compensation and Pension Record Interchange (CAPRI) system. It allows users to view a medication profile as well as refill prescriptions for a specific patient.

Example 1: Medication Profile with default view

```
Patient Medication Profile    Jun 04, 2007@19:22:16                 Page:    1 of    1
OPPATIENT,ONE                                                      <A>
  PID: 000-12-5678                                       HEIGHT(cm): 175.26 (11/21/2006)
  DOB: NOV 28,1900 (111)                                 WEIGHT(kg): 108.18 (08/09/2007)
  SEX: MALE                                       EXP/CANCEL CUTOFF: 120 DAY
                                                            ISSUE    LAST     REF  DAY
  # Rx#           DRUG [^]                            QTY ST  DATE     FILL     REM  SUP
  1 100004112     ALBUTEROL INHALER                     1 A   04-21-07 04-21-07  11    7
  2 300483e       ALPRAZOLAM 0.25MG TABS               30 DC  06-14-07 06-14-07  11   30
  3 100004113     AMITRIPTYLINE 10MG TAB               60 A   04-21-07 04-21-07  11   30
  4 100004075e    CABERGOLINE 0.5MG TAB                 7 E   05-18-05 05-18-05   6    7
  5 100004155     DESIPRAMINE 25MG                     90 S   02-23-07 02-11-07  11   90
  6 100004022$e   DIGOXIN 0.05MG/ML ELIX (60CC)        30 A   02-01-07 02-20-07  10   90
  7 100004081     METAPROTERENOL 5% SOLUTION 10ML      15 DC  06-02-07 06-03-07  11   15
  8 100004082     METAPROTERENOL 5% SOLUTION 10ML      10 DC  06-02-07 06-03-07  11   10
  9 100004083     METAPROTERENOL 5% SOLUTION 10ML      15 A>  06-02-07 06-23-07  11   15
 10 100004079     NICOTINE 10MG/ML SOLN NASAL SPRAY     1 A>  06-02-07 06-23-07  11   15
 11 100003298     SIMVASTATIN 20MG TAB                  5 DC  05-28-05 04-27-07   3   30
 12 100003298A    SODIUM CHLORIDE 0.9% NASAL SOLN(O     1 A   05-10-07 05-10-07  11   30
 13 100004070e    VALSARTAN 80MG TAB                    5 S   06-28-07 05-31-07  11   30
                                  PENDING (2 order)
 14 ALBUTEROL INHALER                                   RF  06-03-07            2   30
 15 AMITRIPTYLINE 10MG TAB                              RN  06-02-07            3   10
                     Non-VA MEDS (Not dispensed by VA) (1 order)
 16 TAMOXIFEN CITRATE 10MG TABS                     Date Documented: 06/04/07


          Enter ?? for more actions
CV  Change View           PI  Patient Information   SIG Show/Hide SIG
GS  Group by Status       RF  Refill
Select: Quit//
```

The following options are available as Hidden Menu actions on this screen:

DR	- Sort by Drug	LF	- Sort by Last Fill
RX	- Sort by Prescription	ID	- Sort by Issue Date

The *CV (Change View)* action allows the user to change some characteristics of the screen above. The user can also save and/or delete preferences, which will be used every time the user runs this option.The users can have one set of preferences for each Division defined.

Example 2: Change View action

Enter CV at the “Select” prompt to change the view preferences.

```
     OPPROVIDER,ONE's current default view (ALBANY):
     ----------------------------------------
     EXP/CANCEL CUTOFF  : 120 DAYS
     SORT BY            : DRUG NAME
     SORT ORDER         : ASCENDING
     DISPLAY SIG        : NO
     GROUP BY STATUS    : YES
     DISPLAY ORDER COUNT: YES

     Delete this default view? NO// <Enter>

EXP/CANCEL CUTOFF: 120// 120 DAYS
SORT BY: DR// DRUG NAME
SORT ORDER: ASCENDING// ASCENDING
DISPLAY SIG: OFF// OFF
GROUP BY STATUS: OFF// ON
DISPLAY ORDER COUNT: ON// OFF

Save as your default View? NO// YES

Saving...OK!
```

Example 3: Patient Information action

Enter PI at the “Select” prompt to view patient information.

```
Patient Information           Jul 12, 2011@13:28:53          Page:    1 of    2
OPPATIENT,ONE                                                          <A>
  PID: 000-12-5678                              Ht(cm): _______ (______)
  DOB: NOV 28,1900 (111)                        Wt(kg): _______ (______)
  SEX: MALE
Eligibility: NSC, VA PENSION
RX PATIENT STATUS: OPT NSC

Disabilities: POST-TRAUMATIC STRESS DISORDER-100% (SC),

2222 CENTRAL AVE
                                                  HOME PHONE:
ALBANY                                            CELL PHONE:
NEW YORK  01280-7654                              WORK PHONE:
Prescription Mail Delivery: Regular Mail
Cannot use safety caps.

Allergies
    Verified: PENICILLIN,

Adverse Reactions





+         Enter ?? for more actions
DD  Detailed Allergy/ADR List           EX  Exit Patient List
Select Action: Next Screen//
```

Example 4: Medication Profile with SIG expanded

Enter SIG at the “Select” prompt to show/hide the Rx SIG.

```
Patient Medication Profile    Jun 04, 2007@19:22:16          Page:    1 of    1
OPPATIENT,ONE                                                       <A>
  PID: 000-12-5678                              HEIGHT(cm): 175.26 (11/21/2006)
  DOB: NOV 28,1900 (111)                        WEIGHT(kg): 108.18 (08/09/2007)
  SEX: MALE                                EXP/CANCEL CUTOFF: 120 DAY
                                                            ISSUE    LAST     REF  DAY
  # Rx#           DRUG [^]                            QTY ST DATE     FILL     REM  SUP
  1 100004112     ALBUTEROL INHALER                     1 A   04-21-07 04-21-07  11    7
    SIG: TAKE 1 PUFF BY MOUTH EVERY DAY FOR 10 DAYS
  2 300483e       ALPRAZOLAM 0.25MG TABS               30 DC  06-14-07 06-14-07  11   30
    SIG: TAKE ONE CAPSULE BY BY MOUTH EVERY MORNING
  3 100004113     AMITRIPTYLINE 10MG TAB               60 A   04-21-07 04-21-07  11   30
    SIG: TAKE ONE TABLET BY BY MOUTH EVERY MORNING
  4 100004075e    CABERGOLINE 0.5MG TAB                 7 E   05-18-05 05-18-05   6    7
    SIG: TAKE 2 TABLET(S) BY BY MOUTH EVERY 12 HOURS
  5 100004155     DESIPRAMINE 25MG                     90 S   02-23-07 02-11-07  11   90
    SIG: TAKE 2 TABLET(S) BY BY MOUTH EVERY 12 HOURS
  6 100004022$e   DIGOXIN 0.05MG/ML ELIX (60CC)        30 A   02-01-07 02-20-07  10   90
    SIG: INJECT 1000IM EVERY DAY
  7 100004081     METAPROTERENOL 5% SOLUTION 10ML      15 DC  06-02-07 06-03-07  11   15
    SIG: INJECT 1000 IM EVERY DAY
  8 100004082     METAPROTERENOL 5% SOLUTION 10ML      10 DC  06-02-07 06-03-07  11   10
    SIG: INJECT 1000 IM EVERY DAY
  9 100004083     METAPROTERENOL 5% SOLUTION 10ML      15 A>  06-02-07 06-23-07  11   15
    SIG: INJECT 1000 IM EVERY DAY
 10 100004079     NICOTINE 10MG/ML SOLN NASAL SPRAY     1 A>  06-02-07 06-23-07  11   15
    SIG: APPLY 1 PATCH ON SHOULDER DAILY
 11 100003298     SIMVASTATIN 20MG TAB                  5 DC  05-28-05 04-27-07   3   30
    SIG: TAKE 2 TABLET(S) PO FOUR TIMES A DAY
 12 100003298A    SODIUM CHLORIDE 0.9% NASAL SOLN(O     1 A   05-10-07 05-10-07  11   30
    SIG: TAKE 2 PUFFS EACH NOSTRIL EVERY 8 HOURS
 13 100004070e    VALSARTAN 80MG TAB                    5 S   06-28-07 05-31-07  11   30
    SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
                                 PENDING (2 order)
 14 ALBUTEROL INHALER                                   RF  06-03-07            2   30
    SIG: 1 PUFF BY MOUTH EVERY DAY FOR 5 DAYS
 15 AMITRIPTYLINE 10MG TAB                              RN  06-02-07            3   10
    SIG: TAKE 2 TABLET(S) PO FOUR TIMES A DAY
                      Non-VA MEDS (Not dispensed by VA) (1 order)
 16 TAMOXIFEN CITRATE 10MG TABS                     Date Documented: 06/04/07
    SIG: TAKE 2 TABLET(S) PO FOUR TIMES A DAY


          Enter ?? for more actions
CV  Change View           PI  Patient Information   SIG Show/Hide SIG
GS  Group by Status       RF  Refill
Select: Quit//
```

Example 5: Group By Status action

Enter GS at the “Select” prompt to group/ungroup list by Rx status.

```
Patient Medication Profile    Jun 04, 2007@19:22:16          Page:    1 of    1
OPPATIENT,ONE                                                        <A>
  PID: 000-12-5678                                HEIGHT(cm): 175.26 (11/21/2006)
  DOB: NOV 28,1900 (111)                          WEIGHT(kg): 108.18 (08/09/2007)
  SEX: MALE                                 EXP/CANCEL CUTOFF: 120 DAY
                                                                ISSUE    LAST     REF  DAY
  # Rx#           DRUG [^]                              QTY ST DATE     FILL     REM  SUP
                                   ACTIVE (6 orders)
  1 100004112     ALBUTEROL INHALER                       1 A   04-21-07 04-21-07  11    7
  2 100004113     AMITRIPTYLINE 10MG TAB                 60 A   04-21-07 04-21-07  11   30
  3 100004022$e   DIGOXIN 0.05MG/ML ELIX (60CC)          30 A   02-01-07 02-20-07  10   90
  4 100004083     METAPROTERENOL 5% SOLUTION 10ML        15 A>  06-02-07 06-23-07  11   15
  5 100004079     NICOTINE 10MG/ML SOLN NASAL SPRAY       1 A>  06-02-07 06-23-07  11   15
  6 100003298A    SODIUM CHLORIDE 0.9% NASAL SOLN(O       1 A   05-10-07 05-10-07  11   30
                                 DISCONTINUED (4 orders)
  7 300483e       ALPRAZOLAM 0.25MG TABS                 30 DC  06-14-07 06-14-07  11   30
  8 100004081     METAPROTERENOL 5% SOLUTION 10ML        15 DC  06-02-07 06-03-07  11   15
  9 100004082     METAPROTERENOL 5% SOLUTION 10ML        10 DC  06-02-07 06-03-07  11   10
 10 100003298     SIMVASTATIN 20MG TAB                    5 DC  05-28-05 04-27-07   3   30
                                  SUSPENDED (2 orders)
 11 100004155     DESIPRAMINE 25MG                       90 S   02-23-07 02-11-07  11   90
 12 100004070e    VALSARTAN 80MG TAB                      5 S   06-28-07 05-31-07  11   30
                                   EXPIRED (1 order)
 13 100004075e    CABERGOLINE 0.5MG TAB                   7 E   05-18-05 05-18-05   6    7
                                   PENDING (2 order)
 14 ALBUTEROL INHALER                                      RF  06-03-07            2   30
 15 AMITRIPTYLINE 10MG TAB                                 RN  06-02-07            3   10
                      Non-VA MEDS (Not dispensed by VA) (1 order)
 16 TAMOXIFEN CITRATE 10MG TABS                     Date Documented: 06/04/07


          Enter ?? for more actions
CV  Change View           PI  Patient Information   SIG Show/Hide SIG
GS  Group by Status       RF  Refill
Select: Quit//
```

Example 6: Refill action

Enter RF at the “Select” prompt to request a refill for one or more prescriptions as shown below. This action is also available after selecting a specific prescription.

```
          Enter ?? for more actions
CV  Change View           PI  Patient Information   SIG Show/Hide SIG
GS  Group by Status       RF  Refill
Select: Quit// RF   Refill
Barcode Refill? NO//
Select Orders by number:  (1-16): ?

This response must be a list or range, e.g., 1,3,5 or 2-4,8.

Select Orders by number:  (1-16): 2
FILL DATE:  (5/2/2011 - 11/2/2011): TODAY//   (JUL 12, 2011)
MAIL/WINDOW: MAIL// MAIL
Now refilling Rx# 100004113   Drug: AMITRIPTYLINE 10MG TAB

Qty: 120           Sig: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY

RX# 100004113 has been suspended until 07-12-11.
```

NOTE: The system has the flexibility to sort the Medication Profile by different columns (RX, drug name, date, etc). When selecting a range of prescriptions from the Medication Profile to be refilled, selection is not limited to active prescriptions. If discontinued or expired prescriptions are included in a range, the system will display a message stating the status of each prescription as they are processed within the range. For example:

Cannot refill Rx # 100002897, Rx is in DISCONTINUED status.

(This page included for two-sided copying.)

Chapter 11: Using the Medication Reconciliation Tools

This chapter describes the tools available to perform Medication Reconciliation functions via the CPRS Reports tab and CPRS Notes tab.

Medication Reconciliation

The Medication Reconciliation functions may be performed via the use of four tools. The tools utilize Health Summary components and Text Integrated Utility (TUI) data objects to create a list of current medications. These Medication Reconciliation tools also leverage the Remote Data Interoperability (RDI) software to include medication data from other sites.

Tool 1 is a Medication Reconciliation Profile health summary component. This report creates an alphabetical list of outpatient prescriptions, unit dose medications, documented non-VA medications, and remote VA medications. This summary can be used at transition points in a patient's care, (admission, discharge, etc.) to identify medications that need to be continued, new items to be ordered, old items to be discontinued, or orders that need to be changed.

Tool 2 is a Medication Worksheet component. This report provides a grid-formatted list of active and pending medications suitable for giving to a patient at a clinic visit or upon discharge from the hospital.

Tool 3 is a TIU data object provided as an alternative to the Medication Chart health summary process. The unique aspect of this object is that the list, generated for the patient, includes recently expired medications but not recently discontinued medications.

Tool 4 is a series of TIU data objects and health summary components that retrieve remote active medications and remote allergy/ADR data.

For a complete list of functionality, please refer to Medication Reconciliation Tools Implementation Guide. Upon completion of the steps listed in the Implementation Guide, users will be able to retrieve reports useful for Medication Reconciliation by selecting the newly created Health Summaries on the CPRS Reports tab or by using the newly created TIU templates and objects from the CPRS Notes Tab's Templates Drawer and/or any progress note titles in which they have been embedded.

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Chapter 12: Using the Pharmacy Intervention Menu

This chapter describes the options in the *Pharmacy Intervention Menu*.

This menu is locked with the PSORPH key.

Pharmacy Intervention Menu

[PSO INTERVENTION MENU]

The *Pharmacy Intervention Menu* enables the user to enter, edit, print, delete, or view interventions in the APSP INTERVENTION file.

The following options are available on this menu:

- *Enter Pharmacy Intervention*
- *Edit Pharmacy Intervention*
- *Print Pharmacy Intervention*
- *Delete Intervention*
- *View Intervention*

Enter Pharmacy Intervention

[PSO INTERVENTION NEW ENTRY]

When it is necessary to interrupt the filling of a prescription to contact the provider in order to change, clarify, or cancel the prescription, use this option to add a new intervention entry into the APSP INTERVENTION file.

Edit Pharmacy Intervention

[PSO INTERVENTION EDIT]

Using this option, an already existing entry in the APSP INTERVENTION file can be edited.

Print Pharmacy Intervention

[PSO INTERVENTION PRINTOUT]

Print a captioned printout of pharmacy interventions for a certain date range with this option. The report prints out on normal width paper and can be queued to print at a later time.

The subtotal on this report represents the number of interventions for a specific type of intervention where the recommendation for the intervention was accepted. The total is the sum of all interventions in which the recommendation was accepted.

The sub count on this report is the number of interventions for a specific type of intervention over the specific date range. The count is the total number of all interventions over the specific date range.

Delete Intervention

[PSO INTERVENTION DELETE]

This option can be used to delete an intervention from the APSP INTERVENTION file. An intervention can be deleted only on the same day that it was entered.

View Intervention

[PSO INTERVENTION VIEW]

This option displays pharmacy interventions in a captioned format on the screen. More than one intervention can be viewed at a time.

Chapter 13: Print from Suspense File

This chapter describes the *Print from Suspense File* option used for printing suspended prescriptions.

Print from Suspense File

[PSO PNDLBL]

This option allows the user to print labels from the RX SUSPENSE file. First, enter the “Print Through” date. Any prescriptions with a suspense date on or before the date entered will print. Additionally, if a patient has at least one prescription on or before the date entered, any other prescriptions for that patient that are in suspense will be printed for the site parameter specified number of days to be pulled from suspense.

For example, if today’s date is entered and Patient A has a prescription to be printed through the that date, all of Patient A's prescriptions between the date entered plus the number of days set in the local site parameter will be printed. If there are no prescriptions for Patient A through the date entered, no labels will print.

Labels can be sorted by the patient name, the SSN, or the DEA Special Handling code. If sorted by DEA, the labels must then sort by patient name or SSN. Sorting by DEA will send the labels to the printer in three groups:

- **First group** – will contain all the prescriptions with drugs that contain an “A” (narcotics and alcoholics) or a “C“ (controlled substances-non narcotic) in the DEA Special Handling field.
- **Second group** – will contain all the prescriptions with drugs containing an “S” (supply) in the DEA Special Handling field.
- **Third group** – will contain all others. If a patient has prescriptions in suspense that fall in all three categories, that patient's labels will be printed three times, once in each group.

Only one job is tasked for all of the prescriptions in the batch; therefore, if the job is queued by mistake, only one tasked job must be undone. Any prescription that is put in suspense for the "Print Through Date" between the times the job was queued until the time it actually runs will be included in the job.

Labels for each job printed from suspense will be part of a batch. Each batch is identified by the Division, the user who queued the batch, and the date/time that the job was queued to begin.

Prescriptions pulled early from suspense will not be part of a batch, so they will not be able to be reprinted through the *Reprint Batches from Suspense* option.

Prescriptions with an FDA Medication Guide associated will automatically print along with the labels (if one is available). In order to ensure that the documents are sent to an actual printer users will be required to enter a valid printer for printing the FDA Medication Guides at this option if one has not been selected when they logged on to the Outpatient Pharmacy Division.

A short profile for every patient for whom a label for a new prescription is being printed will also be printed if the local Profile with New Prescriptions site parameter is set to Yes.

If a patient has partial prescriptions with regular fills, only one set of trailing documents will print for that patient. (In V. 6.0 trailer documents were printed after each partial.)

If a prescription is determined to be an ePharmacy prescription (e.g., third party electronically billable), an electronic claim will be sent by the Electronic Claims Management Engine (ECME) to the third party payer. TRICARE and CHAMPVA prescriptions are exceptions, as noted in the TRICARE and CHAMPVA section. The communication events between Outpatient Pharmacy and ECME are recorded in the ECME Log section of each prescription. The ECME log can be viewed in the patient Medication Profile screen (Activity Log option - AL) and also from the View Prescriptions option. If the claim submission returns a Refill Too Soon (79) or Drug Utilization Review (88) reject, the label is not printed for the prescription and it is moved to the Refill Too Soon/DUR section of the patient Medication Profile screen until the user resolves the reject. The prescription will also display on the Third Party Payer Reject worklist.

¾ Days Supply Hold

Because of the great number of refill-too-soon third party claim rejections that can occur due to prescriptions being filled too early, the system verifies that ¾ of the days supply has elapsed on the previous fill before the ePharmacy prescription may be refilled. The following list describes this functionality.

- ePharmacy prescriptions are delayed from being sent to CMOP and printed for local mail until ¾ of the days supply has elapsed. For CMOP suspense, a partial day will be rounded up (ex.: ¾ of 30 days will be 23 days). With the release of PSO*7*367, this rounding functionality will also be available for local mail suspense.
- An activity log entry will state the date/time that the Rx will be allowed to be removed from suspense. The activity log will be defined on the initial evaluation. The following is an example of the log entry:

```
4   06/18/08    SUSPENSE       REFILL 2       OPHARM,ONE
Comments: 3/4 of Days Supply SUSPENSE HOLD until 6/20/08.
```

- To fill the prescription earlier, users may pull these types of prescriptions early from suspense.

Host Errors

Prescriptions (ePharmacy only) will be prevented from being filled/sent to CMOP when a host processing error occurs as a claim is submitted through ECME. Host processing errors are identified by reject codes M6, M8, NN, and 99 which are returned by the third party payer. The following conditions apply when this scenario occurs.

- The transmission of the prescription fill will be delayed 1 day in hopes that the host processing issues will be resolved by the third party payer.
- An activity log entry will state the date/time along with a comment stating that the Rx/fill was left in suspense hold due to a host processing error. The following is an example of the log entry:

```
2   06/25/08    SUSPENSE       ORIGINAL       OPPHARM,TWO
Comments: SUSPENSE HOLD until 6/26/08 due to host reject error.
```

- The Pull Early from Suspense function is not impacted by this added functionality. Users may pull these type prescriptions early from suspense.

There is no user interaction for this function. It initiates when the Print from Suspense [PSO PNDLBL] option is initiated for CMOP prescriptions.

TRICARE and CHAMPVA

If there is an override or bypass for a TRICARE or CHAMPVA prescription and there are no open claim rejections for that prescription, then an electronic claim is not generated from suspense, and the label will be printed when the prescription is processed from suspense. This exception applies to TRICARE and CHAMPVA ePharmacy billable prescriptions and non-billable prescriptions.

If a claim is submitted from suspense for a TRICARE or CHAMPVA prescription, the prescription will be displayed on the Third Party Payer Reject worklist if the claim submission returns any type of reject. Also, non-billable TRICARE and CHAMPVA prescriptions will be displayed on the Third Party Payer Reject worklist. A user must resolve the reject or submit an override before the prescription can be processed through suspense.

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Chapter 14: Processing Interactions

This chapter describes the option used for processing drug interactions.

Process Drug/Drug Interactions

[PSO INTERACTION VERIFY]

Using this option, information for medications that have been marked as a drug/drug interaction can be processed. This allows prescriptions with drug/drug interactions to be processed, deleted, or bypassed. To complete any of these actions, an assigned signature code, which will not appear on the screen, must be entered. It will then be verified or non-verified. The *Electronic Signature code Edit* option can be found under the *User's Toolbox* menu in Kernel V. 8.0.

When processing a drug/drug interaction the profile will list the status of the interacting drug orders as pending (P).

This section describes the Drug/Drug Interaction enhancements made to the Outpatient Pharmacy application included in PSO*7*251.

Legacy VistA Drug/Drug Interactions have been enhanced to utilize First DataBank's (FDB) Drug Information Framework (DIF) business rules, APIs and database to provide more clinically relevant Drug Interaction information. No changes have been made to the existing user actions for critical or significant Drug Interactions. The pharmacist will have to log an intervention for local, pending and remote critical interactions and have the option of logging an intervention for local and remote significant interactions. No action is required for Non-VA medications orders.

FDB custom Drug Interaction tables will be used to store custom changes to FDB standard reference Drug Interaction tables. FDB Drug Interactions that are designated as critical in VistA will have their severity level modified to '1'. All FDB Drug Interactions that are designated as significant in VistA will have their severity level modified to '2'. Any Drug Interaction in VistA that is not in FDB will be added to the FDB custom tables. For these interactions a custom monograph will be created with a clinical effects section.

The following Outpatient Pharmacy order entry processes have been enhanced:

- Entering a new order via backdoor pharmacy options
- Finishing a pending order
- Renewing an order
- Editing an order which results in a new order being created.
- Verifying an order
- Copying an order
- Reinstating a discontinued order

If a dispense drug is associated with an active Non-VA med order, that dispense drug will be used for the Drug Interaction order check.

If no dispense drug is associated with an active Non-VA med order, the first active dispense drug marked for Non-VA med use associated with the Orderable Item will be used for the Drug Interaction order check.

If there are no active dispense drugs marked for Non-VA med use that are associated with the Orderable Item, then the first active dispense drug marked for Outpatient use associated with the Orderable item will be used.

If there are no active dispense drugs marked for Outpatient use associated with the Orderable Item, the first active dispense drugs associated with the Orderable Item will be used.

If there are no active dispense drugs associated with the Orderable Item for the Non-VA med order, no Drug Interaction order check will be performed.

Drug interaction order checks will be performed against pending orders.

The software will display to a non-pharmacist (does not hold PSORPH key) when entering a new order via pharmacy backdoor options or when finishing an order entered through CPRS the same Drug Interaction warning information as shown to a pharmacist.

See examples below:

Example: Critical Drug Interaction with Local Rx

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

         Local Rx#: 2443
              Drug: AMIODARONE 200MG TAB  (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY
 Processing Status: Released locally on 11/08/06@08:55:32  (Window)
    Last Filled On: 11/08/06

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

Example: Significant Drug Interaction with Local Rx

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

         Local RX#: 2443
              Drug: ASPIRIN 325MG TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY
Processing Status: Released locally on 11/08/06@08:55:32  (Window)
   Last Filled On: 11/08/06

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

Example: Significant Drug Interaction with Remote Rx

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

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

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

Example: Critical Drug Interaction with Remote Rx

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

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

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

Example: Critical Drug Interaction with Non-VA Med Order

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

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

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

Example: Significant Drug Interaction with Non-VA Med Order

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

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

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

Example: Critical Drug Interaction with Pending Order

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

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

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

Example: Significant Drug Interaction with Pending Order

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

      Pending Drug: ASPIRIN 325MG TAB
               SIG: TAKE ONE TABLET EVERY 8 HOURS

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

The FDB standard professional Drug Interaction monograph is shown below:

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

MONOGRAPH TITLE:  Anticoagulants/Salicylates

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

MECHANISM OF ACTION:  Multiple processes are involved:  1) Salicylate doses
greater than 3 gm daily decrease plasma prothrombin levels. 2) Salicylates may
also displace anticoagulants from plasma protein binding sites. 3) Salicylates
impair platelet function, resulting in prolonged bleeding time. 4) Salicylates
may cause gastrointestinal bleeding due to irritation.

CLINICAL EFFECTS:  The concurrent use of anticoagulants and salicylates may
result in increased INR values and increase the risk of bleeding.

PREDISPOSING FACTORS:  None determined.

PATIENT MANAGEMENT:  Avoid concomitant administration of these drugs. If
salicylate use is necessary, monitor prothrombin time, bleeding time, or INR
values closely.  When possible, the administration of a non-aspirin salicylate
would be preferable.

DISCUSSION:  This interaction has been reported between aspirin and warfarin
and between aspirin and dicumarol.  Diflunisal, sodium salicylate, and topical
methyl salicylate have been shown to interact with anticoagulants as well.
Based on the proposed mechanisms, other salicylates would be expected to
interact with anticoagulants as well.The time of highest risk for a coumarin-
type drug interaction is when the precipitant drug is initiated, altered, or
discontinued.

REFERENCES:
1.Quick AJ, Clesceri L. Influence of acetylsalicylic acid and salicylamide on
the coagulation of blood. J Pharmacol Exp Ther 1960;128:95-8.
2.Watson RM, Pierson RN, Jr. Effect of anticoagulant therapy upon aspirin-
induced gastrointestinal bleeding. Circulation 1961 Sep;24:613-6.
3.Barrow MV, Quick DT, Cunningham RW. Salicylate hypoprothrombinemia in
rheumatoid arthritis with liver disease. Report of two cases. Arch Intern Med
1967 Nov;120(5):620-4.
4.Weiss HJ, Aledort LM, Kochwa S. The effect of salicylates on the hemostatic
properties of platelets in man. J Clin Invest 1968 Sep; 47(9):2169-80.
5.Udall JA. Drug interference with warfarin therapy. Clin Med 1970 Aug; 77:20-
5.
6.Fausa O. Salicylate-induced hypoprothrombinemia. A report of four cases. Acta
Med Scand 1970 Nov;188(5):403-8.
```

```
7.Zucker MB, Peterson J. Effect of acetylsalicylic acid, other nonsteroidal
anti-inflammatory agents, and dipyridamole on human blood platelets. J Lab Clin
Med 1970 Jul;76(1):66-75.
8.O'Reilly RA, Sahud MA, Aggeler PM. Impact of aspirin and chlorthalidone on
the pharmacodynamics of oral anticoagulant drugs in man. Ann N Y Acad Sci 1971
Jul 6;179:173-86.
9.Dale J, Myhre E, Loew D. Bleeding during acetylsalicylic acid and
anticoagulant therapy in patients with reduced platelet reactivity after aortic
valve replacement. Am Heart J 1980 Jun;99(6):746-52.
10.Donaldson DR, Sreeharan N, Crow MJ, Rajah SM. Assessment of the interaction
of warfarin with aspirin and dipyridamole. Thromb Haemost 1982 Feb 26;47(1):77.
11.Chesebro JH, Fuster V, Elveback LR, McGoon DC, Pluth JR, Puga FJ, Wallace
RB, Danielson GK, Orszulak TA, Piehler JM, Schaff HV. Trial of combined
warfarin plus dipyridamole or aspirin therapy in prosthetic heart valve
replacement: danger of aspirin compared with dipyridamole. Am J Cardiol 1983
May 15;51(9):1537-41.
12.Chow WH, Cheung KL, Ling HM, See T. Potentiation of warfarin anticoagulation
by topical methylsalicylate ointment. J R Soc Med 1989 Aug;82(8):501-2.
13.Meade TW, Roderick PJ, Brennan PJ, Wilkes HC, Kelleher CC. Extra-cranial
bleeding and other symptoms due to low dose aspirin and low intensity oral
anticoagulation. Thromb Haemost 1992 Jul 6;68(1):1-6.

Copyright <Insert Current Year> First DataBank, Inc.
```

Following the drug interaction monograph prompts, when a critical or significant drug interaction is generated with a local, pending, Non-VA med or remote medication order, users not holding a PSORPH key shall be presented with the next prompt in the current order entry dialog. They shall not be shown any intervention prompts or dialog.

Following the Drug Interaction monograph prompts, when a significant Drug Interaction is generated with a local, pending, or remote medication order, the user will be presented with 'Do you want to intervene?' prompt for the following processes:

- New order entry via backdoor pharmacy options
- Finishing a pending order
- Renewing an order
- Copying an order
- Editing an order which results in creation of a new order
- Verifying an order
- Reinstating an order

Example: Critical Drug Interaction with Local Rx – No Monograph –Backdoor New Order Entry

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

         Local RX#: 2443
              Drug: AMIODARONE 200MG TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY
Processing Status: Released locally on 11/08/06@08:55:32  (Window)
   Last Filled On: 11/08/06

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

Display Professional Interaction Monograph? No// No
```

```
Do you want to Continue? Y// n  NO
RX DELETED

    Or

Do you want to Continue? Y// ES

Do you want to Process medication
INDINAVIR 400MG CAP: P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention
for INDINAVIR 400MG CAP

PROVIDER: OPPROVIDER, ONE
RECOMMENDATION: NO CHANGE

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


Would you like to edit this intervention ? N// O
VERB: TAKE
Available Dosage(s)
       1. 400MG
       2. 800MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 400MG

You entered 400MG is this correct? Yes//   YES
VERB: TAKE
DISPENSE UNITS PER DOSE(CAPSULE): 1// 1
Dosage Ordered: 400MG

NOUN: CAPSULE
ROUTE: ORAL// ORAL
.
.
.
```

Example: Significant Drug Interaction with Local Rx – With Monograph – Backdoor New Order Entry

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

         Local RX#: 2411
              Drug: ASPIRIN 325MG EC TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
 Processing Status: Released locally on 11/08/06@08:55:32  (Window)
    Last Filled On: 11/08/06

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// Y es

Device: Home// <Home would print to screen, or a specific device could be
specified>
```

Professional Monograph
Drug Interaction with WARFARIN and ASPIRIN

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

MONOGRAPH TITLE: Anticoagulants/Salicylates

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

MECHANISM OF ACTION: Multiple processes are involved: 1) Salicylate doses greater than 3 gm daily decrease plasma prothrombin levels. 2) Salicylates may also displace anticoagulants from plasma protein binding sites. 3) Salicylates impair platelet function, resulting in prolonged bleeding time. 4) Salicylates may cause gastrointestinal bleeding due to irritation.

CLINICAL EFFECTS: The concurrent use of anticoagulants and salicylates may result in increased INR values and increase the risk of bleeding.

PREDISPOSING FACTORS: None determined.

PATIENT MANAGEMENT: Avoid concomitant administration of these drugs. If salicylate use is necessary, monitor prothrombin time, bleeding time, or INR values closely. When possible, the administration of a non-aspirin salicylate would be preferable.

DISCUSSION: This interaction has been reported between aspirin and warfarin and between aspirin and dicumarol. Diflunisal, sodium salicylate, and topical methyl salicylate have been shown to interact with anticoagulants as well. Based on the proposed mechanisms, other salicylates would be expected to interact with anticoagulants as well.The time of highest risk for a coumarin-type drug interaction is when the precipitant drug is initiated, altered, or discontinued.

REFERENCES:
1.Quick AJ, Clesceri L. Influence of acetylsalicylic acid and salicylamide on the coagulation of blood. J Pharmacol Exp Ther 1960;128:95-8.
2.Watson RM, Pierson RN, Jr. Effect of anticoagulant therapy upon aspirin-induced gastrointestinal bleeding. Circulation 1961 Sep;24:613-6.
3.Barrow MV, Quick DT, Cunningham RW. Salicylate hypoprothrombinemia in rheumatoid arthritis with liver disease. Report of two cases. Arch Intern Med 1967 Nov;120(5):620-4.
4.Weiss HJ, Aledort LM, Kochwa S. The effect of salicylates on the hemostatic properties of platelets in man. J Clin Invest 1968 Sep; 47(9):2169-80.
5.Udall JA. Drug interference with warfarin therapy. Clin Med 1970 Aug; 77:20-5.
6.Fausa O. Salicylate-induced hypoprothrombinemia. A report of four cases. Acta Med Scand 1970 Nov;188(5):403-8.
7.Zucker MB, Peterson J. Effect of acetylsalicylic acid, other nonsteroidal anti-inflammatory agents, and dipyridamole on human blood platelets. J Lab Clin Med 1970 Jul;76(1):66-75.
8.O'Reilly RA, Sahud MA, Aggeler PM. Impact of aspirin and chlorthalidone on the pharmacodynamics of oral anticoagulant drugs in man. Ann N Y Acad Sci 1971 Jul 6;179:173-86.
9.Dale J, Myhre E, Loew D. Bleeding during acetylsalicylic acid and anticoagulant therapy in patients with reduced platelet reactivity after aortic valve replacement. Am Heart J 1980 Jun;99(6):746-52.
10.Donaldson DR, Sreeharan N, Crow MJ, Rajah SM. Assessment of the interaction of warfarin with aspirin and dipyridamole. Thromb Haemost 1982 Feb 26;47(1):77.

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11.Chesebro JH, Fuster V, Elveback LR, McGoon DC, Pluth JR, Puga FJ, Wallace
RB, Danielson GK, Orszulak TA, Piehler JM, Schaff HV. Trial of combined
warfarin plus dipyridamole or aspirin therapy in prosthetic heart valve
replacement: danger of aspirin compared with dipyridamole. Am J Cardiol 1983
May 15;51(9):1537-41.
12.Chow WH, Cheung KL, Ling HM, See T. Potentiation of warfarin anticoagulation
by topical methylsalicylate ointment. J R Soc Med 1989 Aug;82(8):501-2.
13.Meade TW, Roderick PJ, Brennan PJ, Wilkes HC, Kelleher CC. Extra-cranial
bleeding and other symptoms due to low dose aspirin and low intensity oral
anticoagulation. Thromb Haemost 1992 Jul 6;68(1):1-6.

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Do you want to Intervene? Y// NO
Remote data not available - Only local order checks processed.


Press Return to Continue...

VERB: TAKE
Available Dosage(s)
       1. 2.5MG
       2. 5MG
.
.
.
  OR

Do you want to Intervene? Y// ES
Remote data not available - Only local order checks processed.


Press Return to Continue...


Now creating Pharmacy Intervention
for WARFARIN 5MG TAB

PROVIDER: OPPROVIDER,ONE       OPP     119
RECOMMENDATION: NO CHANGE

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


Would you like to edit this intervention ? N// O
VERB: TAKE
Available Dosage(s)
       1. 5MG
       2. 10MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 5MG

You entered 5MG is this correct? Yes//   YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 5MG

NOUN: TABLET
ROUTE: PO//   ORAL      PO  MOUTH
```

Example: Significant Drug Interaction with Remote Rx - With Monograph –Backdoor New Order Entry

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

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

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// Y es

Device: Home// <Home would print to screen, or a specific device could be
specified>

Professional Monograph
Drug Interaction with WARFARIN and ASPIRIN

MONOGRAPH TITLE:  Anticoagulants/Salicylates

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

MECHANISM OF ACTION:  Multiple processes are involved:  1) Salicylate doses
greater than 3 gm daily decrease plasma prothrombin levels. 2) Salicylates may
also displace anticoagulants from plasma protein binding sites. 3) Salicylates
impair platelet function, resulting in prolonged bleeding time. 4) Salicylates
may cause gastrointestinal bleeding due to irritation.

CLINICAL EFFECTS:  The concurrent use of anticoagulants and salicylates may
result in increased INR values and increase the risk of bleeding.

PREDISPOSING FACTORS:  None determined.

PATIENT MANAGEMENT:  Avoid concomitant administration of these drugs. If
salicylate use is necessary, monitor prothrombin time, bleeding time, or INR
values closely.  When possible, the administration of a non-aspirin salicylate
would be preferable.

DISCUSSION:  This interaction has been reported between aspirin and warfarin
and between aspirin and dicumarol.  Diflunisal, sodium salicylate, and topical
methyl salicylate have been shown to interact with anticoagulants as well.
Based on the proposed mechanisms, other salicylates would be expected to
interact with anticoagulants as well.The time of highest risk for a coumarin-
type drug interaction is when the precipitant drug is initiated, altered, or
discontinued.

REFERENCES:
1.Quick AJ, Clesceri L. Influence of acetylsalicylic acid and salicylamide on
the coagulation of blood. J Pharmacol Exp Ther 1960;128:95-8.
2.Watson RM, Pierson RN, Jr. Effect of anticoagulant therapy upon aspirin-
induced gastrointestinal bleeding. Circulation 1961 Sep;24:613-6.
3.Barrow MV, Quick DT, Cunningham RW. Salicylate hypoprothrombinemia in
rheumatoid arthritis with liver disease. Report of two cases. Arch Intern Med
1967 Nov;120(5):620-4.
4.Weiss HJ, Aledort LM, Kochwa S. The effect of salicylates on the hemostatic
properties of platelets in man. J Clin Invest 1968 Sep; 47(9):2169-80.
5.Udall JA. Drug interference with warfarin therapy. Clin Med 1970 Aug; 77:20-
5.
6.Fausa O. Salicylate-induced hypoprothrombinemia. A report of four cases. Acta
Med Scand 1970 Nov;188(5):403-8.
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7.Zucker MB, Peterson J. Effect of acetylsalicylic acid, other nonsteroidal
anti-inflammatory agents, and dipyridamole on human blood platelets. J Lab Clin
Med 1970 Jul;76(1):66-75.
8.O'Reilly RA, Sahud MA, Aggeler PM. Impact of aspirin and chlorthalidone on
the pharmacodynamics of oral anticoagulant drugs in man. Ann N Y Acad Sci 1971
Jul 6;179:173-86.
9.Dale J, Myhre E, Loew D. Bleeding during acetylsalicylic acid and
anticoagulant therapy in patients with reduced platelet reactivity after aortic
valve replacement. Am Heart J 1980 Jun;99(6):746-52.
10.Donaldson DR, Sreeharan N, Crow MJ, Rajah SM. Assessment of the interaction
of warfarin with aspirin and dipyridamole. Thromb Haemost 1982 Feb 26;47(1):77.
11.Chesebro JH, Fuster V, Elveback LR, McGoon DC, Pluth JR, Puga FJ, Wallace
RB, Danielson GK, Orszulak TA, Piehler JM, Schaff HV. Trial of combined
warfarin plus dipyridamole or aspirin therapy in prosthetic heart valve
replacement: danger of aspirin compared with dipyridamole. Am J Cardiol 1983
May 15;51(9):1537-41.
12.Chow WH, Cheung KL, Ling HM, See T. Potentiation of warfarin anticoagulation
by topical methylsalicylate ointment. J R Soc Med 1989 Aug;82(8):501-2.

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Do you want to Intervene? Y// NO

Press Return to Continue...

VERB: TAKE
Available Dosage(s)
       1. 2.5MG
       2. 5MG
.
.
.
  OR

Do you want to Intervene? Y// ES

Press Return to Continue...


Now creating Pharmacy Intervention
for WARFARIN 5MG TAB

PROVIDER: OPPROVIDER,ONE       OPP     119
RECOMMENDATION: NO CHANGE

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


Would you like to edit this intervention ? N// O
VERB: TAKE
Available Dosage(s)
       1. 5MG
       2. 10MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 5MG
```

```
You entered 5MG is this correct? Yes//   YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 5MG

NOUN: TABLET
ROUTE: PO//   ORAL      PO  MOUTH
.
.
```

Example: Critical Drug Interaction with Remote Rx - No Monograph – Backdoor New Order Entry

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

          LOCATION: <VA or DOD facility>   Remote RX#: 2543789
              Drug: AMIODARONE 200MG TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH EVERY 8 HOURS
    Last Filled On: 11/08/06

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

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// n  NO
RX DELETED

    OR

Do you want to Continue? Y// ES

Do you want to Process medication
INDINAVIR 400MG CAP: P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED

Press Return to Continue...


Now creating Pharmacy Intervention
for INDINAVIR 400MG CAP

PROVIDER: OPPROVIDER, ONE
RECOMMENDATION: NO CHANGE

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


Would you like to edit this intervention ? N// O
VERB: TAKE
Available Dosage(s)
       1. 400MG
       2. 800MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 400MG

You entered 400MG is this correct? Yes//   YES
VERB: TAKE
DISPENSE UNITS PER DOSE(CAPSULE): 1// 1
```

```
Dosage Ordered: 400MG

NOUN: CAPSULE
ROUTE: ORAL// ORAL
.
```

Example: Critical Drug Interaction with Non-VA Medication Order – Backdoor New Order Entry – No Monograph

```
Select Action: Quit// NO   New Order

Eligibility: SC LESS THAN 50%     SC%: 40
RX PATIENT STATUS: SC LESS THAN 50%//
DRUG: WARFARIN
  Lookup: GENERIC NAME
     1   WARFARIN 2.5MG TAB           BL110
     2   WARFARIN 5MG TAB           BL110
CHOOSE 1-2: 2  WARFARIN 5MG TAB         BL110


Now doing remote order checks. Please wait...
Now Processing Enhanced Order Checks!  Please Wait...

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

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

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

Display Professional Interaction Monograph? No// No

VERB: TAKE
Available Dosage(s)
       1. 5MG
       2. 10MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 5MG

You entered 5MG is this correct? Yes//
.
.
.
```

Example: Critical Drug Interaction with Pending Order – No Monograph –Backdoor New Order Entry

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

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

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

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// n  NO
RX DELETED

    Or

Do you want to Continue? Y// ES

Do you want to Process medication
INDINAVIR 400MG CAP: P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention
for INDINAVIR 400MG CAP

PROVIDER: OPPROVIDER, ONE
RECOMMENDATION: NO CHANGE

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


Would you like to edit this intervention ? N// O
VERB: TAKE
Available Dosage(s)
       1. 400MG
       2. 800MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 400MG

You entered 400MG is this correct? Yes//   YES
VERB: TAKE
DISPENSE UNITS PER DOSE(CAPSULE): 1// 1
Dosage Ordered: 400MG

NOUN: CAPSULE
ROUTE: ORAL// ORAL
.
.
```

Example: Significant Drug Interaction with Pending Rx – With Monograph – Backdoor New Order Entry

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

      Pending Drug: ASPIRIN 325MG EC TAB
               SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// Y es

Device: Home// <Home would print to screen, or a specific device could be
specified>


Professional Monograph
Drug Interaction with WARFARIN and ASPIRIN

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

MONOGRAPH TITLE:  Anticoagulants/Salicylates

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

MECHANISM OF ACTION:  Multiple processes are involved:  1) Salicylate doses
greater than 3 gm daily decrease plasma prothrombin levels. 2) Salicylates may
also displace anticoagulants from plasma protein binding sites. 3) Salicylates
impair platelet function, resulting in prolonged bleeding time. 4) Salicylates
may cause gastrointestinal bleeding due to irritation.

CLINICAL EFFECTS:  The concurrent use of anticoagulants and salicylates may
result in increased INR values and increase the risk of bleeding.

PREDISPOSING FACTORS:  None determined.

PATIENT MANAGEMENT:  Avoid concomitant administration of these drugs. If
salicylate use is necessary, monitor prothrombin time, bleeding time, or INR
values closely.  When possible, the administration of a non-aspirin salicylate
would be preferable.

DISCUSSION:  This interaction has been reported between aspirin and warfarin
and between aspirin and dicumarol.  Diflunisal, sodium salicylate, and topical
methyl salicylate have been shown to interact with anticoagulants as well.
Based on the proposed mechanisms, other salicylates would be expected to
interact with anticoagulants as well.The time of highest risk for a coumarin-
type drug interaction is when the precipitant drug is initiated, altered, or
discontinued.

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1.Quick AJ, Clesceri L. Influence of acetylsalicylic acid and salicylamide on
the coagulation of blood. J Pharmacol Exp Ther 1960;128:95-8.
2.Watson RM, Pierson RN, Jr. Effect of anticoagulant therapy upon aspirin-
induced gastrointestinal bleeding. Circulation 1961 Sep;24:613-6.
3.Barrow MV, Quick DT, Cunningham RW. Salicylate hypoprothrombinemia in
rheumatoid arthritis with liver disease. Report of two cases. Arch Intern Med
1967 Nov;120(5):620-4.
4.Weiss HJ, Aledort LM, Kochwa S. The effect of salicylates on the hemostatic
properties of platelets in man. J Clin Invest 1968 Sep; 47(9):2169-80.
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```
5.Udall JA. Drug interference with warfarin therapy. Clin Med 1970 Aug; 77:20-
5.
6.Fausa O. Salicylate-induced hypoprothrombinemia. A report of four cases. Acta
Med Scand 1970 Nov;188(5):403-8.
7.Zucker MB, Peterson J. Effect of acetylsalicylic acid, other nonsteroidal
anti-inflammatory agents, and dipyridamole on human blood platelets. J Lab Clin
Med 1970 Jul;76(1):66-75.
8.O'Reilly RA, Sahud MA, Aggeler PM. Impact of aspirin and chlorthalidone on
the pharmacodynamics of oral anticoagulant drugs in man. Ann N Y Acad Sci 1971
Jul 6;179:173-86.
9.Dale J, Myhre E, Loew D. Bleeding during acetylsalicylic acid and
anticoagulant therapy in patients with reduced platelet reactivity after aortic
valve replacement. Am Heart J 1980 Jun;99(6):746-52.
10.Donaldson DR, Sreeharan N, Crow MJ, Rajah SM. Assessment of the interaction
of warfarin with aspirin and dipyridamole. Thromb Haemost 1982 Feb 26;47(1):77.
11.Chesebro JH, Fuster V, Elveback LR, McGoon DC, Pluth JR, Puga FJ, Wallace
RB, Danielson GK, Orszulak TA, Piehler JM, Schaff HV. Trial of combined
warfarin plus dipyridamole or aspirin therapy in prosthetic heart valve
replacement: danger of aspirin compared with dipyridamole. Am J Cardiol 1983
May 15;51(9):1537-41.
12.Chow WH, Cheung KL, Ling HM, See T. Potentiation of warfarin anticoagulation
by topical methylsalicylate ointment. J R Soc Med 1989 Aug;82(8):501-2.
13.Meade TW, Roderick PJ, Brennan PJ, Wilkes HC, Kelleher CC. Extra-cranial
bleeding and other symptoms due to low dose aspirin and low intensity oral
anticoagulation. Thromb Haemost 1992 Jul 6;68(1):1-6.

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Do you want to Intervene? Y// NO
Remote data not available - Only local order checks processed.


Press Return to Continue...

VERB: TAKE
Available Dosage(s)
       1. 2.5MG
       2. 5MG
.
.
.
  OR

Do you want to Intervene? Y// ES
Remote data not available - Only local order checks processed.


Press Return to Continue...


Now creating Pharmacy Intervention
for WARFARIN 5MG TAB

PROVIDER: OPPROVIDER,ONE       OPP     119
RECOMMENDATION: NO CHANGE

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


Would you like to edit this intervention ? N// O
VERB: TAKE
```

```
Available Dosage(s)
       1. 5MG
       2. 10MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 5MG

You entered 5MG is this correct? Yes//   YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 5MG

NOUN: TABLET
ROUTE: PO//   ORAL      PO  MOUTH
.
.
.
```

Example: Significant Drug Interaction with Local Rx – Finishing Pending Order – No Monograph

```
+         Enter ?? for more actions
BY  Bypass                              DC  Discontinue
ED  Edit                                FN  Finish
Select Item(s): Next Screen// FN   Finish


Now doing remote order checks. Please wait...
Now Processing Enhanced Order Checks!  Please Wait...

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

         Local RX#: 2498
              Drug: ASPIRIN 325MG EC TAB  (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
Processing Status: Released locally on 11/08/06@08:55:32  (Window)
   Last Filled On: 11/08/06

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// NO


Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//
.
.
.

OR


Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for WARFARIN 5MG TAB

PROVIDER:    OERRPROVIDER, ONE
RECOMMENDATION: NO CHANGE
```

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

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

Rx # 2500              10/19/07
OPPATIENT, ONE                 #30
TAKE ONE TABLET BY MOUTH AT BEDTIME

WARFARIN 5MG TAB
OERRPROVIDER,ONE   OPPHARMACIST,ONE
# of Refills: 11


       SC Percent: 40%
     Disabilities: NONE STATED

This Rx has been flagged by the provider as: NO COPAY

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//
.
.
.
```

Example: Critical Drug Interaction with Local Rx – Finishing Pending Order – No Monograph

```
+         Enter ?? for more actions
BY  Bypass                              DC  Discontinue
ED  Edit                                FN  Finish
Select Item(s): Next Screen// FN   Finish

                              Oct 19, 2007@07:48:33
Now doing remote order checks. Please wait...
Now Processing Enhanced Order Checks!  Please Wait...


***CRITICAL*** Drug Interaction with Prospective Drug:
                    IBUPROFEN 600MG TAB and

         Local RX#: 2498
              Drug: ASPIRIN 325MG EC TAB  (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
Processing Status: Released locally on 11/08/06@08:55:32  (Window)
   Last Filled On: 11/08/06


In some patients, NSAIDS have been associated with an increase in the
hypoprothrombinemic effect to anticoagulants.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// NO

Pending OP Orders (ROUTINE)   Oct 19, 2007@08:55:12          Page:    1 of    4
OPPATIENT, ONE                                                            <A>
  PID: 666-45-6754                                  Ht(cm): 187.96 (07/05/1994)
  DOB: JAN 1,1945 (62)                              Wt(kg): 77.27 (07/05/1994)

CPRS Order Checks:
```

```
      CRITICAL drug-drug interaction: ASPIRIN & IBUPROFEN (ASPIRIN TAB,EC
325MG
      TAKE ONE TABLET BY MOUTH EVERY MORNING  [ACTIVE])
     Overriding Provider: OERRPROVIDER, ONE
     Overriding Reason: TESTING

      SIGNIFICANT drug-drug interaction: IBUPROFEN & WARFARIN (WARFARIN TAB
5MG
      TAKE ONE TABLET BY MOUTH AT BEDTIME  [PENDING])
     Overriding Provider: OERRPROVIDER, ONE
     Overriding Reason:

      SIGNIFICANT drug-drug interaction: IBUPROFEN & METHOTREXATE (METHOTREXATE
      TAB  2.5MG TAKE ONE TABLET BY MOUTH TWICE A DAY  [PENDING])
     Overriding Provider: OERRPROVIDER,ONE

+         Enter ?? for more actions
AC Accept                 ED Edit                   DC Discontinue
Select Item(s): Next Screen//.
.
.
OR


Do you want to Continue? Y// YES

Do you want to Process medication
IBUPROFEN 600MG TAB : P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for IBUPROFEN 600MG TAB

PROVIDER:    OERRPROVIDER, ONE
RECOMMENDATION: NO CHANGE

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

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

Rx # 2501              10/19/07
OPPATIENT, ONE              #90
TAKE ONE TABLET BY MOUTH THREE TIMES A DAY WITH FOOD OR MILK

IBUPROFEN 600MG TAB
OERRPROVIDER,ONE  OPPHARMACIST,ONE
# of Refills: 11


       SC Percent: 40%
     Disabilities: NONE STATED

This Rx has been flagged by the provider as: NO COPAY

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//

.
.
.
```

Example: Significant Drug Interaction with Pending Order – Finishing Pending Order – No Monograph

```
+         Enter ?? for more actions
BY  Bypass                              DC  Discontinue
ED  Edit                                FN  Finish
Select Item(s): Next Screen// FN   Finish


Now doing remote order checks. Please wait...
Now Processing Enhanced Order Checks!  Please Wait...

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

     Pending Drug: ASPIRIN 325MG EC TAB
               SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// NO


Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//
.
.
.

OR


Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for WARFARIN 5MG TAB

PROVIDER:    OERRPROVIDER, ONE
RECOMMENDATION: NO CHANGE

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


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

Rx # 2500              10/19/07
OPPATIENT, ONE                 #30
TAKE ONE TABLET BY MOUTH AT BEDTIME

WARFARIN 5MG TAB
OERRPROVIDER,ONE   OPPHARMACIST,ONE
# of Refills: 11


       SC Percent: 40%
     Disabilities: NONE STATED

This Rx has been flagged by the provider as: NO COPAY

Was treatment for Service Connected condition? YES//
```

```
Are you sure you want to Accept this Order? NO//
.
.
.
```

Example: Critical Drug Interaction with Pending Order – Finishing Pending Order – No Monograph

```
+         Enter ?? for more actions
BY  Bypass                              DC  Discontinue
ED  Edit                                FN  Finish
Select Item(s): Next Screen// FN   Finish

                              Oct 19, 2007@07:48:33
Now doing remote order checks. Please wait...
Now Processing Enhanced Order Checks!  Please Wait...


***CRITICAL*** Drug Interaction with Prospective Drug:
                    IBUPROFEN 600MG TAB and

      Pending Drug: ASPIRIN 325MG EC TAB
               SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING

In some patients, NSAIDS have been associated with an increase in the
hypoprothrombinemic effect to anticoagulants.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// NO

Pending OP Orders (ROUTINE)   Oct 19, 2007@08:55:12          Page:    1 of    4
OPPATIENT, ONE                                                            <A>
  PID: 666-45-6754                                Ht(cm): 187.96 (07/05/1994)
  DOB: JAN 1,1945 (62)                            Wt(kg): 77.27 (07/05/1994)

CPRS Order Checks:
      CRITICAL drug-drug interaction: ASPIRIN & IBUPROFEN (ASPIRIN TAB,EC
325MG
      TAKE ONE TABLET BY MOUTH EVERY MORNING  [ACTIVE])
     Overriding Provider: OERRPROVIDER, ONE
     Overriding Reason: TESTING

      SIGNIFICANT drug-drug interaction: IBUPROFEN & WARFARIN (WARFARIN TAB
5MG
      TAKE ONE TABLET BY MOUTH AT BEDTIME  [PENDING])
     Overriding Provider: OERRPROVIDER, ONE
     Overriding Reason:

      SIGNIFICANT drug-drug interaction: IBUPROFEN & METHOTREXATE (METHOTREXATE
      TAB  2.5MG TAKE ONE TABLET BY MOUTH TWICE A DAY  [PENDING])
     Overriding Provider: OERRPROVIDER,ONE

+         Enter ?? for more actions
AC Accept                 ED Edit                   DC Discontinue
Select Item(s): Next Screen//.
.
.
OR


Do you want to Continue? Y// YES
```

```
Do you want to Process medication
IBUPROFEN 600MG TAB : P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for IBUPROFEN 600MG TAB

PROVIDER:    OERRPROVIDER, ONE
RECOMMENDATION: NO CHANGE

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

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

Rx # 2501              10/19/07
OPPATIENT, ONE              #90
TAKE ONE TABLET BY MOUTH THREE TIMES A DAY WITH FOOD OR MILK

IBUPROFEN 600MG TAB
OERRPROVIDER,ONE  OPPHARMACIST,ONE
# of Refills: 11


       SC Percent: 40%
     Disabilities: NONE STATED

This Rx has been flagged by the provider as: NO COPAY

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//

.
.
.
```

Example: Critical Interaction –Renewing an Order

```
OP Medications (ACTIVE)       Feb 14, 2008@07:25:28          Page:  1 of  3
OPPATIENT,THREE                                                          <A>
  PID: 000-00-0000                                Ht(cm): 167.64 (10/16/1993)
  DOB: JUL 1,1934 (73)                            Wt(kg): 68.18 (10/16/1993)

                Rx #: 2530$
 (1) *Orderable Item: WARFARIN TAB
 (2)            Drug: WARFARIN 2.5MG TAB
 (3)         *Dosage: 2.5 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
              *Route: ORAL
           *Schedule: QHS
 (4)Pat Instructions:
                 SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
 (5)  Patient Status: OPT NSC
 (6)      Issue Date: 02/13/08              (7)  Fill Date: 02/13/08
      Last Fill Date: 02/13/08 (Window)
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// RN   Renew
```

```
FILL DATE:  (2/14/2008 - 2/14/2009): TODAY//   (FEB 14, 2008)
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
Nature of Order: WRITTEN//        W
WAS THE PATIENT COUNSELED: NO// NO

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

Now Renewing Rx # 2530   Drug: WARFARIN 2.5MG TAB

Now doing remote order checks. Please wait...
Now Processing Enhanced Order Checks!  Please Wait...


***CRITICAL*** Drug Interaction with Prospective Drug:
                    WARFARIN 2.5MG TAB and

         Local RX#: #2527
              Drug: CIMETIDINE 300MG TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
Processing Status: Released locally on 09/08/07@08:55:32  (Window)
   Last Filled On: 09/08/07

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

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// NO

RENEWED RX DELETED

  OR
Do you want to Continue? Y// ES

Do you want to Process medication
WARFARIN 2.5MG TAB: P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for WARFARIN 2.5MG TAB

PROVIDER:    OPPROVIDER, FOUR     FPP     119
RECOMMENDATION:    NO CHANGE

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

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

2530A        WARFARIN 2.5MG TAB                QTY: 30
# OF REFILLS: 11  ISSUED: 02-14-08
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
FILLED: 03-04-08
ROUTING: WINDOW     PHYS: OPPROVIDER, FOUR

Edit renewed Rx ? Y//
.
.
.
```

Example: Significant Interaction – Renewing an Order

```
OP Medications (ACTIVE)       Feb 14, 2008@07:15:31          Page:    1 of    3
OPPATIENT,THREE                                                              <A>
  PID: 000-00-0000                                Ht(cm): 167.64 (10/16/1993)
  DOB: JUL 1,1934 (73)                            Wt(kg): 68.18 (10/16/1993)

                Rx #: 2531$
 (1) *Orderable Item: INDOMETHACIN CAP,ORAL
 (2)            Drug: INDOMETHACIN 25MG CAP
 (3)         *Dosage: 25 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: CAPSULE
              *Route: ORAL
           *Schedule: TID
 (4)Pat Instructions:
                 SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
 (5)  Patient Status: OPT NSC
 (6)      Issue Date: 02/13/08              (7)  Fill Date: 02/13/08
      Last Fill Date: 02/13/08 (Window)
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// RN   Renew
FILL DATE:  (2/14/2008 - 2/14/2009): TODAY//   (FEB 14, 2008)
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
Nature of Order: WRITTEN//        W
WAS THE PATIENT COUNSELED: NO// NO

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

Now Renewing Rx # 2531   Drug: INDOMETHACIN 25MG CAP


Now doing remote order checks. Please wait...
Now Processing Enhanced Order Checks!  Please Wait...

***SIGNIFICANT*** Drug Interaction with Prospective Drug:
                     INDOMETHACIN 25MG CAP and

         Local RX#: 2530
              DRUG: WARFARIN 2.5MG TAB
               SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
Processing Status: Released locally on 01/08/08@08:55:32  (Window)
   Last Filled On: 01/08/08

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// ES
Remote data not available - Only local order checks processed.

Press Return to Continue...


Now creating Pharmacy Intervention
for INDOMETHACIN 25MG CAP

PROVIDER:    OPPROVIDER,FOUR    FPP     119
RECOMMENDATION:    NO CHANGE
```

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


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

2531A        INDOMETHACIN 25MG CAP             QTY: 90
# OF REFILLS: 11  ISSUED: 02-14-08
SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
FILLED: 03-04-08
ROUTING: WINDOW     PHYS: OPPROVIDER,FOUR

Edit renewed Rx ? Y//
.
.

   OR

Do you want to Intervene? Y// NO
Remote data not available - Only local order checks processed.

Press Return to Continue...


2531A        INDOMETHACIN 25MG CAP             QTY: 90
# OF REFILLS: 11  ISSUED: 02-14-08
SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
FILLED: 03-04-08
ROUTING: WINDOW     PHYS: OPPROVIDER,FOUR

Edit renewed Rx ? Y//
.
.
.
```

Example: Copying An Order – Critical Interaction

```
OP Medications (ACTIVE)       Feb 14, 2008@09:20:04       Page:    1 of    3
OPPATIENT,TWO                                                            <A>
  PID: 666-33-3333                                 Ht(cm): 167.64 (10/16/1993)
  DOB: JUL 1,1934 (73)                             Wt(kg): 68.18 (10/16/1993)

                Rx #: 2530$
 (1) *Orderable Item: WARFARIN TAB
 (2)            Drug: WARFARIN 2.5MG TAB
 (3)         *Dosage: 2.5 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
             *Route: ORAL
           *Schedule: QHS
 (4)Pat Instructions:
                 SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
 (5)  Patient Status: OPT NSC
 (6)      Issue Date: 02/13/08              (7)  Fill Date: 02/13/08
      Last Fill Date: 02/13/08 (Window)
+         Enter ?? for more actions

DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// co   CO
```

```
New OP Order (COPY)          Feb 14, 2008@09:20:04          Page:    1 of    2
OPPATIENT,TWO                                                            <A>
  PID: 666-33-3333                                Ht(cm): 167.64 (10/16/1993)
  DOB: JUL 1,1934 (73)                            Wt(kg): 68.18 (10/16/1993)

      Orderable Item: WARFARIN TAB
  (1)           Drug: WARFARIN 2.5MG TAB
  (2) Patient Status: OPT NSC
  (3)     Issue Date: FEB 14,2008            (4) Fill Date: FEB 14,2008
  (5) Dosage Ordered: 2.5 (MG)
                 Verb: TAKE
      Dispense Units: 1
                 Noun: TABLET
                Route: ORAL
             Schedule: QHS
  (6)Pat Instruction:
                  SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
  (7)    Days Supply: 30                     (8)   QTY (TAB): 30
  (9)   # of Refills: 11                     (10)  Routing: WINDOW
+         Enter ?? for more actions
AC   Accept                             ED   Edit
Select Action: Next Screen// ac   Accept
-------------------------------------------------------------------------------
Duplicate Drug in Local RX:

              Rx #: 2530
              Drug: WARFARIN 2.5MG TAB
               SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
               QTY: 30                  Refills remaining: 11
          Provider: OPPROVIDER, ONE                Issued: 02/13/08
            Status: ACTIVE                 Last filled on: 02/13/08
 Processing Status: Released locally on 02/13/08@08:55:32  (Window)
                                                Days Supply: 30
-----------------------------------------------------------------------------
Discontinue Rx #2530 WARFARIN 2.5MG TAB? Y/N  YES

Rx #2530 WARFARIN 2.5MG TAB will be discontinued after the acceptance of the
new order.


Now doing remote order checks. Please wait...
Now Processing Enhanced Order Checks!  Please Wait...

***CRITICAL*** Drug Interaction with Prospective Drug:
                    WARFARIN 2.5MG TAB and

                RX: #2560
              Drug: WARFARIN 2.5MG TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
Processing Status: Released locally on 02/18/08@08:55:32  (Window)
   Last Filled On: 02/18/08

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

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// ES

Do you want to Process medication
WARFARIN 2.5MG TAB: P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED
```

```
Remote data not available - Only local order checks processed.

Press Return to Continue...


Now creating Pharmacy Intervention
for WARFARIN 2.5MG TAB

PROVIDER:    OPPROVIDER,ONE     OPP     119
RECOMMENDATION:    NO CHANGE

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


Would you like to edit this intervention ? N// O
Nature of Order: WRITTEN//
.
.
.
   OR


Do you want to Continue? Y// NO
Duplicate Drug Rx #2530 WARFARIN 2.5MG TAB was NOT Discontinued.
.
.
.
```

Example: Copying an Order – Significant Interaction

```
Medication Profile            Feb 14, 2008@08:56:40          Page:    1 of    1
OPPATIENT,TWO                                                            <A>
  PID: 666-33-3333                                  Ht(cm): 167.64 (10/16/1993)
  DOB: JUL 1,1934 (73)                              Wt(kg): 68.18 (10/16/1993)
  SEX: MALE
                                                             ISSUE  LAST REF DAY
 #  RX #         DRUG                                  QTY ST  DATE  FILL REM SUP

-------------------------------------ACTIVE-------------------------------------
 1 2528$         AMINOPHYLLINE 200MG TAB              120 A  02-13 02-13  11  30
 2 2529$         ASPIRIN 325MG EC TAB                  30 A  02-13 02-13  11  30
 3 2527$         CIMETIDINE 300MG TAB                  30 A  02-13 02-13  11  30
 4 2531$         INDOMETHACIN 25MG CAP                 90 A  02-13 02-13  11  30
 5 2530$         WARFARIN 2.5MG TAB                    30 A  02-13 02-13  11  30


DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// co   CO


New OP Order (COPY)           Feb 14, 2008@08:56:43          Page:    1 of    2
OPPATIENT,TWO                                                            <A>
  PID: 666-33-3333                                  Ht(cm): 167.64 (10/16/1993)
  DOB: JUL 1,1934 (73)                              Wt(kg): 68.18 (10/16/1993)

      Orderable Item: ASPIRIN TAB,EC
  (1)           Drug: ASPIRIN 325MG EC TAB <DIN>
  (2) Patient Status: OPT NSC
  (3)     Issue Date: FEB 14,2008             (4) Fill Date: FEB 14,2008
  (5) Dosage Ordered: 325 (MG)
                Verb: TAKE
```

```
      Dispense Units: 1
                Noun: TABLET
               Route: ORAL
            Schedule: QAM
  (6)Pat Instruction:
                 SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
  (7)    Days Supply: 30                    (8)   QTY (TAB): 30
  (9)   # of Refills: 11                    (10)  Routing: WINDOW
+         Enter ?? for more actions
AC   Accept                              ED   Edit
Select Action: Next Screen// ac   Accept
-------------------------------------------------------------------------------
Duplicate Drug in Local RX:

              Rx #: 2529
              Drug: ASPIRIN 325MG EC TAB
               SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
               QTY: 30                  Refills remaining: 11
          Provider: OPPROVIDER, ONE                Issued: 02/13/08
            Status: ACTIVE                Last filled on: 02/13/08
 Processing Status: Released locally on 02/13/08@08:55:32  (Window)
                                                Days Supply: 30
-------------------------------------------------------------------------------

Discontinue Rx #2529 ASPIRIN 325MG EC TAB? Y/N  YES

Rx #2529 ASPIRIN 325MG EC TAB will be discontinued after the acceptance of the
new order.


Now doing remote order checks. Please wait...
Now Processing Enhanced Order Checks!  Please Wait...

***SIGNIFICANT*** Drug Interaction with
                    ASPIRIN 325MG EC TAB and

  Local RX#: 2530
              DRUG: WARFARIN 2.5MG TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
Processing Status: Released locally on 01/08/08@08:55:32  (Window)
   Last Filled On: 01/08/08

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// n  NO
Remote data not available - Only local order checks processed.

Press Return to Continue...

Nature of Order: WRITTEN//        W
WAS THE PATIENT COUNSELED: NO//
.
.
.
     OR


Do you want to Intervene? Y// ES
Remote data not available - Only local order checks processed.

Press Return to Continue...
```

```
Now creating Pharmacy Intervention
for ASPIRIN 325MG EC TAB

PROVIDER:    OPPROVIDER,ONE     OPP     119
RECOMMENDATION:    NO CHANGE

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


Would you like to edit this intervention ? N// O
Nature of Order: WRITTEN//
.
.
.
```

Example: Verifying an Order – Critical Drug Interaction

```
OP Medications (NON-VERIFIED) Feb 13, 2008@08:49:48          Page:    1 of    2
PSOPATIENT,TWO                                                            <A>
  PID: 000-00-0000                                  Ht(cm): 167.64 (10/16/1993)
  DOB: JUL 1,1934 (73)                              Wt(kg): 68.18 (10/16/1993)

                Rx #: 2528$
 (1) *Orderable Item: AMINOPHYLLINE TAB
 (2)            Drug: AMINOPHYLLINE 200MG TAB
 (3)         *Dosage: 200 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
             *Route: ORAL
           *Schedule: Q6H
 (4)Pat Instructions:
                 SIG: TAKE ONE TABLET BY MOUTH EVERY 6 HOURS
 (5)  Patient Status: OPT NSC
 (6)      Issue Date: 02/13/08               (7)  Fill Date: 02/13/08
      Last Fill Date: 02/13/08 (Window)
+         Enter ?? for more actions
DC   Discontinue          PR   (Partial)            RL   (Release)
ED   (Edit)               RF   (Refill)             RN   (Renew)
Select Action: Next Screen// VF   VF


PSOPATIENT,TWO                                  ID#:000-00-0000  RX #2528

                                                            ISSUE  LAST REF DAY
    RX #         DRUG                                  QTY ST  DATE  FILL REM SUP
-------------------------------------------------------------------------------
----------------------------------NON-VERIFIED-----------------------------------
 1 2528$         AMINOPHYLLINE 200MG TAB             120 N  02-13 02-13  11  30
 2 2529$         ASPIRIN 325MG EC TAB                 30 N  02-13 02-13  11  30
 3 2527$         CIMETIDINE 300MG TAB                 30 N  02-13 02-13  11  30
 4 2531$         INDOMETHACIN 25MG CAP                90 N  02-13 02-13  11  30
 5 2530$         WARFARIN 2.5MG TAB                   30 N  02-13 02-13  11  30
Press RETURN to Continue:

***CRITICAL*** Drug Interaction with Prospective Drug:
                    AMINOPHYLLINE 200MG TAB and

         Local RX#: 2527
              Drug: CIMETIDINE 300MG (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
```

```
Processing Status: Released locally on 11/08/08@08:55:32  (Window)
   Last Filled On: 11/08/08

Concurrent cimetidine and theophylline derivative therapy may result in
elevated theophylline derivative concentration levels, prolonged elimination
half-life, and decreased clearance.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// NO


Medication Profile            Feb 13, 2008@08:50:04          Page:    1 of    1
PSOPATIENT,TWO                                                            <A>
  PID: 000-00-0000                                Ht(cm): 167.64 (10/16/1993)
  DOB: JUL 1,1934 (73)                            Wt(kg): 68.18 (10/16/1993)
  SEX: MALE
                                                            ISSUE  LAST REF DAY
 #  RX #         DRUG                                  QTY ST  DATE  FILL REM SUP

-----------------------------------NON-VERIFIED---------------------------------
 1 2528$         AMINOPHYLLINE 200MG TAB             120 N  02-13 02-13  11  30
 2 2529$         ASPIRIN 325MG EC TAB                 30 N  02-13 02-13  11  30
 3 2527$         CIMETIDINE 300MG TAB                 30 N  02-13 02-13  11  30
 4 2531$         INDOMETHACIN 25MG CAP                90 N  02-13 02-13  11  30
 5 2530$         WARFARIN 2.5MG TAB                   30 N  02-13 02-13  11  30


          Enter ?? for more actions

ED   (Edit)               RF   (Refill)             RN   (Renew)
.
.

    OR

Do you want to Continue? Y// YES

Do you want to Process or Cancel medication?
Rx #2528  DRUG: AMINOPHYLLINE 200MG TAB: PROCESS//

Enter your Current Signature Code:    SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for AMINOPHYLLINE 200MG TAB

PROVIDER:    PSOPROVIDER,TWO     TPP     119
RECOMMENDATION:    NO CHANGE

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


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

RX: 2528            PATIENT: PSOPATIENT,TWO (000-00-0000)
STATUS: Non-Verified   CO-PAY STATUS
      DRUG: AMINOPHYLLINE 200MG TAB
       QTY: 120     30 DAY SUPPLY
       SIG: TAKE ONE TABLET BY MOUTH EVERY 6 HOURS
    LATEST: 02/13/2008               # OF REFILLS: 11  REMAINING: 11
    ISSUED: 02/13/08                     PROVIDER:
    LOGGED: 02/13/08                       CLINIC: NOT ON FILE
```

```
   EXPIRES: 02/13/09                     DIVISION: HINES (499)
       CAP: SAFETY                        ROUTING: WINDOW
  ENTRY BY: PSOPHARMACIST,ONE             VERIFIED BY:


LABEL LOG:
#  DATE       RX REF                    PRINTED BY
================================================================================

1  02/13/08   ORIGINAL                  OPCLERK,ONE
COMMENTS: From RX number 2528 Drug-Drug interaction
PATIENT STATUS : OPT NSC                  COPIES : 1
Now doing remote order checks. Please wait...
Remote data not available - Only local order checks processed.

Press Return to Continue...

EDIT:  (Y/N/P): N// O
VERIFY FOR PSOPATIENT,TWO ? (Y/N/Delete/Quit): Y// ES
.
.
```

Example: Verifying an Order – Significant Drug Interaction

```
OP Medications (NON-VERIFIED) Feb 13, 2008@08:51:40          Page:    1 of    2
PSOPATIENT,TWO                                                          <A>
  PID: 000-00-0000                                  Ht(cm): 167.64 (10/16/1993)
  DOB: JUL 1,1934 (73)                              Wt(kg): 68.18 (10/16/1993)

                Rx #: 2531$
 (1) *Orderable Item: INDOMETHACIN CAP,ORAL
 (2)            Drug: INDOMETHACIN 25MG CAP
 (3)         *Dosage: 25 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: CAPSULE
              *Route: ORAL
           *Schedule: TID
 (4)Pat Instructions:
                 SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
 (5)  Patient Status: OPT NSC
 (6)      Issue Date: 02/13/08               (7)  Fill Date: 02/13/08
      Last Fill Date: 02/13/08 (Window)
+         Enter ?? for more actions
DC   Discontinue          PR   (Partial)            RL   (Release)
ED   Edit                 RF   (Refill)             RN   (Renew)
Select Action: Next Screen// VF   VF


PSOPATIENT,TWO                                 ID#:000-00-0000  RX #2531

                                                          ISSUE  LAST REF DAY
    RX #         DRUG                                QTY ST  DATE  FILL REM SUP
--------------------------------------------------------------------------------
-------------------------------------ACTIVE-------------------------------------
 1 2528$         AMINOPHYLLINE 200MG TAB             120 A  02-13 02-13  11  30
 2 2529$         ASPIRIN 325MG EC TAB                 30 A  02-13 02-13  11  30
-----------------------------------NON-VERIFIED-----------------------------------
 3 2527$         CIMETIDINE 300MG TAB                 30 N  02-13 02-13  11  30
 4 2531$         INDOMETHACIN 25MG CAP                90 N  02-13 02-13  11  30
 5 2530$         WARFARIN 2.5MG TAB                   30 N  02-13 02-13  11  30
```

```
Press RETURN to Continue:

***SIGNIFICANT*** Drug Interaction with Prospective Drug:
                      INDOMETHACIN 25MG CAP and

  Local RX#: #2530
              DRUG: WARFARIN 2.5MG TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
Processing Status: Released locally on 02/13/08@08:55:32  (Window)
   Last Filled On: 02/13/08

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// NO

RX: 2531            PATIENT: PSOPATIENT,TWO (000-00-0000)
STATUS: Non-Verified   CO-PAY STATUS
      DRUG: INDOMETHACIN 25MG CAP
       QTY: 90     30 DAY SUPPLY
       SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
    LATEST: 02/13/2008               # OF REFILLS: 11  REMAINING: 11
    ISSUED: 02/13/08                     PROVIDER:
    LOGGED: 02/13/08                       CLINIC: NOT ON FILE
   EXPIRES: 02/13/09                     DIVISION: HINES (499)
       CAP: SAFETY                        ROUTING: WINDOW
  ENTRY BY: OPCLERK,ONE               VERIFIED BY:

PATIENT STATUS : OPT NSC                  COPIES : 1
Now doing remote order checks. Please wait...
Remote data not available - Only local order checks processed.

Press Return to Continue...

EDIT:  (Y/N/P): N// O
VERIFY FOR PSOPATIENT,TWO ? (Y/N/Delete/Quit): Y// NO
.
.
.

   OR

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for INDOMETHACIN 25MG CAP

PROVIDER:    PSOPROVIDER,TWO     TPP     119
RECOMMENDATION:    NO CHANGE

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


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

RX: 2531            PATIENT: PSOPATIENT,TWO (000-00-0000)
STATUS: Non-Verified   CO-PAY STATUS
      DRUG: INDOMETHACIN 25MG CAP
       QTY: 90     30 DAY SUPPLY
       SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
    LATEST: 02/13/2008               # OF REFILLS: 11  REMAINING: 11
```

```
    ISSUED: 02/13/08                     PROVIDER:
    LOGGED: 02/13/08                       CLINIC: NOT ON FILE
   EXPIRES: 02/13/09                     DIVISION: HINES (499)
       CAP: SAFETY                        ROUTING: WINDOW
  ENTRY BY: OPCLERK, ONE              VERIFIED BY:

PATIENT STATUS : OPT NSC                  COPIES : 1
Now doing remote order checks. Please wait...
Remote data not available - Only local order checks processed.


Press Return to Continue...

EDIT:  (Y/N/P): N// O
VERIFY FOR PSOPATIENT,TWO ? (Y/N/Delete/Quit): Y// YES
.
.
.
```

Example: Reinstating A Discontinued Order – Critical Interaction

```
                Rx #: 2473
 (1) *Orderable Item: AMINOPHYLLINE TAB
 (2)            Drug: AMINOPHYLLINE 200MG TAB
 (3)         *Dosage: 200 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
              *Route: ORAL
           *Schedule: Q6H
 (4)Pat Instructions:
                 SIG: TAKE ONE TABLET BY MOUTH EVERY 6 HOURS
 (5)  Patient Status: SC LESS THAN 50%
 (6)      Issue Date: 06/25/07               (7)  Fill Date: 06/25/07
      Last Fill Date: 02/12/08 (Window)
+         Enter ?? for more actions
DC   Discontinue          PR   (Partial)            RL   Release
ED   (Edit)               RF   (Refill)             RN   Renew
Select Action: Next Screen// DC   Discontinue
Are you sure you want to Reinstate? NO// YES

Comments: TESTING
Nature of Order: SERVICE CORRECTION//        S
==============================================================================

2473  AMINOPHYLLINE 200MG TAB
Now Processing Enhanced Order Checks!  Please Wait...

***CRITICAL*** Drug Interaction with Prospective Drug:
                    AMINOPHYLLINE 200MG TAB and

         Local RX#: 2527
              Drug: CIMETIDINE 300MG (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
Processing Status: Released locally on 02/13/08@08:55:32  (Window)
   Last Filled On: 02/13/08

Concurrent cimetidine and theophylline derivative therapy may result in
elevated theophylline derivative concentration levels, prolonged elimination
half-life, and decreased clearance.

Display Professional Interaction Monograph? No// No
```

```
Do you want to Continue? Y// NO

PI  Patient Information                SO  Select Order

PU  Patient Record Update              NO  New Order
PI  Patient Information                SO  Select Order
Select Action: Quit// 5

Medication Profile           Feb 14, 2008@11:43:17          Page:    1 of    1
PSOPATIENT, TEN                                                      <A>
  PID: 000-00-0000                                Ht(cm): _______ (______)
  DOB: JAN 1,1922 (86)                            Wt(kg): _______ (______)
  SEX: MALE
                                                            ISSUE  LAST REF DAY
 #  RX #         DRUG                                  QTY ST  DATE  FILL REM SUP

-------------------------------------ACTIVE-----------------------------------
 1 2472          CIMETIDINE 300MG TAB                   60 A  06-25 02-12  11  30
 2 2526          INDINAVIR 400MG CAP                    90 A  02-12 02-12  11  30
 3 2469          RIFAMPIN 300MG CAP                    120 A  06-25 02-12  11  30
 4 2525          WARFARIN 5MG TAB                       30 A  02-12 02-12  11  30
----------------------------------DISCONTINUED--------------------------------
 5 2473          AMINOPHYLLINE 200MG TAB               120 DC 06-25 02-12  11  30
 6 2533          AMIODARONE 200MG TAB                  180 DC 02-14 02-14  11  30
 7 2465          ASPIRIN 325MG EC TAB                   30 DC 06-25 02-12  11  30
 8 2471          CARBAMAZEPINE 200MG TAB                90 DC 06-25 02-12  11  30
 9 2524          WARFARIN 2.5MG TAB                     90 DC 02-12 02-12  11  30
          Enter ?? for more actions



ED   (Edit)               RF   (Refill)             RN   Renew
.
.
   Or

Do you want to Continue? Y// ES

Do you want to Process medication
AMINOPHYLLINE 200MG TAB: P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for AMINOPHYLLINE 200MG TAB

PROVIDER:    OPPROVIDER, ELEVEN     EPP
RECOMMENDATION:    NO CHANGE

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


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

Prescription #2473 REINSTATED!
   Prescription #2473 Filled:  JUN 25, 2007Printed: JUN 25, 2007Released:
     ** Do you want to print the label now? N// O



ED   (Edit)               RF   (Refill)             RN   Renew
```

Example: Reinstating A Discontinued Order – Significant Interaction

```
                Rx #: 2465
 (1) *Orderable Item: ASPIRIN TAB,EC
 (2)            Drug: ASPIRIN 325MG EC TAB <DIN>
 (3)         *Dosage: 325 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
              *Route: ORAL
            *Schedule: QAM
 (4)Pat Instructions:
                 SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
 (5)  Patient Status: SC LESS THAN 50%
 (6)      Issue Date: 06/25/07              (7)  Fill Date: 06/25/07
      Last Fill Date: 02/12/08 (Window)
+         Enter ?? for more actions
DC   Discontinue          PR   (Partial)            RL   Release
ED   (Edit)               RF   (Refill)             RN   Renew
Select Action: Next Screen// DC   Discontinue
Are you sure you want to Reinstate? NO// YES

Comments: TESTING
Nature of Order: SERVICE CORRECTION//        S
================================================================================
=

2465  ASPIRIN 325MG EC TAB
Now Processing Enhanced Order Checks!  Please Wait...

***SIGNIFICANT*** Drug Interaction with Prospective Drug:
                    ASPIRIN 325MG EC TAB and

         Local RX#: 2524
              Drug: WARFARIN 2.5MG TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
 Processing Status: Released locally on 02/12/07@08:55:32  (Window)
    Last Filled On: 02/12/07

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// NO

Prescription #2465 REINSTATED!
   Prescription #2465 Filled:  JUN 25, 2007Printed: JUN 25, 2007Released:
     ** Do you want to print the label now? N//
.
.

   OR

Do you want to Intervene? Y// YES

Do you want to Process medication
CARBAMAZEPINE 200MG TAB: P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for CARBAMAZEPINE 200MG TAB
```

```
PROVIDER:    OPPROVIDER, ELEVEN     EPP
RECOMMENDATION:    NO CHANGE

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


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

Prescription #2471 REINSTATED!
   Prescription #2471 Filled:  JUN 25, 2007Printed: JUN 25, 2007Released:
     ** Do you want to print the label now? N// O
.
.
```

Example: Editing An Order – Creating a New Order – Critical Interaction

```
Medication Profile            Feb 14, 2008@12:26:38          Page:    1 of    2
OPPATIENT, ONE                                                      <A>
  PID: 000-00-0000                                   Ht(cm): _______ (______)
  DOB: JAN 1,1922 (86)                               Wt(kg): _______ (______)
  SEX: MALE
                                                              ISSUE  LAST REF DAY
 #  RX #         DRUG                                   QTY ST  DATE  FILL REM SUP

-------------------------------------ACTIVE-----------------------------------
 1 2473          AMINOPHYLLINE 200MG TAB               120 A  06-25 02-12  11  30
 2 2537          ASPIRIN 325MG EC TAB                   30 A  02-14 02-14  11  30
 3 2471          CARBAMAZEPINE 200MG TAB                90 A  06-25 02-12  11  30
 4 2472          CIMETIDINE 300MG TAB                   60 A  06-25 02-12  11  30
 5 2526          INDINAVIR 400MG CAP                    90 A  02-12 02-12  11  30
 6 2469          RIFAMPIN 300MG CAP                    120 A  06-25 02-12  11  30
----------------------------------DISCONTINUED--------------------------------
 7 2533          AMIODARONE 200MG TAB                  180 DC 02-14 02-14  11  30
 8 2536          DIPYRIDAMOLE 25MG TAB                  30 DE 02-14 02-14  11  30
 9 2524          WARFARIN 2.5MG TAB                     90 DC 02-12 02-12  11  30
+         Enter ?? for more actions


DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// ED

                Rx #: 2537
 (1) *Orderable Item: ASPIRIN TAB,EC
 (2)            Drug: ASPIRIN 325MG EC TAB <DIN>
 (3)         *Dosage: 325 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
              *Route: ORAL
OP Medications (ACTIVE)       Feb 14, 2008@12:26:38          Page:    1 of    2
OPPATIENT, ONE                                                      <A>
  PID: 000-00-0000                                   Ht(cm): _______ (______)
  DOB: JAN 1,1922 (86)                               Wt(kg): _______ (______)

           *Schedule: QAM
 (4)Pat Instructions:
                 SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
 (5)  Patient Status: SC LESS THAN 50%
 (6)      Issue Date: 02/14/08              (7)  Fill Date: 02/14/08
      Last Fill Date: 02/14/08 (Window)
+         Enter ?? for more actions
```

```
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// 1

Current Orderable Item: ASPIRIN TAB,EC
Select PHARMACY ORDERABLE ITEM NAME: ASPIRIN// AMIODARONE  AMIODARONE     TAB

New Orderable Item selected. This edit will create a new prescription!

Press Return to Continue...

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

               Rx #: 2533
               Drug: AMIODARONE 200MG TAB
                SIG: TAKE TWO TABLETS BY MOUTH THREE TIMES A DAY
                QTY: 180                  Refills remaining: 11
           Provider: OPPROVIDER,TEN                  Issued: 02/14/08
             Status: Discontinued            Last filled on: 02/14/08
  Processing Status: Released locally on 02/14/08@08:55:32  (Window)
                                                Days Supply: 30
-------------------------------------------------------------------------------

Press Return to Continue:
Now Processing Enhanced Order Checks!  Please Wait...

***CRITICAL*** Drug Interaction with Prospective Drug:
                       AMIODARONE 200MG TAB and

            Local RX#: 2526
                 Drug: INDINAVIR 400MG CAP (ACTIVE)
                  SIG: TAKE ONE CAPSULES EVERY 8 HOURS
    Processing Status: Released locally on 02/12/08@08:55:32  (Window)
       Last Filled On: 02/12/08

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

Display Professional Interaction Monograph? N//No

Do you want to Continue? Y// NO

                Rx #: 2537
 (1) *Orderable Item: ASPIRIN TAB,EC
 (2)            Drug: ASPIRIN 325MG EC TAB <DIN>
 (3)         *Dosage: 325 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
              *Route: ORAL
           *Schedule: QAM
OP Medications (ACTIVE)       Feb 14, 2008@12:27:09          Page:    1 of    2
OPPATIENT, ONE                                                     <A>
  PID: 000-00-0000                                  Ht(cm): _______ (______)
  DOB: JAN 1,1922 (86)                              Wt(kg): _______ (______)

 (4)Pat Instructions:
                 SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
```

```
 (5)  Patient Status: SC LESS THAN 50%
 (6)      Issue Date: 02/14/08              (7)  Fill Date: 02/14/08
      Last Fill Date: 02/14/08 (Window)
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen//
.
.

OR

Do you want to Continue? Y// ES

Do you want to Process medication
AMIODARONE 200MG TAB: P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for AMIODARONE 200MG TAB

PROVIDER:    PSOPROVIDER, THREE     TPP
RECOMMENDATION:    NO CHANGE

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


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

Example: Editing An Order – Creating a New Order – Significant Interaction

```
                Rx #: 2537
 (1) *Orderable Item: ASPIRIN TAB,EC
 (2)            Drug: ASPIRIN 325MG EC TAB <DIN>
 (3)         *Dosage: 325 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
             *Route: ORAL
           *Schedule: QAM
OP Medications (ACTIVE)       Feb 14, 2008@12:27:09          Page:    1 of    2
OPPATIENT,TWO                                                       <A>
  PID: 000-00-0000                                Ht(cm): _______ (______)
  DOB: JAN 1,1922 (86)                            Wt(kg): _______ (______)

 (4)Pat Instructions:
                 SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
 (5)  Patient Status: SC LESS THAN 50%
 (6)      Issue Date: 02/14/08              (7)  Fill Date: 02/14/08
      Last Fill Date: 02/14/08 (Window)
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// EDIT   Edit
Select fields by number:  (1-19): 1

Current Orderable Item: ASPIRIN TAB,EC
Select PHARMACY ORDERABLE ITEM NAME: ASPIRIN// AMIODARONE  AMIODARONE     TAB
```

```
New Orderable Item selected. This edit will create a new prescription!


Press Return to Continue...

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

               Rx #: 2533
               Drug: AMIODARONE 200MG TAB
                SIG: TAKE TWO TABLETS BY MOUTH THREE TIMES A DAY
                QTY: 180                  Refills remaining: 11
           Provider: OPPROVIDER,TEN                   Issued: 02/14/08
             Status: Discontinued            Last filled on: 02/14/08
  Processing Status: Released locally on 02/14/08@08:55:32  (Window)
                                                Days Supply: 30
-------------------------------------------------------------------------------

Press Return to Continue:
Now Processing Enhanced Order Checks!  Please Wait...

***SIGNIFICANT*** Drug Interaction with Prospective Drug:
                       AMIODARONE 200MG TAB and

            Local RX#: 2469
                 Drug: CIPROFLOXACIN 750MG TAB (ACTIVE)
                  SIG: TAKE ONE TABLET EVERY 12 HOURS
    Processing Status: Released locally on 02/12/08@08:55:32  (Window)
       Last Filled On: 02/12/08

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? N//No

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for AMIODARONE 200MG TAB

PROVIDER:    OPPROVIDER,ELEVEN     EPP
RECOMMENDATION:    NO CHANGE

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

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

   OR
Do you want to Intervene? Y// NO

You have changed the Orderable Item from
ASPIRIN to AMIODARONE.
Do You want to Edit the SIG? NO// YES
Available Dosage(s)
       1. 200MG
       2. 400MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 200MG

You entered 200MG is this correct? Yes//   YES
```

```
VERB: TAKE// TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
.
.
```

Example: Backdoor New Order Entry by Non-Pharmacist – Critical Interaction with Non-VA Med plus Significant Interaction with Local Rx

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

Eligibility: SERVICE CONNECTED 50% to 100%     SC%: 80
RX PATIENT STATUS: SC//
DRUG: WARFAR
  Lookup: GENERIC NAME
     1   WARFARIN 2.5MG TAB           BL110
     2   WARFARIN 5MG TAB           BL110
CHOOSE 1-2: 2  WARFARIN 5MG TAB         BL110

Now Processing Enhanced Order Checks!  Please Wait...

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


            Non-VA Med: CIMETIDINE 300MG TAB
                Dosage: ONE TABLET  Schedule: AT BEDTIME

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

Display Professional Interaction Monograph? No// No

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

         Local RX#: 2443
              Drug: IBUPROFEN 600MG TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY
Processing Status: Released locally on 11/08/07@08:55:32  (Window)
   Last Filled On: 11/08/07

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFFECTS

Display Professional Interaction Monograph? No// Yes


Device: Home// <Home would print to screen, or a specific device could be
specified>

Professional Monograph
Drug Interaction with WARFARIN and IBUPROFEN

MONOGRAPH TITLE:  Anticoagulants/NSAIDs

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

MECHANISM OF ACTION: The exact mechanism is unknown. Some NSAIDs may displace anticoagulants from plasma protein binding sites. NSAIDs also have the potential to produce gastrointestinal ulceration and bleeding. Some NSAIDs may impair platelet function and prolong bleeding times.

CLINICAL EFFECTS: In some patients, NSAIDs have been associated with an increase in the hypoprothrombinemic effect to anticoagulants.

PREDISPOSING FACTORS: None determined.

PATIENT MANAGEMENT: If concurrent therapy with anticoagulants and NSAIDs is warranted, patients should be monitored for an increased hypoprothrombinemic response when NSAIDs are added to the patient's drug regimen. In addition to routine monitoring of INR values, the patient should be observed for signs of increased effect, including bruising or bleeding.The time of highest risk for a coumarin-type drug interaction is when the precipitant drug is initiated or discontinued. Consult with the prescriber before initiating, altering the dose of, or discontinuing either drug.

DISCUSSION: The effects of NSAIDs on the hypoprothrombinemic response to anticoagulants appears to vary between patients as well as with different NSAIDs. Documentation is frequently contradictory - while studies have shown several NSAIDs to have no effect on the pharmacokinetics of warfarin, case reports have documented increased effects with and without bleeding when these same NSAIDs were administered concurrently with warfarin.While celecoxib has been shown not to affect platelet aggregation or bleeding times and had no effects on the anticoagulant effect of warfarin in healthy subjects, increased prothrombin times and bleeding episodes, some of which were fatal, have been reported, predominantly in the elderly, in patients receiving concurrent therapy with celecoxib and warfarin.Rofecoxib has been shown to increase prothrombin times in subjects who received concurrent warfarin therapy.If concurrent therapy with anticoagulants and NSAIDs is warranted, it would be prudent to monitor patients closely for increased anticoagulant effects.

REFERENCES:
1.Thilo D, Nyman D. A study of the effects of the anti-rheumatic drug ibuprofen (Brufen) on patients being treated with the oral anti-coagulant phenprocoumon (Marcoumar). J Int Med Res 1974;2:276-8.
2.Boekhout-Mussert MJ, Loeliger EA. Influence of ibuprofen on oral anti-coagulant with phenprocoumon. J Int Med Res 1974;2:279-83.
3.Penner JA, Abbrecht PH. Lack of interaction between ibuprofen and warfarin Curr Ther Res Clin Exp 1975 Dec;18(6):862-71.
4.Michot F, Ajdacic K, Glaus L. A double-blind clinical trial to determine if an interaction exists between diclofenac sodium and the oral anticoagulant acenocoumarol (nicoumalone). J Int Med Res 1975;3(3):153-7.
5.Marbet GA, Duckert F, Walter M, Six P, Airenne H. Interaction study between phenprocoumon and flurbiprofen. Curr Med Res Opin 1977;5(1):26-31.
6.Slattery JT, Levy G, Jain A, McMahon FG. Effect of naproxen on the kinetics of elimination and anticoagulant activity of a single dose or warfarin. Clin Pharmacol Ther 1979 Jan;25(1):51-60.
7.Jain A, McMahon FG, Slattery JT, Levy G. Effect of naproxen on the steady-state serum concentration and anticoagulant activity of warfarin. Clin Pharmacol Ther 1979 Jan;25(1):61-6.
8.Loftin JP, Vesell ES. Interaction between sulindac and warfarin: different results in normal subjects and in an unusual patient with a potassium-losing renal tubular defect. J Clin Pharmacol 1979 Nov-Dec; 19(11-12):733-42.
9.Carter SA. Potential effect of sulindac on response of prothrombin-time to oral anticoagulants. Lancet 1979 Sep 29;2(8144):698-9.
10.Ross JR, Beeley L. Sulindac, prothrombin time, and anticoagulants. Lancet 1979 Nov 17;2(8151):1075.
11.Stricker BH, Delhez JL. Interactions between flurbiprofen and coumarins. Br Med J (Clin Res Ed) 1982 Sep 18;285(6344):812-3.

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12.Dahl SL, Ward JR. Pharmacology, clinical efficacy, and adverse effects of
piroxicam, a new nonsteroidal anti-inflammatory agent. Pharmacotherapy 1982
Mar-Apr;2(2):80-90.
13.Rhodes RS, Rhodes PJ, Klein C, Sintek CD. A warfarin-piroxicam drug
interaction. Drug Intell Clin Pharm 1985 Jul-Aug;19(7-8):556-8.
14.Flessner MF, Knight H. Prolongation of prothrombin time and severe
gastrointestinal bleeding associated with combined use of warfarin and
ketoprofen. JAMA 1988 Jan 15;259(3):353.
15.Griffin MR, Piper JM, Daugherty JR, Snowden M, Ray WA. Nonsteroidal anti-
inflammatory drug use and increased risk for peptic ulcer disease in elderly
persons. Ann Intern Med 1991 Feb 15;114(4):257-63.
16.Gabriel SE, Jaakkimainen L, Bombardier C. Risk for serious gastrointestinal
complications related to use of nonsteroidal anti-inflammatory drugs. A meta-
analysis. Ann Intern Med 1991 Nov 15; 115(10):787-96.
17.Shorr RI, Ray WA, Daugherty JR, Griffin MR. Concurrent use of nonsteroidal
anti-inflammatory drugs and oral anticoagulants places elderly persons at high
risk for hemorrhagic peptic ulcer disease. Arch Intern Med 1993 Jul
26;153(14):1665-70.
18.Hilleman DE, Mohiuddin SM, Lucas BD, Jr. Nonsteroidal antiinflammatory drug
use in patients receiving warfarin: emphasis on nabumetone. Am J Med 1993 Aug
9;95(2A):30S-34S.
19.Mieszczak C, Winther K. Lack of interaction of ketoprofen with warfarin. Eur
J Clin Pharmacol 1993;44(2):205-6.
20.Celebrex (celecoxib) US prescribing information. Pfizer Inc. December,
2006.21.Vioxx (rofecoxib) US prescribing information. Merck & Co., Inc. March,
2004.

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Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for WARFARIN 5MG TAB

PROVIDER:    OPPROVIDER,ELEVEN     EPP
RECOMMENDATION:    NO CHANGE

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

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

   OR
Do you want to Intervene? Y// NO


VERB: TAKE
Available Dosage(s)
       1. 5MG
       2. 10MG

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

Example: Finishing a Pending Order by Non-Pharmacist

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

            Non-VA Med: CIMETIDINE 300MG TAB
                Dosage: ONE TABLET    Schedule: AT BEDTIME
```

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

Display Professional Interaction Monograph? No// No

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

         Local RX#: 2443
              Drug: IBUPROFEN 600MG TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY
Processing Status: Released locally on 11/08/07@08:55:32  (Window)
   Last Filled On: 11/08/07

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for WARFARIN 5MG TAB

PROVIDER:    OPPROVIDER,ELEVEN     EPP
RECOMMENDATION:    NO CHANGE

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

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

   OR
Do you want to Intervene? Y// NO


Rx # 2559              03/04/08
OPPATIENT,ONE               #90
TAKE ONE TABLET BY MOUTH EVERY EVENING

WARFARIN 5MG TAB
OERRPROVIDER,ONE     PSOPHARMACIST,ONE
# of Refills: 3


       SC Percent: 80%
     Disabilities: NONE STATED

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

Example: Pharmacist Verifying Order with Two Drug Interactions

```
OP Medications (NON-VERIFIED) Mar 04, 2008@11:55:21          Page:    1 of    2
OPPATIENT,ONE                                                          <A>
  PID: 666-00-0000                                  Ht(cm): _______ (______)
  DOB: JAN 1,1910 (98)                              Wt(kg): _______ (______)

                Rx #: 2560
 (1) *Orderable Item: WARFARIN TAB
 (2)            Drug: WARFARIN 5MG TAB
 (3)         *Dosage: 5 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
              *Route: ORAL
           *Schedule: QPM
 (4)Pat Instructions:
                 SIG: TAKE ONE TABLET BY MOUTH EVERY EVENING
 (5)  Patient Status: SC
 (6)      Issue Date: 03/04/08              (7)  Fill Date: 03/04/08
      Last Fill Date: 03/04/08 (Window)
+         Enter ?? for more actions
DC   Discontinue          PR   (Partial)            RL   (Release)
ED   Edit                 RF   (Refill)             RN   (Renew)
Select Action: Next Screen// VF   VF


OPPATIENT,ONE                                        ID#:666-00-0000  RX #2560

                                                            ISSUE  LAST REF DAY
    RX #         DRUG                                 QTY ST  DATE  FILL REM SUP
-------------------------------------------------------------------------------
-------------------------------------ACTIVE-------------------------------------
 1 2550          IBUPROFEN 600MG TAB                 270 A  03-03 03-04   3  90
----------------------------------NON-VERIFIED----------------------------------
 2 2560          WARFARIN 5MG TAB                     90 N  03-04 03-04   3  90
-------------------------------------PENDING-------------------------------------
 3 FAMOTIDINE 20MG TAB                    QTY: 180         ISDT: 03-04> REF:  3
 4 INDOMETHACIN 25MG CAP                  QTY: 270         ISDT: 03-04  REF:  3
 5 LOVASTATIN 10MG TAB                    QTY: 90          ISDT: 03-03  REF:  3
 6 NIFEDIPINE 90MG SA TAB                 QTY: 90          ISDT: 03-03  REF:  3
-----------------------Non-VA MEDS (Not dispensed by VA)-----------------------
  CIMETIDINE 300MG TAB 300MG TWICE A DAY          Date Documented: 03/03/08
Press RETURN to Continue:

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

            Non-VA Med: CIMETIDINE 300MG TAB
                Dosage: ONE TABLET    Schedule: AT BEDTIME

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

Display Professional Interaction Monograph? No// No


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

         Local RX#: 2443
              Drug: IBUPROFEN 600MG TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY
```

```
Processing Status: Released locally on 11/08/07@08:55:32  (Window)
   Last Filled On: 11/08/07

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// NO

RX: 2560            PATIENT: OPPATIENT,ONE (666-00-0000)
STATUS: Non-Verified
      DRUG: WARFARIN 5MG TAB
       QTY: 90     90 DAY SUPPLY
       SIG: TAKE ONE TABLET BY MOUTH EVERY EVENING
    LATEST: 03/04/2008              # OF REFILLS: 3  REMAINING: 3
    ISSUED: 03/04/08                    PROVIDER:
    LOGGED: 03/04/08                      CLINIC: BARB'S CLINIC
   EXPIRES: 03/05/09                    DIVISION: HINES (499)
       CAP: SAFETY                       ROUTING: WINDOW
  ENTRY BY: OERRPROVIDER,ONE            VERIFIED BY:


ACTIVITY LOG:
#  DATE       REASON     RX REF         INITIATOR OF ACTIVITY
================================================================================

1  03/04/08   PATIENT INST.ORIGINAL
COMMENTS: Patient Instructions Not Sent By Provider.
PATIENT STATUS : SC                       COPIES : 1
EDIT:  (Y/N/P): N// NO
VERIFY FOR OPPATIENT,ONE ? (Y/N/Delete/Quit): Y// ES



PI  Patient Information                 SO  Select Order

Medication Profile            Mar 04, 2008@11:55:31          Page:    1 of    1
OPPATIENT,ONE                                                     <A>
  PID: 666-00-0000                                  Ht(cm): _______ (______)
  DOB: JAN 1,1910 (98)                              Wt(kg): _______ (______)
  SEX: FEMALE                   Non-VA Meds on File      Last entry on 03/03/08
                                                            ISSUE  LAST REF DAY
 #  RX #         DRUG                                  QTY ST  DATE  FILL REM SUP

------------------------------------ACTIVE------------------------------------
 1 2550          IBUPROFEN 600MG TAB                 270 A  03-03 03-04   3  90
 2 2560          WARFARIN 5MG TAB                     90 A  03-04 03-04   3  90
-----------------------------------PENDING------------------------------------
 3 FAMOTIDINE 20MG TAB                    QTY: 180         ISDT: 03-04> REF:  3
 4 INDOMETHACIN 25MG CAP                  QTY: 270         ISDT: 03-04  REF:  3
 5 LOVASTATIN 10MG TAB                    QTY: 90          ISDT: 03-03  REF:  3
 6 NIFEDIPINE 90MG SA TAB                 QTY: 90          ISDT: 03-03  REF:  3
-----------------------Non-VA MEDS (Not dispensed by VA)-----------------------
  CIMETIDINE 300MG TAB 300MG TWICE A DAY          Date Documented: 03/03/08

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

For orders with multiple drug interactions, the user is presented with a drug interaction monograph display prompt and intervention prompt after each drug interaction warning is displayed.

Example: Multiple Drug Interactions

```
Another New Order for OPPATIENT,ONE? YES//

Eligibility: SERVICE CONNECTED 50% to 100%     SC%: 60
          PRISONER OF WAR
RX PATIENT STATUS: SC//
DRUG: WARFAR
  Lookup: GENERIC NAME
     1   WARFARIN (COUMADIN) NA 2.5MG TAB           BL110
     2   WARFARIN 5MG TAB           BL110
CHOOSE 1-2: 1  WARFARIN (COUMADIN) NA 2.5MG TAB         BL110

Now Processing Enhanced Order Checks!  Please Wait...

--------------------------------------------------------------------------------
***Critical*** Drug Interaction with Prospective Drug:
                    WARFARIN 2.5MG TAB and

         Local RX#: 2376
              Drug: CIMETIDINE 300MG TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
Processing Status: Released locally on 11/08/07@08:55:32  (Window)
   Last Filled On: 11/08/07

The pharmacologic effects of warfarin may be increased resulting in severe
bleeding.
--------------------------------------------------------------------------------
Display Professional Interaction Monograph? No// No

--------------------------------------------------------------------------------
***SIGNIFICANT*** Drug Interaction with Prospective Drug:
                    WARFARIN 2.5MG TAB and

         Local RX#: 2378
              Drug: ASPIRIN 325MG EC TAB (ACTIVE)
               SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
Processing Status: Released locally on 11/08/07@08:55:32  (Window)
   Last Filled On: 11/08/07

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS
--------------------------------------------------------------------------------
Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// YES


Do you want to Process medication
CIMETIDINE 300MG TAB P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention
for CIMETIDINE 300MG TAB

PROVIDER: OPPROVIDER, ONE
```

```
RECOMMENDATION: NO CHANGE

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

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

```
Now Processing Enhanced Order Checks!  Please wait...
-------------------------------------------------------------------------------
  ***Critical***  Drug Interaction with Prospective Drug:
                       WARFARIN (C0UMADIN) NA 5MG TAB and

            Local Rx#: 509974
                 Drug: AMIODARONE 200MG TAB  (SUSPENDED)
                  SIG: TAKE ONE TABLET BY MOUTH THREE TIMES A DAY
    Processing Status: Not released locally (Window)
       Last Filled On: 11/08/06


        Pending Drug: AMIODARONE HCL (PACERONE) 200MG TAB
                 SIG: TAKE ONE TABLET BY MOUTH EVERY 8 HOURS

  The concurrent administration of amiodarone and an anticoagulant may result
  in an increase in the clinical effects of the anticoagulant and an
  increased risk of bleeding.(1-22)  It may take several weeks of concurrent
  therapy before the full effects of this interaction are noted.  The effect
  of amiodarone on anticoagulant levels may continue for several months after
  amiodarone is discontinued.
-------------------------------------------------------------------------------

Display Interaction Monograph? No//   NO
-------------------------------------------------------------------------------
  ***Critical***  Drug Interaction with Prospective Drug:
                       WARFARIN (C0UMADIN) NA 5MG TAB

            Local Rx#: 502214
                 Drug: KETOCONAZOLE 200MG TAB  (ACTIVE)
                  SIG: TAKE ONE TABLET BY MOUTH THREE TIMES A DAY
    Processing Status: Not released locally (Window)
       Last Filled On: 11/08/06


  The anticoagulant effect of warfarin may be increased.
-------------------------------------------------------------------------------

Display Interaction Monograph? No//   NO
-------------------------------------------------------------------------------

  ***Critical***  Drug Interaction with Prospective Drug:
                    WARFARIN (C0UMADIN) NA 5MG TAB and


        Non-VA Med: CIMETIDINE 300MG TAB
        Dosage: 300MG        Schedule: TWICE A DAY

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

Display Interaction Monograph? No//   NO
```

```
-------------------------------------------------------------------------------
  ***Significant***  Drug Interaction with Prospective Drug:
                       WARFARIN (C0UMADIN) NA 5MG TAB and

             Location: <Remote facility name>   Remote Rx#: 502211
                 Drug: ASPIRIN 325MG EC TAB  (ACTIVE)
                  SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
       Last Filled On: 11/08/06

           Non-VA Med: ASPIRIN 325MG EC TAB
               Dosage: 325MG        Schedule: EVERY MORNING

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL

Display Interaction Monograph? No// NO

Do you want to Continue? Y// ES

Do you want to Process medication
WARFARIN (C0UMADIN) NA 5MG TAB: P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for  WARFARIN (C0UMADIN) NA 5MG TAB

PROVIDER:
RECOMMENDATION:    NO CHANGE

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


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

Allergy/ADR Order Checks (PSO*7*251)

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

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

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

See examples below:

Remote Allergy/ADR – New Order Entry Backdoor – Both Ingredient and Drug Class defined for Allergy/ADR

```
Select Action: Quit// NO   New Order

PATIENT STATUS: SC//
DRUG: DILTIAZEM
  Lookup: GENERIC NAME
     1   DILTIAZEM (DILACOR XR) 240MG SA CAP           CV200     N/F  This
drug will not be processed without Drug Request Form 10-7144
     2   DILTIAZEM (INWOOD) 120MG SA CAP           CV200
     3   DILTIAZEM (INWOOD) 180MG SA CAP           CV200
     4   DILTIAZEM (INWOOD) 240MG SA CAP           CV200
     5   DILTIAZEM (INWOOD) 300MG SA CAP           CV200
Press <RETURN> to see more, '^' to exit this list, '^^' to exit all lists, OR
CHOOSE 1-5: 1  DILTIAZEM (DILACOR XR) 240MG SA CAP         CV200     N/F   This
drug will not be processed without Drug Request Form 10-7144

Now doing allergy checks.  Please wait...

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

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

Do you want to Intervene? Y// NO

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

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

   OR


Do you want to Intervene? Y// ES

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

PROVIDER:    PSOPROVIDER,THREE     TPP     119
RECOMMENDATION:    NO CHANGE

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


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

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

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

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

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

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

Now doing allergy checks.  Please wait...


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

Drug: SEPTRA DS TAB
   Class: AM650 SULFONAMIDE/RELATED ANTIMICROBIALS (LOCAL)

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for SEPTRA DS TAB

PROVIDER:    PSOPROVIDER,FOUR     FPP     119
RECOMMENDATION:    NO CHANGE

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


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

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

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

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

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

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

*(1) Orderable Item: SULFAMETHOXAZOLE/TRIMETHOPRIM TAB
 (2)           Drug: SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
               Verb: TAKE
 (3)        *Dosage: 1 TABLET
             *Route: ORAL
          *Schedule: Q12H
 (4)   Pat Instruct:
  Provider Comments:
       Instructions: TAKE 1 TABLET PO Q12H
                 SIG: TAKE 1 TABLET BY MOUTH EVERY 12 HOURS
 (5) Patient Status: OPT NSC
 (6)     Issue Date: MAR 24,2008        (7) Fill Date: MAR 24,200
+         Enter ?? for more actions
BY  Bypass                              DC  Discontinue
ED  Edit                                FN  Finish
Select Item(s): Next Screen// FN   Finish

Now doing allergy checks.  Please wait...

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

Drug: SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
  Ingredients: SULFAMETHOXAZOLE (LOCAL), TRIMETHOPRIM (LOCAL)
   Class: AM650 SULFONAMIDE/RELATED ANTIMICROBIALS (LOCAL AND REMOTE SITE(S))

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB

PROVIDER:    PSOPROVIDER, 11     PP     119
RECOMMENDATION:    NO CHANGE

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

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

Rx # 2611              03/24/08
PSOPATIENT,THREE                   #20
TAKE 1 TABLET BY MOUTH EVERY 12 HOURS

SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
PSOPROVIDER, 11            PSOPHARMACIST,TWO
# of Refills: 1

Are you sure you want to Accept this Order? NO// Y
.
.
```

Therapeutic Duplication

This section describes enhancements to the existing VistA Duplicate Class order checks.
The current VistA Duplicate Class checks have been enhanced using the FDB business rules and database, as well as the FDB Enhanced Therapeutic Classification (ETC) system. The Duplicate Class check will now be referred to as the Duplicate Therapy order check. This order check will continue to be performed against active, pending, non-verified orders on hold (initiated through pharmacy or CPRS), expired and discontinued orders. The timeframe for inclusion of expired and discontinued orders is determined by the display rules on the medication profile. This check will be performed on active Non-VA Medication orders.

No changes have been made to the existing user actions for Duplicate Therapy order checks. Users will continue to have the ability to discontinue the order. The existing order will only be discontinued upon acceptance of the order being processed. No discontinue actions can be performed on remote outpatient orders, Non-VA medications, discontinued, and expired orders or orders placed on provider hold through CPRS. If the CANCEL DRUG IN SAME CLASS outpatient site parameter is set to 'No', no discontinue action is allowed on any duplicate class order.

Any remote Outpatient order (from another VAMC or Department of Defense (DoD) facility) using data from Health Data Repository Historical (HDR-Hx) or Health Data Repository- Interim Messaging Solution (HDR-IMS) that has been expired for 120 days or less will be included in the list of medications to be checked.

FDB custom tables will be used to store custom changes to the duplication allowance for a FDB therapeutic classification. Each duplicate therapy class is assigned a duplication allowance. The duplication allowance for a therapeutic allowance determines whether or not the therapeutic duplication warning will be displayed to the user.

The Vendor's (currently FDB) Enhanced Therapeutic Classification (ETC) System is now used in place of the VA Drug Class for the Duplicate Therapy (formerly duplicate class) order checks.

Duplicate Therapy order checks will no longer be processed in pairs. Each duplicate therapy warning includes as many outpatient medication orders as it applies to.

A duplicate therapy warning is only displayed if the number of duplicate therapy matches exceeds the duplication allowance specified for the FDB duplicate therapy class.

The following processes use the enhanced functionality:

- Entering a new outpatient medication order through pharmacy options
- Finishing a pending outpatient medication order
- Renewing an outpatient medication order
- When a new outpatient medication order is created via an edit
- Verification of an outpatient medication order entered or finished by a non-pharmacist
- Copy of an outpatient medication order
- Reinstatement of an outpatient medication order

See illustrations below:

Example: Local RX

```
==============================================================================
*** THERAPEUTIC DUPLICATION(S) *** FAMOTIDINE 20MG TAB with

            Local Rx#: 2561
                 Drug: CIMETIDINE 300MG TAB (DISCONTINUED)
                  SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
                  QTY: 30                 Days Supply: 30
    Processing Status: Released locally on 3/4/08@08:55:32  (Window)
       Last Filled On: 11/08/06

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

Example: Remote Rx

```
==============================================================================
*** THERAPEUTIC DUPLICATION(S) *** SUCRALFATE 1GM TAB with

        LOCATION: <VA OR DOD FACILITY>   Remote Rx#: 65343
                 Drug: RANITIDINE HCL 150MG TAB (EXPIRED)
                  SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
                  QTY: 180                Days Supply: 90
       Last Filled On: 11/08/06

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

Example: Pending Order

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

          Pending Drug: FAMOTIDINE 20MG TAB
                   SIG: TAKE ONE TABLET BY TWICE DAILY

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

Example: Non-VA Med Order

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

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

           Non-VA Med: CIMETIDINE 300MG TAB
               Dosage: 300MG    Schedule: TWICE A DAY

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

If the CANCEL DRUG IN SAME CLASS outpatient site parameter is set to ‘No’, the following information is shown for the duplicate therapy warning:

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

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

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

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

   Pending Order for FAMOTIDINE 20MG TAB

   Non-VA Med Order for CIMETIDINE 300MG TAB

Class(es)Involved in Therapeutic Duplication(s): PEPTIC ULCER AGENTS,
HISTAMINE-2 RECEPTOR ANTAGOINSTS (H2 ANTAGONISTS)
==============================================================================
```

If there is more than one remote, local, pending or Non-VA med order involved in the therapeutic duplication, the order details will be displayed one after the other.

If the same drugs are involved in multiple therapeutic duplications, a single therapeutic duplication warning will be displayed and multiple therapeutic classes will be listed.

If the CANCEL DRUG IN SAME CLASS outpatient site parameter is set to ‘No’, no discontinue action prompt will be presented.

After all the therapeutic duplication warnings are displayed and if the CANCEL DRUG IN SAME CLASS outpatient site parameter is set to ‘Yes’, the user will be asked if they want to discontinue any of the orders.

See Examples:

```
Discontinue RX #2580A SUCRALFATE 1GM TAB? Y/N
```

```
Discontinue Pending Order SUCRALFATE 1GM TAB? Y/N
```

The system will only allow a discontinuation action on active, pending, non-verified and orders placed on hold by pharmacy.

The system will display the following information for the numbered list of orders:

- Prescription number (if applicable)
- Dispense Drug (Orderable item if dispense drug not assigned to order)
- Indicate if the order is pending (with text ‘Pending Order’)

See example below.

```
  1. Pending order  AMLODIPINE 5MG/ATORVASTATIN 10MG
    2. RX #2426 LOVASTATIN 40MG TAB
```

The discontinuation of selected orders by the system will occur at the time the user accepts the order that is being processed.

```
Discontinue order(s)? Y/N  Y es

    1. RX #2577 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
    2. RX #2581 CHOLESTYRAMINE 9GM PACKETS

Select (1-2):  1  Duplicate Therapy RX #2577 AMLODIPINE 5MG/ATORVASTATIN 10MG
TAB will be discontinued after the acceptance of the new order.
```

```
Discontinue order(s)? Y/N  Y es

    1. RX #2577 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
    2. Pending Order CHOLESTYRAMINE 9GM PACKETS

Select (1-2):  2  Duplicate Therapy Pending Order CHOLESTYRAMINE 9GM PACKETS
will be discontinued after the acceptance of the new order.
```

If the user fails to accept the order that is being processed or exits before accepting the order, the system shall not discontinue the order(s) selected.

The message displayed to the user shall contain:

- Indicate that discontinuance was for Duplicate Therapy
- The prescription number or text ‘Pending order’ if order status is pending.
- Dispense Drug (Orderable item if dispense drug not assigned to order)
- Ending with text ‘NOT Discontinued.’

See examples below:

```
Duplicate Therapy  RX #2710 CIMETIDINE 300MG TAB NOT Discontinued.
```

```
Duplicate Therapy  Pending Order RANITIDINE  150MG TAB NOT Discontinued.
```

Once the order being processed is accepted and there were orders selected for discontinuation, the system shall inform the user when the discontinuation occurs.

The message displayed to the user shall contain:

- Indicate that discontinuance was for Duplicate Therapy
- The prescription number or text ‘Pending order’ if order status is pending.
- Dispense Drug (Orderable item if dispense drug not assigned to order)
- Ending with text ‘has been discontinued.’

See examples below.

```
Duplicate Therapy RX #2549 CIMETIDINE 300MG TAB has been discontinued...
```

```
Duplicate Therapy  Pending Order RANITIDINE  150MG TAB has been discontinued…
```

See Therapeutic Duplication examples below:

Example: Finishing pending order – Therapeutic Duplication with Non-VA med and discontinued order -No discontinue action allowed.

```
*(1) Orderable Item: FAMOTIDINE TAB ***(N/F)*** <DIN>
 (2)      CMOP Drug: FAMOTIDINE 20MG TAB ***(N/F)*** <DIN>
 (3)        *Dosage: 20 (MG)
               Verb: TAKE
     Dispense Units: 1
               Noun: TABLET
             *Route: ORAL
+         Enter ?? for more actions
BY  Bypass                              DC  Discontinue
ED  Edit                                FN  Finish
Select Item(s): Next Screen// FN   Finish

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

            Local Rx#: 2561
                 Drug: CIMETIDINE 300MG TAB (DISCONTINUED)
                  SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
                  QTY: 30                 Days Supply: 30
        Processing Status: Released locally on 3/4/08@08:55:32  (Window)
       Last Filled On: 11/08/06
------------------------------------------------------------------------------
           Non-VA Med: CIMETIDINE 300MG TAB
               Dosage: 300MG    Schedule: TWICE A DAY


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

Press Return to Continue:

Rx # 2570              03/07/08
PSOPATIENT,ONE                  #180
TAKE ONE TABLET BY MOUTH TWICE A DAY

FAMOTIDINE 20MG TAB
PSOPROVIDER,ONE            PSOPHARMACIST,ONE
# of Refills: 3


       SC Percent: 80%
     Disabilities: NONE STATED

Was treatment for a Service Connected condition? YES//
Are you sure you want to Accept this Order? NO//
.
.
.
```

Example: New Order Entry Backdoor – Therapeutic Duplication with pending and active order. Discontinue action shown.

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

Eligibility: SERVICE CONNECTED 50% to 100%     SC%: 80
RX PATIENT STATUS: SC//
DRUG: Nizatidine
    Lookup: DRUG  GENERIC NAME
NIZATIDINE 150MG CAP           GA302
         ...OK? Yes//   (Yes)
==============================================================================
*** THERAPEUTIC DUPLICATION(S) *** NIZATIDINE 150MG CAP with

            Local Rx#: 2549
                 Drug: CIMETIDINE 300MG TAB (ACTIVE)
                  SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
                  QTY: 30                 Days Supply: 30
    Processing Status: Released locally on 3/4/09@08:55:32  (Window)
       Last Filled On: 11/08/06
------------------------------------------------------------------------------
         Pending Drug: FAMOTIDINE 20MG TAB
                  SIG: TAKE ONE TABLET BY TWICE DAILY

Class(es)Involved in Therapeutic Duplication(s): Peptic Ulcer Agents,
Histamine-2 Receptor Antagonists (H2 Antagonists)
==============================================================================
Discontinue order(s)? Y/N  No

Press Return to Continue...

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

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

         OR

Discontinue order(s)? Y/N  Y es

    1. Pending Order FAMOTIDINE 20MG TAB
    2. RX #2549 CIMETIDINE 300MG TAB

Select (1-2):  2  RX #2549 CIMDTIDINE 300MG TAB will be discontinued after the
acceptance of the new order.

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

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 150MG

You entered 150MG is this correct? Yes//   YES
VERB: TAKE
```

```
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 150MG

NOUN: TABLET
ROUTE: PO//   ORAL      PO  MOUTH
Schedule:
This is a required response. Enter '^' to exit
Schedule: BID (TWO TIMES A DAY)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES):
CONJUNCTION:
PATIENT INSTRUCTIONS:

(TAKE ONE TABLET BY MOUTH TWO TIMES A DAY)

DAYS SUPPLY:  (1-90): 60//
QTY (   ) : 360// 180
COPIES: 1// 1
# OF REFILLS:  (0-3): 3//
PROVIDER:    PSOPROVIDER,ONE
CLINIC:    BARB'S CLINIC 2
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
REMARKS:
ISSUE DATE: TODAY//   (MAR 12, 2008)
FILL DATE:  (3/12/2008 - 3/13/2009): TODAY//   (MAR 12, 2008)
Nature of Order: WRITTEN//        W
WAS THE PATIENT COUNSELED: NO// NO

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

Rx # 2580              03/12/08
PSOPATIENT,ONE             #180
TAKE ONE TABLET BY MOUTH TWO TIMES A DAY

NIZATIDINE 150MG CAP
PSOPROVIDER,ONE       PSOPHARMACIST,ONE
# of Refills: 3


       SC Percent: 80%
     Disabilities: NONE STATED

Was treatment for a Service Connected condition?
This is a required response. Enter '^' to exit
Was treatment for a Service Connected condition? NO
Is this correct? YES//

 -Duplicate Therapy RX #2549 CIMETIDINE 300MG TAB has been discontinued...


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

Example: Finishing Pending Order – Therapeutic Duplication with Non-Verified and Active orders. One drug is involved in both therapeutic duplications. One duplication allowance value is greater than '0'.

```
-------------------------------------ACTIVE----------------------------------
 1 2577       AMLODIPINE 5MG/ATORVASTATIN 10MG TAB  90 A  03-07 03-07   3  90
 2 2578       ITRACONAZOLE 100MG CAP                60 A  03-07 03-07   0  30
 3 2576       SUCRALFATE 1MG TAB                   120 A  03-07 03-07   0  30
----------------------------------NON-VERIFIED-------------------------------
 4 2581       CHOLESTYRAMINE 9GM PACKETS            60 N  03-12 03-12  11  30
-------------------------------------PENDING----------------------------------
 5 SIMVASTATIN 20MG TAB                  QTY: 30        ISDT: 03-12  REF:  6

          Enter ?? for more actions

ED  Edit                                FN  Finish

Pending OP Orders (ROUTINE)   Mar 12, 2008@07:54:21          Page:  1 of  3
OPPATIENT, THREE                                            <A>
  PID: 666-44-4444                                  Ht(cm): _______ (______)
  DOB: JUL 3,1949 (58)                              Wt(kg): 51.36 (10/01/1996)

CPRS Order Checks:
      CRITICAL drug-drug interaction: ITRACONAZOLE & SIMVASTATIN
     (ITRACONAZOLE CAP,ORAL  100MG TAKE ONE CAPSULE BY MOUTH EVERY 12 HOURS
     [ACTIVE])
     Overriding Provider: PSOPROVIDER,ONE
     Overriding Reason: TESTING

      CRITICAL drug-drug interaction: ITRACONAZOLE & SIMVASTATIN
     ITRACONAZOLE CAP,ORAL  100MG PO BID  [ACTIVE])
     Overriding Provider: PSOPROVIDER,ONE
     Overriding Reason: TESTING

      Duplicate drug class order: ANTILIPEMIC AGENTS (CHOLESTYRAMINE 9GM
      PACKETS TAKE ONE PACKET BY MOUTH TWICE A DAY DISSOLVE IN WATER OR
      JUICE. [PENDING])

+         Enter ?? for more actions
BY  Bypass                              DC  Discontinue
ED  Edit                                FN  Finish
Select Item(s): Next Screen// FN   Finish

==============================================================================
THERAPEUTIC DUPLICATION(S) *** SIMVASTATIN 20MG TAB with

            Local Rx#: 2577
                 Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB (ACTIVE)
                  SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
                  QTY: 90                 Days Supply: 90
    Processing Status: Released locally on 3/7/08@08:55:32  (Window)
       Last Filled On: 03/07/08
-------------------------------------------------------------------------------

            Local Rx#: 2581
                 Drug: CHOLESTYRAMINE 9GM PACKETS (NON-VERIFIED)
                  SIG: TAKE ONE PACKET BY MOUTH TWICE A DAY DISSOLVE IN WATER
                        OR JUICE.
                  QTY: 60                 Days Supply: 30
    Processing Status: Not released locally (Window)
       Last Filled On: 11/08/06
Class(es)Involved in Therapeutic Duplication(s): HMGCo-A Reductase Inhibitors,
Antihyperlipidemics
```

```
==============================================================================
Discontinue order(s)? Y/N  Y es

    1. RX #2577 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
    2. RX #2581 CHOLESTYRAMINE 9GM PACKETS

Select (1-2):  1  RX #2577 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB will be
discontinued after the acceptance of the new order.


Rx # 2582              03/12/08
TEST,D                        #30
TAKE ONE TABLET BY MOUTH EVERY EVENING

SIMVASTATIN 20MG TAB
PSOPROVIDER,ONE        PSOPHARMACIST,ONE
# of Refills: 6


This Rx has been flagged by the provider as: NO COPAY


Was treatment related to Agent Orange exposure? YES//

Are you sure you want to Accept this Order? NO// YES

METHOD OF PICK-UP:
WAS THE PATIENT COUNSELED: NO// NO

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

-Duplicate Therapy RX #2577 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB has been
discontinued...

Press Return to Continue:
.
.
.
```

Example: Renewing an order –Therapeutic Duplication involving 5 drugs, one therapy class and only one order can be discontinued.

```
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// rn   Renew
FILL DATE:  (3/12/2008 - 3/13/2009): TODAY//   (MAR 12, 2008)
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
Nature of Order: WRITTEN//        W
WAS THE PATIENT COUNSELED: NO// NO

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

Now Renewing Rx # 2580   Drug: SUCRALFATE 1GM TAB

==============================================================================
*** THERAPEUTIC DUPLICATION(S) *** SUCRALFATE 1GM TAB with

            Local Rx#: 2574
                 Drug: CIMETIDINE 300MG TAB (DISCONTINUED)
                  SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
```

```
                  QTY: 180                Days Supply: 90
    Processing Status: Released locally on 3/7/08@08:55:32  (Window)
       Last Filled On: 03/07/08
-----------------------------------------------------------------------------
            Local Rx#: 2573
                 Drug: NIZATIDINE 150MG CAP (HOLD)
                  SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
                  QTY: 180                Days Supply: 90
    Processing Status: Released locally on 3/7/08@08:55:32  (Window)
       Last Filled On: 03/07/08
-----------------------------------------------------------------------------

             LOCATION: <VA OR DOD FACILITY>   Remote Rx#: 65343
                 Drug: RANITIDINE HCL 150MG TAB (EXPIRED)
                  SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
                  QTY: 180                Days Supply: 90

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

=============================================================================
Discontinue RX #2573 NIZATIDINE 150MG CAP? Y/N  No

Press Return to Continue:

2580A        SUCRALFATE 1MG TAB                QTY: 360
# OF REFILLS: 3  ISSUED: 03-12-08
SIG: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY
FILLED: 03-12-08
ROUTING: WINDOW     PHYS: PSOPROVIDER,ONE

Edit renewed Rx ? Y// n  NO

       SC Percent: 80%
     Disabilities: NONE STATED

Was treatment for a Service Connected condition? NO//
.
.
.
```

Example: Verification of Non-Verified Order

```
OP Medications (NON-VERIFIED) Mar 12, 2008@09:02:56          Page: 1 of  2
PSOPATIENT,ONE                                                     <A>
  PID: 666-00-0000                                  Ht(cm): _______ (______)
  DOB: JAN 1,1910 (98)                              Wt(kg): _______ (______)

                Rx #: 2573
 (1) *Orderable Item: NIZATIDINE CAP,ORAL
 (2)            Drug: NIZATIDINE 150MG CAP
 (3)         *Dosage: 150 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: CAPSULE
              *Route: ORAL
           *Schedule: BID
 (4)Pat Instructions:
                 SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
 (5)  Patient Status: SC
 (6)      Issue Date: 03/07/08               (7)  Fill Date: 03/07/08
      Last Fill Date: 03/07/08 (Window)
```

```
+         Enter ?? for more actions
DC   Discontinue          PR   (Partial)            RL   (Release)
ED   Edit                 RF   (Refill)             RN   (Renew)
Select Action: Next Screen// VF   VF

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

PATIENT STATUS : SC                      COPIES : 1

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

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

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

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

Press Return to Continue:
EDIT:  (Y/N/P): N// O
VERIFY FOR PSOPATIENT,ONE ? (Y/N/Delete/Quit): Y// ES
.
.
.
```

Example: Copying an Existing Order

```
New OP Order (COPY)           Mar 12, 2008@09:15:48        Page:    1 of    2
PSOPATIENT,TWO                                                       <A>
  PID: 000-00-0000                                  Ht(cm): 182.88 (04/13/2005)
  DOB: JAN 1,1945 (63)                              Wt(kg): 77.27 (04/13/2005)

      Orderable Item: AMLODIPINE/ATORVASTATIN TAB
  (1)           Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
  (2) Patient Status: OPT NSC
  (3)     Issue Date: MAR 12,2008             (4) Fill Date: MAR 12,2008
                Verb: TAKE
  (5) Dosage Ordered: ONE TABLET
               Route: ORAL
            Schedule: QAM
  (6)Pat Instruction:
                 SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
  (7)    Days Supply: 30                      (8)   QTY ( ): 30
  (9)   # of Refills: 11                      (10)  Routing: WINDOW
 (11)         Clinic:
```

```
 (12)       Provider: PSOPROVIDER,ONE                  (13)   Copies: 1
+         Enter ?? for more actions
AC   Accept                              ED   Edit
Select Action: Next Screen// AC   Accept
---------------------------------------------------------------------------
Duplicate Drug in Local Rx:

              Rx #: 2584
              Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
               SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
               QTY: 30                  Refills remaining: 11
          Provider: OPPROVIDER, ONE                Issued: 03/12/07
            Status: ACTIVE                Last filled on: 03/12/07
 Processing Status: Released locally on 03/12/07@08:55:32  (Window)
                                                Days Supply: 30

---------------------------------------------------------------------------
Discontinue Rx #2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB? Y/N YES

Rx #2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB will be discontinued after the
acceptance of the new order.

===========================================================================
*** THERAPEUTIC DUPLICATION(S) *** AMLODIPINE 5MG/ATORVASTATIN 10MG TAB with

         Pending Drug: LOVASTATIN 20MG TAB
                  SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME FOR HIGH CHOLESTEROL

         Pending Drug: NIFEDIPINE 10MG CAP
                  SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY


Class(es)Involved in Therapeutic Duplication(s): Calcium Channel Blockers,
HMGCo-A Reductase Inhibitors

==========================================================================
Discontinue order(s)? Y/N  Y es

    1. Pending Order NIFEDIPINE 10MG CAP
    2. Pending Order LOVASTATIN 20MG TAB

Select (1-2):  1-2  Pending Order NIFEDIPINE 10MG CAP will be discontinued
after the acceptance of the new order.
Pending Order LOVASTATIN 20MG TAB will be discontinued after the acceptance of
the new order.

Nature of Order: WRITTEN//        W
WAS THE PATIENT COUNSELED: NO// NO

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

Rx # 2585              03/12/08
PSOPATIENT,TWO T                  #30
TAKE ONE TABLET BY MOUTH EVERY MORNING

AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
PSOPROVIDER,ONE       PSOPHARMACIST,ONE
# of Refills: 11


       SC Percent: 40%
     Disabilities: NONE STATED
```

```
Was treatment for Service Connected condition? NO//

Is this correct? YES// ...

Duplicate Drug Rx 2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB has been
discontinued…
Duplicate Therapy Pending Order NIFEDIPINE 10MG CAP has been discontinued…
Duplicate Therapy Pending Order LOVASTATIN 20MG TAB has been discontinued…
.
```

Example: Reinstating a Discontinued Order

```
                Rx #: 2586
 (1) *Orderable Item: CIMETIDINE TAB
 (2)            Drug: CIMETIDINE 300MG TAB
 (3)         *Dosage: 300 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
             *Route: ORAL
           *Schedule: QHS
 (4)Pat Instructions:
                 SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
 (5)  Patient Status: OPT NSC
 (6)      Issue Date: 03/12/08               (7)  Fill Date: 03/12/08
      Last Fill Date: 03/12/08 (Window)
+         Enter ?? for more actions
DC   Discontinue          PR   (Partial)            RL   Release
ED   (Edit)               RF   (Refill)             RN   Renew
Select Action: Next Screen// dc   Discontinue
Are you sure you want to Reinstate? NO// y  YES

Comments: testing duplicate therapy check
Nature of Order: SERVICE CORRECTION//        S

==============================================================================
*** THERAPEUTIC DUPLICATION(S) *** CIMETIDINE 300MG TAB with

            Local Rx#: 2576
                 Drug: SUCRALFATE 1GM TAB (ACTIVE)
                  SIG: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY
                  QTY: 1200               Days Supply: 30
    Processing Status: Released locally on 3/7/08@08:55:32  (Window)
       Last Filled On: 03/07/08

Class(es)Involved in Therapeutic Duplication(s): Peptic Ulcer Agents
==============================================================================
Discontinue RX # 2576 SUCRALFATE 1GM TAB? Y/N NO - Prescription was not
discontinued...


Prescription #2586 REINSTATED!
   Prescription #2586 Filled: MAR 12, 2008Printed:      Released:
     Either print the label using the reprint option
       or check later to see if the label has been printed.
.
.
.
```

Example: Creating a New Order – Editing the Orderable Item

```
                Rx #: 2594
 (1) *Orderable Item: ENALAPRIL TAB ***(N/F)***
 (2)            Drug: ENALAPRIL 5MG TAB ***(N/F)***
 (3)         *Dosage: 5 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
               *Route: ORAL
           *Schedule: QAM
 (4)Pat Instructions:
                 SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
 (5)  Patient Status: SC
 (6)      Issue Date: 03/12/08              (7)  Fill Date: 03/12/08
      Last Fill Date: 03/12/08 (Window)
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// 1

Current Orderable Item: ENALAPRIL TAB

Select PHARMACY ORDERABLE ITEM NAME: ENALAPRIL// dip
     1   DIPHENHYDRAMINE       CREAM,TOP
     2   DIPHENHYDRAMINE       CAP,ORAL
     3   DIPYRIDAMOLE       TAB
CHOOSE 1-3: 3  DIPYRIDAMOLE     TAB

New Orderable Item selected. This edit will create a new prescription!


Press Return to Continue...


DRUG NAME REQUIRED!

Instructions:

The following Drug(s) are available for selection:
1. DIPYRIDAMOLE 25MG TAB
2. DIPYRIDAMOLE 50MG TAB

Select Drug by number:  (1-2): 1
==============================================================================
*** THERAPEUTIC DUPLICATION(S) *** DIPYRIDAMOLE 25MG TAB with

            Local Rx#: 2560
                 Drug: WAFFARIN 5MG TAB (ACTIVE)
                  SIG: TAKE ONE TABLET BY MOUTH EVERY EVENING
                  QTY: 90                 Days Supply: 90
    Processing Status: Released locally on 3/4/08@08:55:32  (Window)
       Last Filled On: 03/04/08

Class(es)Involved in Therapeutic Duplication(s): Antiplatelet Drugs,
Antithrombotic Drugs

==============================================================================
Discontinue RX # 2560 WAFFARIN 5MG TAB? Y/N  NO -Prescription was not
discontinued...

You have changed the Orderable Item from ENALAPRIL to
DIPYRIDAMOLE.
```

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

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 25MG

You entered 25MG is this correct? Yes//   YES
VERB: TAKE// TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 25MG

NOUN: TABLET// TABLET

ROUTE: ORAL// ORAL
Schedule: QAM// tid (THREE TIMES A DAY)
LIMITED DURATION (IN MONTHS, WEEKS, DAYS, HOURS OR MINUTES):
CONJUNCTION:


New OP Order (ROUTINE)        Mar 12, 2008@10:58:24       Page:    1 of    2
PSOPATIENT,ONE                                                      <A>
  PID: 666-00-0000                                Ht(cm): _______ (______)
  DOB: JAN 1,1910 (98)                            Wt(kg): _______ (______)

      Orderable Item: DIPYRIDAMOLE TAB
  (1)           Drug: DIPYRIDAMOLE 25MG TAB
  (2) Patient Status: SC
  (3)     Issue Date: MAR 12,2008            (4) Fill Date: MAR 12,2008
  (5) Dosage Ordered: 25 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
               Route: ORAL
            Schedule: TID
  (6)Pat Instruction:
                 SIG: TAKE ONE TABLET BY MOUTH THREE TIMES A DAY
  (7)    Days Supply: 90                     (8)   QTY (TAB): 180
  (9)   # of Refills: 3                      (10)  Routing: WINDOW
+         This change will create a new prescription!
AC   Accept                              ED   Edit
Select Action: Next Screen// ac   Accept
Nature of Order: SERVICE CORRECTION//        S
WAS THE PATIENT COUNSELED: NO// NO

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

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

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


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


       SC Percent: 80%
```

```
     Disabilities: NONE STATED

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

Example: Cancel drug in same class parameter set to No

```
PSOPATIENT,ONE                                                          <A>
  PID: 666-00-0000                                Ht(cm): _______ (______)
  DOB: JAN 1,1910 (98)                            Wt(kg): _______ (______)
  SEX: FEMALE                Non-VA Meds on File      Last entry on 03/03/08
                                                             ISSUE  LAST REF
DAY
 #  RX #      DRUG                              QTY ST  DATE  FILL REM SUP

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

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

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

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

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

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

   Pending Order FAMOTIDINE 20MG TAB

   Non-VA Med Order for CIMETIDINE 300MG TAB

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

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

Example: Entering a New Order – Not accepting order, duplicate therapy not discontinued

```
Select Action: Quit// NO   New Order

Eligibility: NSC     SC%: 5
RX PATIENT STATUS: OPT NSC//
DRUG: FAMOTIDINE
  Lookup: GENERIC NAME
FAMOTIDINE 20MG TAB           GA301
         ...OK? Yes//   (Yes)

  Restriction/Guideline(s) exist.  Display? :  (N/D/O/B): No//   NO
Now doing allergy checks.  Please wait...


Now Processing Enhanced Order Checks!  Please wait...

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


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


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

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

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

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

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

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

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

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

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

You entered 20MG is this correct? Yes//   YES
```

```
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 20MG

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

(TAKE ONE TABLET BY MOUTH EVERY MORNING )

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

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

Chapter 15: Pull Early from Suspense

This chapter describes the option for pulling prescriptions early from the SUSPENSE file.

Pull Early from Suspense

[PSO PNDRX]

This option is used to pull a specific prescription or all prescriptions for a patient early. If a prescription is pulled early using this option, it will not be associated with any printed batch. A label cannot be reprinted with the *Reprint Batches from Suspense* option if the prescription has been pulled early suspense. In addition, Method of Pickup can be edited. Also, there is no longer a "DELETE FROM SUSPENSE PROMPT." That prompt has been changed to "Pull Rx(s) and delete from Suspense." Yes must be answered to this prompt to pull the prescriptions, and they will always be deleted from suspense. Since prescriptions that are pulled early from suspense do not belong to any printed batch and cannot be reprinted from suspense, there is no reason to leave them in suspense.

If the prescription being pulled from suspense has an FDA Medication Guide associated, the user will be required to enter a valid FDA Medication Guide printer.

If the routing is changed to “Window” when pulling from suspense early, and the bingo board is being used, those prescriptions will be sent to the bingo board.

If the patient has remote prescriptions, then the text “THIS PATIENT HAS PRESCRIPTIONS AT OTHER FACILITIES” will appear on the report as shown in the following example.

```
        PRESCRIPTION PROFILE AS OF 12/30/2008

                        NAME: PSOPATIENT,ONE


  THIS PATIENT HAS PRESCRIPTIONS AT OTHER FACILITIES

                        PHARMACIST: ___________________  DATE: ________
```

If a prescription is determined to be an ePharmacy prescription (e.g., third party electronically billable), an electronic claim will be sent by ECME to the third party payer. The communication events between Outpatient Pharmacy and ECME are recorded in the ECME Log section of each prescription. The ECME log can be viewed in the patient Medication Profile screen (Activity Log option - AL) and also from the *View Prescriptions* option. If the claim submission returns a Refill Too Soon (79) or Drug Utilization Review (88) reject, the label is not printed for the prescription and it is moved to the Refill Too Soon/DUR section of the patient Medication Profile screen until the user resolves the reject. The prescription will also display on the Third Party Payer Reject worklist.

(This page included for two-sided copying.)

Chapter 16: Queue CMOP Prescription

This chapter describes the option for suspending prescriptions for mail-routed CMOP drugs.

QUEUE CMOP Prescription

[PSO RX QUEUE CMOP]

The *Queue CMOP Prescription* option allows the users (including pharmacy technicians) to put mail-routed prescription(s) for CMOP drugs on suspense for CMOP.

Example: Queue CMOP Prescription

```
Select Suspense Functions Option: QUEUE CMOP Prescription
Enter the Rx # to queue to CMOP: 300486
```

If the prescription does not have a routing of Mail, has already been released, or is not for a CMOP drug, and does not pass all the other normal checks for CMOP, it will not be put on suspense for CMOP.

(This page included for two-sided copying.)

Chapter 17: Releasing Medication

This chapter describes the option used for releasing medications.

Release Medication

[PSO RELEASE]

The *Release Medication* option is used at the time the prescription is filled and ready to be given to the patient. Inventory is decreased, certain fields in the file are updated, and a copay is generated if the action is applicable to the prescription. With this option, prescriptions can be batch processed. Communication is made with the Integrated Funds Control, Accounting and Procurement (IFCAP) and Integrated Billing (IB) software to generate copay charges. IFCAP and IB software handle patient billing, tracking of charges, and payment received.

The copay status of a prescription is re-evaluated whenever a fill is released. Various actions can occur based on changes to the criteria that determine the copay status of a prescription. The actions that may result at the time a fill is released are described below.

1. **No action is taken.** No changes to the criteria that determine copay status of a prescription have occurred.

2. **The copay status of the prescription is automatically reset and an entry is placed in the copay activity log.**

   Example: The drug for which the prescription is written is no longer marked for investigational use. The copay status of the prescription is reset from No Copayment to Copay.

3. **The copay status of the prescription is automatically reset, an entry is placed in the copay activity log, and a MailMan message is generated detailing missing information required for user follow up.**

   Example: The drug for which the prescription is written is no longer marked for investigational use. The copay status of the prescription is reset from No Copayment to Copay. The patient has been documented as being exposed to Southwest Asia Conditions during Persian Gulf War service since the last fill. A MailMan message will be generated informing the user that the ‘Is this Rx for treatment related to service in SW Asia?’ question must be addressed and documented using the *Reset Copay Status/Cancel Charges* option.

4. **A MailMan message is generated detailing missing information required for user follow-up.**

   Example: A veteran is documented as having Agent Orange exposure. Refill #2 for a prescription entered into the system before the new medication copay exemptions took effect on January 1, 2002 is released. The prescription is copay eligible. A MailMan message will be generated informing recipients that the 'Is this Rx for treatment of Vietnam-Era Herbicide (Agent Orange) exposure?' question must be addressed. The copay status of the Rx may change based on the response entered using the *Reset Copay Status/Cancel Charges* option.

If a MailMan message is generated at the time a prescription fill is released, the recipients of the message will be the provider of record, the pharmacy user who finished the order, and holders of the PSO COPAY key. The message lists the patient name, prescription number, and medication ordered, current copay status, and applicable copay exemption questions that need addressing to determine the prescription's copay status. The *Reset Copay Status/Cancel Charges* option must be used to enter the responses to the medication copay exemption questions listed in the MailMan message. If responses are not entered for the applicable medication copay exemption questions, any subsequent refills when released for this prescription and possibly other prescriptions for this patient will continue to generate the same MailMan message.

Example: MailMan Message

```
Subj: PRESCRIPTION QUESTIONS REVIEW NEEDED (500)  [#30364] 10/11/05@19:56
35 lines
From: OUTPATIENT PHARMACY PACKAGE  In 'IN' basket. Page 1
-------------------------------------------------------------------------------

OPPATIENT29,ONE  (6543P)    CHEYENNE VAM&ROC
Eligibility: SC LESS THAN 50%     SC%: 20
             REIMBURSABLE INSURANCE

Disabilities: ARTHRITIS-10%(SC), FOREARM CONDITION-5%(NSC),
              FOREARM CONDITION-4%(NSC), BENIGN EYE GROWTH-0%(NSC),
              LOSS OF FIELD OF VISION-20%(SC),

Rx# 102006 (1)    COPAY
ALBUTEROL SO4 0.083% INHL 3ML

Due to a change in criteria, additional information listed below is needed
to determine the final VA copay and/or insurance billable status for this Rx
so that appropriate action can be taken by pharmacy personnel.

Is this Rx for a Service Connected Condition?

Is this Rx for treatment related to service in SW Asia?

This message has been sent to the provider of record, the pharmacist who
finished the prescription order, and all holders of the PSO COPAY key.

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

----------example continues----------

Example: MailMan Message (continued)

```
Subj: PRESCRIPTION QUESTIONS REVIEW NEEDED (500)  [#30364]   Page 2
-------------------------------------------------------------------------------

Providers:
Please respond with your answer to the question(s) as a reply to this
message. The prescription will be updated by the appropriate staff.

Staff assigned to update the Prescription responses:
Please use the RESET COPAY STATUS/CANCEL CHARGES option to enter the responses
to the questions above, which may result in a Rx copay status change and/or
the need to remove VA copay charges or may result in a charge to the patient's
insurance carrier.

Note: The SC question is now asked for Veterans who are SC>49% in order to
determine if the Rx can be billed to a third party insurance. These Veterans
will NOT be charged a VA copay.

Supply, nutritional and investigational drugs are not charged a VA copay but
could be
reimbursable by third party insurance.

Enter message action (in IN basket): Ignore//
```

An annual copayment cap is applied to patients in specific priority enrollment groups. Once a patient reaches the annual copayment cap, no further medication copay charges will be billed for the calendar year. An entry to that effect is made to the Copay Activity Log. The '$' indicator remains next to the prescription number to indicate that the prescription is still copay eligible. Integrated Billing software keeps track of all prescription fills not billed due to the annual cap.

Example: Copay Activity Log When Annual Cap Reached

```
Copay Activity Log:
#   Date        Reason               Rx Ref         Initiator Of Activity
==============================================================================
1   10/23/01    ANNUAL CAP REACHED   ORIGINAL       OPPHARMACIST11,THREE
Comment:  NO BILLING FOR THIS FILL
```

If for whatever reason (e.g. prescription fill is returned to stock and copay charges cancelled), a patient falls below the annual copayment cap, the Integrated Billing package can initiate copay charges to bring the patient back up to the annual copayment cap. Integrated billing software will go back and bill a copay charge for those fills previously not charged due to the annual cap, bringing the patient's total copayment up to the cap. Whenever this occurs an entry will be placed in the copay activity log.

Example: Copay Activity Log With IB-Initiated Charge

```
Copay Activity Log:
#   Date        Reason               Rx Ref         Initiator Of Activity
==============================================================================
1   10/23/01    ANNUAL CAP REACHED   ORIGINAL       OPPHARMACIST11,THREE
Comment:  NO BILLING FOR THIS FILL
2   10/23/01    IB-INITIATED COPAY   ORIGINAL       OPPHARMACIST11,THREE
Comment: PARTIAL CHARGE
```

If a prescription is not in a releasable status, the user will be given an error message, such as:

- Prescription has a status of (status) and is not eligible for release.
- Prescription was deleted.
- Improper barcode format.
- Non-existent prescription.

Copay is not charged for a partial fill.

*****Important*****
This is a mandatory function that must be used by the pharmacy.

Changes to Releasing Orders function - Digitally Signed Orders Only

The release function in the *Patient Prescription Processing* option has been modified with patch PSO*7*131 to require that all digitally signed orders for Schedule II controlled substances (CSII orders) be released through the *Outpatient Rx* option in the *Controlled Substances* (CS) menu. If DEA/PKI is activated and an order is digitally signed, the user will be advised that the order must be released through the *Outpatient Rx* option in the *Controlled Substances* (CS) menu. The same message will display if a user attempts to release a digitally signed CSII order during Speed Release or when using the *Release Medications* option.

At this time the functionality for entering and processing digitally signed orders is part of a pilot project limited to only one site. System-wide implementation of this functionality requires further study and modifications.

Changes to Releasing Orders function - ScripTalk®

The release function in the *Patient Prescription Processing* option has been modified to display a message to the user when the site is using a Bingo Board and when the patient is enrolled in ScripTalk®. This message will alert the user that the patient is enrolled in ScripTalk® and may need to have a verbal announcement that the prescription(s) is ready, instead of a visual announcement.

Example: Releasing Medication to a ScripTalk® Patient

```
       Prescription Number 400693 Released
       No Refill(s) to be Released
       No Partial(s) to be Released

OPPATIENT16,ONE added to the WAITING display.
This patient is enrolled in ScripTalk and may benefit from
a non-visual announcement that prescriptions are ready.

Press Return to Continue:
```

Changes to Releasing Orders Function – Signature Alert

With Patch PSO*7*385, the release function in the *Patient Prescription Processing* option has been modified to display a message to the user when an ECME-billable prescription is being released as a window fill. This message will alert the user that the patient's signature must be obtained. The user is not required to press <Enter> to continue or respond to the alert in any other manner.

Example: Releasing an ePharmacy Window Fill

```
       Prescription Number 100003853 Released
       No Refill(s) to be Released
       No Partial(s) to be Released

ePharmacy Rx – Obtain Signature
```

(This page included for two-sided copying.)

Changes to Releasing Orders function – HIPAA NCPDP Global

The release function has been modified with patch PSO*7*148 to perform National Drug Code (NDC) validation for ePharmacy prescriptions. These changes also affect the Controlled Substance prescription release, which is performed through the Controlled Substances package.

The user releasing the third-party electronically billable prescription will be prompted for the NDC for the drug being dispensed to the patient. The NDC code previously retrieved when the prescription was finished will be presented as the current (default) NDC for the prescription. The other possible values that the user will be able to choose from are:

- NDC field value in the DRUG file, if valid and different than the current prescription NDC.
- LAST LOCAL NDC field value in NDC BY OUTPATIENT SITE sub-file in the DRUG file for the division filling the prescription, if valid and different that the current prescription NDC.
- NDC CODE field values in the SYNONYM sub-file in the DRUG file, if valid and different that the current prescription NDC.

If the NDC dispensed is not on the list to select, the user must contact the ADPAC or other designated person to add the NDC in a synonym multiple for that drug in file 50.

If the NDC code selected matches the current NDC in the prescription no further NDC processing is required. However, if the user selects a different NDC, the following steps will occur:

1. Outpatient Pharmacy V. 7.0 will instruct ECME to reverse the previous claim for the previous NDC code and submit a new claim for the newly selected NDC code.

2. The newly selected NDC code will be saved in the LAST LOCAL NDC field in NDC BY OUTPATIENT SITE sub-file in the DRUG file for the division filling the prescription.

The following examples show the new prompt for NDC validation during the release process.

Example: Releasing an ePharmacy Order – Selecting Default NDC

```
Select Outpatient Pharmacy Manager Option: RELEASE Medication

Enter PHARMACIST: OPPHARMACIST4,THREE

Enter/Wand PRESCRIPTION number: 100003853
```

```
NDC: 00580-0277-10// ?

Select one of the following valid NDC code(s) below:

           1 - 00580-0277-10

NDC: 00580-0277-10// <Enter> 00580-0277-10
       Prescription Number 100003853 Released
       No Refill(s) to be Released
       No Partial(s) to be Released

ePharmacy Rx – Obtain Signature
```

Example: Releasing an ePharmacy Order – Selecting Different NDC

```
Select Outpatient Pharmacy Manager Option: RELEASE Medication

Enter PHARMACIST: OPPHARMACIST4,THREE

Enter/Wand PRESCRIPTION number: 100003853
```

```
NDC: 00580-0277-10// ?

Select one of the following valid NDC code(s) below:

           1 - 00580-0277-10
           2 - 00580-0277-14

NDC: 00580-0277-10//  2 00580-0277-14

Prescription 100003853 successfully submitted to ECME for claim generation.

Claim Status:
Reversing and Rebilling a previously submitted claim...
Reversing...
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
Resubmitting...
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E PAYABLE

       Prescription Number 100003853 Released
       No Refill(s) to be Released
       No Partial(s) to be Released
```

Chapter 18: Returning Medication to Stock

This chapter describes the option used for returning medication to stock.

Return Medication to Stock

[PSO RETURNED STOCK]

This option is used when a prescription has been released, but has been refused, not picked up, or not given to the patient for some reason. Comments can be entered to explain why the medication was returned to stock.

A prescription can only be returned to stock if the prescription status is Active, Discontinued, or Expired. If the prescription is not released, there is no need to return it to stock. This function increases the inventory so that a more current level is maintained by the Outpatient Pharmacy package and removes the copay charge if it is applicable to the prescription. It is highly recommended that this option be used.

When an ePharmacy prescription is returned to stock, the software checks if the it has a PAYABLE claim, if so, a request is sent to ECME to electronically reverse the claim with the third party payer. Also, if the prescription contains any unresolved DUR or REFILL TOO SOON reject, it will be marked resolved with the reason 'Prescription Returned To Stock'.

If a copay charge is removed by returning a prescription fill to stock, an entry will be placed in the copay activity log documenting the action.

Example: Returning Medication to Stock

```
Copay Activity Log:
#   Date        Reason               Rx Ref         Initiator Of Activity
==============================================================================
1   11/21/01    REMOVE COPAY CHARGE  REFILL 1       OPPHARMACIST9,THREE
Comment: RX REFUSED Returned to stock
```

If an **original fill** is returned to stock and reprinted, it can be released again. If a **refill** is returned to stock, the refill is deleted so the patient will not lose it.

(This page included for two-sided copying.)

Chapter 19: Ordering/Processing a Prescription

This chapter describes the menu and options used in processing prescriptions.

Rx (Prescriptions)

[PSO RX]

The *Rx (Prescriptions*) menu allows the pharmacist to manipulate information that pertains to prescriptions. Actions are taken on prescriptions via this menu. Some previous options, such as renew, refill, edit, release, are now actions in the *Patient Prescription Processing* option found on this menu. Also, data now must be entered for the individual fields that are used to build a Sig.

Default values display for possible dosages, schedules, med routes, and patient instructions. When possible, default quantities are calculated using data entered into specific fields during medication order entry.

The following options are available on this menu:

- *Patient Prescription Processing*
- *Barcode Rx Menu ...*
- *Complete Orders from OERR*
- *Discontinue Prescription(s)*
- *Edit Prescriptions*
- *ePharmacy Menu ...*
- *List One Patient's Archived Rx's*
- *Manual Print of Multi-Rx Forms*
- *Reprint an Outpatient Rx Label*
- *Signature Log Reprint*
- *View Prescriptions*

Patient Prescription Processing
[PSO LM BACKDOOR ORDERS]

This option is used to process outpatient medication through OERR V. 3.0. The *Patient Prescription Processing* option is found on the *Outpatient Pharmacy Manager Menu* and the *Pharmacist Menu* under the *Rx (Prescriptions)* option. This option uses List Manager features to allow the outpatient pharmacy manager and pharmacist to perform the following actions on a prescription without leaving this option.

- Enter a new Rx
- Discontinue
- Edit
- Refill
- Renew
- Hold
- Unhold
- Order a partial
- Release
- Reprint
- Copy
- Verify a prescription
- Show a profile
- View activity log
- Pull early from suspense

When a new drug order is processed (new, renewal, finish, verify, copy, or an edit that creates a new order), order checks are performed. These include checking for duplicate drug, duplicate drug therapy, drug-drug interaction, and drug-drug allergy.

With the introduction of enhanced Order checks (PSO*7*251) , Outpatient Pharmacy generated order checks are displayed in this sequence:

- System Errors
- Duplicate Drug
- Clozapine
- Allergy/ADR (local & remote) or Non-Assessment
- CPRS checks generated backdoor (3 new checks)
- Drug Level Errors
- Local & Remote Critical Drug Interactions
- Local & Remote Significant Drug Interactions
- Local & Remote Duplicate Therapy

Additionally, the order check display sequence is applied to the following processes:

- Backdoor new order entry
- Finishing a pending order
- When renewing an outpatient medication order
- Creating a new order when editing an outpatient medication order
- Verifying an outpatient medication order.
- Copying an outpatient medication order
- Reinstating a discontinued outpatient medication order.

There are two levels of error messages associated with Enhanced Order Checking (Drug Interactions and Duplicate Therapy):

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

2. Drug - When a drug level error occurs, no Drug Interaction or Duplicate Therapy order checks will be performed for a specific drug. Drug level errors can occur for the prospective drug (drug being processed) or the profile drug. If a drug level error occurs on the prospective drug, no profile drug errors will be displayed. The only exception to this is when you are processing an IV order with multiple prospective drugs (i.e. multiple IV Additives). Profile drug level errors will only be shown once per patient session.

   There are two reasons that a drug level error is generated; the drug is not matched to NDF or the drug is matched to NDF, but the VA Product to which it is matched does not have a GCNSEQNO assigned or the GCNSEQNO assigned does not match up to the GCNSEQNO in the COTS database. The latter (GCNSENO mismatch) is rare.

See table below for an explanation of the errors:

Error Level	**Error Message**	**Reason**	**Why message is being displayed.**
System	No Enhanced Order Checks can be performed.	Vendor Database cannot be reached.	The connectivity to the vendor database has gone down. A MailMan message is sent to the G. PSS ORDER CHECKS mail group when the link goes down and when it comes back up.
System	No Enhanced Order Checks can be performed.	The connection to the vendor database has been disabled.	A user has executed the Enable/Disable Vendor Database Link [PSS ENABLE/DISABLE DB LINK] option and disabled the interface.
System	No Enhanced Order Checks can be performed	Vendor database updates are being processed	The vendor database (custom and standard data) is being updated using the DATUP (Data Update) process.
Drug	Enhanced Order Checks cannot be performed for Local or Local Outpatient Drug: <DRUG NAME>	Drug not matched to NDF	The local drug being ordered/ or on profile has not been matched to NDF. Matching the drug to a VA Product will eliminate this message.
Drug	Order Checks could not be done for Remote Drug: <DRUG NAME>, please complete a manual check for Drug Interactions and Duplicate Therapy. Remote order indicator		If this error message is displayed, it means that the VA product that the local or remote drug being ordered/or on the local or remote profile does not have a GCNSEQNO or in rare cases, the GCNSEQNO assigned to the VA Product does not match up with a GCNSEQNO in the vendor database.

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

See Examples below to illustrate error sequences.

Example: New Order Entry – System Level Error

```
Select Action: Quit// NO   New Order

Eligibility: SC LESS THAN 50%     SC%: 40
RX PATIENT STATUS: SC LESS THAN 50%//
DRUG: AMLOD
  Lookup: GENERIC NAME
     1   AMLODIPINE 10MG/BENAZAPRIL 20MG TAB           CV400
     2   AMLODIPINE 5MG/ATORVASTATIN 10MG TAB           CV200
CHOOSE 1-2: 1  AMLODIPINE 10MG/BENAZAPRIL 20MG TAB         CV400

Now Processing Enhanced Order Checks! Please wait...

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

Press Return to Continue...

Available Dosage(s)

1 TABLET
2 TABLETS

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

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

Example: Drug Error Message – Finishing Pending Outpatient Order

```
+         Enter ?? for more actions
BY  Bypass                              DC  Discontinue
ED  Edit                                FN  Finish
Select Item(s): Next Screen// FN   Finish

Now Processing Enhanced Order Checks! Please wait...

Enhanced Order Checks cannot be performed for Local Drug: WARFARIN 5MG TAB
   Reason: Drug not matched to NDF

Press Return to Continue...

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//
.
.
.
```

Example: Renewing an Order – Therapeutic Duplication – Drug Level Error

```
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// rn   Renew
FILL DATE:  (3/12/2008 - 3/13/2009): TODAY//   (MAR 12, 2008)
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
Nature of Order: WRITTEN//        W
WAS THE PATIENT COUNSELED: NO// NO

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

Now Renewing Rx # 2580   Drug: SUCRALFATE 1GM TAB


Press Return to Continue...

Now Processing Enhanced Order Checks! Please wait…

Order Checks could not be done for Drug: RANITIDINE 150MG TAB, please complete
a manual check for Drug Interactions and Duplicate Therapy.

==============================================================================
*** THERAPEUTIC DUPLICATION(S) *** SUCRALFATE 1GM TAB with

                   Local Rx#: 2574
                 Drug: CIMETIDINE 300MG TAB (DISCONTINUED)
                  SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
                  QTY: 180                Days Supply: 90
    Processing Status: Released locally on 03/07/08@08:55:32  (Window)
       Last Filled On: 11/08/06

------------------------------------------------------------------------------
                   Local Rx#: 2573
                 Drug: NIZATIDINE 150MG CAP (ACTIVE)
                  SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
                  QTY: 180                Days Supply: 90
    Processing Status: Released locally on 03/07/08@08:55:32  (Window)
       Last Filled On: 11/08/06
```

```
 ------------------------------------------------------------------------------
            Local Rx#: 2599
                 Drug: FAMOTIDINE 20MG TAB (PROVIDER HOLD)
                  SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
                  QTY: 180                Days Supply: 90
    Processing Status: Released locally on 03/07/08@08:55:32  (Window)
       Last Filled On: 11/08/06

Class(es)Involved in Therapeutic Duplication(s): Peptic Ulcer Agents,
Histamine-2 Receptor Antagonists (H2 Antagonists
==============================================================================
Discontinue RX #2573 NIZATIDINE 150MG CAP? Y/N  No

Press Return to Continue:

2580A        SUCRALFATE 1GM TAB                QTY: 360
# OF REFILLS: 3  ISSUED: 03-12-08
SIG: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY
FILLED: 03-12-08
ROUTING: WINDOW     PHYS: PSOPROVIDER,ONE

Edit renewed Rx ? Y// n  NO

       SC Percent: 80%
     Disabilities: NONE STATED

Was treatment for a Service Connected condition? NO//
.
.
.
```

Duplicate Drug Order Check

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

Example: Local Rx

```
Duplicate Drug in Local Rx:

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

Example: Remote Rx

```
Duplicate Drug in Remote Rx:

         LOCATION NAME: <NAME OF FACILITY>
                  Rx #: 2608
                  Drug: ASPIRIN 81MG EC TAB
                   SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
                   QTY: 30              Refills remaining: 11
              Provider: PSOPROVIDER,TEN            Issued: 03/24/08
                Status: Active             Last filled on: 03/24/08
                                              Days Supply: 30
```

Duplicate Drug Order Check for Pending Orders:

Example: Pending Order

```
DUPLICATE DRUG in a Pending Order for:

                  Drug: ALLOPURINOL 300MG TAB
                   SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
                   QTY: 180                  # of Refills: 3
              Provider: PSOPROVIDER,TEN        Issue Date: 03/24/08@14:44:15
     Provider Comments: <only if data present>
```

Duplicate Drug order check for Non-VA Medications

Example: Non-VA Med Order

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


                Drug: CIMETIDINE 300MG TAB
              Dosage: 300MG
            Schedule: AT BEDTIME
    Medication Route: MOUTH
          Start Date: <NOT ENTERED>     CPRS Order #: 13554
       Documented By: PSOPROVIDER,TEN on Mar 24, 2008@14:44:15
```

Duplicate Drug Order Check business rules:

- If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO, the system will not prompt a clerk (no PSORPH key) to discontinue the order when a Duplicate Drug order check occurs.

- If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO, and a new order is being entered by a clerk (no PSORPH key) via the pharmacy backdoor, the order being processed will be deleted by the system immediately after the duplicate drug warning is displayed.

- If the duplicate drug is a remote order, the system will allow the clerk to process the new order after the display of the duplicate drug warning.

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

- When the VERIFICATION outpatient site parameter is set to YES and the duplicate drug is a local order, the system will return the user back to the detailed order ListMan display with the available actions of Accept/Edit/Discontinue.

- When the VERIFICATION outpatient site parameter is set to YES and the duplicate drug is a remote order
  - A duplicate drug warning will be displayed
  - The clerk will be allowed to finish the order
  - The finished order will have a status of non-verified

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

- If the DRUG CHECK FOR CLERK outpatient site parameter is set to Yes, a clerk (no PSORPH key) will see the same discontinue prompts as a pharmacist.

- If the VERIFICATION outpatient site parameter is set to YES when reinstating an order, no duplicate message will be displayed and the reinstated order will have a non-verified status.

- No discontinuation prompt will be displayed for a duplicate Non-VA medication order in any situation.

After the Duplicate Drug warning is displayed, the system will ask the user if they wish to discontinue the order.

Active Order

```
Discontinue RX #2580A SUCRALFATE 1GM TAB? Y/N
```

Pending Order

```
Discontinue Pending Order for ALLOPURINOL 300MG? Y/N
```

If the user chooses not to discontinue the displayed order when entering a new order via the pharmacy backdoor, the system will delete the order being entered (prospective drug).

If the user chooses not to discontinue the displayed order when finishing a pending order, the system will redisplay the pending order and prompt them to accept, edit or discontinue the order.

If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO, and if the clerk (no PSORPH key) is copying an order, the system will return them back to the detailed order ListMan display where the copy action was initiated.

If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO and the VERIFICATION outpatient site parameter is set to YES when a clerk (no PSORPH key) is reinstating a discontinued order for a medication for which an active local order exists, the system will delete the active order and reinstate the discontinued order.

If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO and the VERIFICATION outpatient site parameter is set to NO when a clerk is reinstating a discontinued order for a medication for which an active local order exists, the system will display a duplicate drug warning, but the order will not be reinstated.

If the DRUG CHECK FOR CLERK outpatient site parameter is set to YES or NO and the VERIFICATION outpatient site parameter is set to NO when a clerk is reinstating a discontinued order for a medication for which a remote order exists, the system will display a duplicate drug warning and the reinstated order will be assigned an active status.

If the DRUG CHECK FOR CLERK outpatient site parameter is set to YES or NO and the VERIFICATION outpatient site parameter is set to YES when a clerk is reinstating a discontinued order, the system will not display a duplicate drug warning and the reinstated order will be assigned a non-verified status.

If a duplicate drug warning is displayed for a medication order, it will not be included in a duplicate therapy order check.

The following examples illustrate the conditions described above.

Example: Duplicate Pending Order

```
Pending OP Orders (ROUTINE)   Mar 24, 2008@13:52:04          Page:    1 of    2
PSOPATIENT,FOUR                                 <NO ALLERGY ASSESSMENT>
  PID: 000-00-0000                                 Ht(cm): 168.91 (04/11/2006)
  DOB: MAY 20,1966 (41)                            Wt(kg): 68.18 (09/06/2006)

Order Checks:
      Duplicate drug order: ASPIRIN TAB,EC  325MG TAKE ONE TABLET BY MOUTH
EVERY
      MORNING  [ACTIVE]
     Overriding Provider: PSOPROVIDER,TEN
     Overriding Reason: TESTING DUPLICATE THERAPY FUNCTIONALITY

*(1) Orderable Item: ASPIRIN TAB,EC
 (2)           Drug: ASPIRIN 325MG EC TAB <DIN>
 (3)        *Dosage: 325 (MG)
               Verb: TAKE
     Dispense Units: 1
               Noun: TABLET
              *Route: ORAL
          *Schedule: QAM
+         Enter ?? for more actions
BY  Bypass                                DC  Discontinue
ED  Edit                                  FN  Finish
Select Item(s): Next Screen// FN   Finish

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

                  RX #: 2603
                  Drug: ASPIRIN 325MG EC TAB
                   SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
                   QTY: 30                     Refills remaining: 11
               Provider: PSOPROVIDER,TEN                   Issued: 03/24/08
                 Status: Active                    Last filled on: 03/24/08
     Processing Status: Released locally on 3/24/08@08:55:32  (Window)
```

```
                                                        Days Supply: 30
-------------------------------------------------------------------------------
Discontinue RX #2603 ASPIRIN 325MG EC TAB? Y/N NO -Prescription was not
discontinued...

Pending OP Orders (ROUTINE)   Mar 24, 2008@13:52:45          Page:    1 of    2
PSOPATIENT,FOUR                                  <NO ALLERGY ASSESSMENT>
  PID: 000-00-0000                                  Ht(cm): 168.91 (04/11/2006)
  DOB: MAY 20,1966 (41)                             Wt(kg): 68.18 (09/06/2006)

Order Checks:
      Duplicate drug order: ASPIRIN TAB,EC  325MG TAKE ONE TABLET BY MOUTH
EVERY
      MORNING  [ACTIVE]
     Overriding Provider: PSOPROVIDER,TEN
     Overriding Reason: TESTING DUPLICATE THERAPY FUNCTIONALITY

*(1) Orderable Item: ASPIRIN TAB,EC
 (2)           Drug: ASPIRIN 325MG EC TAB <DIN>
 (3)        *Dosage: 325 (MG)
               Verb: TAKE
     Dispense Units: 1
               NOUN: TABLET
             *Route: ORAL
          *Schedule: QAM
+         Enter ?? for more actions
AC Accept                 ED Edit                   DC Discontinue
Select Item(s): Next Screen//
.
  OR

Discontinue RX #2603 ASPIRIN 325MG EC TAB? Y/N  YES

RX #2603 ASPIRIN 325MG EC TAB will be discontinued after the acceptance of the
new order.


Rx # 2604              03/24/08
PSOPATIENT,FOUR                #30
TAKE ONE TABLET BY MOUTH EVERY MORNING

ASPIRIN 325MG EC TAB
PSOPROVIDER,TEN            PSOPHARMACIST,ONE
# of Refills: 11


       SC Percent: 100%
     Disabilities: NONE STATED

Was treatment for a Service Connected condition? YES// YES
Are you sure you want to Accept this Order? NO// YES
WAS THE PATIENT COUNSELED: NO// NO

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

 -Duplicate Drug Rx #2603 ASPIRIN 325MG EC TAB has been discontinued...

Press Return to Continue:
.
.
```

Example: New Order Entry Backdoor – Duplicate Drug

```
Eligibility: SERVICE CONNECTED 50% to 100%     SC%: 100
RX PATIENT STATUS: OPT NSC//
DRUG: aspirin
    Lookup: DRUG  GENERIC NAME
     1   ASPIRIN 325MG EC TAB           CN103
     2   ASPIRIN 325MG SUPPOSITORY           CN103
     3   ASPIRIN 325MG TAB           CN103
     4   ASPIRIN 650MG/BUTALBITAL 50MG TAB           CN103
     5   ASPIRIN 81MG EC TAB           CN103
Press <RETURN> to see more, '^' to exit this list, '^^' to exit all lists, OR
CHOOSE 1-5: 1  ASPIRIN 325MG EC TAB         CN103
  Restriction/Guideline(s) exist.  Display? :  (N/D): No//   NO
-------------------------------------------------------------------------------
Duplicate Drug in Local Rx:

              RX #: 2604
              Drug: ASPIRIN 325MG EC TAB
               SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
               QTY: 30                       Refills remaining: 11
          Provider: PSOPROVIDER,TEN                     Issued: 03/24/08
            Status: Active                     Last filled on: 03/24/08
 Processing Status: Released locally on 3/24/08@08:55:32  (Window)
                                                   Days Supply: 30
-------------------------------------------------------------------------------
Discontinue RX #2604 ASPIRIN 325MG EC TAB? Y/N  NO -Prescription was not
discontinued...

RX DELETED

   OR

Discontinue RX #2604 ASPIRIN 325MG EC TAB? Y/N  YES

RX #2604 ASPIRIN 325MG EC TAB will be discontinued after the acceptance of the
new order.


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

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 325MG

You entered 325MG is this correct? Yes//   YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 325MG

NOUN: TABLET
ROUTE: PO//   ORAL      PO  MOUTH
Schedule: bid (TWICE A DAY)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES):
CONJUNCTION:
PATIENT INSTRUCTIONS:

(TAKE ONE TABLET BY MOUTH TWICE A DAY)

DAYS SUPPLY:  (1-90): 30//
QTY ( TAB ) : 60// 60
```

```
COPIES: 1// 1
# OF REFILLS:  (0-11): 11//
PROVIDER:    PSOPROVIDER,TEN
CLINIC:
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
REMARKS:
ISSUE DATE: TODAY//   (MAR 24, 2008)
FILL DATE:  (3/24/2008 - 3/25/2009): TODAY//   (MAR 24, 2008)
Nature of Order: WRITTEN//        W
WAS THE PATIENT COUNSELED: NO// NO

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

Rx # 2605              03/24/08
PSOPATIENT,FOUR                #60
TAKE ONE TABLET BY MOUTH TWICE A DAY

ASPIRIN 325MG EC TAB
PSOPROVIDER,TEN            PSOPHARMACIST,ONE
# of Refills: 11


       SC Percent: 100%
     Disabilities: NONE STATED

Was treatment for a Service Connected condition? n  NO
Is this correct? YES//

 -Duplicate Drug RX #2604 ASPIRIN 325MG EC TAB has been discontinued...


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

Example: Editing Dispense Drug – Create New Order

```
                Rx #: 2605A
 (1) *Orderable Item: ASPIRIN TAB,EC
 (2)            Drug: ASPIRIN 325MG EC TAB <DIN>
 (3)         *Dosage: 325 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
             *Route: ORAL
           *Schedule: BID
 (4)Pat Instructions:
                 SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
 (5)  Patient Status: OPT NSC
 (6)      Issue Date: 03/24/08               (7)  Fill Date: 03/24/08
      Last Fill Date: 03/24/08 (Window)
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// ED   Edit

Select fields by number:  (1-19): 2
DRUG: ASPIRIN 325MG EC TAB// ASPIRIN 8

  Lookup: GENERIC NAME
ASPIRIN 81MG EC TAB           CN103
         ...OK? Yes//   (Yes)
```

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

                  Rx #: 2606
                  Drug: ASPIRIN 81MG EC TAB
                   SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
                   QTY: 30                  Refills remaining: 11
              Provider: PSOPROVIDER,TEN                Issued: 03/24/08
                Status: Active                 Last filled on: 03/24/08
     Processing Status: Released locally on 03/24/08@08:55:32  (Window)
                                                  Days Supply: 30
-------------------------------------------------------------------------------
Discontinue RX #2606 ASPIRIN 81MG EC TAB? Y/N NO -Prescription was not
discontinued...
.


   OR

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

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

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

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

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

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

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

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

New OP Order (ROUTINE)        Mar 24, 2008@14:10:20          Page:    1 of    2
PSOPATIENT,FOUR                                 <NO ALLERGY ASSESSMENT>
  PID: 000-00-0000                                 Ht(cm): 168.91 (04/11/2006)
  DOB: MAY 20,1966 (41)                            Wt(kg): 68.18 (09/06/2006)

      Orderable Item: ASPIRIN TAB,EC
  (1)           Drug: ASPIRIN 81MG EC TAB
  (2) Patient Status: OPT NSC
  (3)     Issue Date: MAR 24,2008             (4) Fill Date: MAR 24,2008
  (5) Dosage Ordered: 81 (MG)
                Verb: TAKE
      Dispense Units: 1
```

```
                Noun: TABLET
               Route: ORAL
            Schedule: QAM
  (6)Pat Instruction:
                 SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
  (7)    Days Supply: 30                    (8)   QTY (TAB): 60
  (9)   # of Refills: 11                    (10)  Routing: WINDOW
+         This change will create a new prescription!
AC   Accept                             ED   Edit
Select Action: Next Screen// AC   Accept

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

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

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

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

       SC Percent: 100%
     Disabilities: NONE STATED

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

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

Example: Clerk Entering New Order via Backdoor – Drug Check for Clerk Parameter set to No

```
PI  Patient Information                 SO  Select Order
Select Action: Quit// NO   New Order

Eligibility: SERVICE CONNECTED 50% to 100%     SC%: 100
RX PATIENT STATUS: OPT NSC//
DRUG: ASPIRIN 81
  Lookup: GENERIC NAME
ASPIRIN 81MG EC TAB           CN103
         ...OK? Yes//   (Yes)

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

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

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

Example: Clerk Entering New Order via Backdoor – Drug Check for Clerk Parameter set to No – Duplicate Drug – Discontinued Status

```
Eligibility: SERVICE CONNECTED 50% to 100%     SC%: 100
RX PATIENT STATUS: OPT NSC//
DRUG: ASPIRIN
  Lookup: GENERIC NAME
     1   ASPIRIN 325MG EC TAB           CN103
     2   ASPIRIN 325MG SUPPOSITORY           CN103
     3   ASPIRIN 325MG TAB           CN103
     4   ASPIRIN 650MG/BUTALBITAL 50MG TAB           CN103
     5   ASPIRIN 81MG EC TAB           CN103
Press <RETURN> to see more, '^' to exit this list, '^^' to exit all lists, OR
CHOOSE 1-5: 1  ASPIRIN 325MG EC TAB         CN103
  Restriction/Guideline(s) exist.  Display? :  (N/D): No//   NO
-------------------------------------------------------------------------------
Duplicate Drug in Local Rx:

                  Rx #: 2605A
                  Drug: ASPIRIN 325MG EC TAB
                   SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
                   QTY: 60                    Refills remaining: 11
              Provider: PSOPROVIDER,TEN                 Issued: 03/24/08
                Status: Discontinued (Edit)     Last filled on: 03/24/08
     Processing Status: Released locally on 3/24/08@08:55:32  (Window)
                                                   Days Supply: 30
-------------------------------------------------------------------------------
Press Return to Continue: .
```

Example: Clerk Finishing Pending Order – Drug Check for Clerk parameter set to No

```
ED  (Edit)                                FN  Finish

Pending OP Orders (ROUTINE)   Mar 24, 2008@14:35:21          Page:    1 of    3
PSOPATIENT,FOUR                                <NO ALLERGY ASSESSMENT>
  PID: 000-00-0000                                Ht(cm): 168.91 (04/11/2006)
  DOB: MAY 20,1966 (41)                           Wt(kg): 68.18 (09/06/2006)

CPRS Order Checks:
      Duplicate drug order: ASPIRIN TAB,EC  81MG TAKE ONE TABLET BY MOUTH EVERY
      MORNING  [ACTIVE]
     Overriding Provider: PSOPROVIDER,TEN
     Overriding Reason: TESTING

      Duplicate drug class order:(ASPIRIN TAB,EC  325MG
      TAKE ONE TABLET BY MOUTH EVERY MORNING  [UNRELEASED])
     Overriding Provider: PSOPROVIDER,TEN
     Overriding Reason: TESTING

*(1) Orderable Item: ASPIRIN TAB,EC
 (2)           Drug: ASPIRIN 81MG EC TAB
 (3)        *Dosage: 81 (MG)
+         Enter ?? for more actions
BY  Bypass                                DC  (Discontinue)
ED  (Edit)                                FN  Finish
Select Item(s): Next Screen// FN   Finish

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

                  Rx #: 2608
                  Drug: ASPIRIN 81MG EC TAB
```

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

Pending OP Orders (ROUTINE)   Mar 24, 2008@14:35:25          Page:    1 of    3
PSOPATIENT,FOUR                                 <NO ALLERGY ASSESSMENT>
  PID: 000-00-0000                                 Ht(cm): 168.91 (04/11/2006)
  DOB: MAY 20,1966 (41)                            Wt(kg): 68.18 (09/06/2006)

CPRS Order Checks:
      Duplicate drug order: ASPIRIN TAB,EC  81MG TAKE ONE TABLET BY MOUTH EVERY
      MORNING  [ACTIVE]
     Overriding Provider: PSOPROVIDER,TEN
     Overriding Reason: TESTING

      Duplicate drug class order: NON-OPIOID ANALGESICS (ASPIRIN TAB,EC  325MG
      TAKE ONE TABLET BY MOUTH EVERY MORNING  [UNRELEASED])
     Overriding Provider: PSOPROVIDER,TEN
     Overriding Reason: TESTING

*(1) Orderable Item: ASPIRIN TAB,EC
 (2)           Drug: ASPIRIN 81MG EC TAB
 (3)        *Dosage: 81 (MG)
+         Enter ?? for more actions
AC Accept                 ED Edit                   DC Discontinue
Select Item(s): Next Screen// DC   Discontinue

Nature of Order: SERVICE CORRECTION//        S

Requesting PROVIDER: PSOPROVIDER,TEN//        LBB     119
Comments: Per Pharmacy Request  Replace

Press Return to :



PI  Patient Information                 SO  Select Order

PU  Patient Record Update               NO  New Order
PI  Patient Information                 SO  Select Order
Select Action: Quit// 2

Medication Profile            Mar 24, 2008@14:36:28          Page:    1 of    1
PSOPATIENT,FOUR                                 <NO ALLERGY ASSESSMENT>
  PID: 000-00-0000                                 Ht(cm): 168.91 (04/11/2006)
  DOB: MAY 20,1966 (41)                            Wt(kg): 68.18 (09/06/2006)
  SEX: MALE
                                                            ISSUE  LAST REF DAY
 #  RX #         DRUG                                  QTY ST  DATE  FILL REM SUP

-------------------------------------ACTIVE-------------------------------------
 1 2608          ASPIRIN 81MG EC TAB                   30 A  03-24 03-24  11  30
----------------------------------NON-VERIFIED----------------------------------
 2 2609          ASPIRIN 325MG EC TAB                  30 N  03-24 03-24   5  30
.
.
.
```

Example: Duplicate with Non-VA Med – No Action Required

```
DRUG: CIMETIDINE
  Lookup: GENERIC NAME
     1   CIMETIDINE 100MG TAB           GA301
     2   CIMETIDINE 200MG TAB           GA301
     3   CIMETIDINE 300MG TAB           GA301         90 DAY SUPPLY
     4   CIMETIDINE 400MG TAB           GA301
     5   CIMETIDINE 800MG TAB           GA301
CHOOSE 1-5: 3  CIMETIDINE 300MG TAB         GA301         90 DAY SUPPLY
-------------------------------------------------------------------------------
Duplicate Drug in a Non-VA Med Order for


                Drug: CIMETIDINE 300MG TAB
              Dosage: 300MG
            Schedule: AT BEDTIME
    Medication Route: MOUTH
          Start Date:                  CPRS Order #: 13554
       Documented By: PSOPROVIDER,TEN on Mar 24, 2008@14:44:15
-------------------------------------------------------------------------------

Press Return to Continue:

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

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

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

Example: Duplicate Drug with Pending Order

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

Eligibility: SERVICE CONNECTED 50% to 100%     SC%: 100
RX PATIENT STATUS: OPT NSC//
DRUG: ALLOPURINOL
  Lookup: GENERIC NAME
     1   ALLOPURINOL 100MG TAB           MS400
     2   ALLOPURINOL 300MG TAB           MS400
CHOOSE 1-2: 2  ALLOPURINOL 300MG TAB         MS400
-------------------------------------------------------------------------------
DUPLICATE DRUG in a Pending Order for:

                  Drug: ALLOPURINOL 300MG TAB
                   SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
                   QTY: 180                  # of Refills: 3
              Provider: PSOPROVIDER,TEN        Issue Date: 03/24/08@14:44:15
-------------------------------------------------------------------------------
Discontinue Pending Order for ALLOPURINOL 300MG? Y/N  YES

Pending Order for ALLOPURINOL 300MG will be discontinued after the acceptance
of the new order.

VERB: TAKE
```

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

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

You entered 300MG is this correct? Yes//   YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 300MG

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

DAYS SUPPLY:  (1-90): 30//
QTY ( TAB ) : 30// 30
COPIES: 1// 1
# OF REFILLS:  (0-11): 11//
PROVIDER:    PSOPROVIDER,TEN
CLINIC:
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
REMARKS:
ISSUE DATE: TODAY//   (MAR 24, 2008)
FILL DATE:  (3/24/2008 - 3/25/2009): TODAY//   (MAR 24, 2008)
Nature of Order: WRITTEN//        W

Rx # 2610              03/24/08
PSOPATIENT,FOUR                #30
TAKE ONE TABLET BY MOUTH EVERY MORNING

ALLOPURINOL 300MG TAB
PSOPROVIDER,TEN            PSOPHARMACIST,ONE
# of Refills: 11


       SC Percent: 100%
     Disabilities: NONE STATED

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

- Duplicate Drug Pending Order for ALLOPURINOL 300MG has been discontinued...
```

Example: Copying an Existing Order

```
RN   Renew
Select Action: Next Screen// CO   CO

OP Medications (ACTIVE)       Mar 12, 2008@09:15:48          Page:  1 of    2
PSOPATIENT,TWO                                                        <A>
  PID: 000-00-0000                                Ht(cm): 182.88 (04/13/2005)
  DOB: JAN 1,1945 (63)                            Wt(kg): 77.27 (04/13/2005)

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

AC   Accept                              ED   Edit

New OP Order (COPY)           Mar 12, 2008@09:15:48        Page:    1 of    2
PSOPATIENT,TWO                                                        <A>
  PID: 000-00-0000                                Ht(cm): 182.88 (04/13/2005)
  DOB: JAN 1,1945 (63)                            Wt(kg): 77.27 (04/13/2005)

      Orderable Item: AMLODIPINE/ATORVASTATIN TAB
  (1)            Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
  (2) Patient Status: OPT NSC
  (3)      Issue Date: MAR 12,2008             (4) Fill Date: MAR 12,2008
                Verb: TAKE
  (5) Dosage Ordered: ONE TABLET
               Route: ORAL
            Schedule: QAM
  (6)Pat Instruction:
                 SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
  (7)    Days Supply: 30                     (8)   QTY ( ): 30
  (9)   # of Refills: 11                     (10)  Routing: WINDOW
 (11)         Clinic:
 (12)       Provider: PSOPROVIDER,ONE                 (13)   Copies: 1
+         Enter ?? for more actions
AC   Accept                              ED   Edit
Select Action: Next Screen// AC   Accept
---------------------------------------------------------------------------
Duplicate Drug in Local RX:

              Rx #: 2584
              Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
               SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
               QTY: 30                  Refills remaining: 11
          Provider: OPPROVIDER, ONE                Issued: 03/12/07
            Status: ACTIVE                 Last filled on: 03/12/07
 Processing Status: Released locally on 3/12/07@08:55:32  (Window)
                                                Days Supply: 30

---------------------------------------------------------------------------
```

```
Discontinue Rx #2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB? Y/N YES

Rx #2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB will be discontinued after the
acceptance of the new order.

Nature of Order: WRITTEN//        W
WAS THE PATIENT COUNSELED: NO// NO

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

Rx # 2585              03/12/08PSOPATIENT,TWO T                  #30
TAKE ONE TABLET BY MOUTH EVERY MORNING

AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
PSOPROVIDER,ONE       PSOPHARMACIST,ONE
# of Refills: 11


       SC Percent: 40%
     Disabilities: NONE STATED

Was treatment for Service Connected condition? NO//

Is this correct? YES// ...

-  Duplicate Drug Rx #2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB has been
   discontinued...
```

The CPRS Auto Refill field can be updated using the *Pharmacy Systems Parameter Edit* [PSS MGR] option. This parameter works in conjunction with the PSOUATRF security key.

- When the CPRS Auto Refill field is set to YES and the PSOAUTRF security key has been assigned to at least one user, all refills placed in CPRS by the provider are processed and suspended with the next fill date and all routing is set to Mail automatically.

- When the CPRS Auto Refill field is set to NO or if the PSOAUTRF security key is not assigned, the manual refill process is required.

If the auto refill process fails, the order will not be processed and will require manual refilling. A MailMan message will be sent to the holders of the PSOAUTRF key describing the reason for not filling the auto refill. All of the refill activity, manual or automatic, is recorded in the Activity Log entry notes.

With Patch PSO*7*233, when a name is selected, if the patient's address is flagged with a Bad Address Indicator, a warning message is displayed. If the user has proper authorization (i.e., the PSO SITE parameter "EDIT PATIENT DATA" is set to Yes or the user holds the new PSO ADDRESS UPDATE security key), a prompt appears asking if the user wants to update the address. Also, for the *Patient Prescription Processing, Complete Orders from OERR*, and *Action Profile (132 COLUMN PRINTOUT)* options, if a temporary address has no end date, the following text is now displayed: "(Temp address from XXX 99,9999 till (no end date))".

Following the installation of patches PSO*7*207 and OR*3*238 (Remote Data Interoperability (RDI) trigger patch), order checks will be made using additional data from the Health Data Repository Interim Messaging Solution (HDR-IMS) and the HDR-Historical (HDR-Hx). This will contain both Outpatient orders from other VAMCs as well as from Department of Defense (DoD) facilities, if available. All

(This page included for two-sided copying.)

remote prescription statuses will be included in order checking for a new order being processed from within backdoor outpatient pharmacy and for new orders being placed by CPRS or by Inpatient Medications. Any remote Outpatient order that has been expired or discontinued for 30 days or less will be included in the list of medications to be checked.

The check for remote data availability is performed upon entering the patient's profile, rather than on each order, to ensure that both remote data and local data are used for order checking.

Note: Once the above patches have been installed, a new comment for remote order checks, "`Now doing remote order checks. Please wait...`" has been added to the screen. The previous comment, "`Now doing order checks. Please wait...` " is replaced by: "`Now doing drug interaction and allergy checks. Please wait...`"

The following will not be included in order checks (after patch PSO*7*243):

- Prescriptions with a status of "DELETED" in the STATUS field in the PRESCRIPTION file from a remote facility
- Prescriptions with a missing expiration date, unless the ISSUE DATE field of the PRESCRIPTION file is within the past year

Remote order checking added (after patch PSO*7*243):

- For drug class when orders are placed for locally defined drugs
- allergy Analgesic class order checks only match against the specific 5-character class if the class begins with "CN10"

If for any reason remote order checks cannot be performed, the following message displays:

```
Remote data not available - Only local order checks processed.
```

Note: For remote order checking, if the remote order does not have a VA PRODUCT file VUID, then it will not be included in drug-drug order checks. However, future patches are planned to send/receive the drug class to the HDR, and then it will be possible to use non-standardized remote orders for duplicate drug class checks.

When an order is an ePharmacy order (determined to be third party billable), the billing data is sent to the Electronic Claims Management Engine (ECME) when an order is finished. ECME sends a message back to Outpatient Pharmacy displaying the status of the claim. This message displays for new, edited, copied, and renewed ePharmacy orders.

```
Is this correct? YES// <Enter>
 -Rx 100003869A has been discontinued...

Prescription 100003919 successfully submitted to ECME for claim generation.

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

Entering a New Order

Actions display in the action area of the screen. Actions with parentheses ( ) around them are invalid actions for that order. A double question mark (??) displays all the actions available, including the Outpatient Pharmacy actions described in the section "Using List Manager." If one of the hidden actions is selected and it is invalid, a message will display in the message window.

Example: Entering a New Order

```
Select Option: RX (Prescriptions)

          Orders to be completed for all divisions: 14

Do you want an Order Summary? No//
```

A summary list of the number of pending orders can be displayed by Division or by each Clinic within the Division where the user is signed on. This is helpful when completing batch orders. In this example, an individual patient name is entered.

```
          Patient Prescription Processing
          Barcode Rx Menu ...
          Complete Orders from OERR
          Discontinue Prescription(s)
          Edit Prescriptions
          List One Patient's Archived Rx's
          Manual Print of Multi-Rx Forms
          Reprint an Outpatient Rx Label
          Signature Log Reprint
          View Prescriptions

Select Rx (Prescriptions) Option: PATient Prescription Processing
Select PATIENT NAME: OPPATIENT16,ONE  OPPATIENT16,ONE   4-3-41    000246802
 YES     SC VETERAN
Patient is enrolled to receive ScripTalk 'talking' prescription labels.

Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED//  <Enter>
 ---------------------------------example continues-------------------------------------
```

A detailed explanation of the different parts of the screen can be found under “List Manager Options” at the beginning of this manual. The Patient Information screen displays the information on two pages. Only the second screen is shown in this example.

Example: Entering a New Order (continued)

```
Patient Information           May 22, 2001 10:44:38          Page:    2 of    2
OPPATIENT16,ONE
  PID: 000-24-6802                                  Ht(cm): 177.80 (02/08/1999)
  DOB: APR 3,1941 (60)                              Wt(kg): 90.45 (02/08/1999)
  SEX: MALE
+
Allergies:
    Remote: ASPIRIN, NON-OPIOID ANALGESICS
Adverse Reactions:
          Enter ?? for more actions
EA  Enter/Edit Allergy/ADR Data         PU  Patient Record Update
DD  Detailed Allergy/ADR List           EX  Exit Patient List
Select Action: Quit// <Enter>
```

Although the default option is “Quit” at the "Select Action" prompt, pressing the Enter key here quits the Patient Information screen and displays the Medication Profile. This Medication Profile includes any Non-VA Med orders documented via the CPRS GUI application.

```
Medication Profile            May 22, 2001 10:44:56          Page:    1 of    1
OPPATIENT16,ONE
  PID: 000-24-6802                                  Ht(cm): 177.80 (02/08/1999)
  DOB: APR 3,1941 (60)                              Wt(kg): 90.45 (02/08/1999)

                                                            ISSUE  LAST REF DAY
 #  RX #         DRUG                                  QTY ST  DATE  FILL REM SUP

-------------------------------------ACTIVE----------------------------------
 1 503902        ACETAMINOPHEN 500MG TAB                60 A> 05-22 05-22   3  30
 2 503886$       DIGOXIN (LANOXIN) 0.2MG CAP            60 A> 05-07 05-07   5  30
-------------------------------------PENDING----------------------------------
 3 AMPICILLIN 250MG CAP                    QTY: 40       ISDT: 05-29  REF:  0


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

If a double question mark (??) is entered at the above “Select Action” prompt, the following hidden actions display in the action area.

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

----------example continues----------

Typing in the letters **NO** creates a new order.

Example: Entering a New Order (continued)

```
Medication Profile            Mar 29, 2011@14:34:27          Page:    1 of    1
(Patient information is displayed here.)
:
          Enter ?? for more actions
PU  Patient Record Update               NO  New Order
PI  Patient Information                 SO  Select Order
Select Action: Quit// NO   New Order

Eligibility:
RX PATIENT STATUS: SC LESS THAN 50%//
DRUG: ACETAMINOPHEN
  Lookup: GENERIC NAME
     1   ACETAMINOPHEN 160MG/5ML LIQUID           CN103         NATL FORM; 480 M
L/BT (NDC)
     2   ACETAMINOPHEN 325MG TAB           CN103         NATL FORM; DU: INCREMEN
TS OF 100 ONLY *** AUTOMED & SCRIPTPRO ***
     3   ACETAMINOPHEN 325MG/BUTALBITAL 50MG TAB           CN103     N/F       N
ATL N/F
     4   ACETAMINOPHEN 500MG TAB           CN103         NATL FORM; DU: INCREMEN
TS OF 100 ONLY*** AUTOMED & SCRIPTPRO ***
     5   ACETAMINOPHEN 650MG RTL SUPP           CN103         NATL FORM (IEN)

CHOOSE 1-5: 5  ACETAMINOPHEN 650MG RTL SUPP         CN103         NATL FORM (IEN
)

Now doing allergy checks.  Please wait...

Now Processing Enhanced Order Checks!  Please wait...

Press return to continue:

==============================================================================
*** THERAPEUTIC DUPLICATION(S) *** ACETAMINOPHEN 650MG RTL SUPP with

         Local RX#: 2054930
              Drug: ACETAMINOPHEN 500MG TAB (Active)
               SIG: TAKE ONE TABLET BY MOUTH EVERY FOUR HOURS AS NEEDED
               QTY: 180                            Days Supply: 30
     Processing Status: Not released locally (Window)
    Last Filled On: 03/29/11

Class(es) Involved in Therapeutic Duplication(s): Non-Narcotic
Analgesic/Antipyretic, Non-Salicylate
==============================================================================

Press Return to continue:
Discontinue Rx #2054930 ACETAMINOPHEN 500MG TAB Y/N ?
```

The system checks the medication selected for any duplicate drugs or classes, interactions, or allergies that are noted in the patient's local and remote record. This also includes any local Non-VA Meds. See the following example of local and remote order checking.

If the new order is for Clozapine, there are additional restrictions for filling a prescription. See "Chapter 8: Controlling the Dispensing of Clozapine" for more information.

Please Note: More than one ingredient and more than one VA Drug Class may be associated with an Allergy/ADR.

See output below:

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

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

After the Allergy/ADR warning is displayed, the system ask the user if they want to intervene.

If the user chooses to intervene after the Allergy/ADR warning is displayed, the intervention dialog will launch.

If the user chooses not to intervene after the Allergy/ADR warning is displayed, the order entry dialog will start.

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

```
Select Action: Quit// NO   New Order

PATIENT STATUS: SC//
DRUG: DILTIAZEM
  Lookup: GENERIC NAME
     1   DILTIAZEM (DILACOR XR) 240MG SA CAP           CV200     N/F       This
drug will not be processed without Drug Request Form 10-7144
     2   DILTIAZEM (INWOOD) 120MG SA CAP           CV200
     3   DILTIAZEM (INWOOD) 180MG SA CAP           CV200
     4   DILTIAZEM (INWOOD) 240MG SA CAP           CV200
     5   DILTIAZEM (INWOOD) 300MG SA CAP           CV200
Press <RETURN> to see more, '^' to exit this list, '^^' to exit all lists, OR
CHOOSE 1-5: 1  DILTIAZEM (DILACOR XR) 240MG SA CAP         CV200     N/F   This
drug will not be processed without Drug Request Form 10-7144

Now doing allergy checks.  Please wait...

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

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

Do you want to Intervene? Y// NO

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

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

   OR


Do you want to Intervene? Y// ES

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

PROVIDER:    PSOPROVIDER,THREE     TPP     119
RECOMMENDATION:    NO CHANGE

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


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

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

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

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

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

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

Now doing allergy checks.  Please wait...


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

Drug: SEPTRA DS TAB
   Class: AM650 SULFONAMIDE/RELATED ANTIMICROBIALS (LOCAL)

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for SEPTRA DS TAB

PROVIDER:    PSOPROVIDER,FOUR     FPP     119
RECOMMENDATION:    NO CHANGE

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

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

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

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

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

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

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

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

Now doing allergy checks.  Please wait...
A Drug-Allergy Reaction exists for this medication and/or class!

Drug: SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
  Ingredients: SULFAMETHOXAZOLE (LOCAL), TRIMETHOPRIM (LOCAL)
   Class: AM650 SULFONAMIDE/RELATED ANTIMICROBIALS (LOCAL AND REMOTE SITE(S))

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB

PROVIDER:    PSOPROVIDER, 11     PP     119
RECOMMENDATION:    NO CHANGE

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

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

```
Rx # 2611              03/24/08
PSOPATIENT,THREE                   #20
TAKE 1 TABLET BY MOUTH EVERY 12 HOURS

SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
PSOPROVIDER, 11            PSOPHARMACIST,TWO
# of Refills: 1

Are you sure you want to Accept this Order? NO// Y
.
```

CPRS Order Checks

Three CPRS order checks have been added to the list of order checks performed within the Outpatient Pharmacy application.

- Aminoglycoside Ordered
- Dangerous Meds for Patient >64
- Glucophage –Lab Results

Please Note: See Appendix 5 for details on each order check as taken from CPRS (OERR) documentation.

The CPRS order checks shall be incorporated in the following Outpatient Pharmacy order entry processes:

- Entering a new order via backdoor pharmacy options
- Finishing a pending order
- Renewing an order
- Editing an order which results in a new order being created.
- Verifying an order
- Copying an order
- Reinstating a discontinued order

No user action/intervention shall be required after a CPRS order check warning is displayed.

The following information is displayed for the Aminoglycoside Ordered order check:

- Order Check Name
- Text message displaying an estimated CrCL if available or a message that it is not.

```
***Aminoglycoside Ordered***

Aminoglycoside - est. CrCl: <VALUE> (CREAT: <result>  BUN: <result>) [Est. CrCl
Based on modified Cockcroft-Gault equation using Adjusted Body Weight (if ht >
60 in)].
```

-OR-

```
***Aminoglycoside Ordered***

Aminoglycoside – est. CrCl: <Unavailable> (<Results Not Found>)  [Est. CrCl
```

```
Based on modified Cockcroft-Gault equation using Adjusted Body Weight (if ht >
60
```

The following information is displayed for the Dangerous Meds for Patient >64 order check:

- Order Check Name
- Text message displaying a message if patient is greater than 64 and has been prescribed Amitriptyline

```
***Dangerous Meds for Patient >64***

Patient is <age>.  Amitriptyline can cause cognitive impairment and loss of
balance in older patients.  Consider other antidepressant medications on
formulary.
```

-OR-

Text message displaying a message if patient is greater than 64 and has been prescribed Chlorpropamide

```
***Dangerous Meds for Patient >64***

Patient is <age>.  Older patients may experience hypoglycemia with
Chlorpropamide due do its long duration and variable renal secretion. They may
also be at increased risk for Chlorpropamide-induced SIADH.
```

-OR-

Text message displaying a message if patient is greater than 64 and has been prescribed Dipyridamole

```
***Dangerous Meds for Patient >64***

Patient is <age>.  Older patients can experience adverse reactions at high
doses of Dipyridamole (e.g., headache, dizziness, syncope, GI intolerance.)
There is also questionable efficacy at lower doses.
```

The following information is displayed for the Glucophage Lab Results order check:

- Order Check Name
- Text message displaying a serum creatinine does not exist or it is greater than 1.5

```
***Metformin Lab Results***

Metformin - no serum creatinine within past 60 days.
```

-OR-

```
***Metformin Lab Results***

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

Examples of CPRS Order Checks

Example: New Order Entry – Backdoor – Dangerous Meds for Patient >64 for Dipyridamole

```
Select Action: Quit// NO   New Order

Eligibility: NSC
RX PATIENT STATUS: OPT NSC//
DRUG: DIPYRIDAMOLE
  Lookup: GENERIC NAME
     1   DIPYRIDAMOLE 25MG TAB           BL117
     2   DIPYRIDAMOLE 50MG TAB           BL117
CHOOSE 1-2: 1  DIPYRIDAMOLE 25MG TAB         BL117

***DANGEROUS MEDS FOR PATIENT >64***

Patient is 78.  Older patients can experience adverse reactions at high doses
of Dipyridamole (e.g., headache, dizziness, syncope, GI intolerance.)  There is
also questionable efficacy at lower doses.

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

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 25MG

You entered 25MG is this correct? Yes//   YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 25MG

NOUN: TABLET
ROUTE: PO//
.
.
.
```

Example: Finishing a Pending Order – Dangerous Meds for Patient >64 for Amitriptyline

```
Pending OP Orders (ROUTINE)   Mar 25, 2008@15:29:09          Page:    1 of    2
PSOPATIENT,NINE                                                          <A>
  PID: 000-00-0000                                  Ht(cm): 177.80 (10/14/2005)
  DOB: JAN 1,1930 (78)                              Wt(kg): 136.36 (10/14/2005)

*(1) Orderable Item: AMITRIPTYLINE TAB
 (2)           Drug: AMITRIPTYLINE 25MG TAB
 (3)        *Dosage: 25 (MG)
               Verb: TAKE
     Dispense Units: 1
               Noun: TABLET
             *Route: ORAL
          *Schedule: QHS
 (4)   Pat Instruct:
  Provider Comments:
       Instructions: TAKE ONE TABLET PO QHS
                SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
 (5) Patient Status: OPT NSC
 (6)     Issue Date: MAR 25,2008        (7) Fill Date: MAR 25,2008
+         Enter ?? for more actions
BY  Bypass                               DC  Discontinue
```

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


***DANGEROUS MEDS FOR PATIENT >64***

Patient is 78.  Amitriptyline can cause cognitive impairment and loss of
balance in older patients.  Consider other antidepressant medications on
formulary.

Rx # 2612              03/25/08
PSOPATIENT,NINE                     #30
TAKE ONE TABLET BY MOUTH AT BEDTIME

AMITRIPTYLINE 25MG TAB
PSOPROVIDER,TEN            PSOPHARMACIST,22
# of Refills: 3


Are you sure you want to Accept this Order? NO// YES
WAS THE PATIENT COUNSELED: NO//
```

Example: Renewing an Order – Dangerous Meds for Patient >64 for Chlorpropamide

```
                Rx #: 2613$
 (1) *Orderable Item: CHLORPROPAMIDE TAB
 (2)            Drug: CHLORPROPAMIDE 25OMG TAB
 (3)         *Dosage: 250 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
             *Route: ORAL
           *Schedule: BID
 (4)Pat Instructions:
                 SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
 (5)  Patient Status: OPT NSC
 (6)      Issue Date: 03/25/08               (7)  Fill Date: 03/25/08
      Last Fill Date: 03/25/08 (Mail)
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// RN   Renew

FILL DATE:  (3/25/2008 - 3/26/2009): TODAY//   (MAR 25, 2008)
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
Nature of Order: WRITTEN//        W
WAS THE PATIENT COUNSELED: NO// NO

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

Now Renewing Rx # 2613   Drug: CHLORPROPAMIDE 25OMG TAB


***DANGEROUS MEDS FOR PATIENT >64***

Patient is 78.  Older patients may experience hypoglycemia with Chlorpropamide
due do its long duration and variable renal secretion. They may also be at
increased risk for Chlorpropamide-induced SIADH.


2613A        CHLORPROPAMIDE 25OMG TAB          QTY: 60
# OF REFILLS: 3  ISSUED: 03-25-08
```

```
SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
.
.
.
```

Example: Creating New Order from Edit – Glucophage Lab Results for Metformin

```
*(1) Orderable Item: METFORMIN TAB,ORAL
 (2)           Drug: METFORMIN 500MG TAB
 (3)        *Dosage: 500 (MG)
               Verb: TAKE
ED  Edit                                FN  Finish
Select Item(s): Next Screen//    NEXT SCREEN

BY  Bypass                              DC  Discontinue
Pending OP Orders (ROUTINE)   Mar 25, 2008@15:33:47          Page:    2 of    3
PSOPATIENT,NINE                                                        <A>
  PID: 000-00-0000                                  Ht(cm): 177.80 (10/14/2005)
  DOB: JAN 1,1930 (78)                              Wt(kg): 136.36 (10/14/2005)
+
     Dispense Units: 1
               Noun: TABLET
             *Route: ORAL
          *Schedule: Q12H
 (4)   Pat Instruct:
  Provider Comments:
       Instructions: TAKE ONE TABLET PO Q12H
                 SIG: TAKE ONE TABLET BY MOUTH EVERY 12 HOURS
 (5) Patient Status: OPT NSC
 (6)     Issue Date: MAR 25,2008        (7) Fill Date: MAR 25,2008
 (8)    Days Supply: 30                (9)   QTY (TAB): 60
       Provider ordered 2 refills
(10)   # of Refills: 2                (11)   Routing: MAIL
(12)         Clinic: BARB'S CLINIC
+         Enter ?? for more actions
ED  Edit                                FN  Finish
Select Item(s): Next Screen// ED   Edit
* Indicates which fields will create an new Order
Select Field to Edit by number:  (1-15): 3

Press Return to :

Available Dosage(s)
       1. 500MG
       2. 1000MG

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 500MG// 2 1000MG

You entered 1000MG is this correct? Yes//   YES
VERB: TAKE// TAKE
DISPENSE UNITS PER DOSE(TABLETS): 2// 2
Dosage Ordered: 1000MG

NOUN: TABLETS// TABLETS
ROUTE: ORAL// ORAL
Schedule: Q12H// QHS (AT BEDTIME)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES):
CONJUNCTION:

Pending OP Orders (ROUTINE)   Mar 25, 2008@15:34:08          Page:    1 of    3
PSOPATIENT,NINE                                                        <A>
```

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

CPRS Order Checks:
      Duplicate drug class order: ORAL HYPOGLYCEMIC AGENTS,ORAL (CHLORPROPAMIDE
      TAB  250MG TAKE ONE TABLET BY MOUTH TWICE A DAY  [PENDING])
     Overriding Provider: PSOPROVIDER,TEN
     Overriding Reason: testing

      Metformin - no serum creatinine within past 60 days.
     Overriding Provider: PSOPROVIDER,TEN
     Overriding Reason: testing

*(1) Orderable Item: METFORMIN TAB,ORAL
 (2)           Drug: METFORMIN 500MG TAB
 (3)        *Dosage: 1000 (MG)
               Verb: TAKE

+         This change will create a new prescription!
AC Accept                 ED Edit                   DC Discontinue
Select Item(s): Next Screen// AC   Accept

***Metformin Lab Results***

Metformin - no serum creatinine within past 60 days.


Rx # 2614              03/25/08
PSOPATIENT,NINE                     #1440
TAKE TWO TABLETS BY MOUTH AT BEDTIME

METFORMIN 500MG TAB
PSOPROVIDER,TEN            PSOPHARMACIST,22
# of Refills: 2


Are you sure you want to Accept this Order? NO// YES
Nature of Order: SERVICE CORRECTION//
.
```

Example: Verifying an Order – Dangerous Meds for Patient >64 for Dipyridamole

```
OP Medications (NON-VERIFIED) Mar 25, 2008@15:39:03          Page:    1 of    2
PSOPATIENT,NINE                                                        <A>
  PID: 000-00-0000                                Ht(cm): 177.80 (10/14/2005)
  DOB: JAN 1,1930 (78)                            Wt(kg): 136.36 (10/14/2005)

                Rx #: 2615$
 (1) *Orderable Item: DIPYRIDAMOLE TAB
 (2)            Drug: DIPYRIDAMOLE 25MG TAB
 (3)         *Dosage: 25 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
              *Route: ORAL
           *Schedule: QHS
 (4)Pat Instructions:
                 SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
 (5)  Patient Status: OPT NSC
 (6)      Issue Date: 03/25/08              (7)  Fill Date: 03/25/08
      Last Fill Date: 03/25/08 (Mail)
+         Enter ?? for more actions
DC   Discontinue          PR   (Partial)            RL   (Release)
ED   Edit                 RF   (Refill)             RN   (Renew)
Select Action: Next Screen// VF   VF

RX: 2615            PATIENT: PSOPATIENT,NINE (000-00-0000)
STATUS: Non-Verified   CO-PAY STATUS
      DRUG: DIPYRIDAMOLE 25MG TAB
       QTY: 30     30 DAY SUPPLY
       SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
    LATEST: 03/25/2008              # OF REFILLS: 3  REMAINING: 3
    ISSUED: 03/25/08                    PROVIDER:
    LOGGED: 03/25/08                      CLINIC: BARB'S CLINIC
   EXPIRES: 03/26/09                    DIVISION: HINES (499)
       CAP: SAFETY                       ROUTING: MAIL
  ENTRY BY: PSOPROVIDER,TEN            VERIFIED BY:


ACTIVITY LOG:
#  DATE       REASON     RX REF         INITIATOR OF ACTIVITY
==============================================================================

1  03/25/08   PATIENT INST.ORIGINAL
COMMENTS: Patient Instructions Not Sent By Provider.
PATIENT STATUS : OPT NSC                  COPIES : 1

Press RETURN to Continue:

***DANGEROUS MEDS FOR PATIENT >64***

Patient is 78.  Older patients can experience adverse reactions at high doses
of Dipyridamole (e.g., headache, dizziness, syncope, GI intolerance.)  There is
also questionable efficacy at lower doses.


EDIT:  (Y/N/P): N// O
VERIFY FOR PSOPATIENT,NINE ? (Y/N/Delete/Quit): Y// ES
.
.
.
```

Example: Copying an Order – Aminoglycoside Ordered – Gentamicin

```
Select Action: Next Screen// CO   CO

OP Medications (ACTIVE)       Mar 25, 2008@15:46:18          Page:    1 of    2
PSOPATIENT,NINE                                                          <A>
  PID: 000-00-0000                                 Ht(cm): 177.80 (10/14/2005)
  DOB: JAN 1,1930 (78)                             Wt(kg): 136.36 (10/14/2005)

                Rx #: 2616$
 (1) *Orderable Item: GENTAMICIN INJ,SOLN
 (2)            Drug: GENTAMICIN 40MG/ML 2ML VI
                Verb: INJECT
 (3)         *Dosage: 80MG
              *Route: INTRAMUSCULAR
           *Schedule: Q8H
 (4)Pat Instructions:
                 SIG: INJECT 80MG IM EVERY 8 HOURS
 (5)  Patient Status: OPT NSC
 (6)      Issue Date: 03/25/08              (7)  Fill Date: 03/25/08
      Last Fill Date: 03/25/08 (Window)
   Last Release Date:                        (8)      Lot #:
             Expires: 04/24/08                        MFG:
+         Enter ?? for more actions



AC   Accept                              ED   Edit

New OP Order (COPY)           Mar 25, 2008@15:46:18          Page:    1 of    2
PSOPATIENT,NINE                                                          <A>
  PID: 000-00-0000                                 Ht(cm): 177.80 (10/14/2005)
  DOB: JAN 1,1930 (78)                             Wt(kg): 136.36 (10/14/2005)

      Orderable Item: GENTAMICIN INJ,SOLN
  (1)           Drug: GENTAMICIN 40MG/ML 2ML VI
  (2) Patient Status: OPT NSC
  (3)     Issue Date: MAR 25,2008            (4) Fill Date: MAR 25,2008
                Verb: INJECT
  (5) Dosage Ordered: 80MG
               Route: INTRAMUSCULAR
            Schedule: Q8H
  (6)Pat Instruction:
                 SIG: INJECT 80MG IM EVERY 8 HOURS
  (7)    Days Supply: 10                    (8)   QTY (VI): 10
  (9)   # of Refills: 0                     (10)  Routing: WINDOW
 (11)         Clinic: SHIRL-2
 (12)       Provider: PSOPROVIDER,TEN                 (13)   Copies: 1
+         Enter ?? for more actions
AC   Accept                              ED   Edit
Select Action: Next Screen// AC   Accept


***Aminoglycoside Ordered***

Aminoglycoside - est. CrCl: <Unavailable> (<Results Not Found>)  [Est.
CrCl based on modified Cockcroft-Gault equation using Adjusted Body
Weight (if ht > 60 in)]

Nature of Order: WRITTEN//        W
WAS THE PATIENT COUNSELED: NO// NO

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

```
Rx # 2617              03/25/08
PSOPATIENT,NINE                    #10
INJECT 80MG IM EVERY 8 HOURS

GENTAMICIN 40MG/ML 2ML VI
PSOPROVIDER,TEN            PSOPHARMACIST,22
# of Refills: 0


Is this correct? YES//
.
.
.
```

Example: Reinstating a Discontinued Order – Glucophage Lab Results for Metformin

```
                Rx #: 2614$
 (1) *Orderable Item: METFORMIN TAB,ORAL
 (2)            Drug: METFORMIN 500MG TAB
 (3)         *Dosage: 1000 (MG)
                Verb: TAKE
      Dispense Units: 2
                Noun: TABLETS
              *Route: ORAL
           *Schedule: QHS
 (4)Pat Instructions:
                 SIG: TAKE TWO TABLETS BY MOUTH AT BEDTIME
 (5)  Patient Status: OPT NSC
 (6)      Issue Date: 03/25/08              (7)  Fill Date: 03/25/08
      Last Fill Date: 03/25/08 (Mail)
+         Enter ?? for more actions
DC   Discontinue          PR   (Partial)            RL   Release
ED   (Edit)               RF   (Refill)             RN   Renew
Select Action: Next Screen// DC   Discontinue
Are you sure you want to Reinstate? NO// YES

Comments: TESTING
Nature of Order: SERVICE CORRECTION//        S
======================================================== 2614 METFORMIN 500MG TAB

Now Processing Enhanced Order Checks!  Please wait...


***Metformin Lab Results***

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


Prescription #2614 REINSTATED!
   Prescription #2614 Filled: MAR 25, 2008Printed: MAR 25, 2008Released:
     Either print the label using the reprint option
       or check later to see if the label has been printed.
```

The list of available possible dosages shown after order checks is linked to the drug ordered. One of the dosages listed may be chosen or a different, free text dosage may be entered. Confirmation of the dosage is required and the value entered is displayed again to allow the user to confirm that it is correct.

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

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

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

For numeric dosages, the Dispense Units Per Dose value is calculated based on the strength of the dosage ordered divided by the strength of the medication ordered. The 500 mg Dosage Ordered will require two 250 mg capsules. The Dosage Ordered is re-displayed after the Dispense Units to allow the entry to be double-checked.

```
DISPENSE UNITS PER DOSE(CAPSULES): 2// <Enter> 2
Dosage Ordered: 500MG
```

If a Route has not been associated with the Dispense Drug, the default Route of PO or Oral will be displayed. A different Route can be entered or it can be deleted at this point if needed. The Route is not required to complete a prescription. If the abbreviation entered is in the MEDICATION ROUTES file, the entry will be expanded in the Sig based on the OUTPATIENT EXPANSION field.

```
ROUTE: PO// <Enter>   ORAL      PO  MOUTH
```

or

```
ROUTE: PO// @ <Enter to delete>
```

A default schedule associated with the Orderable Item of the drug ordered is displayed at the “Schedule:” prompt. The default can be accepted or a different free text schedule can be entered. Free text entries cannot contain more than two spaces or be more than twenty characters long. Entries will be compared against a list of common abbreviations, first in the ADMINISTRATION SCHEDULE file and then in the MEDICATION INSTRUCTION file, and expanded if the entry matches. Any entry not found in the list of common abbreviations will be displayed in the Sig as entered.

```
Schedule: QID//  (FOUR TIMES A DAY)
```

----------example continues----------

The LIMITED DURATION field is used only when a medication should be taken for a limited period of time. Days are assumed for numeric entries. The user should follow the number with an “H” to specify hours or an “M” to specify minutes.

Do not use the LIMITED DURATION field for Days Supply.

Example: Entering a New Order (continued)

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

The CONJUCTION field is used to join dosing sequences in complex orders. Entries are limited to AND, THEN, or EXCEPT. AND is used for concurrent doses, such as “Take 1 tablet every morning AND take 2 tablets at bedtime.” THEN is used for consecutive doses, such as “Take 2 tablets daily for one week THEN take 1 tablet for five days.” EXCEPT is used to describe any dosing sequence that is not routine, such as “Take 1 tablet every day EXCEPT take no tablets Wednesday.” See Chapter 2 in the *User Manual - Supplemental* for examples.

```
CONJUNCTION: <Enter>
```

Any entry in the PATIENT INSTRUCTIONS field will first be checked to see if it contains any abbreviations that can be expanded. The entry will be added to the end of the Sig, after the dosing information, and the entire Sig will be displayed.

```
PATIENT INSTRUCTIONS: WF                WITH FOOD

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

OTHER PATIENT INSTRUCTIONS: WF          CON ALIMENTO
```

Two optional fields, OTHER LANGUAGE PREFERENCE and PMI LANGUAGE PREFERENCE in the PHARMACY PATIENT file, store if a patient has another language preference and if the patient’s PMI sheets should print in English or Spanish at the CMOP. The CMOP functionality was requested for future CMOP use. When printing locally from Outpatient Pharmacy this parameter is not used. These fields are accessed through the *Update Patient Record* option and the protocol Patient Record Update [PSO PATIENT RECORD UPDATE]. If the other language preference is indicated for a patient, the user will be prompted to enter OTHER PATIENT INSTRUCTIONS after selecting the PATIENT INSTRUCTIONS field to enter/edit. If a quick code is entered at the OTHER PATIENT INSTRUCTIONS prompt, the expansion entered at the OTHER PATIENT INSTRUCTIONS EXPANSIONS will print on the prescription label.

A default value for Days Supply based on patient status is displayed. A default quantity is calculated when possible. See Chapter 2 in the *User Manual - Supplemental* for more information on QUANTITY calculations.

```
DAYS SUPPLY:  (1-90): 30// 10
QTY ( CAP ) : 80// <Enter> 80
```

----------example continues----------

Example: Entering a New Order (continued)

```
COPIES: 1// <Enter> 1
# OF REFILLS:  (0-11): 11// 0
PROVIDER:    OPPROVIDER4,TWO
CLINIC:    OUTPT NURSE GREEN TEAM
MAIL/WINDOW: WINDOW// <Enter>  WINDOW
METHOD OF PICK-UP: <Enter>
REMARKS: <Enter>
ISSUE DATE: TODAY// <Enter>   (MAY 30, 2001)
FILL DATE:  (5/30/2001 - 6/9/2001): TODAY//  <Enter>  (MAY 30, 2001)
Nature of Order: WRITTEN//  <Enter> W
WAS THE PATIENT COUNSELED: NO// Y  YES
WAS COUNSELING UNDERSTOOD: NO// Y  YES
```

An option to add a progress note has been added. If "Yes" is entered at this prompt, the progress note entry will begin after the order information has been displayed and confirmed. The order is redisplayed, along with information on any service-connected disabilities on record.

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

Rx # 503906            05/30/01
OPPATIENT16,ONE                 #80
TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS WITH FOOD

AMPICILLIN 250MG CAP
OPPROVIDER1,TWO           OPPHARMACIST4,THREE
# of Refills: 11


         SC Percent: 40%
       Disabilities: NONE STATED

Was treatment for Service Connected condition?
```

To determine if the order should be charged copay, eligible copay exemptions for the order are displayed one at a time. The user is asked if it the first applies to the order. In this example, the user is first asked if the order is being prescribed for any of the service-connected conditions displayed. If yes had been entered at this prompt, the fill would have been set for No Copay and no other exemption questions would have been asked. In this example, the patient has reported exposure to herbicides during Vietnam-era service.

```
Was treatment related to Agent Orange exposure? NO

Is this correct? YES//  <Enter>

Another New Order for OPPATIENT16,ONE? YES//
```

----------example continues----------

Medications with non-numeric dosages, such as ointments and creams, will display non-numeric possible dosages as a default. Because the dosage is non-numeric, values for dispense units per dose and quantity cannot be calculated.

Example: Entering a New Order (continued)

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

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

Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 2 MODERATE AMOUNT

You entered MODERATE AMOUNT is this correct? Yes// <Enter> YES
ROUTE: TOPICAL// <Enter> TOPICAL
```

During prescription processing, if the label printer selected has an Automated Dispensing Device (ADD) defined, then Rx will be routed to the appropriate automated dispensing devices. A message will be displayed indicating the automated dispensing devices where the Rx will be routed. Below is an example of the routing message.

```
PRESCRIPTIONS SENT TO:
        OPTIFILL1
          100002815      ACETAMINOPHEN 325MG C.T.
          100002816      AMOXICILLIN 250MG CAP
          100002824      AMOXAPINE 50MG TAB

        SCRIPTPRO1
          100002844      CIMETIDINE 200MG TAB
```

Entering a New Order --ePharmacy (Third Party Billable)

For patients who have active third party insurance and have the appropriate eligibility requirements, the software will submit electronic claims to their insurance companies when prescriptions for billable drugs are ordered.

After a WINDOW order is entered and finished, the billing data is sent to the Electronic Claims Management Engine (ECME). ECME sends a message back to Outpatient Pharmacy displaying the status of the claim. For MAIL orders, the communication between Outpatient Pharmacy and ECME happens either during the Local Mail Label Print or during the CMOP transmission.

The following example shows the creation of a new WINDOW order starting with the "DRUG:" prompt.

Example: Entering a New Order for ePharmacy Billing

```
DRUG: PREDNISONE
  Lookup: GENERIC NAME
     1   PREDNISONE 1MG TAB           HS051
     2   PREDNISONE 20MG S.T.           HS051
     3   PREDNISONE 5MG TAB           HS051
CHOOSE 1-3: 3  PREDNISONE 5MG TAB         HS051
Now doing order checks.  Please wait...
```

```
Previously entered ICD-9 diagnosis codes: <Enter>

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

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

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

NOUN: TABLET
ROUTE: PO// <Enter>
     1   PO  ORAL (BY MOUTH)      PO
     2   PO  ORAL      PO
CHOOSE 1-2: 2  ORAL      PO  BY MOUTH
Schedule: TID (THREE TIMES A DAY)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10 (DAYS)
CONJUNCTION: <Enter>
PATIENT INSTRUCTIONS: WF
WITH FOOD
```

----------example continues----------

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

```
 (TAKE ONE TABLET BY BY MOUTH THREE TIMES A DAY FOR 10 DAYS WITH FOOD)
DAYS SUPPLY:  (1-90): 30// <Enter>
QTY ( TAB ) : 30// <Enter> 30
COPIES: 1// <Enter> 1
# OF REFILLS:  (0-5): 5// <Enter>
PROVIDER: OPPROVIDER4,TWO
CLINIC: <Enter>
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
REMARKS: <Enter>
ISSUE DATE: TODAY//  <Enter> (NOV 02, 2005)
FILL DATE:  (11/2/2005 - 11/3/2006): TODAY// <Enter>  (NOV 02, 2005)
Nature of Order: WRITTEN//   <Enter>     W
WAS THE PATIENT COUNSELED: NO// YES
WAS COUNSELING UNDERSTOOD: NO// YES

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

Rx # 100003840         11/02/05
OPPATIENT,FOUR                      #30
TAKE ONE TABLET BY BY MOUTH THREE TIMES A DAY FOR 10 DAYS WITH FOOD

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


Is this correct? YES// <Enter> YES
```

```
Prescription 100003840 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Gathering claim info
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE

Another New Order for OPPATIENT,FOUR? YES// NO
```

View of RX:

```
Medication Profile            Nov 02, 2005@07:33:29          Page:    1 of    1
OPPATIENT,FOUR
  PID: 000-01-1322P                                  Ht(cm): _______ (______)
  DOB: JAN 13,1922 (83)                              Wt(kg): _______ (______)
  SEX: MALE
                                                            ISSUE  LAST REF DAY
 #  RX #         DRUG                                  QTY ST  DATE  FILL REM SUP

-------------------------------------ACTIVE-------------------------------------
 1  100003840e   PREDNISONE 5MG TAB                     30 A> 11-02 11-02   5  30
```

Denotes ePharmacy Rx

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

If a new order is rejected due to a Drug Utilization Review (DUR) or Refill Too Soon, the prescription will be marked as “REJECTED”, and the user will have the opportunity to resolve before continuing.

The following example shows a sample ECME transmission rejection, and how to resolve the rejection error.

Example: Handling a Rejected New Order for ePharmacy Billing

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

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

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

----------example continues----------

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

```
     Select one of the following:

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

(O)verride,(I)gnore,(Q)uit: Q// O  OVERRIDE
```

When a claim is rejected, typically the Payer provides a “Reason for Service Code”, which displays on the reject as “Reason”. The user can use this reason to then select which code is entered for “Professional Service Code” and “Result of Service Code”. To see a list of service codes, enter **?** at the specified prompt.

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

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

     Confirm? ? YES// <Enter>

Prescription 99999999 successfully submitted to ECME for claim generation.

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

For Refill Too Soon rejects, the same choices apply.

Example: Handling a TRICARE Rejected New Order for ePharmacy Billing

Rejected TRICARE claims will be denoted with “TRICARE” during submission to ECME and within the subsequent reject notification screen. Also, the reject codes will be displayed in both places. The following example shows a prescription being submitted to ECME and this process occurs directly following the “Is this correct? YES//” prompt during finish. Where DUR or RTS are one of the reject codes, the user will be able to select from (D)iscontinue the prescription, submit (O)verride codes, or (Q)uit which sends the rejection to the Third Party Payer Rejects - Worklist. A TRICARE rejection may not be (I)gnored.

```
TRICARE Prescription 101110 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Processing response
E REJECTED
    79 - Refill Too Soon
    14 - M/I Eligibility Clarification Code


                *** REJECT RECEIVED FOR TRICARE PATIENT ***
   ---------------------------------------------------------------------------
   Division : ALBANY ISC                                NPI#: 5000000021
   Patient  : OPTRICARE,ONE(666-55-4789)  Sex: M        DOB: OCT 18,1963(44)
   Rx/Drug  : 101110/0 - NAPROXEN 250MG S.T.          ECME#: 000000112303
   Reject(s): REFILL TOO SOON (79), 14 - M/I Eligibility Clarification Code (14).
              Received on MAR 03, 2008@14:40:57.

   Insurance    : TRICARE                        Contact:
   Group Name   : TRICARE PRIME              Group Number: 123123
   Cardholder ID: SI9844532
   ---------------------------------------------------------------------------

     Select one of the following:

          O         (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
          D         (D)iscontinue - DO NOT FILL PRESCRIPTION
          Q         (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

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

Example: Handling a non-DUR/RTS or non-clinical TRICARE rejected New Order for ePharmacy Billing

For TRICARE prescription rejections that have non-DUR/RTS or non-clinical rejects, the user will be able to select from (D)iscontinue the prescription or (Q)uit which sends it to the Third Party Payer Rejects - Worklist. TRICARE prescriptions with these type rejects cannot be filled until the rejection is resolved. Example:

```
TRICARE Prescription 101113 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Building the HL7 packet
IN PROGRESS-Transmitting
E REJECTED
    07 - M/I Cardholder ID Number
    14 - M/I Eligibility Clarification Code


                 *** REJECT RECEIVED FOR TRICARE PATIENT ***
   ---------------------------------------------------------------------------
   Division : ALBANY ISC                                NPI#: 5000000021
   Patient  : OPTRICARE,ONE(666-55-4789)  Sex: M        DOB: OCT 18,1963(44)
   Rx/Drug  : 101113/0 - SIMETHICONE 40MG TAB         ECME#: 000000112306
   Reject(s): M/I Eligibility Clarification Code (14), M/I Cardholder ID
              Number (07).  Received on MAR 03, 2008@14:43:42.

   Insurance    : TRICARE                        Contact:
   Group Name   : TRICARE PRIME              Group Number: 123123
   Cardholder ID: SI9844532
   ---------------------------------------------------------------------------

     Select one of the following:

          D         (D)iscontinue - DO NOT FILL PRESCRIPTION
          Q         (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

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

For non-billable TRICARE prescriptions, an abbreviated version of the reject notification screen will be displayed. Because the prescription is non-billable, the insurance and ECME information that's currently provided for DUR/RTS rejects will not be displayed (i.e. insurance, group name, group #, ECME #, contact, cardholder ID). In this case, the prescription must be discontinued.

```
Is this correct? YES// ...



                        *** TRICARE - NON-BILLABLE ***
   ---------------------------------------------------------------------------
   Division : ALBANY ISC                                   NPI#:
   Patient  : OPTRICARE,ONE(666-55-4789)  Sex: M        DOB: OCT 18,1963(44)
   Rx/Drug  : 102058/0 - ABSORBABLE GELATIN S
   Date/Time: AUG 27, 2008@16:49:46
   Reason   : Drug not billable.
   ---------------------------------------------------------------------------

This is a non-billable TRICARE prescription.  It cannot be filled or sent
to the reject worklist.  It must be discontinued.

Press <RETURN> to continue...
Nature of Order: SERVICE CORRECTION//        S

Requesting PROVIDER: OPHARM  OPPHARM,ONE       OO
```

Labels will not print for discontinued TRICARE prescriptions, and reprint label will not be allowed for TRICARE rejected prescriptions.

```
Select Rx (Prescriptions) Option: REPrint an Outpatient Rx Label



Reprint Prescription Label: 101113       SIMETHICONE 40MG TAB
Number of Copies? :  (1-99): 1//
Print adhesive portion of label only? ? No//   NO
Do you want to resend to Dispensing System Device? No//   NO
Comments: REPRINT

Rx # 101113            03/03/08
OPTRICARE,ONE                 #180

ONE MOUTH TWICE A DAY

SIMETHICONE 40MG TAB
OPPHARM,ONE                OPPHARM,ONE
# of Refills: 3

Select LABEL DEVICE: NULL  Bit Bucket



No Label(s) printed.


Reprint Prescription Label:
```

Suspended TRICARE prescriptions will remain on suspense when a reject occurs, when the prescription is non-billable, or when the third party claim remains in an 'IN PROGRESS' status in ECME. Labels will not print. Once the reject is resolved, the user may pull the prescription early from suspense or wait for the next scheduled Print from Suspense option runs at which time labels will print accordingly. This includes CMOP and local suspense.

```
TRICARE Prescription 101607 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response


                  *** TRICARE - 'IN PROGRESS' ECME status ***
   ----------------------------------------------------------------------
   Division : ALBANY ISC                                NPI#: 5000000021
   Patient  : OPTRICARE,ONE(666-55-4789)  Sex: M        DOB: OCT 18,1963(44)
   Rx/Drug  : 101607/0 - ACETAZOLAMIDE 250MG
   Date/Time: APR 20, 2008@20:11:17
   Reason   : ECME Status is in an 'IN PROGRESS' state and cannot be filled
   ----------------------------------------------------------------------

This prescription will be suspended.  After the third party claim is resolved,
it may be printed or pulled early from suspense.


Press <RETURN> to continue...
```

A rejected TRICARE prescription may not have a partial fill ordered until the reject is resolved.

```
OP Medications (SUSPENDED)    Apr 18, 2008@19:10:16          Page:    1 of    2
OPTRICARE,ONE
  PID: 666-55-4789                                  Ht(cm): _______ (______)
  DOB: OCT 18,1963 (44)                             Wt(kg): _______ (______)

                Rx #: 101526e
 (1) *Orderable Item: ACETAZOLAMIDE PILL
 (2)            Drug: ACETAZOLAMIDE 500MG SEQUELS
                Verb: TAKE
 (3)         *Dosage: 1 PILL
              *Route: ORAL
           *Schedule: BID
 (4)Pat Instructions:
                 SIG: TAKE 1 PILL BY MOUTH TWICE A DAY
 (5)  Patient Status: OTHER FEDERAL
 (6)      Issue Date: 04/18/08               (7)  Fill Date: 04/19/08
      Last Fill Date: 04/19/08 (Window)
   Last Release Date:                         (8)      Lot #:
             Expires: 04/19/09                            MFG:
+
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   (Refill)             RN   Renew
Select Action: Next Screen// p   Partial


OP Medications (SUSPENDED)    Apr 18, 2008@19:10:16          Page:    1 of    2
OPTRICARE,ONE
  PID: 666-55-4789                                  Ht(cm): _______ (______)
  DOB: OCT 18,1963 (44)                             Wt(kg): _______ (______)

                Rx #: 101526e
 (1) *Orderable Item: ACETAZOLAMIDE PILL
 (2)            Drug: ACETAZOLAMIDE 500MG SEQUELS
                Verb: TAKE
 (3)         *Dosage: 1 PILL
              *Route: ORAL
           *Schedule: BID
 (4)Pat Instructions:
                 SIG: TAKE 1 PILL BY MOUTH TWICE A DAY
 (5)  Patient Status: OTHER FEDERAL
 (6)      Issue Date: 04/18/08               (7)  Fill Date: 04/19/08
      Last Fill Date: 04/19/08 (Window)
   Last Release Date:                         (8)      Lot #:
             Expires: 04/19/09                            MFG:
+         Partial cannot be filled on TRICARE non-payable Rx
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   (Refill)             RN   Renew
Select Action: Next Screen//
```

If ECME's status on the claim remains in an "In Progress" state past the processing timeout during finish of the prescription, TRICARE prescriptions will not be allowed to be filled. Instead it will be placed on suspense until the rejection is resolved. Below is an example of this screen:

```
TRICARE Prescription 101607 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response


                 *** TRICARE - 'IN PROGRESS' ECME status ***
   ---------------------------------------------------------------------
   Division : ALBANY ISC                                NPI#: 5000000021
   Patient  : OPTRICARE,ONE(666-55-4789)  Sex: M        DOB: OCT 18,1963(44)
   Rx/Drug  : 101607/0 - ACETAZOLAMIDE 250MG
   Date/Time: APR 20, 2008@20:11:17
   Reason   : ECME Status is in an 'IN PROGRESS' state and cannot be filled
   ---------------------------------------------------------------------

This prescription will be suspended.  After the third party claim is resolved,
it may be printed or pulled early from suspense.


Press <RETURN> to continue...
```

If a pharmacy is active for ePharmacy processing but an insurance plan is not linked or not active, TRICARE prescription will be allowed to be filled without third party claim submission. The phrase "Inactive ECME TRICARE" will be displayed during Finish and an ECME log entry will be added stating such.

Example of message during finish:

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

Rx # 102046            08/27/08
OPTRICARE,TEST                     #180
ONE MOUTH TWICE A DAY

DANTROLENE 25MG CAP
OPPROVIDER,ONE             OPPHAR,ONE
# of Refills: 3


Is this correct? YES// ...
 -Rx 101921 has been discontinued...




Inactive ECME TRICARE
```

Example of ECME Activity Log entry:

```
ECME Log:
#   Date/Time           Rx Ref          Initiator Of Activity
================================================================================
1   8/27/08@11:07:45    ORIGINAL        OPPHARM,ONE
Comments: TRICARE-Inactive ECME TRICARE
```

Example: Handling a CHAMPVA Rejected New Order for ePharmacy Billing

Rejected CHAMPVA claims will be denoted with “CHAMPVA” during submission to ECME and within the subsequent reject notification screen. Also, the reject codes will be displayed in both places. The following example shows a prescription being submitted to ECME and this process occurs directly following the “Is this correct? YES//” prompt during finish. Where DUR or RTS are one of the reject codes, the user will be able to select from (D)iscontinue the prescription, submit (O)verride codes, or (Q)uit which sends the rejection to the Third Party Payer Rejects - Worklist. A CHAMPVA rejection may not be (I)gnored.

```
CHAMPVA Prescription 101110 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Processing response
E REJECTED
    79 - Refill Too Soon
    14 - M/I Eligibility Clarification Code


                *** REJECT RECEIVED FOR CHAMPVA PATIENT ***
   ---------------------------------------------------------------------------
   Division : ALBANY ISC                                NPI#: 5000000021
   Patient  : OPCHAMPVA,ONE(666-55-4789)  Sex: M        DOB: OCT 18,1963(44)
   Rx/Drug  : 101110/0 - NAPROXEN 250MG S.T.          ECME#: 000000112303
   Reject(s): REFILL TOO SOON (79), 14 - M/I Eligibility Clarification Code (14).
              Received on MAR 03, 2008@14:40:57.

   Insurance    : CHAMPVA                        Contact:
   Group Name   : CHAMPVA PRIME              Group Number: 123123
   Cardholder ID: SI9844532
   ---------------------------------------------------------------------------

     Select one of the following:

          O         (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
          D         (D)iscontinue - DO NOT FILL PRESCRIPTION
          Q         (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

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

Example: Handling a non-DUR/RTS or non-clinical CHAMPVA **rejected New Order for ePharmacy Billing**

For CHAMPVA prescription rejections that have non-DUR/RTS or non-clinical rejects, the user will be able to select from (D)iscontinue the prescription or (Q)uit which sends it to the Third Party Payer Rejects - Worklist. CHAMPVA prescriptions with these type rejects cannot be filled until the rejection is resolved. Example:

```
CHAMPVA Prescription 101113 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Building the HL7 packet
IN PROGRESS-Transmitting
E REJECTED
    07 - M/I Cardholder ID Number
    14 - M/I Eligibility Clarification Code


                *** REJECT RECEIVED FOR CHAMPVA PATIENT ***
   ---------------------------------------------------------------------------
   Division : ALBANY ISC                                NPI#: 5000000021
   Patient  : OPCHAMPVA,ONE(666-55-4789)  Sex: M        DOB: OCT 18,1963(44)
   Rx/Drug  : 101113/0 - SIMETHICONE 40MG TAB         ECME#: 000000112306
   Reject(s): M/I Eligibility Clarification Code (14), M/I Cardholder ID
              Number (07).  Received on MAR 03, 2008@14:43:42.

   Insurance    : CHAMPVA                        Contact:
   Group Name   : CHAMPVA PRIME              Group Number: 123123
   Cardholder ID: SI9844532
   ---------------------------------------------------------------------------

     Select one of the following:

          D         (D)iscontinue - DO NOT FILL PRESCRIPTION
          Q         (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

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

For non-billable CHAMPVA prescriptions, an abbreviated version of the reject notification screen will be displayed. Because the prescription is non-billable, the insurance and ECME information that's currently provided for DUR/RTS rejects will not be displayed (i.e. insurance, group name, group #, ECME #, contact, cardholder ID). In this case, the prescription must be discontinued.

```
Is this correct? YES// ...



                        *** CHAMPVA - NON-BILLABLE ***
   ---------------------------------------------------------------------------
   Division : ALBANY ISC                                  NPI#:
   Patient  : OPCHAMPVA,ONE(666-55-4789)  Sex: M        DOB: OCT 18,1963(44)
   Rx/Drug  : 102058/0 - ABSORBABLE GELATIN S
   Date/Time: AUG 27, 2008@16:49:46
   Reason   : Drug not billable.
   ---------------------------------------------------------------------------

This is a non-billable CHAMPVA prescription.  It cannot be filled or sent
to the reject worklist.  It must be discontinued.

Press <RETURN> to continue...
Nature of Order: SERVICE CORRECTION//        S

Requesting PROVIDER: OPHARM  OPPHARM,ONE       OO
```

Labels will not print for discontinued CHAMPVA prescriptions, and reprint label will not be allowed for CHAMPVA rejected prescriptions.

```
Select Rx (Prescriptions) Option: REPrint an Outpatient Rx Label



Reprint Prescription Label: 101113       SIMETHICONE 40MG TAB
Number of Copies? :  (1-99): 1//
Print adhesive portion of label only? ? No//   NO
Do you want to resend to Dispensing System Device? No//   NO
Comments: REPRINT

Rx # 101113            03/03/08
OPCHAMPVA,ONE                 #180

ONE MOUTH TWICE A DAY

SIMETHICONE 40MG TAB
OPPHARM,ONE                OPPHARM,ONE
# of Refills: 3

Select LABEL DEVICE: NULL  Bit Bucket



No Label(s) printed.


Reprint Prescription Label:
```

Suspended CHAMPVA prescriptions will remain on suspense when a reject occurs, when the prescription is non-billable, or when the third party claim remains in an 'IN PROGRESS' status in ECME. Labels will not print. Once the reject is resolved, the user may pull the prescription early from suspense or wait for the next scheduled Print from Suspense option runs at which time labels will print accordingly. This includes CMOP and local suspense.

```
CHAMPVA Prescription 101607 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response


                  *** CHAMPVA - 'IN PROGRESS' ECME status ***
   ----------------------------------------------------------------------
   Division : ALBANY ISC                                NPI#: 5000000021
   Patient  : OPCHAMPVA,ONE(666-55-4789)  Sex: M        DOB: OCT 18,1963(44)
   Rx/Drug  : 101607/0 - ACETAZOLAMIDE 250MG
   Date/Time: APR 20, 2008@20:11:17
   Reason   : ECME Status is in an 'IN PROGRESS' state and cannot be filled
   ----------------------------------------------------------------------

This prescription will be suspended.  After the third party claim is resolved,
it may be printed or pulled early from suspense.


Press <RETURN> to continue...
```

A rejected CHAMPVA prescription may not have a partial fill ordered until the reject is resolved.

```
OP Medications (SUSPENDED)    Apr 18, 2008@19:10:16          Page:    1 of    2
OPCHAMPVA,ONE
  PID: 666-55-4789                                   Ht(cm): _______ (______)
  DOB: OCT 18,1963 (44)                              Wt(kg): _______ (______)

                Rx #: 101526e
 (1) *Orderable Item: ACETAZOLAMIDE PILL
 (2)            Drug: ACETAZOLAMIDE 500MG SEQUELS
                Verb: TAKE
 (3)         *Dosage: 1 PILL
              *Route: ORAL
           *Schedule: BID
 (4)Pat Instructions:
                 SIG: TAKE 1 PILL BY MOUTH TWICE A DAY
 (5)  Patient Status: OTHER FEDERAL
 (6)      Issue Date: 04/18/08               (7)  Fill Date: 04/19/08
      Last Fill Date: 04/19/08 (Window)
   Last Release Date:                         (8)      Lot #:
             Expires: 04/19/09                            MFG:
+
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   (Refill)             RN   Renew
Select Action: Next Screen// p   Partial


OP Medications (SUSPENDED)    Apr 18, 2008@19:10:16          Page:    1 of    2
OPCHAMPVA,ONE
  PID: 666-55-4789                                   Ht(cm): _______ (______)
  DOB: OCT 18,1963 (44)                              Wt(kg): _______ (______)

                Rx #: 101526e
 (1) *Orderable Item: ACETAZOLAMIDE PILL
 (2)            Drug: ACETAZOLAMIDE 500MG SEQUELS
                Verb: TAKE
 (3)         *Dosage: 1 PILL
              *Route: ORAL
           *Schedule: BID
 (4)Pat Instructions:
                 SIG: TAKE 1 PILL BY MOUTH TWICE A DAY
 (5)  Patient Status: OTHER FEDERAL
 (6)      Issue Date: 04/18/08               (7)  Fill Date: 04/19/08
      Last Fill Date: 04/19/08 (Window)
   Last Release Date:                         (8)      Lot #:
             Expires: 04/19/09                            MFG:
+         Partial cannot be filled on CHAMPVA non-payable Rx
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   (Refill)             RN   Renew
Select Action: Next Screen//
```

If ECME's status on the claim remains in an "In Progress" state past the processing timeout during finish of the prescription, a CHAMPVA prescription will not be allowed to be filled. Instead it will be placed on suspense until the rejection is resolved. Below is an example of this screen:

```
CHAMPVA Prescription 101607 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response


                  *** CHAMPVA - 'IN PROGRESS' ECME status ***
   ----------------------------------------------------------------------
   Division : ALBANY ISC                                NPI#: 5000000021
   Patient  : OPCHAMPVA,ONE(666-55-4789)  Sex: M        DOB: OCT 18,1963(44)
   Rx/Drug  : 101607/0 - ACETAZOLAMIDE 250MG
   Date/Time: APR 20, 2008@20:11:17
   Reason   : ECME Status is in an 'IN PROGRESS' state and cannot be filled
   ----------------------------------------------------------------------

This prescription will be suspended.  After the third party claim is resolved,
it may be printed or pulled early from suspense.


Press <RETURN> to continue...
```

If a pharmacy is active for ePharmacy processing but an insurance plan is not linked or not active, the CHAMPVA prescription will be allowed to be filled without third party claim submission. The phrase "Inactive ECME CHAMPVA" will be displayed during Finish and an ECME log entry will be added stating such.

Example of message during finish:

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

Rx # 102046            08/27/08
OPCHAMPVA,TEST                     #180
ONE MOUTH TWICE A DAY

DANTROLENE 25MG CAP
OPPROVIDER,ONE             OPPHAR,ONE
# of Refills: 3


Is this correct? YES// ...
 -Rx 101921 has been discontinued...




Inactive ECME CHAMPVA
```

Example of ECME Activity Log entry:

```
ECME Log:
#   Date/Time           Rx Ref          Initiator Of Activity
==============================================================================
1   8/27/08@11:07:45    ORIGINAL        OPPHARM,ONE
Comments: CHAMPVA -Inactive ECME CHAMPVA
```

Displaying a Patient's Remote Prescriptions

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

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

If the user responds **NO**, then the normal procedure occurs for entering prescriptions. If the user responds **YES**, the "Remote Facilities Visited" screen appears such as the following example.

```
Remote Facilities Visited     Dec 30, 2008@17:26:47          Page: 1 of 1

Patient: PSOPATIENT,ONE            (000-00-0000)      DOB: 01/02/1967

  Station
  HDR CHEYENNE



          Enter ?? for more actions
DR  Display Remote Pharmacy Data        DB  Display Both Pharmacy Data
Action:Quit//DR
```

To display the prescriptions at the remote pharmacy location, enter DR at the “Action” prompt. The “Medication Profile – Remote” screen appears such as the following example. .

```
Medication Profile - Remote   Dec 30, 2008@17:29:43       Page: 1 of 2

Patient: PSOPATIENT,ONE             (000-00-0000)      DOB: 01/02/1967

  RX#         DRUG                              ST QTY ISSUED  LAST FILLED
HDR CHEYENNE
712885        AMOXICILLIN TRIHYDRATE 250MG CAP   A  90 11/06/08  11/06/08
              SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
              PROVIDER: MCKAY,ELMER
712886        DILTIAZEM (INWOOD) 240MG CAP,SA    A  30 11/28/08  11/28/08
              SIG: TAKE ONE CAPSULE BY MOUTH EVERY DAY
              PROVIDER: MCKAY,ELMER
712888        LABETALOL HCL 200MG TAB            A  60 12/30/08  12/30/08
              SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
              PROVIDER: MCKAY,ELMER
712887        SIMVASTATIN 20MG TAB               A  15 12/09/08  12/09/08
              SIG: TAKE ONE-HALF TABLET BY MOUTH EVERY EVENING TESTING
                   FOR PATTESTING FOR PATIENT TESTING FOR PATTESTING
                   FOR PATIENTENT INTRUCTION ON SIG1 TESTING FOR
                   PATIENT INTRUCTION ON SIG1 TESTING FOR PATIENT
                   REPLACE IENT WITH IENT TESTING FOR PATIENT
+         Enter ?? for more actions

Select Action:Next Screen//
```

Editing a New Order

An asterisk or star (*) is shown in front of each field that will create a new order if it is changed. The Sig field cannot be edited directly, but it will change if the fields used to construct the Sig are edited.

When editing fields preceded by an asterisk (*) in an ePharmacy order (or electronically third party billable prescription), upon acceptance of the edited order the original prescription will be discontinued and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription. For more information, see the example Editing an ePharmacy Order.

> Do not use the up-arrow (^) after editing one field to jump past the rest of the fields. Using just the up-arrow results in the changes just entered being deleted. The user must press **<Enter>** through *all* the order fields when editing to save the changes.

Example: Editing a New Order

```
OP Medications (ACTIVE)       May 30, 2001 16:48:05          Page:    1 of    3
OPPATIENT16,ONE                                                        <A>
  PID: 000-24-6802                                  Ht(cm): 177.80 (02/08/1999)
  DOB: APR 3,1941 (60)                              Wt(kg): 90.45 (02/08/1999)

                Rx #: 503908
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
 (3)         *Dosage: 500 (MG)
                Verb: TAKE
      Dispense Units: 2
                Noun: CAPSULES
              *Route: ORAL
           *Schedule: QID
           *Duration: 10D (DAYS)
 (4)Pat Instructions: with food
                 SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
                      WITH FOOD
 (5)  Patient Status: SERVICE CONNECTED
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   (Refill)             RN   Renew
Select Action: Next Screen// ED   Edit
Select fields by number:  (1-19): 4
PATIENT INSTRUCTIONS: WITH FOOD// WITH FOOD AVOIDING DAIRY FOODS
```

----------example continues----------

If a new order is created due to the editing of a field that affects copay, like Duration, the values previously entered display as defaults.

Edits to fields that are not starred (*), like Patient Instructions, will not create a new order. Note that the new Patient Instruction text now appears at the end of the Sig.

Example: Editing a New Order (continued)

```
OP Medications (ACTIVE)       May 30, 2001 16:54:25          Page:    1 of    3
OPPATIENT16,ONE                                                          <A>
  PID: 000-24-6802                                  Ht(cm): 177.80 (02/08/1999)
  DOB: APR 3,1941 (60)                              Wt(kg): 90.45 (02/08/1999)

                Rx #: 503908
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
 (3)         *Dosage: 500 (MG)
                Verb: TAKE
      Dispense Units: 2
                Noun: CAPSULES
              *Route: ORAL
           *Schedule: QID
           *Duration: 10D (DAYS)
 (4)Pat Instructions: WITH FOOD AVOIDING DAIRY FOODS
                 SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
                      WITH FOOD AVOIDING DAIRY FOODS
 (5)  Patient Status: SERVICE CONNECTED
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   (Refill)             RN   Renew
Select Action: Next Screen//
```

When a starred field, like Dosage, is changed, a new order is created. The dispense units per dose and quantity are recalculated, if possible, and the new order includes a remark noting the original prescription number.

```
Select from list of Available Dosages, Enter Free Text Dose
or Enter a Question Mark (?) to view list: 500// 750MG 750MG

You entered 750MG is this correct? Yes// <Enter> YES
VERB: TAKE//  <Enter> TAKE
DISPENSE UNITS PER DOSE (CAPSULE(S)): 3//  <Enter> 3
Dosage Ordered: 750MG
NOUN: CAPSULE(S)// <Enter> CAPSULE(S)
ROUTE: ORAL//  <Enter> ORAL
Schedule: QID//  <Enter>  (FOUR TIMES A DAY)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10D//  <Enter> 10D (DAYS)
CONJUNCTION: <Enter>
```

----------example continues----------

Example: Editing a New Order (continued)

(Order screens are merged to display all fields)

```
New OP Order (ROUTINE)        May 30, 2001 17:11:44          Page:    1 of    2
OPPATIENT16,ONE                                                          <A>
  PID: 000-24-6802                                  Ht(cm): 177.80 (02/08/1999)
  DOB: APR 3,1941 (60)                              Wt(kg): 90.45 (02/08/1999)

      Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
  (1)           Drug: AMPICILLIN 250MG CAP ***(N/F)***
  (2) Patient Status: SERVICE CONNECTED
  (3)     Issue Date: MAY 30,2001             (4) Fill Date: MAY 30,2001
  (5) Dosage Ordered: 750 (MG)
                 Verb: TAKE
      Dispense Units: 3
                 Noun: CAPSULE(S)
                Route: ORAL
             Schedule: QID
            *Duration: 10D (DAYS)
  (6)Pat Instruction: WITH FOOD AVOIDING DAIRY FOODS
                  SIG: TAKE THREE CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10
                       DAYS WITH FOOD AVOIDING DAIRY FOODS
:
  (7)    Days Supply: 10                      (8)   QTY (CAP): 120
  (9)   # of Refills: 0                       (10)  Routing: WINDOW
 (11)         Clinic: OUTPT NURSE GREEN TEAM
 (12)       Provider: OPPROVIDER4,TWO         (13)   Copies: 1
 (14)        Remarks: New Order Created by editing Rx # 503908.
   Entry By: OPPROVIDER4,TWO                  Entry Date: MAY 30,2001 17:11:44

          This change will create a new prescription!
AC   Accept                              ED   Edit
Select Action: Edit// AC
```

If the DAYS SUPPLY field is edited, the QTY field is recalculated. If the QTY field is edited, the DAYS SUPPLY field value does not change, but a message is displayed warning the user of the change and recommending that the value be checked.

```
New OP Order (ROUTINE)        May 31, 2001 12:57:06          Page:    2 of    2
OPPATIENT16,ONE                                                          <A>
  PID: 000-24-6802                                  Ht(cm): 177.80 (02/08/1999)
  DOB: APR 3,1941 (60)                              Wt(kg): 90.45 (02/08/1999)
+
  (7)    Days Supply: 30                      (8)   QTY (CAP): 120
  (9)   # of Refills: 0                       (10)  Routing: WINDOW
 (11)         Clinic: OUTPT NURSE GREEN TEAM
 (12)       Provider: OPPROVIDER4,TWO         (13)   Copies: 1
 (14)        Remarks: New Order Created by editing Rx # 503910.
   Entry By: OPPROVIDER4,TWO                  Entry Date: MAY 31,2001 12:57:06


          Enter ?? for more actions
AC   Accept                              ED   Edit
Select Action: Edit// <Enter>  Edit
Select Field to Edit by number:  (1-14): 7
DAYS SUPPLY:  (1-90): 10// 7
```

----------example continues----------

Once changes are entered the screen redisplays with the changes and the order can be accepted or edited again.

If the order is accepted, the prescription is checked for drug/drug interactions and, if none exist, prompts follow for nature of order and whether the patient was counseled.

Example: Editing a New Order (continued)

```
Now doing drug interaction and allergy checks.  Please wait...

Nature of Order: WRITTEN// ??

                                Require        Print     Print on
  Nature of Order Activity   E.Signature   Chart Copy   Summary
  ------------------------   -----------   ----------   --------
  WRITTEN                                                   x
  VERBAL                          x            x           x
  TELEPHONED                      x            x           x
  SERVICE CORRECTION
  POLICY                                       x           x
  DUPLICATE
  SERVICE REJECT                  x            x

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

Editing an ePharmacy Order

When editing fields preceded by an asterisk (*) in an ePharmacy order (or electronically third party billable prescription), upon acceptance of the edited order the original prescription will be discontinued and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription.

If the original claim was E Payable, and edits are made to any of these fields – Provider, Qty, Days Supply, Division, Fill Date, NDC, or DAW Code – then the original payable claim is reversed and a new claim is submitted to ECME. If the original claim was rejected, then a reversal is not necessary, and a new claim is submitted to ECME.

```
Medication Profile            Nov 03, 2005@12:33:29          Page:    1 of    1
OPPATIENT,FOUR                                                        <A>
  PID: 000-01-1322P                                  Ht(cm): _______ (______)
  DOB: JAN 13,1922 (83)                              Wt(kg): _______ (______)
  SEX: MALE
                                                             ISSUE  LAST REF DAY
 #  RX #         DRUG                                  QTY ST  DATE  FILL REM SUP

-------------------------------------ACTIVE-----------------------------------
 1  100003840e   PREDNISONE 5MG TAB                     30 A> 11-02 11-02   5  30




          Enter ?? for more actions
PU  Patient Record Update               NO  New Order
PI  Patient Information                 SO  Select Order
Select Action: Quit// 1
```

Press **<Enter>** twice to scroll to page 3 of the Medication Profile. Notice that a new field displays on the profile: DAW Code. DAW stands for "Dispense as Written" and refers to a set of ten NCPDP codes (0-9) that tells third party payers why a brand or generic product was selected to fill a prescription. When a new prescription is entered for a specific drug, the DAW code from the drug is stored in the PRESCRIPTION file (#52) for each fill. This field is solely being used for electronic billing purposes. It communicates to the third party payer that a drug has a special characteristic, which may prevent the payer from rejecting the claim. The available codes include:

Code	Description
0	NO PRODUCT SELECTION INDICATED
1	SUBSTITUTION NOT ALLOWED BY PRESCRIBER
2	SUBSTITUTION ALLOWED-PATIENT REQUESTED PRODUCT DISPENSED
3	SUBSTITUTION ALLOWED-PHARMACIST SELECTED PRODUCT DISPENSED
4	SUBSTITUTION ALLOWED-GENERIC DRUG NOT IN STOCK
5	SUBSTITUTION ALLOWED-BRAND DRUG DISPENSED AS A GENERIC
6	OVERRIDE
7	SUBSTITUTION NOT ALLOWED-BRAND DRUG MANDATED BY LAW
8	SUBSTITUTION ALLOWED-GENERIC DRUG NOT AVAILABLE IN MARKETPLACE
9	OTHER

The DAW Code default is 0 – No Product Selection Indicated, unless the DAW Code has been set for this drug at the DRUG file level.

Enter **21** to edit the field.

Example: Editing an ePharmacy Order (continued)

```
OP Medications (ACTIVE)       Nov 03, 2005@12:51:52          Page:    3 of    3
OPPATIENT,FOUR                                                          <A>
  PID: 000-01-1322P                                Ht(cm): _______ (______)
  DOB: JAN 13,1922 (83)                            Wt(kg): _______ (______)

(19)      Counseling: YES                      Was Counseling Understood: YES
(20)     Refill Data
(21)        DAW Code: 0 - NO PRODUCT SELECTION INDICATED
   Entry By: OPPHARMACIST4,THREE                   Entry Date: 11/03/05 12:50:51









+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// 21
```

```
Select fields by number:  (1-21): 21

DAW CODE: 0// ??

Answer with BPS NCPDP DAW CODE
   Choose from:
   0        NO PRODUCT SELECTION INDICATED
   1        SUBSTITUTION NOT ALLOWED BY PRESCRIBER
   2        SUBSTITUTION ALLOWED-PATIENT REQUESTED PRODUCT DISPENSED
   3        SUBSTITUTION ALLOWED-PHARMACIST SELECTED PRODUCT DISPENSED
   4        SUBSTITUTION ALLOWED-GENERIC DRUG NOT IN STOCK
   5        SUBSTITUTION ALLOWED-BRAND DRUG DISPENSED AS A GENERIC
   6        OVERRIDE
   7        SUBSTITUTION NOT ALLOWED-BRAND DRUG MANDATED BY LAW
   8        SUBSTITUTION ALLOWED-GENERIC DRUG NOT AVAILABLE IN MARKETPLACE
   9        OTHER


Dispensed As Written code. This information is used for electronic claim transmi
ssion to third party payers (insurance companies).


DAW CODE: 0// 5 - SUBSTITUTION ALLOWED-BRAND DRUG DISPENSED AS A GENERIC
Are You Sure You Want to Update Rx 100003853? Yes// <Enter>
```

The field is updated and displayed in the Medication Profile.

```
OP Medications (ACTIVE)       Nov 03, 2005@12:51:52          Page:    1 of    3
OPPATIENT,FOUR                                                          <A>
  PID: 000-01-1322P                                Ht(cm): _______ (______)
  DOB: JAN 13,1922 (83)                            Wt(kg): _______ (______)

(19)      Counseling: YES                      Was Counseling Understood: YES
(20)     Refill Data
(21)        DAW Code: 0 - NO PRODUCT SELECTION INDICATED
   Entry By: OPPHARMACIST4,THREE                   Entry Date: 11/03/05 12:50:51









+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Quit//
```

```
New OP Order (ROUTINE)        Nov 04, 2005@08:36:29          Page:    2 of    2
OPPATIENT,FOUR                                                          <A>
  PID: 000-01-1322P                                Ht(cm): _______ (______)
  DOB: JAN 13,1922 (83)                            Wt(kg): _______ (______)
+
  (7)    Days Supply: 30                     (8)   QTY (TAB): 30
  (9)   # of Refills: 5                      (10)  Routing: WINDOW
 (11)         Clinic:
 (12)       Provider: OPPROVIDER4,TWO                 (13)   Copies: 1
 (14)        Remarks: New Order Created by editing Rx # 100003840.
   Entry By: OPPHARMACIST4,THREE                 Entry Date: NOV 4,2005 08:36:06









          This change will create a new prescription!
AC   Accept                              ED   Edit
Select Action: Edit// AC   Accept
Nature of Order: SERVICE CORRECTION//   <Enter>     S
WAS THE PATIENT COUNSELED: NO// YES
WAS COUNSELING UNDERSTOOD: NO// YES

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

----------example continues----------

```
Rx # 100003852         11/04/05
OPPATIENT,FOUR                      #30
TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30 DAYS WITH FOOD
AVOIDING DAIRY FOODS

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


Is this correct? YES// <Enter> YES...
Claim has status E REJECTED.  Not reversed.

Prescription 100003852 successfully submitted to ECME for claim generation.

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

This status refers to the original prescription.

This status refers to the newly created prescription.

Using the Copy Action

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

```
The following actions are also available:

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

Copy is a hidden action used to create a new order exactly like the original order. Any field of the new order can be edited. This action does not affect the status of the original order but the duplicate order checks will occur.

Example: Using the Copy Action

```
Medication Profile            Jun 04, 2001 15:49:09          Page:    1 of    1
OPPATIENT6,ONE                                                          <A>
  PID: 000-13-5790                                  Ht(cm): 175.26 (08/10/1999)
  DOB: FEB 8,1922 (79)                              Wt(kg): 75.45 (08/10/1999)

                                                                ISSUE  LAST REF DAY
 #  RX #         DRUG                                   QTY ST  DATE  FILL REM SUP

-------------------------------------ACTIVE-------------------------------------
 1 503911$       AMPICILLIN 250MG CAP                    80 A  05-25 06-01   0  10
 2 503901        LISINOPRIL 10MG TAB                    150 A> 05-17 05-17   2  30



          Enter ?? for more actions
PU  Patient Record Update                NO  New Order
PI  Patient Information                  SO  Select Order
Select Action: Quit// SO   Select Order  [Or enter the order number here, e.g. 1]
Select Orders by number:  (1-2): 1
```

Actions in parentheses, like Refill in the example below, are not available for the order.

```
OP Medications (ACTIVE)       Jun 04, 2001 15:50:49          Page:    1 of    3
OPPATIENT6,ONE                                                          <A>
  PID: 000-13-5790                                  Ht(cm): 175.26 (08/10/1999)
  DOB: FEB 8,1922 (79)                              Wt(kg): 75.45 (08/10/1999)

                Rx #: 503911$
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
 (3)         *Dosage: 500 (MG)
                Verb: TAKE
      Dispense Units: 2
                Noun: CAPSULES
               *Route: ORAL
           *Schedule: QID
 (4)Pat Instructions: Prov Comments
   Provider Comments: Prov Comments
                 SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV COMMENTS
 (5)  Patient Status: OUTPT NON-SC
 (6)      Issue Date: 05/25/01              (7)  Fill Date: 06/01/01
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   (Refill)             RN   Renew
Select Action: Next Screen//CO   CO
```

----------example continues----------

After “CO” is entered, the heading on the screen changes to “New OP Order (COPY)” and the available actions are limited to “Accept” or “Edit”.

Example: Using the Copy Action (continued)

```
New OP Order (COPY)           Jun 04, 2001 15:51:32          Page:    1 of    2
OPPATIENT6,ONE                                                          <A>
  PID: 000-13-5790                                  Ht(cm): 175.26 (08/10/1999)
  DOB: FEB 8,1922 (79)                              Wt(kg): 75.45 (08/10/1999)

      Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
  (1)           Drug: AMPICILLIN 250MG CAP ***(N/F)***
  (2) Patient Status: OUTPT NON-SC
  (3)     Issue Date: JUN 4,2001            (4) Fill Date: JUN 4,2001
  (5) Dosage Ordered: 500 (MG)
                Verb: TAKE
      Dispense Units: 2
                Noun: CAPSULES
               Route: ORAL
            Schedule: QID
  (6)Pat Instruction: Prov Comments
                 SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV
                      COMMENTS
  (7)    Days Supply: 10                    (8)   QTY (CAP): 80
+         Enter ?? for more actions
AC   Accept                              ED   Edit
Select Action: Next Screen// AC   Accept
```

Once the copied order is accepted, the previous order information displays.

```
Duplicate Drug in Local Rx:

                  Rx #: 503911
                  Drug: AMPICILLIN 250MG CAP
                   SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV
COMMENTS
                   QTY: 80              Refills remaining: 0
              Provider: OPPROVIDER4,TWO            Issued: 05/25/01
                Status: Active             Last filled on: 06/01/01
     Processing Status: Released locally on 06/01/01@11:34:13  (Window)
                                                 Days Supply: 10
Discontinue Rx # 503911? YES

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

Now doing order checks.  Please wait...
Nature of Order: WRITTEN// <Enter>        W
WAS THE PATIENT COUNSELED: NO// <Enter>  NO

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

----------example continues----------

The new order information is displayed and, once verified, the old order is discontinued.

Example: Using the Copy Action (continued)

```
Rx # 503913            06/04/01
OPPATIENT6,ONE                #80
TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV COMMENTS

AMPICILLIN 250MG CAP
OPPROVIDER4,TWO           OPPHARMACIST4,THREE
# of Refills: 0

Is this correct? YES//<Enter>   ...
 -Rx 503911 has been discontinued...


       SC Percent: 10%
     Disabilities:
PROSTATE GLAND CONDITION                        10% - SERVICE CONNECTED
INGUINAL HERNIA                                  0% - SERVICE CONNECTED

Was treatment for Service Connected condition: N
```

The Medication Profile screen is redisplayed at this point. The dollar sign after the first prescription number means that a copay charge is associated with that order. The default printer is displayed and the user can queue the label to print, change the default printer, or hold, suspend, or bypass printing.

```
Medication Profile            Jun 04, 2001 16:03:55          Page:    1 of    1
OPPATIENT6,ONE                                                        <A>
  PID: 000-13-5790                                  Ht(cm): 175.26 (08/10/1999)
  DOB: FEB 8,1922 (79)                              Wt(kg): 75.45 (08/10/1999)

                                                                ISSUE  LAST REF DAY
 #  RX #         DRUG                                  QTY ST  DATE  FILL REM SUP

--------------------------------ACTIVE-----------------------------------
 1 503913$       AMPICILLIN 250MG CAP                   80 A  06-04 06-04   0  10
 2 503901        LISINOPRIL 10MG TAB                   150 A> 05-17 05-17   2  30




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

Label Printer: TELNET
LABEL: QUEUE/CHANGE PRINTER/HOLD/SUSPEND or '^' to bypass Q//<Enter>

LABEL(S) QUEUED TO PRINT


Select PATIENT NAME: <Enter>
```

Copying an ePharmacy Order

When copying an ePharmacy order, upon acceptance of the copied order the original prescription will be discontinued and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription.

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

Eligibility: NSC, VA PENSION

Disabilities:

123 ANY STREET                                    HOME PHONE:
BIRMINGHAM                                        CELL PHONE:
ALABAMA                                           WORK PHONE:
Prescription Mail Delivery: Regular Mail


Allergies:

Adverse Reactions:

          Enter ?? for more actions
EA  Enter/Edit Allergy/ADR Data         PU  Patient Record Update
DD  Detailed Allergy/ADR List           EX  Exit Patient List
Select Action: Quit// <Enter>   QUIT
```

```
Medication Profile            Nov 04, 2005@09:23:47         Page:    1 of    1
OPPATIENT,FOUR                                                        <A>
  PID: 000-01-1322P                                Ht(cm): _______ (______)
  DOB: JAN 13,1922 (83)                            Wt(kg): _______ (______)
  SEX: MALE
                                                          ISSUE  LAST REF DAY
 #  RX #         DRUG                                  QTY ST  DATE  FILL REM SUP

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





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

```
Medication Profile            Nov 04, 2005@09:24:04          Page:    1 of    1
OPPATIENT,FOUR                                                        <A>
  PID: 000-01-1322P                                  Ht(cm): _______ (______)
  DOB: JAN 13,1922 (83)                              Wt(kg): _______ (______)
  SEX: MALE                                                                  .
                                                                 ISSUE  LAST REF DAY
 #  RX #         DRUG                                     QTY ST  DATE  FILL REM SUP

-------------------------------------ACTIVE-------------------------------------
 OP Medications (ACTIVE)       Nov 04, 2005@09:24:17          Page:    1 of    3
OPPATIENT,FOUR                                                        <A>
  PID: 000-01-1322P                                  Ht(cm): _______ (______)
  DOB: JAN 13,1922 (83)                              Wt(kg): _______ (______)

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

          Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// CO   CO
```

Once “Copy” is entered, the heading on the screen changes to “New OP Order (COPY)” and the available actions are limited to “Edit” or “Accept.”

```
New OP Order (COPY)           Nov 04, 2005@09:24:17          Page:    1 of    2
OPPATIENT,FOUR                                                        <A>
  PID: 000-01-1322P                                  Ht(cm): _______ (______)
  DOB: JAN 13,1922 (83)                              Wt(kg): _______ (______)

      Orderable Item: PREDNISONE TAB
  (1)       CMOP Drug: PREDNISONE 5MG TAB
  (2) Patient Status: OPT NSC
  (3)      Issue Date: NOV 4,2005            (4) Fill Date: NOV 4,2005
  (5) Dosage Ordered: 20 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: TABLET
               Route: ORAL
            Schedule: QID
           *Duration: 30 (DAYS)
  (6)Pat Instruction: WITH FOOD AVOIDING DAIRY FOODS
                 SIG: TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30
                      DAYS WITH FOOD AVOIDING DAIRY FOODS
+         Enter ?? for more actions
AC   Accept                             ED   Edit
Select Action: Next Screen// AC   Accept
```

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

                  Rx #: 100003852
                 Drug: PREDNISONE 5MG TAB
                  SIG: TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30
                       DAYS WITH FOOD AVOIDING DAIRY FOODS
                  QTY: 30                    Refills remaining: 5
              Provider: OPPROVIDER4,TWO                 Issued: 11/04/05
                Status: Active                 Last filled on: 11/04/05
     Processing Status: Released locally on 11/04/05@11:34:13  (Mail)
                                                   Days Supply: 30
-------------------------------------------------------------------------------

Discontinue Rx # 100003852? YES

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

Now doing order checks.  Please wait...

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

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

Rx # 100003853         11/04/05
OPPATIENT,FOUR                      #30
TAKE ONE TABLET BY BY MOUTH FOUR TIMES A DAY FOR 30 DAYS WITH FOOD
AVOIDING DAIRY FOODS

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


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

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

 -Rx 100003852 has been discontinued...

Prescription 100003853 successfully submitted to ECME for claim generation.

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

View of RX:

```
Medication Profile            Nov 04, 2005@09:25:14          Page:    1 of    1
OPPATIENT,FOUR
  PID: 000-01-1322P                                  Ht(cm): _______ (______)
  DOB: JAN 13,1922 (83)                              Wt(kg): _______ (______)
  SEX: MALE
                                                                 ISSUE  LAST REF DAY
 #  RX #         DRUG                                     QTY ST  DATE  FILL REM SUP

-------------------------------------ACTIVE-------------------------------------
 1 100003853e    PREDNISONE 5MG TAB                        30 A> 11-04 11-04   5  30 ‡‡‡
```

Holding and Unholding a Prescription

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

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

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

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

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

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

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

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

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

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

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

Example: HOLD with PSORPH Security Key or PSO TECH ADV Security Key

```
OP Medications (SUSPENDED)    May 11, 2012@10:12:56          Page:    1 of    3
PAGPATNM,M                                                          <A>
  PID: 666-00-0286                                  Ht(cm): _______ (______)
  DOB: DEC 1,1900                                   Wt(kg): _______ (______)

                Rx #: 100002926
 (1) *Orderable Item: FLUOXETINE CAP,ORAL
 (2)       CMOP Drug: EFFEXOR
 (3)         *Dosage: 10 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: CAPSULE
              *Route: ORAL
           *Schedule: QAM
 (4)Pat Instructions:
                 SIG: TAKE ONE CAPSULE MOUTH EVERY MORNING
 (5)  Patient Status: OPT NSC
 (6)      Issue Date: 02/14/12               (7)  Fill Date: 05/09/12
      Last Fill Date: 05/29/12 (Mail)
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   (Refill)             RN   Renew
Select Action: Next Screen// HD   HD
Nature of Order: WRITTEN//        W
```

If the user has the PSORPH security key, the following HOLD reasons are available:

```
HOLD REASON: ?

Enter reason medication is placed in a 'Hold' status.
Choose from:
1        INSUFFICIENT QTY IN STOCK
2        DRUG-DRUG INTERACTION
4        PROVIDER TO BE CONTACTED
6        ADVERSE DRUG REACTION
7        BAD ADDRESS
8        PER PATIENT REQUEST
9        CONSULT/PRIOR APPROVAL NEEDED
98       OTHER/TECH (NON-CLINICAL)
99       OTHER/RPH (CLINICAL)
```

If the user has the PSO TECH ADV security key, the following HOLD reasons are available:

```
HOLD REASON: ?

Enter reason medication is placed in a 'Hold' status.
Choose from:
1        INSUFFICIENT QTY IN STOCK
7        BAD ADDRESS
8        PER PATIENT REQUEST
98       OTHER/TECH (NON-CLINICAL)
```

The same conditions apply for Unholding a prescription. Users with the PSORPH security key can unhold for the following reason:

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

Users with only the PSO TECH ADV security key can unhold for the following reasons:

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

Note: If a user does not have a PSORPH security key and tries to unhold a prescription, the message "**The HOLD can only be removed by a pharmacist"** is displayed.

Each time a user holds or unholds a prescription, an entry is created in the Activity Log. These entries include HOLD COMMENTS and the HOLD REASON when a prescription is placed on HOLD and UNHOLD COMMENTS when the prescription is removed from HOLD. Again, HOLD reasons 98 and 99 require the user to enter a HOLD comment.

Example: Activity Log with HOLD/UNHOLD Comments

```
Activity Log:
      #   Date        Reason         Rx Ref         Initiator Of Activity
      ...
      8   05/10/12    HOLD           REFILL 1       USER,PHARMACY
      Comments: Rx placed on HOLD (Reason: BAD ADDRESS) and removed from
                SUSPENSE - HOLD COMMENTS ENTERED BY THE USER MANUALLY.
      ...
      9   05/10/12    UNHOLD         REFILL 1       USER,PHARMACY
      Comments: Rx Removed from HOLD - UNHOLD COMMENTS ENTERED BY THE USER
                 WHEN REMOVING THE RX FROM HOLD.
```

(This page included for two-sided copying.)

Renewing a Prescription

This action allows the pharmacy manager, pharmacist, or pharmacy technician to process renewals for existing orders.

Example: Renewing a Prescription

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

```
OP Medications (ACTIVE)       Jun 04, 2001 16:14:40          Page:    1 of    3
OPPATIENT29,ONE                                                          <A>
  PID: 000-87-6543                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)

                 Rx #: 503910
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
 (3)         *Dosage: 500 (MG)
                Verb: TAKE
      Dispense Units: 2
                Noun: CAPSULES
              *Route: ORAL
           *Schedule: QID
           *Duration: 10D (DAYS)
 (4)Pat Instructions: with food
                 SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
                      WITH FOOD
 (5)  Patient Status: SERVICE CONNECTED
          Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   (Edit)               RF   (Refill)             RN   Renew
Select Action: Quit// RN   Renew
FILL DATE:  (6/4/2001 - 7/4/2001): TODAY// <Enter>  (JUN 04, 2001)
MAIL/WINDOW: WINDOW// <Enter>  WINDOW
METHOD OF PICK-UP:   <Enter>
Nature of Order: WRITTEN// <Enter>  W
WAS THE PATIENT COUNSELED: NO// <Enter>  NO

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

Now Renewing Rx # 503910   Drug: AMPICILLIN 250MG CAP

Now doing order checks.  Please wait...


503910A      AMPICILLIN 250MG CAP              QTY: 80
# OF REFILLS: 0  ISSUED: 06-04-01
SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS WITH FOOD
FILLED: 06-20-01
ROUTING: WINDOW     PHYS: OPPROVIDER4,TWO

Edit renewed Rx ? Y//
```

If the order is not edited, the order is renewed and the display returns to the Medication Profile screen.

Example: Renewing a Prescription (continued)

(*To save space, only the second Prescription Renew screen is displayed in this example.)*

```
Prescription Renew            Jun 04, 2006 16:18:17          Page:    2 of    2
OPPATIENT29,ONE                                                          <A>
  PID: 000-87-6543                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)
+
                  SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
                       WITH FOOD
         Days Supply: 30
                  QTY (CAP): 80
  (3)   # of Refills: 0
  (4)        Routing: WINDOW
  (5)         Clinic: OUTPT NURSE GREEN TEAM
  (6)       Provider: OPPROVIDER4,TWO
  (7)         Copies: 1
  (8)        Remarks: RENEWED FROM RX # 503910
   Entry By: OPPROVIDER4,TWO                    Entry Date: JUN 4,2006 16:16:27

          Enter ?? for more actions
AC   Accept                              DC   Discontinue
BY   Bypass                              ED   Edit
Select Item(s): Quit// ED   Edit   [Or enter the field(s), e.g., 1,5,7]

Select Field to Edit by number:  (1-8): 5
CLINIC: OUTPT NURSE GREEN TEAM //OUT
     1   OUTPT NURSE BLUE TEAM
     2   OUTPT NURSE GREEN TEAM
     3   OUTPT NURSE YELLOW TEAM
CHOOSE 1-3: 1  OUTPT NURSE BLUE TEAM
```

```
Prescription Renew            Jun 04, 2006 16:24:32          Page:    2 of    2
OPPATIENT29,ONE                                                          <A>
  PID: 000-87-6543                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)
+
                  SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
                       WITH FOOD
         Days Supply: 30
                  QTY (CAP): 80
  (3)   # of Refills: 0
  (4)        Routing: WINDOW
  (5)         Clinic: OUTPT NURSE BLUE TEAM
  (6)       Provider: OPPROVIDER4,TWO
  (7)         Copies: 1
  (8)        Remarks: RENEWED FROM RX # 503910
   Entry By: OPPROVIDER4,TWO                    Entry Date: JUN 4,2006 16:23:56

          Enter ?? for more actions
AC   Accept                              DC   Discontinue
BY   Bypass                              ED   Edit
Select Item(s): Quit// AC  Accept

RX# 503910A has been suspended until 06-20-01.
```

The user may renew more than one order on the same patient by typing the desired order numbers separated by a comma (for example:. 1,3,5).

Original provider comments are not carried over to any renewals in Outpatient Pharmacy.

Renewing an ePharmacy Order

When renewing an ePharmacy order, upon acceptance of the renewed order the original prescription will be discontinued and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription.

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

```
OP Medications (ACTIVE)       Nov 04, 2005@11:48:14          Page:    1 of    3
OPPATIENT,FOUR
  PID: 000-01-1322P                                   Ht(cm): _______ (______)
  DOB: NOV 12,1075 (29)                              Wt(kg): _______ (______)

              Rx #: 100003642$e
 (1) *Orderable Item: SIMETHICONE TAB,CHEWABLE
 (2)            Drug: SIMETHICONE 40MG TAB
 (3)         *Dosage: 40 (MG)
                Verb: CHEW
      Dispense Units: 1
                Noun: TABLET
              *Route: ORAL
           *Schedule: TID
 (4)Pat Instructions:
                 SIG: CHEW ONE TABLET BY BY MOUTH THREE TIMES A DAY
 (5)  Patient Status: OPT NSC
 (6)      Issue Date: 08/11/05               (7)  Fill Date: 08/11/05
      Last Fill Date: 08/11/05 (Window)
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen//  RN   Renew
FILL DATE:  (11/4/2005 - 11/5/2006): TODAY// <Enter>  (NOV 04, 2005)
MAIL/WINDOW: WINDOW// <Enter>WINDOW
METHOD OF PICK-UP: <Enter>
Nature of Order: WRITTEN//    <Enter>    W
WAS THE PATIENT COUNSELED: NO//<Enter> NO

Now Renewing Rx # 100003642   Drug: SIMETHICONE 40MG TAB

Now doing order checks.  Please wait...


100003642A   SIMETHICONE 40MG TAB              QTY: 90
# OF REFILLS: 5  ISSUED: 11-04-05
SIG: CHEW ONE TABLET BY BY MOUTH THREE TIMES A DAY
FILLED: 11-04-05
ROUTING: WINDOW     PHYS: OPPROVIDER4,TWO

Edit renewed Rx ? Y// <Enter> ES
```

----------example continues----------

Example: Renewing an ePharmacy Order (continued)

(To save space, only the second Prescription Renew screen is displayed in this example.)

```
Prescription Renew            Jun 04, 2001 16:18:17          Page:    2 of    2
OPPATIENT,FOUR
  PID: 000-01-1322P                                  Ht(cm): _______ (______)
  DOB: NOV 12,1075 (29)                             Wt(kg): _______ (______)
+
         Days Supply: 30
                 QTY (  ): 90
  (3)   # of Refills: 5
  (4)        Routing: WINDOW
  (5)         Clinic:
  (6)       Provider: OPPROVIDER4,TWO
  (7)         Copies: 1
  (8)        Remarks: RENEWED FROM RX # 100003642
   Entry By: OPPHARMACIST4,THREE                    Entry Date: NOV 4,2005
11:56:31

          Enter ?? for more actions
AC   Accept                              DC   Discontinue
BY   Bypass                              ED   Edit
Select Item(s): Quit// 5

CLINIC: 3EN
```

```
Prescription Renew            Jun 04, 2001 16:24:32          Page:    2 of    2
OPPATIENT,FOUR
  PID: 000-01-1322P                                  Ht(cm): _______ (______)
  DOB: NOV 12,1075 (29)                             Wt(kg): _______ (______)
+
         Days Supply: 30
                 QTY (  ): 90
  (3)   # of Refills: 5
  (4)        Routing: WINDOW
  (5)         Clinic:
  (6)       Provider: OPPROVIDER4,TWO
  (7)         Copies: 1
  (8)        Remarks: RENEWED FROM RX # 100003642
   Entry By: OPPHARMACIST4,THREE                 Entry Date: NOV 4,2005 11:56:31

          Enter ?? for more actions
AC   Accept                              DC   Discontinue
BY   Bypass                              ED   Edit
Select Item(s): Quit// AC  Accept
       SC Percent: 40%
     Disabilities: NONE STATED

Was treatment for Service Connected condition? NO// <Enter>
```

```
Reversing prescription 100003642.

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

 -Rx 100003642 has been discontinued...
```

Original provider comments are not carried over to any renewals in Outpatient Pharmacy.

Flagging and Unflagging Pending Orders

Flagging a pending order allows you to prevent an order from processing and attach a note known as a flag to the pending order. Flag/Unflag functionality is only available for Pending new orders and Pending renewals; only holders of the PSORPH security key can flag or unflag an order.

The following provides examples of how to flag and unflag a pending order from a medication profile within *Patient Prescription Processing*.

If a pending order is flagged, the row number is highlighted on the Medication Profile screen (shown in the following example). Select the order to view the flag or to flag the new pending order.

Example: A Flagged Pending Order

```
Medication Profile            Mar 13, 2008@16:31:24          Page:    1 of    1
OPPATIENT16,ONE                                   <NO ALLERGY ASSESSMENT>
  PID: 000-24-6802                                  Ht(cm): 177.80 (02/08/2007)
  DOB: APR 3,1941 (66)                              Wt(kg): 90.45 (02/08/2007)
  SEX: MALE                                                                   .
                                                                 ISSUE  LAST REF DAY
 #  RX #         DRUG                                     QTY ST  DATE  FILL REM SUP

------------------------------------ACTIVE------------------------------------
 1 100002518     PENICILLAMINE 250MG TAB                   31 A  02-29 02-29  5  31
------------------------------------PENDING-----------------------------------
 2 ACETAMINOPHEN 500MG TAB                QTY: 60          ISDT: 03-13  REF:  3
          Enter ?? for more actions
PU  Patient Record Update               NO  New Order
PI  Patient Information                 SO  Select Order
Select Action: Quit// SO Select Order
Select Orders by number:  (1-2): 2
```

From the Pending OP Orders screen, you can flag and unflag an order, as well as view the flagged reason. To flag the order, enter **FL** and then enter a “REASON FOR FLAG”, alert the proper individual that the flag has been added by pressing <**Enter**> to select the default name or entering a different user name and pressing <**Enter**>, and the flagging process is complete.

Example: Flagging an Order

```
REASON FOR FLAG: DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE
DISPENSING.
Send alert to: PSOUSER,ONE//        BIRMINGHAM     ALABAMA     OP
PHARMACIST
          ... order flagged.
```

When an order is flagged, “FL-” is placed in front of “Pending OP Orders” in the upper left corner, and the flagged reason is listed below the patient identifying information.

Example: A Flagged New Pending Order

```
FL-Pending OP Orders (ROUTINE)March 13, 2008 16:31:33          Page:    1 of   2
OPPATIENT16,ONE                                      <NO ALLERGY ASSESSMENT>
  PID: 000-24-6802                                    Ht(cm): 177.80 (02/08/2007)
  DOB: APR 3,1941 (66)                                Wt(kg): 90.45 (02/08/2007)

Flagged by OPPHARM,TWO on 03/13/08@23:14:  DOUBLE CHECK WITH PATIENT FOR HEART
CONDITION BEFORE DISPENSING.

*(1) Orderable Item: ACETAMINOPHEN TAB            * Editing starred fields will
 (2)      CMOP Drug: ACETAMINOPHEN 500MG TAB        create a new order
       Drug Message: NATL FORM
 (3)        *Dosage: 500 (MG)
               Verb: TAKE
     Dispense Units: 1
             *Route: ORAL
          *Schedule: BID
 (4)   Pat Instruct:
  Provider Comments: ProvComments
                SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
 (5) Patient Status: SERVICE CONNECTED
 (6)     Issue Date: MAR 13,2008       (7) Fill Date: MAR 13,2008
 (8)    Days Supply: 30                (9)   QTY (TAB): 60
+         Enter ?? for more actions
BY  Bypass                DC  Discontinue         FL  Flag/Unflag
ED  Edit                  FN  Finish
Select Item(s): Next Screen// FL Flag/Unflag
```

Example: A Flagged Renewel

```
FL-Prescription Renew         Jun 12, 2012@14:00:51          Page:    1 of    2
PAGPATNM,M                                                          <A>
  PID: 666-00-0286                                    Ht(cm): _______ (______)
  DOB: DEC 1,1900                                     Wt(kg): _______ (______)

Flagged by PHARMACY,USER on 6/12/12@14:00: test

                 Rx#: 100001943A
      Orderable Item: ACETAMINOPHEN TAB
           CMOP Drug: THIORIDAZINE 30MG/ML CONC.
      Patient Status: OPT NSC
  (1)     Issue Date: JUN 12,2012
  (2)      Fill Date: JUN 12,2012
              Dosage: 20 (MG)
                Verb: TAKE
      Dispense Units: 2
                Noun: TABLETS
               Route: ORAL (BY MOUTH)
            Schedule: BID-PRN
+         Enter ?? for more actions
AC   Accept               DC   Discontinue          FL   Flag/Unflag
BY   Bypass               ED   Edit
Select Item(s): Next Screen//
```

To unflag an order, enter **FL** at the “Select Item(s)” prompt, and then enter your “COMMENTS”. When you press <**Enter**>, the order is no longer flagged.

Example: Unflagging an Order

```
FLAGGED: 03/13 23:14 by OPPHARM,TWO
          DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE DISPENSING.
COMMENTS: CHECKED WITH PATIENT. NO HEART CONDITION.
          ... order unflagged.
```

At that point, the flag from the Medication Profile is removed, but the flagged/unflagged reason remains on the Pending OP Orders screen unless you reflag the order.

Note: If a user does not have the PSORPH security key, they cannot unflag an order and will receive the following message when selecting the Accept (AC) action:

```
+         Enter ?? for more actions
AC   Accept               DC   (Discontinue)        FL   (Flag/Unflag)
BY   Bypass               ED   (Edit)
Select Item(s): Next Screen// AC   Accept

Order must be unflagged by a pharmacist before it can be finished.

Enter RETURN to continue:
```

Example: An Unflagged Order

```
Pending OP Orders (ROUTINE)   March 14, 2008 09:16:33          Page:    1 of   2
OPPATIENT16,ONE                                   <NO ALLERGY ASSESSMENT>
  PID: 000-24-6802                                 Ht(cm): 177.80 (02/08/2007)
  DOB: APR 3,1941 (66)                             Wt(kg): 90.45 (02/08/2007)

Flagged by OPPHARM,TWO on 03/13/08@23:14:  DOUBLE CHECK WITH PATIENT FOR HEART
CONDITION BEFORE DISPENSING.
Unflagged by OPPHARM,TWO on 03/14/08@09:26:  CHECKED WITH PATIENT. NO HEART
CONDITION.

*(1) Orderable Item: ACETAMINOPHEN TAB            * Editing starred fields will
 (2)      CMOP Drug: ACETAMINOPHEN 500MG TAB        create a new order
       Drug Message: NATL FORM
 (3)        *Dosage: 500 (MG)
               Verb: TAKE
     Dispense Units: 1
             *Route: ORAL
          *Schedule: BID
 (4)   Pat Instruct:
  Provider Comments: ProvComments
                SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
 (5) Patient Status: SERVICE CONNECTED
 (6)     Issue Date: MAR 13,2008       (7) Fill Date: MAR 13,2008
 (8)    Days Supply: 30                (9)   QTY (TAB): 60
+         Enter ?? for more actions
BY  Bypass                DC  Discontinue          FL  Flag/Unflag
ED  Edit                  FN  Finish
Select Item(s): Next Screen//
```

Example: An Unflagged Renewel

```
Prescription Renew            Jun 12, 2012@14:02:18          Page:    1 of    2
PAGPATNM,M                                                          <A>
  PID: 666-00-0286                                  Ht(cm): _______ (______)
  DOB: DEC 1,1900                                   Wt(kg): _______ (______)

Flagged by PHARMACY,USER on 6/12/12@14:00: test
Unflagged by PHARMACY,USER on 6/12/12@14:02: testing unflag

                 Rx#: 100001943A
      Orderable Item: ACETAMINOPHEN TAB
           CMOP Drug: THIORIDAZINE 30MG/ML CONC.
      Patient Status: OPT NSC
  (1)     Issue Date: JUN 12,2012
  (2)      Fill Date: JUN 12,2012
              Dosage: 20 (MG)
                Verb: TAKE
      Dispense Units: 2

                Noun: TABLETS
               Route: ORAL (BY MOUTH)
+         Enter ?? for more actions
AC   Accept               DC   Discontinue          FL   Flag/Unflag
BY   Bypass               ED   Edit
Select Item(s): Next Screen// Prescription Renew            Jun 12, 2012@14:02:1
8          Page:    1 of    2
```

After pending orders have been unflagged, they can be processed.

If you attempt to process a flagged order and are a user with a PSORPH security key, you are prompted “Unflag Order? NO//”. If you respond **YES**, enter comments to unflag the order and continue with processing. If you respond **NO**, you cannot process the order because it is still flagged. Users with only the PSO TECH ADV security key cannot unflag an order and will receive the following message when selecting the Accept (AC) action:

```
+         Enter ?? for more actions
AC   Accept               DC   (Discontinue)        FL   (Flag/Unflag)
BY   Bypass               ED   (Edit)
Select Item(s): Next Screen// AC   Accept

Order must be unflagged by a pharmacist before it can be finished.

Enter RETURN to continue:
```

(This page included for two-sided copying.)

Barcode Rx Menu
[PSO BARCODE MENU]

Use this menu to batch barcode refills and renewals of prescriptions, and check the quality of the barcode print. The menu contains the following options:

- *Barcode Batch Prescription Entry*
- *Check Quality of Barcode*
- *Process Internet Refills*

Barcode Batch Prescription Entry
[PSO BATCH BARCODE]

Enter refills or renewals by batch entry using barcodes with this option. Select either refills or renews. Then fill in information for the prescriptions to be batch barcode, i.e., fill date, route, etc. Next, use a barcode wand to enter the barcodes for the prescriptions to be refilled or renewed.

Check Quality of Barcode
[PSO BARCODE CHECK]

No action is taken on the prescription by using this option. Use this option to check the quality of the printed barcodes or use it to practice using the barcode reader. After the barcode is scanned the barcode number will echo back on the screen and the screen will return to the "Read Barcode" prompt. No action is taken on the prescription by using this option.

The following are some common causes for failure of the barcode reader and how they can be corrected.

1. Barcode too faint (change printer ribbon)
2. Improper scanning (move the wand at a steady rate)
3. Defective barcode reader (replace the reader)

Process Internet Refills
[PSO INTERNET REFILLS]

This option allows the pharmacist to process prescription orders entered on the Internet through My HealtheVet. The system will prompt the user for the information as shown in the following example. The user enters the appropriate response for each prompt by pressing **Enter** on the keyboard to accept the default setting for a prompt. The user must type the appropriate word or letter to enter a response contrary to the default.

The recommended usage of this option is three times a day to ensure the requested refills are processed in a timely manner.

Example: Process Internet Refills Screen

```
FILL DATE:  (1/28/2005 - 12/31/2699): TODAY// <Enter> (AUG 11, 2005)
MAIL/WINDOW: MAIL// <Enter> MAIL
Will these refills be Queued or Suspended? Q// S <Enter> USPENDED
Allow refills for inpatient ? N// <Enter> O
Allow refills for CNH ? N//<Enter> O
Allow early refills? N// <Enter> O

Process internet refill requests at this time? YES// <Enter> YES
Process internet refills for all divisions?  NO// <Enter> O
```

Users can process refills for their division or all divisions within a site. However, sites can set parameters in the PHARMACY SYSTEM file for the INTERDIVISIONAL PROCESSING and DIVISION PROMPT ASKED fields that control responses to user input on the Internet Refills Screen. Note that site control parameters override any entries made by the user in the Process Internet Refills screen.

If the INTERDIVISIONAL PROCESSING parameter is set to **No**, regardless of the user's input at the "Process internet refills for all divisions?" prompt, only the refills for the user's division will be filled.

If the INTERDIVISIONAL PROCESSING parameter is set to **Yes** and the DIVISION PROMPT ASKED parameter is set to **No**, then the refill orders are processed for all divisions without any additional user input.

If the INTERDIVISIONAL PROCESSING parameter is set to **Yes** and the DIVISION PROMPT ASKED parameter is set to **Yes**, refills for the user's division will be processed without any additional input. If unprocessed refills outside the user's division exist, the "Continue?" prompt displays, allowing the user to confirm each refill, as shown in the example below.

Example: Process Internet Refills for all Divisions?

```
Process internet refills for all divisions?  NO// Y YES

Now refilling Rx# 100002310       Drug: CAPTROPRIL  100MG TABS

Qty: 60             Sig: TAKE ONE TABLET BY MOUTH TWICE A DAY

      Rx # 100002310 is for (ALBANY) division.
Continue? N// Y YES
```

This refill is outside the user's division.

If the user enters **Yes** at the "Continue?" prompt, the refill will be processed.

If the user enters **No** at the "Continue?" prompt, the refill will not process at this time, and the refill request will remain in the PRESCRIPTION REFILL REQUEST file. These refill requests may be processed later by a user in the same division, or any division, depending on the PHARMACY SYSTEM file parameters.

Refills processed successfully are flagged as FILLED in the RESULTS field of the PRESCRIPTION REFILL REQUEST file.
Refills not processed due to conditions such as: Rx Expired, Discontinued, On Hold, Deleted, are flagged as NOT FILLED in the RESULTS field of PRESCRIPTION REFILL REQUEST file.

Complete Orders from OERR

[PSO LMOE FINISH]

When a clinician has created an order for a patient, the pharmacist then completes and verifies the order. The *Complete Orders from OERR* option is used to complete orders entered into the patient record through Order Entry Results Reporting (OERR) V. 3.0. This option uses the List Manager features.

Orders may be selected by patient, route, priority, clinic, or flag. “E” can be entered at the “Select By:” prompt to stop processing orders.

If a temporary address has no end date, the following text is now displayed: “(Temp address from XXX 99,9999 till (no end date))”.

For ePharmacy orders, after an order is finished, the billing data is sent to the Electronic Claims Management Engine (ECME). ECME sends a message back to Outpatient Pharmacy displaying the status of the claim. For an example, see “Finishing an ePharmacy Order” in this section.

Example: Finishing an Order from OERR

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)

          Orders to be completed for all divisions: 16

Do you want an Order Summary? No//   <Enter> NO

          Patient Prescription Processing
          Barcode Rx Menu ...
          Complete Orders from OERR
          Discontinue Prescription(s)
          Edit Prescriptions
          ePharmacy Menu...
          List One Patient's Archived Rx's
          Manual Print of Multi-Rx Forms
          Reprint an Outpatient Rx Label
          Signature Log Reprint
          View Prescriptions

Select Rx (Prescriptions) Option: Complete Orders from OERR

There are multiple Institutions associated with this Outpatient Site for
finishing orders entered through CPRS. Select the Institution for which to
finish orders from.  Enter '?' to see all choices.

Select CPRS ORDERING INSTITUTION: ALBANY// <Enter>    NY  VAMC  500

You have selected ALBANY.
After completing these orders, you may re-enter this option and select again.

Select By:  (PA/RT/PR/CL/FL/E): PATIENT// <Enter>
All Patients or Single Patient:  (A/S/E): SINGLE// <Enter>
Select Patient: OPPATIENT16,ONE  OPPATIENT16,ONE        4-3-41    000246802
  YES     SC VETERAN

Do you want to see Medication Profile? Yes//
```

----------example continues----------

The user may enter a question mark at the “Select Patient” prompt to view a list of patients with pending orders. A single patient may be selected for processing, or pending orders for all patients may be processed in sequence by the time of each order’s entry into the system.

Flagged orders will not be processed. They are not a part of any pending orders. To process flagged orders, you should enter **FL** at the “Select By” prompt. This ensures you will view all patients with flagged pending orders, allowing you to address their flagged orders; however, if you know which patients have flagged orders, you can access the flagged orders through the Medication Profile.

If the user answers **YES** to “Do you want to see Medication Profile?” and the patient has remote prescription(s), the following prompt appears.

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

If the user answers **YES** to “Display Remote Data?” then the “Remote Facilities Visited” screen appears, allowing the user to see what facilities the patient has prescriptions at and what those prescriptions are.

After the user answers the medication profile prompt, a warning displays if no allergy assessment has been made. The patient’s eligibility and RX patient status also displays.

Example: Finishing an Order from OERR (continued)

```
  OPPATIENT16,ONE        4-3-41    0004246802
  YES     SC VETERAN

Press Return to continue: <Enter>
Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED// <Enter>
```

(*The Patient Information and Medication Profile screens display next, but are not shown in this example.)*

```
Pending OP Orders (ROUTINE)   March 13, 2008 16:31:33         Page:    1 of    2
OPPATIENT16,ONE
  PID: 000-24-6802                                  Ht(cm): 177.80 (02/08/2007)
  DOB: APR 3,1941 (66)                              Wt(kg): 90.45 (02/08/2007)

*(1) Orderable Item: ACETAMINOPHEN TAB            * Editing starred fields will
 (2)      CMOP Drug: ACETAMINOPHEN 500MG TAB        create a new order
       Drug Message: NATL FORM
 (3)        *Dosage: 500 (MG)
               Verb: TAKE
     Dispense Units: 1
             *Route: ORAL
          *Schedule: BID
 (4)   Pat Instruct:
  Provider Comments: ProvComments
                SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
 (5) Patient Status: SERVICE CONNECTED
 (6)     Issue Date: MAR 13,2008        (7) Fill Date: MAR 13,2008
 (8)    Days Supply: 30                (9)   QTY (TAB): 60
+         Enter ?? for more actions
BY  Bypass                DC  Discontinue          FL  Flag/Unflag
ED  Edit                  FN  Finish
Select Item(s): Next Screen//// FN Finish
```

After “Finish” is selected, the user is prompted to fill in any information missing from fields needed to complete the order.

If you attempt to process a flagged order, you are prompted “Unflag Order? NO//”. If you respond **YES**, enter comments to unflag the order and continue with processing. If you respond **NO**, you cannot process the order because it is still flagged.

If an order is sent from OERR without a Dispense Drug selected, and there is only one Dispense Drug tied to the Orderable Item, that drug will be inserted in the DRUG field (#2 on the screen). If there is more than one Dispense Drug tied to the Orderable Item, a “No Dispense Drug Selected” message will display in the DRUG field (#2 on the screen) and a Dispense Drug must be selected to complete/finish the order.

```
The following Drug are available for selection:
1. ACETAMINOPHEN 325MG
2. ACETAMINOPHEN EXTRA STR 500MG
```

If the drug list is empty, the user should select a new orderable item or the order can be discontinued.

Example: Finishing an Order from OERR (continued)

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

If the user chooses to copy Provider Comments into the Patient Instructions, they will be displayed on the end of both the Patient Instructions and the Sig.

If the patient has been identified as having another language preference, the Provider Comments will not be appended to the other language Sig.

```
Provider Comments:
WITH A FULL MEAL
Copy Provider Comments into the Patient Instructions? No//  Y   YES

(TAKE ONE TABLET BY MOUTH TWICE A DAY WITH A FULL MEAL)

Rx # 503902            05/22/01
OPPATIENT16,ONE               #60
TAKE ONE TABLET BY MOUTH TWICE A DAY WITH A FULL MEAL

ACETAMINOPHEN 500MG TAB
OPPROVIDER4,TWO           OPPHARMACIST4,THREE
# of Refills: 3

Are you sure you want to Accept this Order? NO// Y  YES
```

After an order is accepted, the user will be prompted to enter the missing information.

```
METHOD OF PICK-UP:
WAS THE PATIENT COUNSELED: NO// Y  YES
WAS COUNSELING UNDERSTOOD: NO// Y  YES

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

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

This Rx has been flagged as: SC
Was treatment for Service Connected condition: YES// <Enter>
Press Return to Continue:
```

Flagging and Unflagging Pending Orders

Flagging a pending order allows you to prevent an order from processing and attach a note known as a flag to the pending order. Flag/Unflag functionality is only available for Pending new orders and Pending renewals; only holders of the PSORPH security key can flag or unflag an order.

Flagged orders will not be processed. They are not a part of any pending orders. When you have flagged orders to process from the *Complete Orders from OERR* option, you should enter **FL** at the "Select By" prompt (shown in the following example). This ensures you will view all patients with flagged pending orders, allowing you to address their flagged orders; however, if you know which patients have flagged orders, you can access the flagged orders through the Medication Profile.

The following provides examples of how to flag and unflag pending orders from a medication profile within the *Complete Orders from OERR* option.

Example: Finishing an Order from OERR

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)

          Orders to be completed for all divisions: 16

Do you want an Order Summary? No//   <Enter> NO

          Patient Prescription Processing
          Barcode Rx Menu ...
          Complete Orders from OERR
          Discontinue Prescription(s)
          Edit Prescriptions
          ePharmacy Menu...
          List One Patient's Archived Rx's
          Manual Print of Multi-Rx Forms
          Reprint an Outpatient Rx Label
          Signature Log Reprint
          View Prescriptions

Select Rx (Prescriptions) Option: COMPlete Orders from OERR

There are multiple Institutions associated with this Outpatient Site for
finishing orders entered through CPRS. Select the Institution for which to
finish orders from.  Enter '?' to see all choices.

Select CPRS ORDERING INSTITUTION: ALBANY//   <Enter>   NY  VAMC  500

You have selected ALBANY.
After completing these orders, you may re-enter this option and select again.

      <There are 3 flagged orders for ALBANY>

Select By:  (PA/RT/PR/CL/FL/E): PATIENT// FL <Enter>

Do you want to see Medication Profile? Yes// <Enter>
```

After answering the “Medication Profile” prompt, a warning displays if no allergy assessment has been made. The patient’s eligibility and RX patient status also displays.

```
  OPPATIENT16,ONE        4-3-41    000246802
  YES     SC VETERAN
     No Allergy Assessment!

Press Return to continue: <Enter>
Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED// <Enter>
```

If a pending order is flagged, the row number is highlighted on the Medication Profile screen (shown in the following example). Select the order to view the flag or to flag the new pending order.

Example: A Flagged Pending Order

```
Medication Profile            Mar 13, 2008@16:31:24          Page:    1 of    1
OPPATIENT16,ONE                                   <NO ALLERGY ASSESSMENT>
  PID: 000-24-6802                                  Ht(cm): 177.80 (02/08/2007)
  DOB: APR 3,1941 (66)                              Wt(kg): 90.45 (02/08/2007)
  SEX: MALE                                                                   .
                                                                 ISSUE  LAST REF DAY
 #  RX #         DRUG                                     QTY ST  DATE  FILL REM SUP

-------------------------------------ACTIVE-------------------------------------
 1 100002518     PENICILLAMINE 250MG TAB                   31 A  02-29 02-29  5  31
-------------------------------------PENDING------------------------------------
 2 ACETAMINOPHEN 500MG TAB                 QTY: 60          ISDT: 03-13  REF:  3
          Enter ?? for more actions
PU  Patient Record Update               NO  New Order
PI  Patient Information                 SO  Select Order
Select Action: Quit// SO Select Order
Select Orders by number:  (1-2): 2
```

From the Pending OP Orders screen, you can flag and unflag an order, as well as view the flagged reason. To flag the order, enter **FL** and then enter a “REASON FOR FLAG”, alert the proper individual that the flag has been added by pressing <**Enter**> to select the default name or entering a different user name and pressing <**Enter**>, and the flagging process is complete.

Example: Flagging an Order

```
REASON FOR FLAG: DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE
DISPENSING.
Send alert to: PSOUSER,ONE//        BIRMINGHAM     ALABAMA     OP
PHARMACIST
          ... order flagged.
```

When an order is flagged, “FL-” is placed in front of “Pending OP Orders” in the upper left corner, and the flagged reason is listed below the patient identifying information.

Example: A Flagged Order

```
FL-Pending OP Orders (ROUTINE)March 13, 2008 16:31:33          Page:    1 of   2
OPPATIENT16,ONE                                      <NO ALLERGY ASSESSMENT>
  PID: 000-24-6802                                    Ht(cm): 177.80 (02/08/2007)
  DOB: APR 3,1941 (66)                                Wt(kg): 90.45 (02/08/2007)

Flagged by OPPHARM,TWO on 03/13/08@23:14:  DOUBLE CHECK WITH PATIENT FOR HEART
CONDITION BEFORE DISPENSING.

*(1) Orderable Item: ACETAMINOPHEN TAB            * Editing starred fields will
 (2)      CMOP Drug: ACETAMINOPHEN 500MG TAB         create a new order
       Drug Message: NATL FORM
 (3)        *Dosage: 500 (MG)
               Verb: TAKE
     Dispense Units: 1
             *Route: ORAL
          *Schedule: BID
 (4)   Pat Instruct:
  Provider Comments: ProvComments
                SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
 (5) Patient Status: SERVICE CONNECTED
 (6)     Issue Date: MAR 13,2008       (7) Fill Date: MAR 13,2008
 (8)    Days Supply: 30                (9)   QTY (TAB): 60
+         Enter ?? for more actions
BY  Bypass                DC  Discontinue         FL  Flag/Unflag
ED  Edit                  FN  Finish
Select Item(s): Next Screen// FL Flag/Unflag
```

To unflag an order, enter **FL** at the “Select Item(s)” prompt, and then enter your “COMMENTS”. When you press <**Enter**>, the order is no longer flagged.

Example: Unflagging an Order

```
FLAGGED: 03/13 23:14 by OPPHARM,TWO
          DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE DISPENSING.
COMMENTS: CHECKED WITH PATIENT. NO HEART CONDITION.
          ... order unflagged.
```

At that point, the flag from the Medication Profile is removed, but the flagged/unflagged reason remains on the Pending OP Orders screen unless you reflag the order.

Example: An Unflagged Order

```
Pending OP Orders (ROUTINE)   March 14, 2008 09:16:33          Page:    1 of   2
OPPATIENT16,ONE                                        <NO ALLERGY ASSESSMENT>
  PID: 000-24-6802                                      Ht(cm): 177.80 (02/08/2007)
  DOB: APR 3,1941 (66)                                  Wt(kg): 90.45 (02/08/2007)

Flagged by OPPHARM,TWO on 03/13/08@23:14:  DOUBLE CHECK WITH PATIENT FOR HEART
CONDITION BEFORE DISPENSING.
Unflagged by OPPHARM,TWO on 03/14/08@09:26:  CHECKED WITH PATIENT. NO HEART
CONDITION.

*(1) Orderable Item: ACETAMINOPHEN TAB            * Editing starred fields will
 (2)      CMOP Drug: ACETAMINOPHEN 500MG TAB         create a new order
       Drug Message: NATL FORM
 (3)        *Dosage: 500 (MG)
               Verb: TAKE
     Dispense Units: 1
             *Route: ORAL
          *Schedule: BID
 (4)   Pat Instruct:
  Provider Comments: ProvComments
                SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
 (5) Patient Status: SERVICE CONNECTED
 (6)     Issue Date: MAR 13,2008       (7) Fill Date: MAR 13,2008
 (8)    Days Supply: 30                (9)   QTY (TAB): 60
+         Enter ?? for more actions
BY  Bypass                DC  Discontinue          FL  Flag/Unflag
ED  Edit                  FN  Finish
Select Item(s): Next Screen//
```

After pending orders have been unflagged, they can be processed.

If you attempt to process a flagged order, you are prompted “Unflag Order? NO//”. If you respond **YES**, enter comments to unflag the order and continue with processing. If you respond **NO**, you cannot process the order because it is still flagged.

Changes to Finishing Pending Orders Process - Digitally Signed Orders Only

Digitally signed orders will be identifiable by the “Digitally Signed Order’ message in reverse video on the message bar.

If the terminal in use is set up as a VT-100, there may be problems with this message display and the “Processing Digitally Signed Order” message. Updating the VistA terminal session to use VT-320 will avoid this problem.

The provider’s PKI certificate is re-validated when accessing a digitally signed order. If the validation check is unsuccessful, an error code is sent to the pharmacist and an entry is made in the Rx Activity Log. The error code type will result in either the order being automatically rejected/discontinued or the pharmacist being given the choice to finish, bypass, or discontinue the order. Digitally signed prescriptions that have been discontinued cannot be reinstated. The Speed Discontinuation functionality will no longer delete unverified prescriptions.

Finishing an Order from OERR with Multiple Institutions

Multiple Institution entries can be added using the *Site Parameter Enter/Edit* option. If the local site has multiple entries in the CPRS ORDERING INSTITUTION field the user will be prompted for an Institution when entering the *Complete Orders from OERR* option. After an Institution is selected, then the Pending Orders that will be shown for completion will be those Pending Orders from clinics that are associated with the Institution selected.

Example: Finishing an Order from OERR with Multiple Institutions

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)

          Orders to be completed for all divisions: 21

Do you want an Order Summary:? No// <Enter>  NO

Select Rx (Prescriptions) Option: COmplete Orders from OERR

There are multiple Institutions associated with this Outpatient Site for
finishing orders entered through CPRS. Select the Institution from which to
finish orders. Enter '?' to see all choices.
```

```
Select CPRS ORDERING INSTITUTION: BIRMINGHAM, AL.// <Enter> BIRMINGHAM, AL.521

You have selected BIRMINGHAM, AL..
After completing these orders, you may re-enter this option and select again.

Select By:  (PA/RT/PR/CL/E): PATIENT// PA
```

[See the previous example for completion of this option.]

Finishing an ePharmacy Order

After the user reviews the ePharmacy order and chooses to accept the order, the billing data is sent to ECME, which sends a message back to Outpatient Pharmacy displaying the status of the claim. The ECME section of the Activity Log is also updated.

```
Is this correct? YES// <Enter>
 -Rx 100003869A has been discontinued...

Prescription 100003919 successfully submitted to ECME for claim generation.

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

Activity Log

Multiple Activity Logs exist for a completed or finished order. Any single activity log or all activity logs can be viewed.

Use the hidden action (AL) to view the activity log once a completed or finished order is selected.

Example: Activity Log

```
OP Medications (ACTIVE)       Jun 08, 2001 11:01:29          Page:    1 of    3
OPPATIENT29,ONE                                                          <A>
  PID: 000-87-6543                                  Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                             Wt(kg): 79.09 (06/07/2000)

                 Rx #: 503915
 (1) *Orderable Item: AMPICILLIN CAP,ORAL ***(N/F)***
 (2)            Drug: AMPICILLIN 250MG CAP ***(N/F)***
 (3)         *Dosage: 750 (MG)
                Verb: TAKE
      Dispense Units: 3
                Noun: CAPSULE(S)
              *Route: ORAL
           *Schedule: QID
           *Duration: 10D (DAYS)
 (4)Pat Instructions: WITH FOOD AVOIDING DAIRY FOODS
                 SIG: TAKE THREE CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
                      WITH FOOD AVOIDING DAIRY FOODS
 (5)  Patient Status: SERVICE CONNECTED
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   (Refill)             RN   Renew
Select Action: Next Screen// AL
Select Activity Log by  number
1.  Refill      2.  Partial      3.  Activity     4.  Labels
5.  Copay       6.  ECME         7.  All Logs:  (1-7): 7// <Enter>
```

The prompt for the selection of the Activity Log depends on what type of prescription is selected. For example, if the prescription is an ePharmacy prescription, ECME displays as item #6. If the prescription is a CMOP prescription, CMOP displays as item #6.

Example: Activity Log (continued)

```
Rx Activity Log          Jun 08, 2001 11:02:51       Page:    1 of    2
OPPATIENT16,ONE
  PID: 000-24-6802                          Ht(cm): 177.80 (02/08/1999)
  DOB: APR 3,1941 (60)                      Wt(kg): 90.45 (02/08/1999)

Rx #: 503904   Original Fill Released: 5/25/01
Routing: Window      Finished by: OPPHARMACIST4,THREE

Refill Log:
#  Log Date   Refill Date  Qty          Routing  Lot #    Pharmacist
=====================================================================
There are NO Refills For this  Prescription

Partial Fills:
#   Log Date   Date     Qty         Routing    Lot #      Pharmacist
=====================================================================
There are NO Partials for this Prescription

Activity Log:
#   Date        Reason         Rx Ref         Initiator Of Activity
=====================================================================
1   05/25/01                   ORIGINAL
Comments: Patient Instructions Not Sent By Provider.
2   05/25/01    PROCESSED      ORIGINAL       OPPHARMACIST4,THREE
Comments: Label never queued to print by User

Label Log:
#   Date        Rx Ref                     Printed By
=====================================================================
1   09/25/06    ORIGINAL                   OPPHARMACIST31,THREE
Comments: ScripTalk label printed
2   09/25/06    ORIGINAL                   OPPROVIDER,ONE
Comments: ROUTING=WINDOW (BAD ADDRESS)

Copay Activity Log:
#   Date        Reason         Rx Ref         Initiator Of Activity
=====================================================================
There's NO Copay activity to report

ECME Log:
#   Date/Time           Rx Ref          Initiator Of Activity
=============================================================================
1   11/30/05@18:38:29   ORIGINAL        OPPHARMACIST,ONE
Comments: No claim submission made.  Billing Determination was: DRUG NOT
BILLABLE.
```

[This shows an extended view of what displays on the screen.]

```
          Enter ?? for more actions

Select Action:Quit// <Enter>
```

----------example continues----------

The Activity Logs will appear the same as the OP logs with the exception of the addition of a CMOP Event Log. Here is an example of a sample CMOP Event Log:

```
Rx Activity Log             Jul 06, 2006 09:54:24          Page:    2 of    2
OPPATIENT2,ONE
  PID: 000-23-4567                                  Ht(cm):  188.40  (12/02/00)
  DOB: DEC 14,1060 (34)                             Wt(kg):  109.10  (12/02/00)

CMOP Event Log:
Date/Time             Rx Ref    TRN-Order      Stat             Comments
================================================================================
09/17/00@1526         Ref 1     267-4            DISP    NDC: 1234TEST5678

CMOP Lot#/Expiration Date Log:
Rx Ref                Lot #                Expiration Date
================================================================================
Ref 1                 1234TST               07/07/00

          Enter ?? for more actions

Select Action:Quit// <Enter>
```

If this were an ePharmacy prescription, the prompt will display as follows:

```
Select Activity Log by number
1.  Refill      2.  Partial      3.  Activity     4.  Labels
5.  Copay       6.  ECME         7.  All Logs:  (1-7): 7/// 6
```

For an ePharmacy prescription, the ECME Event Log displays before the CMOP Event Log.

Example: ECME Event Log of an ePharmacy prescription

```
Rx Activity Log               Nov 07, 2005@12:23:37          Page:    1 of    1
OPPATIENT,FOUR
  PID: 000-01-1322P                                  Ht(cm): _______ (______)
  DOB: NOV 12,1075 (29)                             Wt(kg): _______ (______)

Rx #: 100003861   Original Fill Released:
Routing: Window      Finished by: OPPHARMACIST4,THREE

ECME Log:
#   Date        Rx Ref         Initiator Of Activity
================================================================================
1   5/16/07@14:40:40     ORIGINAL       OPPHARMACIST4,THREE
Comments: ECME:WINDOW FILL(NDC:00058-2467-05)-E PAYABLE-pOPP INSURANCE
2   5/16/07@14:40:40    ORIGINAL        OPPHARMACIST4,THREE
Comments: Billing quantity submitted through ECME: 25.000 (ML)
3   5/20/07@14:21:52     ORIGINAL        OPPHARMACIST4,THREE
Comments: ECME:REJECT WORKLIST-DUR OVERRIDE CODES(AD/AS/1B)-E
 REJECTED-pOPP INSURANCE
4   5/20/07@14:21:52     ORIGINAL        OPPHARMACIST4,THREE
Comments: Billing quantity submitted through ECME: 25.000 (ML)

================================================================================
          Enter ?? for more actions

Select Action:Quit// <Enter>
```

The activity log has an entry indicating that the Rx has been sent to the external interface. With patch PSO*7*354, this activity entry is enhanced to indicate the routing automated dispensing device. The Domain Name Server (DNS) information of the automated dispensing device is appended to the Comment field of the activity log. This is usually an IP address or the DNS name.

The activity log was also updated to display the mail tracking information available in the RXD-13 segment of the HL7 message received by VistA from the external dispensing interface.

Example: Activity Log with Multiple Dispensing Devices

```
Rx Activity Log                May 23, 2011@12:30:12          Page:    2 of    3
OUTPATIENT,SIX                                                   <A>
  PID: 355-43-4343                                  Ht(cm): _______ (______)
  DOB: OCT 29,1932 (78)                             Wt(kg): _______ (______)
+
1   05/04/11    REPRINT        ORIGINAL       OPPHARMACIST4,FOUR
Comments: TESTING MULTIDEVICES (1 COPIES)
2   05/04/11    X-INTERFACE    ORIGINAL       OPPHARMACIST4,FOUR
Comments: Prescription (Reprint) sent to external interface.
3   05/04/11    X-INTERFACE    ORIGINAL       POSTMASTER
Comments: HL7 ID - 50073974 MESSAGE TRANSMITTED TO 10.4.131.13
4   05/04/11    X-INTERFACE    ORIGINAL       POSTMASTER
Comments: HL7 ID - 50073975 MESSAGE TRANSMITTED TO 10.4.142.22
5   05/04/11    DISP COMPLETED ORIGINAL
Comments: External Interface Dispensing is Complete.   Filled By: OPTECH,ONE
          Checking Pharmacist: OPPHARMACIST4,FOUR
          Mail Tracking Info.: USPS #123456789 received at 05/04/11@15:32:23

Label Log:
#   Date        Rx Ref                    Printed By
==============================================================================
1   05/02/11    ORIGINAL                  OPPHARMACIST4,FIVE
Comments: From RX number 100002987
2   05/04/11    ORIGINAL                  OPPHARMACIST4,FOUR
Comments: From RX number 100002987 (Reprint)
+         Enter ?? for more actions
Select Action:Next Screen//
```

For HOLD/UNHOLD of prescriptions, the activity log entries include HOLD COMMENTS and the HOLD REASON when a prescription is placed on HOLD and UNHOLD COMMENTS when the prescription is removed from HOLD.

Example: Activity Log with HOLD/UNHOLD Comments

```
Activity Log:
      #   Date        Reason         Rx Ref         Initiator Of Activity
      ...
      8   05/10/12    HOLD           REFILL 1       USER,PHARMACY
      Comments: Rx placed on HOLD (Reason: BAD ADDRESS) and removed from
                SUSPENSE - HOLD COMMENTS ENTERED BY THE USER MANUALLY.
      ...
      9   05/10/12    UNHOLD         REFILL 1       USER,PHARMACY
      Comments: Rx Removed from HOLD - UNHOLD COMMENTS ENTERED BY THE USER
                 WHEN REMOVING THE RX FROM HOLD.
```

(This page included for two-sided copying.)

Discontinue Prescription(s)

[PSO C]

This option is used either to discontinue a prescription without deleting its record from the files, or to reinstate a prescription discontinued by pharmacy.

Example: Discontinuing a prescription

```
Select Rx (Prescriptions) Option: DISCONTINUE Prescription(s)

Discontinue/Reinstate by Rx# or patient name:  (R/P): PATIENT NAME

Are you entering the patient name or barcode:  (P/B): Patient Name

Select PATIENT NAME: OPPATIENT16,ONE  OPPATIENT16,ONE        9-7-52    000246802
     YES     SC VETERAN

                                                                ISSUE  LAST REF DAY
    RX #         DRUG                                   QTY ST  DATE  FILL REM SUP
--------------------------------------------------------------------------------
-------------------------------------ACTIVE-------------------------------------
 1 100003218     AMPICILLIN 500MG CAP                    10 A  05-11 05-11   5  30
 2 100003238     PREDNISONE 5MG TAB                      30 A  05-30 05-30   3  10
 3 100003205$    TRIPROLIDINE & PSEUDOEPHEDRINE          10 A  05-01 05-01   5  31
----------------------------------DISCONTINUED----------------------------------
 4 100003216$    AMPICILLIN 10GM INJ. M.D.V.             30 DC 05-07 05-07   5  30
 5 100003214     PREDNISONE 1MG TAB                      30 DE 05-07 05-07   3  10
Press RETURN to continue: <Enter>

Discontinue all or specific Rx#'s?:  (A/S): SPECIFIC Rx's

ENTER THE LINE #:  (1-5): 2

Comments:  RESTRICTED/NF MED
Nature of Order: SERVICE CORRECTION// ??

                              Require        Print     Print on
  Nature of Order Activity   E.Signature   Chart Copy   Summary
  ------------------------   -----------   ----------   --------
  WRITTEN                                                   x
  VERBAL                         x            x           x
  TELEPHONED                     x            x           x
  SERVICE CORRECTION
  POLICY                                      x           x
  DUPLICATE
  SERVICE REJECT                 x            x

Nature of Order: SERVICE CORRECTION// SERVICE REJECT    R

Requesting PROVIDER: OPPROVIDER30,TWO //  <Enter>      TO
100003238  PREDNISONE 5MG TAB                       OPPATIENT16,ONE
                         Rx to be Discontinued

Press Return to Continue: <Enter>

OK to Discontinue? N// YES
```

When a prescription is discontinued, the software checks for any unresolved ECME rejections for that prescription. If a DUR REJECT or REFILL TOO SOON REJECT is found, it will be marked resolved with the reason PRESCRIPTION DISCONTINUED.

When an ePharmacy prescription is discontinued, the software checks for any unreleased fills with a PAYABLE claim. If found, a reversal request is sent to ECME, which forwards it on to the third party payer.

When a pending renewal order is discontinued, Outpatient Pharmacy verifies if there is an active prescription for the same drug. If an active prescription is found, you are prompted with "There is an active Rx for this pending order, Discontinue both (Y/N)?" If you respond **YES**, both the pending order and the active order are discontinued. If you respond **NO**, only the pending order is discontinued and the active order is not discontinued.

Edit Prescriptions

[PSO EXEDIT]

This option allows changes to be made to entered orders. Newly entered orders can be edited before release by typing in the corresponding field number. Previously entered orders can be edited by entering the prescription number, then specifying the field to be edited. An asterisk or star (*) is shown in front of each field that will create a new order if it is changed. See the section "Editing an Order" for an example.

When editing fields preceded by an asterisk (*) in an ePharmacy order (or electronically third party billable prescription), upon acceptance of the edited order the original prescription will be discontinued and a new order created. If the latest fill of the original order has not been released, the claim for that fill will be reversed. A new claim is created for the new prescription. See "Editing an ePharmacy Order" for an example of editing ePharmacy orders.

DAW/NDC Edit

The Dispensed As Written (DAW)/National Drug Code (NDC) field for discontinued and expired orders can be edited.

For ePharmacy prescriptions, the DAW/NDC field for discontinued and expired orders can be edited. The following statuses are editable.

- 11 – EXPIRED
- 12 – DISCONTINUED
- 14 - DISCONTINUED BY PROVIDER
- 15 - DISCONTINUED (EDIT).

These are additional status results from the prescription being discontinued from CPRS. For status 14 - DISCONTINUED BY PROVIDER, the user can choose to discontinue the prescription in CPRS by selecting "Requesting Physician Cancelled" for the reason.

The following is an example of the activity log entry stored on the prescription for this type of discontinue:

```
1   06/20/08    DISCONTINUED   ORIGINAL       OPPHARM,ONE
Comments: Discontinued by OE/RR.
```

For status 15 - DISCONTINUED (EDIT), the user can edit a prescription in CPRS which discontinues the prescription being edited resulting in status 15 in the Outpatient Pharmacy package. The following is an example of the activity log entry on the prescription in OP:

```
2   06/05/08    DISCONTINUED   ORIGINAL       OPHARM,ONE
```

ePharmacy Menu

[PSO EPHARMACY MENU]

The following menu items are locked with the PSORPH key: ePharmacy Medication Profile Division Preferences, ePharmacy Site Parameters, Third Party Payer Rejects – View/Process and Third Party Payer Rejects – Worklist. The following menu item is locked with the PSO TRICARE/CHAMPVA MGR key: TRICARE CHAMPVA Bypass/Override Report.

These menu items allow the user to perform ePharmacy specific functions including rejections by third party payers including DUR/RTS and has the following options:

- *Ignored Rejects Report*
- *ePharmacy Medication Profile (View Only)*
- *NDC Validation*
- *ePharmacy Medication Profile Division Preferences*
- *ePharmacy Site Parameters*
- *Third Party Payer Rejects – View/Process*
- *Third Party Payer Rejects – Worklist*
- *TRICARE CHAMPVA Bypass/Override Report*
- *View ePharmacy Rx*

DURs can occur when a third party determines there are safety issues involved with an Rx claim submission, and they can be due to high dose, drug interaction, and excessive utilization. The third party payer returns an NCPDP rejection code of 88 to indicate a DUR.

Refill Too Soon rejections happen when a third party payer determines that a prescription is being processed too early compared to the last time the prescription was filled. This can occur for several reasons, including third party payer's policy differs from VA policy, patient receiving medication at another pharmacy, or the provider may have increased the dosage or frequency of the medication. The third party payer returns an NCPDP rejection code of 79 to indicate a Refill Too Soon.

Prescriptions rejected as DUR and Refill Too Soon are moved to the REFILL TOO SOON/DUR REJECTS (Third Party) section of the Medication Profile. The user must resolve a rejected prescription before other actions such as release, label print, renew, and refill, among others, can be performed on it. Actions may still be taken on these prescriptions through CPRS.

Ignored Rejects Report
[PSO IGNORED REJECTS REPORT]

This option gives the user the ability to run a report for third-party rejects that have been ignored and consequently closed by the pharmacy users.

The user can select one of the following parameters to filter the data in the report:

- **DIVISION**: Allows the user to select one, some or all divisions.
- **DATE RANGE**: Allows the user to select a date range.
- **SORT BY**: Allows the user to choose different fields to sort the report by. Any combination can be selected:
  - **PATIENT**: Allows the user to select a single, multiple or all patients
  - **DRUG:** Allows the user to select a single, multiple or all drugs.
  - **USER:** Allows the user to select a single, multiple or all users that have ignored third party rejects.

Example: Ignored Rejects Report

```
Select ePharmacy Menu Option: IR  Ignored Rejects Report

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION: ^ALL

BEGIN REJECT DATE: 030606  (MAR 06, 2006)

  END REJECT DATE: 061407  (JUN 14, 2007)

    Enter the SORT field(s) for this Report:

       1 - PATIENT
       2 - DRUG
       3 - USER

    Or any combination of the above, separated by comma,
    as in these examples:

       2,1  - BY PATIENT, THEN DRUG
      3,1,2 - BY USER, THEN BY PATIENT, THEN BY DRUG

SORT BY: PATIENT// 1,2

     SORT BY PATIENT
          THEN BY DRUG

You may select a single or multiple PATIENTS,
or enter ^ALL to select all PATIENTS.

PATIENT: ^ALL

You may select a single or multiple DRUGS,
or enter ^ALL to select all DRUGS.

DRUG: ^ALL
```

```
DEVICE: HOME// [Select Printer Device]

Ignored Rejects Report                                                Page:   1
Sorted by PATIENT, DRUG                          Division: ALBANY
Date Range: 03/06/2007 - 06/14/2007              Run Date: Jun 15, 2007@15:26:35
-------------------------------------------------------------------------------
Rx#            DRUG                 PATIENT             IGNORE DT IGNORED BY
-------------------------------------------------------------------------------
1192029A       SODIUM CHLORIDE 0.9% OPPATIENT,ONE(9999)  04/18/07  OPUSER,ONE
     Comments: PATIENT WAS RUNNING OUT OF DRUG.
Payer Message: NEXT RFL 041907,DAYS TO RFL 1,LAST FILL 112706 VIA MAIL,REFILL
               TOO SOON.
2990211        ALENDRONATE 70MG/75M OPPATIENT,TWO(0000)  05/20/07  OPUSER,ONE
     Comments: NEXT POSSIBLE FILL WAS TOO FAR OUT.
Payer Message: PLAN LIMIT EXCEEDED. NEXT POSSIBLE FILL: 05/29/2007

TOTAL: 2 Patients.
```

ePharmacy Medication Profile (View Only)
[PSO PMP]

Although the name indicates “ePharmacy Medication Profile”, this option can be used to list the medication profile for any patient on file. It will be used mostly by ePharmacy users for claims research purposes. This functionality is also available from the Reject Worklist through the Medication Profile (MP) action.

Example 1: Medication Profile with default view

```
Patient Medication Profile    Jun 04, 2007@19:22:16          Page:    1 of    1
OPPATIENT,ONE                                                   <A>
  PID: 000-12-5678                              HEIGHT(cm): 175.26 (11/21/2006)
  DOB: NOV 28,1946 (60)                         WEIGHT(kg): 108.18 (08/09/2007)
  SEX: MALE                                EXP/CANCEL CUTOFF: 120 DAY                  .
                                                              ISSUE    LAST     REF  DAY
  # Rx#           DRUG [^]                            QTY ST  DATE     FILL     REM  SUP
  1 100004112e    ALBUTEROL INHALER                     1 A   04-21-07 04-21-07  11    7
  2 300483e       ALPRAZOLAM 0.25MG TABS               30 DC  06-14-07 06-14-07  11   30
  3 100004113e    AMITRIPTYLINE 10MG TAB               60 A   04-21-07 04-21-07  11   30
  4 100004075e    CABERGOLINE 0.5MG TAB                 7 E   05-18-05 05-18-05   6    7
  5 100004155     DESIPRAMINE 25MG                     90 S   02-23-07 02-11-07  11   90
  6 100004022$e   DIGOXIN 0.05MG/ML ELIX (60CC)        30 A   02-01-07 02-20-07  10   90
  7 100004081     METAPROTERENOL 5% SOLUTION 10ML      15 DC  06-02-07 06-03-07  11   15
  8 100004082     METAPROTERENOL 5% SOLUTION 10ML      10 DC  06-02-07 06-03-07  11   10
  9 100004083e    METAPROTERENOL 5% SOLUTION 10ML      15 A>  06-02-07 06-23-07  11   15
 10 100004079e    NICOTINE 10MG/ML SOLN NASAL SPRAY     1 A>  06-02-07 06-23-07  11   15
 11 100003298     SIMVASTATIN 20MG TAB                  5 DC  05-28-05 04-27-07   3   30
 12 100003298A    SODIUM CHLORIDE 0.9% NASAL SOLN(O     1 A   05-10-07 05-10-07  11   30
 13 100004070e    VALSARTAN 80MG TAB                    5 S   06-28-07 05-31-07  11   30
                                   PENDING (2 order)
 14 ALBUTEROL INHALER                                    RF  06-03-07            2   30
 15 AMITRIPTYLINE 10MG TAB                               RN  06-02-07            3   10
                        Non-VA MEDS (Not dispensed by VA) (1 order)
 16 TAMOXIFEN CITRATE 10MG TABS                      Date Documented: 06/04/07

          Enter ?? for more actions
CV  Change View           PI  Patient Information   SIG Show/Hide SIG
GS  Group by Status       PU  Patient Record Update
Select: Quit//
```

The following options are available as Hidden Menu actions on this screen.

DR	- Sort by Drug	LF	- Sort by Last Fill
RX	- Sort by Prescription	ID	- Sort by Issue Date
RDD	- Switch between LAST FILL and LAST RELD (release date)		

After selecting a prescription on this screen, the *REJ* option is available on the “RX View” screen’s hidden menu. This action displays third party reject information for the prescriptions with third party rejects.

The *CV (Change View)* option allows the user to change some characteristics of the screen above. The user can also save and/or delete preferences, which will be used every time the user runs the *Medication Profile* option or invokes it from the Reject Worklist. The users can have one set of preferences for each Division defined.

Example 2: Change View action

Enter CV at the “Select:” prompt to change the view preferences.

```
     OPPROVIDER,ONE's current default view (ALBANY):
     ----------------------------------------
     EXP/CANCEL CUTOFF  : 120 DAYS
     SORT BY            : DRUG NAME
     SORT ORDER         : ASCENDING
     DISPLAY SIG        : NO
     GROUP BY STATUS    : YES
     DISPLAY ORDER COUNT: YES

     Delete this default view? NO// <Enter>

EXP/CANCEL CUTOFF: 120// 120 DAYS
SORT BY: DR// DRUG NAME
SORT ORDER: ASCENDING// ASCENDING
DISPLAY SIG: OFF// OFF
GROUP BY STATUS: OFF// ON
DISPLAY ORDER COUNT: ON// OFF

Save as your default View? NO// YES

Saving...OK!
```

Example 3: Display SIG action

Enter SIG at the “Select:” prompt to toggle the Sig display on or off.

```
Patient Medication Profile    Jun 04, 2007@19:22:16          Page:    1 of    1
  PID: 000-12-5678                            HEIGHT(cm): 175.26 (11/21/2006)
  DOB: NOV 28,1946 (60)                       WEIGHT(kg): 108.18 (08/09/2007)
  SEX: MALE                              EXP/CANCEL CUTOFF: 120 DAY           .
                                                          ISSUE    LAST     DAY
  # Rx#           DRUG [^]                          QTY ST DATE     FILL     SUP
  1 100004112e    ALBUTEROL INHALER                   1 A  04-21-07 04-21-07   7
    SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
  2 300483e       ALPRAZOLAM 0.25MG TABS             30 DC 06-14-07 06-14-07  30
    SIG: TAKE 2 CAPSULES BY MOUTH TAKE
  3 100004113e    AMITRIPTYLINE 10MG TAB             60 A  04-21-07 04-21-07  30
    SIG: TAKE TWO BY MOUTH EVERY DAY
  4 100004075e    CEFOPERAZONE                        7 E  05-18-05 05-18-05   7
    SIG: TAKE 1 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
  5 100004155     DESIPRAMINE 25MG                   90 S  02-23-07 02-11-07  90
    SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
  6 100004022$e   DIGOXIN 0.05MG/ML ELIX (60CC)      30 A  02-01-07 02-20-07  90
    SIG: 300 LB BY MOUTH EVERY FOUR HOURS
  7 100004081     METAPROTERENOL 5% SOLUTION 10ML    15 DC 06-02-07 06-03-07  15
    SIG: TAKE 1 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
  8 100004082     METAPROTERENOL 5% SOLUTION 10ML    10 DC 06-02-07 06-03-07  10
    SIG: TAKE 2 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
  9 100004083e    METAPROTERENOL 5% SOLUTION 10ML    15 A  06-02-07 06-23-07  15
    SIG: TAKE 3 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
          Enter ?? for more actions
CV  Change View           PI  Patient Information   SIG Show/Hide SIG
GS  Group by Status       PU  Patient Record Update
Select: Quit//
```

NDC Validation

The initial validation of the NDC can be performed by a pharmacy technician. This functionality only applies to local fills that are not sent to OPAI. This function provides a pharmacy technician the ability to manually enter the prescription number or scan the bar code of the existing prescription label. Then the user may manually enter or scan the NDC of the stock bottle used to fill the prescription. When the system matches the NDC, confirmation is provided to the pharmacy tech and allows the technician to continue processing. However, if the system detects a mismatch and the NDC of the stock bottle has an associated entry in the synonym file, the NDC will be updated in Prescription file (#52) for the fill. The system will then prompt the technician to press enter to continue, a new label will be printed, the original electronic claim reversed, and a new claim submission will be transmitted with the new NDC. In the event that the revised NDC prompts a RTS/DUR rejection, the system will immediately send the item to the Reject Worklist.

In a case where the NDC entered is not defined for the drug in the Drug File, the system prompts the technician that a mismatch has occurred and the prescription needs to be validated by a pharmacist. The system notes that the NDC had not been validated and allows the pharmacy tech to move to the next prescription. In the event of a change of NDC prompted a rejection, the system immediately sends the item to the Reject Worklist.

The releasing pharmacist will receive a notation that NDC has been validated by technician when processing. If the NDC change has prompted a claim reversal and produced a RTS/DUR rejection, the pharmacist will be presented with a Reject Processing screen at release.

Example:Matched NDC:

```
Select ePharmacy Menu Option: NV  NDC Validation

Prescription: 101310       DIPYRIDAMOLE 25MG TAB
Rx: 101310          Fill: 0             Patient: OPPATIENT,ONE
Drug: DIPYRIDAMOLE 25MG TAB             NDC: 00597-0017-10
Prescription label NDC: 00597-0017-10
Stock NDC: 00597001710

NDC match confirmed

Prescription:
```

Example: Non-matched NDC:

```
Prescription:    101341     BIPERIDEN 2MG TAB
Rx: 101341          Fill: 0             Patient: OPPATIENT,ONE
Drug: BIPERIDEN 2MG TAB                 NDC: 00044-0120-05
Prescription label NDC: 00044-0120-05
Stock NDC: 00044012006
Due to a change in NDC, a claims reversal and resubmission will be performed.

Prescription 101341 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
E PAYABLE

Prescription:
```

ePharmacy Medication Profile Division Preferences
[PSO PMP SITE PREFERENCES]

This option allows the user to specify certain settings that will control how the *ePharmacy Medication Profile* option works for that user. Below is the list of settings that can be specified through this option:

- **EXP/CANCEL CUTOFF:** Indicates the maximum number of days for an expired and/or discontinued prescription to be cut from the profile.
- **SORT BY:** Indicates the default sorting column. The options are: Rx#, Drug Name, Issue Date or Last Fill Date.
- **SORT ORDER:** Indicates the order in which the column above will be sorted: Ascending or Descending.
- **DISPLAY SIG:** Indicates whether the SIG should be displayed under each prescription or if it should be hidden.
- **GROUP BY STATUS:** Indicates whether the list should be grouped by status (Active, Discontinued, Hold, etc…) or not.
- **DISPLAY ORDER COUNT:** Indicates whether the number of orders under each group should be displayed beside the group name. Example _____ACTIVE (3 orders)_____

```
Select ePharmacy Menu Option: PF  ePharmacy Medication Profile Division
Preferences

     ALBANY ISC's current default view:
     ---------------------------------
     EXP/CANCEL CUTOFF  : 200 DAYS
     SORT BY            : Rx#
     SORT ORDER         : ASCENDING
     DISPLAY SIG        : ON
     GROUP BY STATUS    : OFF
     DISPLAY ORDER COUNT: OFF

     Delete this default view? NO// <Enter>

EXP/CANCEL CUTOFF: 200// <Enter> DAYS
SORT BY: RX//  <Enter> Rx#
SORT ORDER: ASCENDING// ^EXP
EXP/CANCEL CUTOFF: 200// 120 DAYS
SORT BY: RX//  <Enter> Rx#
SORT ORDER: ASCENDING// <Enter>
DISPLAY SIG: ON// <Enter>
GROUP BY STATUS: OFF// <Enter>
DISPLAY ORDER COUNT: OFF//<Enter>

Saving...OK!
```

If there is a set of preferences already on file for the division the user is logged under, the option to delete such preferences is presented to the user as seen above.

ePharmacy Site Parameters

The ePharmacy Site Parameters file (#52.86) has been added to store ePharmacy Site parameters by division. Along with this, a new EPHARMACY SITE PARAMETERS [PSO ePHARM SITE PARAMETERS] option has been added to the existing ePharmacy Menu [PSO EPHARMACY MENU].

This new option requires the PSORPH security key.

The following site parameters are definable using this option:

- ALLOW ALL REJECTS: Requires a YES or NO answer. It is highly suggested that NO be answered at this prompt. Answering YES to this prompt will signify that all prescription fills with ePharmacy rejected claims will automatically be placed on the Third Party Payer Rejects - Worklist, also known as the Pharmacy Reject Worklist. This is in addition to Refill-Too-Soon (79), Drug Utilization Review (DUR/88), CHAMPVA rejects and TRICARE rejects, which are automatically placed on the Pharmacy Reject Worklist. Any individually defined reject codes in this file will be overridden when a "YES" answer is given.
- REJECT WORKLIST DAYS: This is the number of days an uncommented reject can remain on the reject worklist without being included in the nightly reject worklist alert mail message.

The following prompts appear consecutively and the user may enter as many reject codes as they desire along with the manner in which each will be allowed to be placed on the reject worklist.

- REJECT CODE: A valid third party claim reject code should be entered. A listing of these codes is provided when double question marks (??) are entered for this prompt. Valid codes are contained within the BPS NCPDP REJECT CODES file (#9002313.93). Also, a value defined in this field triggers definition of USER field (#2) and DATE OF LAST UPDATE field (#3). Any individually defined codes will be overridden when the ALLOW ALL REJECTS prompt is answered as YES.
- AUTO SEND: This prompt is a companion to the REJECT CODE prompt. Enter YES to allow the entered REJECT CODE to be automatically placed on the Pharmacy Reject Worklist or NO to require Outpatient Pharmacy Electronic Claims Coordinator (OPECC) intervention to do so. A null value will be treated the same as entering NO in this field.

The following is an example of definition of ePharmacy Site Parameters:

```
Select ePharmacy Menu Option: SP  ePharmacy Site Parameters

Regardless of any parameters defined, Refill-Too-Soon, Drug Utilization
Review(DUR), CHAMPVA and TRICARE rejects will always be placed on the Third Party
Payer Rejects - Worklist, also known as Pharmacy Reject Worklist.  These
parameters are uneditable and are the default parameters.


Division: ALBANY ISC    500
         ...OK? Yes//   (Yes)

ALLOW ALL REJECTS: NO//
REJECT WORKLIST DAYS: 7
Select REJECT CODE: DAW ??

Select REJECT CODE: ??

   Choose from:   (The following are previously defined reject code(s))
  22     M/I Dispense As Written (DAW)/Product Selection Co             YES



     You may enter a new REJECT CODE, if you wish


*** Enter a valid third party reject code from the previously entered codes
*** above, enter a new code, or enter one from the provided listing below.
*** Valid codes are those defined in BPS NCPDP REJECT CODES file (#9002313.93).

     A valid third party claim reject code should be entered.  A listing
        of these codes is provided when double question marks are entered
        for this field.

   Choose from:
   10        M/I Patient Gender Code
   11        M/I Patient Relationship Code
   12        M/I Place of Service
   13        M/I Other Coverage Code
   14        M/I Eligibility Clarification Code
   15        M/I Date of Service
   16        M/I Prescription/Service Reference Number
   17        M/I Fill Number
   18        M/I Metric Quantity
   19        M/I Days Supply
   20        M/I Compound Code
   21        M/I Product/Service ID
   22        M/I Dispense As Written (DAW)/Product Selection Code
   23        M/I Ingredient Cost Submitted
   24        M/I SALES TAX
   25        M/I Prescriber ID
   26        M/I Unit Of Measure
   27        (FUTURE USE)
                ^
Select REJECT CODE: 22         M/I Dispense As Written (DAW)/Product Selection C
ode
         ...OK? Yes//   (Yes)

CODE: 22//
AUTO SEND: NO// Y  YES
Select REJECT CODE: 75       Prior Authorization Required
         ...OK? Yes//   (Yes)

CODE: 75//
AUTO SEND: NO//
Select REJECT CODE:


Division:
```

Third Party Payer Rejects - View/Process
[PSO REJECTS VIEW/PROCESS]

This option provides information about rejects that have been on the Third Party Payer Rejects – Worklist. This option allows the user to find, display and reopen rejects previously resolved from the Third Party Payer Rejects – Worklist in order to take action on them again.

The user can choose to view rejects for one, multiple, or all Outpatient Pharmacy Divisions.

Example: Viewing and Resolving Open Rejects

```
Select ePharmacy Menu Option: VP  Third Party Payer Rejects - View/Process

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION: ^ALL
```

The user can select one of the following selections to filter the data displayed:

- **DATE RANGE**: Selects a date range (Default: Last 90 days).

```
BEGIN REJECT DATE: T-90// <Enter> (MAR 09, 2007)

END REJECT DATE: T// <Enter> (JUN 07, 2007)
```

- **(P)ATIENT**: Selects a single patient, multiple patients, or all patients.
- **(D)RUG:** Selects a single drug, multiple drugs, or all drugs.
- **(R)x**: Selects a single prescription number, or multiple prescription numbers.
- **(I)NSURANCE:** Selects a single insurance, multiple insurances, or all insurances.

```
     Select one of the following:

          P         PATIENT
          D         DRUG
          R         Rx
          I         INSURANCE

By (P)atient, (D)rug, (R)x or (I)nsurance: P// INSURANCE

Enter the whole or part of the Insurance Company
name for which you want to view/process REJECTS.

  INSURANCE: TEST INS
ANOTHER ONE: <Enter>
```

Next, the user can choose to display either Unresolved, Resolved, or Both types of rejects.

```
     Select one of the following:

          U         UNRESOLVED
          R         RESOLVED
          B         BOTH

(U)NRESOLVED, (R)RESOLVED or (B)OTH REJECT statuses: B// <Enter> BOTH
Please wait...
```

----------example continues----------

Example: Viewing and Resolving Open Rejects (continued)

```
Rejects Processing Screen     Nov 21, 2005@08:27:37          Page:    1 of    1
Divisions: ALL
Selection: ALL REJECTS FOR TEST INS
  # Rx#          PATIENT(ID)[^]           DRUG                  REASON
  1 100003872    OPPATIENT,FOUR(1322P         A AND Z OINTMENT     DUR:
    Payer Message:
  2 100003873    OPPATIENT,FOUR(1322P         PHYTONADIONE 5MG TAB 79 :REFILL
TOO SO
    Payer Message:
  3 100003873    OPPATIENT,FOUR(1322P         PHYTONADIONE 5MG TAB DUR:
    Payer Message:
  4 100003785    OPPATIENT,TEN(3222)  ALBUMIN 5% 250ML     DUR:
    Payer Message:
  5 100003882    OPPATIENT,TEN(3222)  ALBUTEROL INHALER    DUR:
    Payer Message:
  6 100003884    OPPATIENT,TEN(3222)  TEMAZEPAM 15MG CAP   DUR:
    Payer Message:


          Select the entry # to view or ?? for more actions
DR  Sort by Drug          RE  Sort by Reason        RX  Sort by Prescription
PA  Sort by Patient       RF  Screen Refresh        GI  Group by Insurance
Select: Quit//
```

----------example continues----------

The following options are available on the screen above:

- DR – Sorts the list by the drug name.
- PA – Sorts the list by the patient's last name.
- RE – Sorts the list by the reject reason.
- RF – Refreshes the screen. (This selection retrieves DUR/ REFILL TOO SOON rejects that happened after the screen was originally populated.)
- RX – Sorts the list by Prescription number.
- GI – Groups the rejects by Insurance Company name.

The following two sets of characters denote the order by which the list is being sorted: [^] for ascending and [v] for descending. The order inverts every time the user selects the same column by which the list is already ordered . Thus, if the list is currently ordered by Patient in ascending order ([^]) and the user types "PA", the list will be re-sorted in descending order and the order indicator will change to ([v])

The user selects a specific record to display all relevant information about the prescription and the claim submitted to the payer.

Example: Viewing and Resolving Open Rejects (continued)

```
Reject Information(UNRESOLVED)Nov 21, 2005@08:29:30          Page:    1 of    2
Division : ALBANY                                          NPI#: 17128842
Patient  : OPPATIENT,FOUR (000-01-1322P)  Sex: M            DOB: JAN 13,1922(83)
Rx#      : 100003873/0      ECME#: 000000504455 Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA                        NDC Code: 54629-0600-01
_____________________________________________________________________________
REJECT Information___________________________________________________________
Reject Type    : 79 - REFILL TOO SOON received on NOV 15, 2005@14:13:51
Reject Status  : OPEN/UNRESOLVED
Payer Addl Msg : NEXT RFL 111805,DAYS TO RFL 3,LAST FILL 101805 AT YOUR
                 PHARM,REFILL TOO SOON
Reason Code    : ER (OVERUSE PRECAUTION )
DUR Text       : RETAIL
DUR Add Msg    : THIS IS THE DUR ADDITIONAL TEXT._____________________________

OTHER REJECTS________________________________________________________________
29 - M/I Number Refills Authorized
39 - M/I Diagnosis Code______________________________________________________

INSURANCE Information________________________________________________________
Insurance      : TEST INS
Contact        : 1-800-555-5050
BIN            : 741852
_____________________________________________________________
+         Enter ?? for more actions
VW  View Rx               IGN Ignore Reject        OVR Submit Override Codes
MP  Medication Profile    RES Resubmit Claim       CSD Change Suspense Date
Select: Next Screen// IGN   Ignore Reject
```

----------example continues----------

These options are available on the screen above:

- VW (View) – Takes the user to the *View Prescription* option to review details for that prescription.
- MP (Medication Profile) – Invokes the patient's list of medication.
- IGN (Ignore Reject) – Allows the user to close or resolve the DUR/REFILL TOO SOON Reject without resubmission to the payer. The user will be required to enter a free-text comment and his/her electronic signature.
- RES (Resubmit Claim) – Allows the user to re-submit the claim to the payer. This will automatically mark the reject resolved.
- OVR (Submit Override Codes) – Allows the user to re-submit the claim by entering NCPDP override codes, which shall trigger a new claim submission be sent to the payer.
- CSD (Change Suspense Date) – Allows the user to change the fill date for suspended prescriptions.

Hidden actions:

- COM (Add Comments) – Allows the user to add reject specific comments. This comments are local to the Reject Worklist and View/Process options and are not transmitted to ECME.
- CLA (Submit Clarif. Code) – Allows the user to re-submit a claim with Clarification Codes.
- ED (Edit Rx) – Allows the user to edit the prescription.
- PA (Submit Prior Auth.) – Allows the user to re-submit a claim with Prior Authorization information.
- ARI (View Addtnl Rej Info) – Allows the user to display additional reject information from the payer, if available.

- SDC (Suspense Date Calculation) – Allows the user to calculate a new suspense date based on Last Date of Service and Last Days Supply.
- SMA (Submit Multiple Actions) – Allows the user to resubmit a claim with multiple actions, including the following information: Prior Authorization, Submission Clarification Code, Reason for Service Code, Professional Service Code, and Result of Service Code.

(This page included for two-sided copying.)

Example: Viewing and Resolving Open Rejects (continued)

```
Enter your Current Signature Code:    SIGNATURE VERIFIED

Comments: changed quantity

     When you confirm this REJECT will be marked RESOLVED.

     Confirm? ? NO// Y  YES             [Closing...OK]
```

The following is a sample of the ECME Activity Log update that occurs when a reject is resolved:

Example: ECME Activity Log entry: Reject Resolved

```
Rx Activity Log               Nov 21, 2005@09:43:33          Page:    3 of    3
OPPATIENT,FOUR
  PID: 000-01-1322P                                  Ht(cm): _______ (______)
DOB: JAN 13,1922 (83)                               Wt(kg): _______ (______)
+                                                                            .
1   11/15/05@14:13:52   ORIGINAL        OPPHARMACIST4,THREE
Comments: Submitted to ECME:REJECT WORKLIST-DUR OVERRIDE CODES(DD/M0/1B)-E
PAYABLE

ECME REJECT Log:
#  Date/Time Rcvd    Rx Ref    Reject Type     STATUS     Date/Time Resolved
==============================================================================
1  12/11/05@19:03:31 ORIGINAL  DUR             RESOLVED   12/12/05@16:45:21
Comments: CLAIM RE-SUBMITTED
2  5/30/06@19:13:57  REFILL 2  DUR             RESOLVED   5/31/06@15:58:32
Comments: CLAIM RE-SUBMITTED

          Enter ?? for more actions

Select Action: Quit//
```

Third Party Payer Rejects - Worklist
[PSO REJECTS WORKLIST]

This option gives the user the ability to process Third Party Payer Rejects, CHAMPVA Non-billable rejects and TRICARE Non-billable rejects for one, multiple, or all Outpatient Pharmacy Divisions. Only OPEN/UNRESOLVED rejects that have clinical significance, such as DUR and Fill Too Soon, and rejects transferred from the ECME user screen, are added to the Worklist. Once the reject is marked CLOSED/RESOLVED, it is automatically removed from the Worklist.

Example: Resolving Open Rejects

```
Select Rx (Prescriptions) Option: EPHARMACY Menu


   IR     Ignored Rejects Report
   MP     ePharmacy Medication Profile (View Only)
   NV     NDC Validation
   PF     ePharmacy Medication Profile Division Preferences
   SP     ePharmacy Site Parameters
   VP     Third Party Payer Rejects - View/Process
   WL     Third Party Payer Rejects - Worklist
   TC     TRICARE CHAMPVA Bypass/Override Report


Select ePharmacy Menu Option: WL  Third Party Payer Rejects - Worklist

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION: ^ALL
```

```
Insurance Rejects – Worklist   Nov 09, 2010@11:24:10          Page:    1 of    1
Divisions: ALL
Selection: ALL UNRESOLVED REJECTS
  # Rx#          PATIENT(ID)[^]           DRUG                  REASON
  1 100003521    OPPATIENT,TWELVE(5444)   ACETYLCYSTEINE 20% 3 79 :REFILL TOO SO
    Payer Message: PLAN = 8906    NEXT FILL: 20050429
  2 100003521    OPPATIENT,TWELVE(5444)   ACETYLCYSTEINE 20% 3 79 :REFILL TOO SO
    Payer Message: RTS – Rx: 9306343 DT: 31-MAR-2005 DS: 30 RD: 23-APRIL 2005
  3 100003872    OPPATIENT,FOUR(1322P)    A AND Z OINTMENT     DUR:
    Payer Message: DUR Reject Error
                              CHAMPVA - Non-DUR/RTS
  4 101358       OPCVACARE,ONE(7895)      BACLOFEN 10MG TABS   07 :M/I Cardholde
    Payer Message:
  5 100923       OPCVACARE,TWO(4933)      LORAZEPAM 1MG TAB    07 :M/I Cardholde
    Payer Message:
                              TRICARE - Non-DUR/RTS
  6 101359       OPTRICARE,ONE(7894)      BACLOFEN 10MG TABS   07 :M/I Cardholde
    Payer Message:
  7 100924       OPTRICARE,TRI(4932)      LORAZEPAM 1MG TAB    07 :M/I Cardholde
    Payer Message:
                                  OTHER REJECTS
  8 101173       IBPATIENT,ONE(9877)      FENOPROFEN 300MG CAP 08 :M/I Person Co
    Payer Message:
  9 101130       OPPATIENT,ONE(4589)      CHLORAMBUCIL 2MG TAB NN :Transaction R
    Payer Message:

          Select the entry # to view or ?? for more actions
DR  Sort by Drug          RE  Sort by Reason        RX  Sort by Prescription
```

```
PA  Sort by Patient       RF  Screen Refresh        GI  Group by Insurance
Select: Quit// 3
```

Hidden actions:

- TRI (Show/Hide TRICARE) - When toggled to Show, TRICARE Non-DUR/RTS rejects will be automatically displayed at the end of the listing. Toggling the TRI action to Hide will remove them from the screen.
- CVA (Show/Hide CHAMPVA) - When toggled to Show, CHAMPVA Non-DUR/RTS rejects will be automatically displayed at the end of the listing. Toggling the CVA action to Hide will remove them from the screen.

These options are available on the following screen:

- VW (View Rx) – Takes the user to the View Prescription option to review details for that prescription.
- MP (Medication Profile) – Invokes the patient's list of medication.
- IGN (Ignore Reject) – Allows the user to close or resolve the DUR/REFILL TOO SOON Reject without resubmission to the payer. The user will be required to enter a free-text comment and his/her electronic signature.
- RES (Resubmit Claim) – Allows the user to re-submit the claim to the payer. This will automatically mark the reject resolved.
- OVR (Submit Override Codes) – Allows the user to re-submit the claim by entering NCPDP override codes, which shall trigger a new claim submission be sent to the payer. This option is active for DUR rejects only.
- CSD (Change Suspense Date) – Allows the user to change the fill date for suspended prescriptions.

Hidden actions:

- COM (Add Comments) – Allows the user to add reject specific comments. These comments are local to the Reject Worklist and View/Process options and are not transmitted to ECME.
- CLA (Submit Clarif. Code) – Allows the user to re-submit a claim with Clarification Codes.
- ED (Edit Rx) – Allows the user to edit the prescription.
- PA (Submit Prior Auth.) – Allows the user to re-submit a claim with Prior Authorization information.
- ARI (View Addtnl Rej Info) – Allows the user to display additional reject information from the payer, if available.
- SDC (Suspense Date Calculation) – Allows the user to calculate a new suspense date.
- SMA (Submit Multiple Actions) – Allows the user to resubmit a claim with multiple actions.

Example: Resolving Open Rejects (continued)

```
Reject Information(UNRESOLVED)Nov 21, 2005@09:51:15          Page:    1 of    1
Division : ALBANY                                          NPI#: 17128842
Patient  : OPPATIENT,FOUR(000-01-1322P)  Sex: M             DOB: JAN 13,1922(83)
Rx#      : 100003872/0      ECME#: 000000504454 Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA                         NDC Code: 54629-0600-01

REJECT Information
Reject Type    : 88 - DUR REJECT received on NOV 15, 2005@14:11:51
Reject Status  : OPEN/UNRESOLVED
Payer Addl Msg : DUR Reject Error
Reason Code    :
DUR Text       :

INSURANCE Information
Insurance      : TEST INS
Contact        :
BIN            : 741852
Group Number   : 12454
Cardholder ID  : 000011322P

          Enter ?? for more actions
VW  View Rx               IGN Ignore Reject        OVR Submit Override Codes
MP  Medication Profile    RES Resubmit Claim       CSD Change Suspense Date
Select: Quit// OVR   Submit Override Codes
```

When a claim is rejected, typically the Payer returns a “Reason for Service Code”, which becomes the default for the “Reason for Service Code” prompt. The user can use this reason to then select which code is entered for “Professional Service Code” and “Result of Service Code”.

Available codes for “Professional Service Code” include:

Code	Description
00	NO INTERVENTION
AS	PATIENT ASSESSMENT
CC	COORDINATION OF CARE
DE	DOSING EVALUATION/DETERMINATION
DP	DOSAGE EVALUATED
FE	FORMULARY ENFORCEMENT
GP	GENERIC PRODUCT SELECTION
M0	PRESCRIBER CONSULTED
MA	MEDICATION ADMINISTRATION
MB	OVERRIDING BENEFIT
MP	PATIENT WILL BE MONITORED
MR	MEDICATION REVIEW
P0	PATIENT CONSULTED
PA	PREVIOUS PATIENT TOLERANCE
PE	PATIENT EDUCATION/INSTRUCTION
PH	PATIENT MEDICATION HISTORY
PM	PATIENT MONITORING
PT	PERFORM LABORATORY REQUEST
R0	PHARMACIST CONSULTED OTHER SOURCE
RT	RECOMMENDED LABORATORY TEST
SC	SELF-CARE CONSULTATION
SW	LITERATURE SEARCH/REVIEW
TC	PAYER/PROCESSOR CONSULTED
TH	THERAPEUTIC PRODUCT INTERCHANGE
ZZ	OTHER ACKNOWLEDGEMENT

Available codes for “Result of Service Code” include:

Code	Description
00	NOT SPECIFIED
1A	FILLED AS IS, FALSE POSITIVE
1B	FILLED PRESCRIPTION AS IS
1C	FILLED, WITH DIFFERENT DOSE
1D	FILLED, WITH DIFFERENT DIRECTIONS
1E	FILLED, WITH DIFFERENT DRUG
1F	FILLED, WITH DIFFERENT QUANTITY
1G	FILLED, WITH PRESCRIBER APPROVAL
1H	BRAND-TO-GENERIC CHANGE
1J	RX-TO-OTC CHANGE
1K	FILLED, WITH DIFFERENT DOSAGE FORM
2A	PRESCRIPTION NOT FILLED

2B	NOT FILLED, DIRECTIONS CLARIFIED
3A	RECOMMENDATION ACCEPTED
3B	RECOMMENDATION NOT ACCEPTED
3C	DISCONTINUED DRUG
3D	REGIMEN CHANGED
3E	THERAPY CHANGED
3F	THERAPY CHANGED - COST INCREASE ACKNOWLEDGED
3G	DRUG THERAPY UNCHANGED
3H	FOLLOW-UP REPORT
3J	PATIENT REFERRAL
3K	INSTRUCTIONS UNDERSTOOD
3M	COMPLIANCE AID PROVIDED
3N	MEDICATION ADMINISTERED
4A	PRESCRIBED WITH ACKNOWLEDGEMENTS

Available codes for "Reason for Service Code" include:

Code	**Description**
AD	ADDITIONAL DRUG NEEDED
AN	PRESCRIPTION AUTHENTICATION
AR	ADVERSE DRUG REACTION
AT	ADDITIVE TOXICITY
CD	CHRONIC DISEASE MANAGEMENT
CH	CALL HELP DESK
CS	PATIENT COMPLAINT/SYMPTOM
DA	DRUG-ALLERGY
DC	DRUG-DISEASE (INFERRED)
DD	DRUG-DRUG INTERACTION
DF	DRUG-FOOD INTERACTION
DI	DRUG INCOMPATIBILITY
DL	DRUG-LAB CONFLICT
DM	APPARENT DRUG MISUSE
DR	DOSE RANGE CONFLICT
DS	TOBACCO USE
ED	PATIENT EDUCATION/INSTRUCTION
ER	OVERUSE
EX	EXCESSIVE QUANTITY
HD	HIGH DOSE
IC	IATROGENIC CONDITION
ID	INGREDIENT DUPLICATION
LD	LOW DOSE
LK	LOCK IN RECIPIENT
LR	UNDERUSE
MC	DRUG-DISEASE (REPORTED)
MN	INSUFFICIENT DURATION
MS	MISSING INFORMATION/CLARIFICATION
MX	EXCESSIVE DURATION
NA	DRUG NOT AVAILABLE
NC	NON-COVERED DRUG PURCHASE
ND	NEW DISEASE/DIAGNOSIS
NF	NON-FORMULARY DRUG

NN	UNNECESSARY DRUG
NP	NEW PATIENT PROCESSING
NR	LACTATION/NURSING INTERACTION
NS	INSUFFICIENT QUANTITY
OH	ALCOHOL CONFLICT
PA	DRUG-AGE
PC	PATIENT QUESTION/CONCERN
PG	DRUG-PREGNANCY
PH	PREVENTIVE HEALTH CARE
PN	PRESCRIBER CONSULTATION
PP	PLAN PROTOCOL
PR	PRIOR ADVERSE REACTION
PS	PRODUCT SELECTION OPPORTUNITY
RE	SUSPECTED ENVIRONMENTAL RISK
RF	HEALTH PROVIDER REFERRAL
SC	SUBOPTIMAL COMPLIANCE
SD	SUBOPTIMAL DRUG/INDICATION
SE	SIDE EFFECT
SF	SUBOPTIMAL DOSAGE FORM
SR	SUBOPTIMAL REGIMEN
SX	DRUG-GENDER
TD	THERAPEUTIC
TN	LABORATORY TEST NEEDED
TP	PAYER/PROCESSOR QUESTION
UD	DUPLICATE DRUG

Example: Resolving Open Rejects (continued)

```
Professional Service Code: MR       MEDICATION REVIEW
Result of Service Code   : 1D       FILLED, WITH DIFFERENT DIRECTIONS

     Professional Service Code: MR - MEDICATION REVIEW
     Result of Service Code   : 1D - FILLED, WITH DIFFERENT DIRECTIONS

     When you confirm, a new claim will be submitted for
     the prescription and this REJECT will be marked
     resolved.

     Confirm? ? YES// <Enter>

Prescription 100003872 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit

IN PROGRESS-Waiting to process response
E PAYABLE
```

The following is a sample of the ECME Activity Log update that occurs when a reject is resolved.

Example: ECME Activity Log entry: Reject Resolved

```
Rx Activity Log               Nov 21, 2005@11:11:53          Page:    3 of    3
OPPATIENT,FOUR
  PID: 000-01-1322P                                Ht(cm): _______ (______)
  DOB: JAN 13,1922 (83)                            Wt(kg): _______ (______)
+
#   Date/Time           Rx Ref          Initiator Of Activity
================================================================================
1   5/16/07@14:40:40     ORIGINAL       OPPHARMACIST4,THREE
Comments: Submitted to ECME:WINDOW FILL(NDC:00058-2467-05)
2   5/16/07@14:40:40    ORIGINAL        OPPHARMACIST4,THREE
Comments: Billing quantity submitted through ECME: 25.000 (ML)
3   5/20/07@14:21:52     ORIGINAL        OPPHARMACIST4,THREE
Comments: Submitted to ECME:REJECT WORKLIST-DUR OVERRIDE CODES(AD/AS/1B)-E
 REJECTED
4   5/20/07@14:21:52     ORIGINAL        OPPHARMACIST4,THREE
Comments: Billing quantity submitted through ECME: 25.000 (ML)



ECME REJECT Log:
#   Date/Time Rcvd       Rx Ref    Reject Type      STATUS    Date/Time Resolved
================================================================================
1   5/16/07@14:40:40     ORIGINAL    DUR                RESOLVED
5/20/07@14:21:52
Comments: CLAIM RE-SUBMITTED

          Enter ?? for more actions

Select Action:Quit//
```

TRICARE CHAMPVA Bypass/Override Report

[PSO Bypass/Override Report]

This menu option is locked with the PSO TRICARE/CHAMPVA MGR security key.

This option provides information in a detail or summary report format that will list prescriptions where the Bypass or Override was performed to enable processing of these TRICARE and CHAMPVA prescriptions. The user has the ability to list (I)npatient; (N)on-Billable Product; (R)eject Override; or(A)ll. Besides allowing the selection of all types, the report allows the selection of one or two types. For example, the user can select Non-billable and Reject for the same report.

Example: Accessing the TRICARE CHAMPVA Bypass/Override Report

```
Select Rx (Prescriptions) Option: epharmacy Menu


   IR     Ignored Rejects Report
   MP     ePharmacy Medication Profile (View Only)
   NV     NDC Validation
   PF     ePharmacy Medication Profile Division Preferences
   SP     ePharmacy Site Parameters
   VP     Third Party Payer Rejects - View/Process
   WL     Third Party Payer Rejects - Worklist
   TC     TRICARE CHAMPVA Bypass/Override Report


You've got PRIORITY mail!


 Select ePharmacy Menu Option: TC  TRICARE CHAMPVA Bypass/Override Report

     Select one of the following:

          D         DIVISION
          A         ALL

Select Certain Pharmacy (D)ivisions or (A)LL:
```

Example: TRICARE CHAMPVA Bypass/Override Report Filters and Data Elements

```
Select one of the following:
          D         DIVISION
          A         ALL
Select Certain Pharmacy (D)ivisions or (A)LL: DIVISION
Select ECME Pharmacy Division(s): BATTLE CREEK
  Selected:
          BATTLE CREEK
Select ECME Pharmacy Division(s): GRAND RAPIDS    MI  CBOC  515BY    VA GRAND RAPIDS
OPC  515BY    VA GRAND RAPIDS OPC
  Selected:
          BATTLE CREEK
          VA GRAND RAPIDS OPC
Select ECME Pharmacy Division(s):

Select one of the following:

          T         TRICARE
          C         CHAMPVA
          A         ALL

Select Eligibility (T)RICARE, (C)HAMPVA or (A)LL Entries: ALL// ALL

     Select one of the following:

          S         Summary
          D         Detail

Display (S)ummary or (D)etail Format: Detail//

START WITH TRANSACTION DATE: T-1// T-10  (APR 30, 2010)
  GO TO TRANSACTION DATE: T// T-9  (MAY 01, 2010)

     Select one of the following:

          I         INPATIENT
          N         NON-BILLABLE
          R         REJECT OVERRIDE
          P         PARTIAL FILL
          A         ALL

Select one of the following: **Can select multiples - limit of 2**  : <no default> ALL

    Select one of the following:

          S         SPECIFIC PHARMACIST(S)
          A         ALL PHARMACISTS

Select Specific Pharmacist(s) or include ALL Pharmacists: ALL//

    Select one of the following:

          S         SPECIFIC PROVIDER(S)
          A         ALL PROVIDERS

Select Specific Provider(s) or include ALL Providers: ALL//

     Select one of the following:

          R         Pharmacist
          P         Provider/Prescriber Name
```

```
Group/Subtotal Report by Pharmacy (R)Pharmacist or (P)rovider: <no default> Pharmacist

Do you want to capture report data for an Excel document? NO//

WARNING - THIS REPORT REQUIRES THAT A DEVICE WITH 132 COLUMN WIDTH BE USED.
IT WILL NOT DISPLAY CORRECTLY USING 80 COLUMN WIDTH DEVICES

DEVICE: HOME// 0;132;99  INCOMING TELNET

Please wait...
```

** When selecting from above, Specific Pharmacist(s), the user will be able to continue selecting Pharmacist(s) as necessary. This filter will have the same functionality as the Division/Insurance Company selection filters.

** When selecting from above, Specific Provider(s), the user will be able to continue selecting Provider(s) as necessary. This filter will have the same functionality as the Division/Insurance Company selection filters.

Example of TRICARE CHAMPVA Bypass/Override Report Summary

```
TRICARE CHAMPVA BYPASS/OVERRIDE AUDIT REPORT -    SUMMARY Print Date: NOV 10, 2010@10:05:26                          PAGE: 1
DIVISION(S): ALL
ELIGIBILITY: ALL
TC TYPES: INPATIENT, NON-BILLABLE PRODUCT, PARTIAL FILL, REJECT OVERRIDE
ALL PRESCRIPTIONS BY AUDIT DATE: From 10/31/10 through 11/10/10
==================================================================================================================

------------------------------------------------------------------------------------------------------------------
DIVISION: DIVISION ONE

****************************   CHAMPVA INPATIENT   *********************************

      PHARMACIST: PHARMACIST,ONE          -------------
      SUB-TOTALS                                 45.00
      RX COUNT                                   1
      MEAN                                       10.00

      PHARMACIST: PHARMACIST,TWO          -------------
      SUB-TOTALS                                 30.00
      RX COUNT                                   1
      MEAN                                       30.00
                                          -------------

CHAMPVA INPATIENT
SUBTOTALS                                        75.00
RX COUNT                                         2
MEAN                                             37.50

****************************   CHAMPVA NON-BILLABLE PRODUCT   ************************

      PHARMACIST: PHARMACIST,THREE         -------------
      SUB-TOTALS                                 20.00
      RX COUNT                                   1
      MEAN                                       20.00

CHAMPVA NON-BILLABLE PRODUCT
SUBTOTALS                                         20.00
RX COUNT                                          1
MEAN                                              20.00

****************************   CHAMPVA PARTIAL FILL   ************************************

       PHARMACIST: PHARMACIST,FOUR         -------------
       SUB-TOTALS                                16.20
       RX COUNT                                  2
       MEAN                                      8.10
```

```
       PHARMACIST: PHARMACIST,FIVE         -------------
       SUB-TOTALS                                 8.00
       RX COUNT                                   1
       MEAN                                       8.00


       PHARMACIST: PHARMACIST,SIX          -------------
       SUB-TOTALS                                 23.58
       RX COUNT                                   1
       MEAN                                       23.58


     CHAMPVA PARTIAL FILL
     SUBTOTALS                                    47.78
     RX COUNT                                     4
     MEAN                                         11.95

******************************   CHAMPVA REJECT OVERRIDE   ****************************

CHAMPVA REJECT OVERRIDE
SUBTOTALS                                          0.00
RX COUNT                                           0
MEAN                                               0.00

******************************   TRICARE INPATIENT   ****************************************

     TRICARE INPATIENT
     SUBTOTALS                                      11.93
     RX COUNT                                       1
     MEAN                                           11.93

******************************   TRICARE NON-BILLABLE PRODUCT   *****************************

       PHARMACIST: OPPHARM,ONE              -------------
       SUB-TOTALS                                     8.03
       RX COUNT                                       1
       MEAN                                           8.03


     TRICARE NON-BILLABLE PRODUCT
     SUBTOTALS                                        8.03
     RX COUNT                                         1
     MEAN                                             8.03

******************************   TRICARE PARTIAL FILL   ************************************

       PHARMACIST: OPPHARM,FOUR             -------------
       SUB-TOTALS                                     8.54
       RX COUNT                                       1
       MEAN                                           8.54
```

```
       PHARMACIST: OPPHARM,FIVE             -------------
       SUB-TOTALS                                 16.20
       RX COUNT                                   2
       MEAN                                       8.10


     TRICARE PARTIAL FILL
     SUBTOTALS                                   24.74
     RX COUNT                                    3
     MEAN                                         8.25

******************************   TRICARE REJECT OVERRIDE   **********************************

       PHARMACIST: OPPHARM,TWO              -------------
       SUB-TOTALS                                  29.17
       RX COUNT                                    3
       MEAN                                        9.72

       PHARMACIST: OPPHARM,THREE            -------------
       SUB-TOTALS                                  10.38
       RX COUNT                                    1
       MEAN                                        10.38


     TRICARE REJECT OVERRIDE
     SUBTOTALS                                     39.55
     RX COUNT                                      4
     MEAN                                          9.89

DIVISION DIVISION ONE                              -------------
SUBTOTALS                                          154.51
RX COUNT                                           9
MEAN                                               17.17
                                                   -------------
                                                   -------------
GRAND TOTALS                                       154.51
RX COUNT                                           9
MEAN                                               17.17
                                                   -------------



REPORT HAS FINISHED
Press Return to continue, '^' to exit:
```

(This page included for two-sided copying.)

Example of TRICARE CHAMPVA Bypass/Override Report Detail

```
TRICARE CHAMPVA BYPASS/OVERRIDE AUDIT REPORT -    DETAIL Print Date: OCT 31, 2010@11:59:22                          Page:  1
DIVISION(S): DIVISION ONE, DIVISION TWO
ELIGIBILITY: ALL
TC TYPES: INPATIENT, NON-BILLABLE PRODUCT, PARTIAL FILL, REJECT OVERRIDE
ALL PRESCRIPTIONS BY AUDIT DATE: From 09/01/10 through 09/30/10
==================================================================================================================
BENEFICIARY NAME/ID                 RX#               REF/ECME#         RX DATE           RX INFO
    ACTION DATE        USER NAME                         $BILLED       QTY         NDC#               DRUG
==================================================================================================================

------------------------------------------------------------------------------------------------------------------
DIVISION: DIVISION ONE

****************************   CHAMPVA INPATIENT   **********************************

CVAPATIENT,TWO/xxxx                 10750570B$        0/000009300476    02/13/10          C  RT  AC/N
    02/13/10           POSTMASTER                        45.00         180         06524328809        METFORMIN HCL 500MG TAB
    CHAMPVA INPATIENT/DISCHARGE

CVAPATIENT,THREE/xxxx               10750570B$        0/000009300476    02/13/10          C  RT  AC/N
   02/13/10            POSTMASTER                        30.00         180         06524328809        METFORMIN HCL 500MG TAB
   CHAMPVA INPATIENT/DISCHARGE

    CHAMPVA INPATIENT
    SUBTOTALS                                       75.00
    RX COUNT                                        2
    MEAN                                            37.50

****************************   CHAMPVA NON-BILLABLE PRODUCT*********************************

CVAPATIENT,ONE/xxxx                 10750570B$        0/000009300476    02/13/10          C  RT  AC/N
   02/13/10            POSTMASTER                        20.00         180         06524328809        DOCUSATE NA 100MG CA
   ec CHAMPVA DRUG NOT BILLABLE
   Fill Per Provider

         PSOUSER,ONE
         SUB-TOTALS                                 20.00
         RX COUNT                                   1
         MEAN                                       20.00


    CHAMPVA NON-BILLABLE PRODUCT
    SUBTOTALS                                       20.00
    RX COUNT                                        1
    MEAN                                            20.00

****************************   CHAMPVA PARTIAL FILL   ************************************
```

```
OPCVA,TWO/272P                      2719140           0/N/A             07/27/11          W ** AC/N
    07/27/11          PSOUSER,THREE                       8.18          60          51111048893        ACETAMINOPHEN 325MG TAB
    eC:CHAMPVA-DRUG NON BILLABLE
    CHAMPVA Partial Fill

OPCVA,TWO/272P                      2719141           0/000004315966    07/27/11          W ** AC/N
    07/27/11          PSOUSER,THREE                       8.02          1           58177032404        NITROGLYCERIN 0.4MG SL T
    79:Refill Too Soon
    CHAMPVA Partial Fill

          PSOUSER,ONE
          SUBTOTALS                                 16.20
          RX COUNT                                  2
          MEAN                                      8.10


TCOUSER,TWO/265P                    2719348           0/N/A             09/08/11          W ** AC/N
    09/08/11          PSOUSER,FOUR                        8.00          1           51111048893        ACETAMINOPHEN 325MG TAB
    CHAMPVA Partial Fill

          PSOUSER,TWO
          SUBTOTALS                                 8.00
          RX COUNT                                  1
          MEAN                                      8.00


TCOUSER,TWO/265P                    2719354           0/000004316183    09/08/11          W ** AC/N
    09/08/11          PSOUSER,FOUR                         23.58        30          00052047260        CALCIFEDIOL 20MCG CAPS
    79:Refill Too Soon
    22:M/I Dispense As Written (DAW)/Product Selection Code
    23:M/I Ingredient Cost Submitted
    24:M/I SALES TAX
    25:M/I Prescriber ID
    26:M/I Unit Of Measure
    CHAMPVA Partial Fill

          PSOUSER,FIVE
          SUBTOTALS                                 23.58
          RX COUNT                                  1
          MEAN                                      23.58


     CHAMPVA PARTIAL FILL
     SUBTOTALS                                      47.78
     RX COUNT                                       4
     MEAN                                           11.95

******************************   CHAMPVA REJECT OVERRIDE   ****************************

    CHAMPVA REJECT OVERRIDE
    SUBTOTALS                                       0.00
```

```
    RX COUNT                                        0
    MEAN                                            0.00

*****************************   TRICARE INPATIENT   **********************************

OPPATIENT,TRIONE/XXXX               10750XXXX$        0/000009300XXX     09/10/10         C  RT  AC/N
    09/10/10          POSTMASTER                          45.00          180        06XXX3XXXXX        METFORMIN HCL 500MG TAB
    TRICARE Inpatient/Discharge

     TRICARE INPATIENT
     SUBTOTALS                                     45.00
     RX COUNT                                      1
     MEAN                                          45.00

*****************************   TRICARE NON-BILLABLE PRODUCT*********************************

OPPATIENT,TRITWO/XXXX               1075XXXXX$        0/00000930XXXX     09/10/10         C  RT  AC/N
    09/10/10          OPPHARM,ONE                         20.00          180        06XXX3XXXXX        DOCUSATE NA 100MG CA
    eT TRICARE DRUG NOT BILLABLE
    Fill Per Provider

          OPPHARM,ONE
          SUB-TOTALS                               20.00
          RX COUNT                                 1
          MEAN                                     20.00


     TRICARE NON-BILLABLE PRODUCT
     SUBTOTALS                                     20.00
     RX COUNT                                      1
     MEAN                                          20.00

*****************************   TRICARE REJECT OVERRIDE   **********************************

OPPATIENT,TRIFOUR/XXXX              107XXXX0B$        0/00000930XXXX     09/10/10         C  RT  AC/N
    09/10/10           OPPHARM,ONE                        20.00          180        06524328809        DOCUSATE NA 100MG CA
    50:Non-Matched Pharmacy Number
    25:M/I Prescriber ID

          OPHARM,ONE
          SUB-TOTALS                               20.00
          RX COUNT                                 1
          MEAN                                     20.00


     TRICARE REJECT
     SUBTOTALS                                     20.00
     RX COUNT                                      1
     MEAN                                          20.00

DIVISION: DIVISION ONE                             -------------
```

```
SUBTOTALS                                          180.00
RX COUNT                                           6
MEAN                                               30.00
                                                   -------------

DIVISION: DIVISION TWO

****************************   CHAMPVA INPATIENT   **********************************
CVAPATIENT,TWO/xxxx                 10750570B$        0/000009300476    02/13/10          C  RT  AC/N
   02/13/10           POSTMASTER                          10.00         180         06524328809        METFORMIN HCL 500MG TAB
   CHAMPVA INPATIENT/DISCHARGE
      SUB-TOTALS                              10.00
      RX COUNT                                1
      MEAN                                    10.00

CVAPATIENT,THREE/xxxx               10750570B$        0/000009300476    02/13/10          C  RT  AC/N
   02/13/10           POSTMASTER                          40.00         180         06524328809        METFORMIN HCL 500MG TAB
   CHAMPVA INPATIENT/DISCHARGE

      SUB-TOTALS                              40.00
      RX COUNT                                1
      MEAN                                    40.00

    CHAMPVA INPATIENT
    SUBTOTALS                                 50.00
    RX COUNT                                  2
    MEAN                                      25.00

****************************   CHAMPVA NON-BILLABLE PRODUCT*********************************

CVAPATIENT,ONE/xxxx                 10750570B$        0/000009300476    02/13/10          C  RT  AC/N
   02/13/10           POSTMASTER                          60.00         180         06524328809        DOCUSATE NA 100MG CA
   ec CHAMPVA DRUG NOT BILLABLE
   Fill Per Provider

      OPUSER,SIX
      SUB-TOTALS                              60.00
      RX COUNT                                1
      MEAN                                    60.00


    CHAMPVA NON-BILLABLE PRODUCT
    SUBTOTALS                                 60.00
    RX COUNT                                  1
    MEAN                                      60.00

****************************   CHAMPVA PARTIAL FILL   ************************************

OPCVA,TWO/272P                      2719140           0/N/A             07/27/11          W ** AC/N
    07/27/11          OPUSER,THREE                        8.18          60          51111048893        ACETAMINOPHEN 325MG TAB
    eC:CHAMPVA-DRUG NON BILLABLE
```

```
    CHAMPVA Partial Fill

OPCVA,TWO/272P                      2719141           0/000004315966    07/27/11          W ** AC/N
    07/27/11          OPUSER,THREE                        8.02          1           58177032404        NITROGLYCERIN 0.4MG SL T
    79:Refill Too Soon
    CHAMPVA Partial Fill

          OPUSER,TWO
          SUBTOTALS                                 16.20
          RX COUNT                                  2
          MEAN                                      8.10


     CHAMPVA PARTIAL FILL
     SUBTOTALS                                      16.20
     RX COUNT                                       2
     MEAN                                           8.10

******************************   CHAMPVA REJECT OVERRIDE   ****************************

    CHAMPVA REJECT OVERRIDE
    SUBTOTALS                                       0.00
    RX COUNT                                        0
    MEAN                                            0.00

*****************************   TRICARE INPATIENT   **********************************

OPPATIENT,TRISIX/XXXX               107XXXXXX$        0/00000930XXXX     09/10/10         C  RT  AC/N
    09/10/10         POSTMASTER                          10.00          180        06XXXXXXXXX        METFORMIN HCL 500MG TAB
    PATIENT IS CURRENTLY ON A WEEKEND PASS AND WILL RETURN ON MONDAY 09/13/2010.

OPPATIENT,TRISEVEN/XXXX             107XXXXXB$        0/0000093XXXXX     09/10/10         C  RT  AC/N
    09/10/10          POSTMASTER                          40.00          180        06XXXXXXXXX        METFORMIN HCL 500MG TAB
    PATIENT IS CURRENTLY ON A WEEKEND PASS AND WILL RETURN ON MONDAY 09/13/2010.

     TRICARE INPATIENT
     SUB-TOTALS                                     50.00
     RX COUNT                                       2
     MEAN                                           50.00

*****************************   TRICARE NON-BILLABLE PRODUCT   **********************

OPPATIENT,TRIEIGHT/XXXX             107XXXXXX$        0/000009300XXX     09/10/10         C  RT  AC/N
    09/10/10 OPPHARM,THREE                              60.00          180         06XXX3XXXXX       DOCUSATE NA 100MG CA
    eT TRICARE DRUG NOT BILLABLE
    Fill Per Provider

          OPHRAM,THREE
          SUBTOTALS                                 60.00
          RX COUNT                                  1
```

```
          MEAN                                    60.00

     TRICARE NON-BILLABLE PRODUCT
     SUBTOTALS                                    60.00
     RX COUNT                                     1
     MEAN                                         60.00

****************************   TRICARE REJECT OVERRIDE   ****************************

OPPATIENT,TRININE/XXXX            107XXXXXX$        0/00000930XXXX     09/10/10         C  RT  AC/N
    09/10/10 OPHARM,TWO                                 20.00          180        06XXXXXXXXX        METFORMIN HCL 500MG TAB
    Claim ID: VA2005-056XXXX-XXXXXX-0007XXX
    50:Non-Matched Pharmacy Number
    25:M/I Prescriber ID

           OPPHARM,TWO
           SUBTOTALS                              20.00
           RX COUNT                               1
           MEAN                                   20.00

     TRICARE REJECT
     SUBTOTALS                                    20.00
     RX COUNT                                     1
     MEAN                                         20.00

DIVISION: DIVISION TWO                            -------------
SUBTOTALS                                         200.00
RX COUNT                                          7
MEAN                                              28.57
                                                  -------------
                                                  -------------
GRAND TOTALS                                      380.00
RX COUNT                                          13
MEAN                                              29.23
                                                  -------------



REPORT HAS FINISHED

Press RETURN to continue, '^' to exit:
```

TRICARE/CHAMPVA Reject Processing

The Third Party Payer Rejects - Worklist [PSO REJECTS WORKLIST] and Third Party Payer Rejects - View/Process [PSO REJECTS VIEW/PROCESS] options have been modified in the following manner:

1. Display of non-DUR/RTS rejects

- Non-DUR/RTS TRICARE and CHAMPVA rejections each will be segregated at the end of the displayed information. They will be denoted with a "TRICARE - Non-DUR/RTS" or "CHAMPVA - Non-DUR/RTS" header. This header remains regardless of whether the GI - Group by Insurance action is toggled on or off. The TRICARE and CHAMPVA sections sort in the same manner as the main sort for non-TRICARE/CHAMPVA prescriptions (by Rx, drug, patient).

```
Insurance Rejects-Worklist    Aug 13, 2008@16:04:05          Page:    1 of    1
Division  : ALBANY ISC
Selection : ALL UNRESOLVED REJECTS
  # Rx#          PATIENT(ID) [^]          DRUG                  REASON
  1 101238       ECMEIBTEST,ONE(5566)     MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
    Payer Message:
  2 100739       ECMEPAT,TWO(8887)        BENZTROPINE 2MG TAB  79 :REFILL TOO SO
    Payer Message:
  3 101960       OPTRICARE,ONE(4789)      ACETAZOLAMIDE 250MG  79 :REFILL TOO SO
    Payer Message:
                              CHAMPVA - Non-DUR/RTS
  4 101358       OPCVACARE,ONE(7895)      BACLOFEN 10MG TABS   07 :M/I Cardholde
    Payer Message:
  5 100923       OPCVACARE,TWO(4933)      LORAZEPAM 1MG TAB    07 :M/I Cardholde
    Payer Message:
                              TRICARE - Non-DUR/RTS
  6 101980       OPTRICARE,ONE(4789)      DANTROLENE 25MG CAP  14 :M/I Eligibili
    Payer Message:









          Select the entry # to view or ?? for more actions
DR  Sort by Drug          RE  Sort by Reason        RX  Sort by Prescription
PA  Sort by Patient       RF  Screen Refresh        GI  Group by Insurance
Select: Quit//
```

- TRICARE and CHAMPVA DUR/RTS rejects display with all other DUR/RTS rejects. See the boxed text in the example below. Sequences 5 and 9 are rejects for the same prescription. Also note that in the following example GI - Group by Insurance action is toggled OFF.

```
Insurance Rejects-Worklist    Aug 13, 2008@16:10:22          Page:    1 of    1
Division  : ALBANY ISC
Selection : ALL UNRESOLVED REJECTS
  # Rx#          PATIENT(ID) [^]          DRUG                  REASON
  1 101238       ECMEIBTEST,ONE(5566)     MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
    Payer Message:
  2 100739       ECMEPAT,TWO(8887)        BENZTROPINE 2MG TAB  79 :REFILL TOO SO
    Payer Message:
  3 101358       OPCVACARE,ONE(7895)      BACLOFEN 10MG TABS   07 :REFILL TOO SO
    Payer Message:
  4 101960       OPTRICARE,ONE(4789)      ACETAZOLAMIDE 250MG  79 :REFILL TOO SO
    Payer Message:
  5 101981       OPTRICARE,ONE(4789)      ATENOLOL 100MG TAB   79 :REFILL TOO SO
    Payer Message:
                              CHAMPVA - Non-DUR/RTS
  6 101358       OPCVACARE,ONE(7895)      BACLOFEN 10MG TABS   07 :M/I Cardholde
    Payer Message:
  7 100923       OPCVACARE,TWO(4933)      LORAZEPAM 1MG TAB    07 :M/I Cardholde
    Payer Message:
                              TRICARE - Non-DUR/RTS
  8 101980       OPTRICARE,ONE(4789)      DANTROLENE 25MG CAP  14 :M/I Eligibili
    Payer Message:
  9 101981       OPTRICARE,ONE(4789)      ATENOLOL 100MG TAB   14 :M/I Eligibili
    Payer Message:



          Select the entry # to view or ?? for more actions
DR  Sort by Drug          RE  Sort by Reason        RX  Sort by Prescription
PA  Sort by Patient       RF  Screen Refresh        GI  Group by Insurance
Select: Quit//
```

When GI - Group by Insurance action is toggled ON, the headers "TRICARE" and “CHAMPVA” display, and these "TRICARE" and “CHAMPVA” sections sort alphabetically within RTS/DUR insurances. These TRICARE/CHAMPVA sections are separate from the Non-DUR/RTS section that displays at the end of the listing.

(This page included for two-sided copying.)

Example with GI action toggled on:

```
Insurance Rejects-Worklist    Aug 13, 2008@16:12:46          Page:    1 of    1
Division  : ALBANY ISC
Selection : ALL UNRESOLVED REJECTS GROUPED BY INSURANCE
  # Rx#          PATIENT(ID) [^]          DRUG                 REASON
                              BLUE CROSS BLUE SHIELD
  1 100739       ECMEPAT,TWO(8887)        BENZTROPINE 2MG TAB  79 :REFILL TOO SO
    Payer Message:
                                     CHAMPVA
  2 101358       OPCVACARE,ONE(7895)      BACLOFEN 10MG TABS   07 :REFILL TOO SO
    Payer Message:
                                     TRICARE
  3 101960       OPTRICARE,ONE(4789)      ACETAZOLAMIDE 250MG  79 :REFILL TOO SO
    Payer Message:
                               ZENITH ADMINISTATORS
  4 101238       ECMEIBTEST,ONE(5566)     MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
    Payer Message:

 5 101981       OPTRICARE,ONE(4789)      ATENOLOL 100MG TAB   79 :REFILL TOO SO
   Payer Message:
                              CHAMPVA - Non-DUR/RTS
  6 101358       OPCVACARE,ONE(7895)      BACLOFEN 10MG TABS   07 :M/I Cardholde
    Payer Message:
  7 100923       OPCVACARE,TWO(4933)      LORAZEPAM 1MG TAB    07 :M/I Cardholde
    Payer Message:
                              TRICARE - Non-DUR/RTS
  8 101980       OPTRICARE,ONE(4789)      DANTROLENE 25MG CAP  14 :M/I Eligibili
    Payer Message:
  9 101981       OPTRICARE,ONE(4789)      ATENOLOL 100MG TAB   14 :M/I Eligibili
    Payer Message:
         Select the entry # to view or ?? for more actions
DR  Sort by Drug          RE  Sort by Reason        RX  Sort by Prescription
PA  Sort by Patient       RF  Screen Refresh        GI  Group by Insurance
Select: Quit//
```

The TRI - Show/Hide TRICARE and CVA - Show/Hide CHAMPVA toggle actions appear on the hidden menu on the Insurance Rejects screen. When the TRI action is toggled to Show, TRICARE Non-DUR/RTS rejects will automatically display at the end of the listing. Toggling the TRI action to Hide will remove them from the screen. The CVA action behaves likewise for CHAMPVA Non-DUR/RTS rejects.

Example with TRICARE and CHAMPVA rejects displayed:

```
Insurance Rejects-Worklist    Aug 13, 2008@16:04:05          Page:    1 of    1
Division  : ALBANY ISC
Selection : ALL UNRESOLVED REJECTS
  # Rx#          PATIENT(ID) [^]          DRUG                 REASON
  1 101238       ECMEIBTEST,ONE(5566)     MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
    Payer Message:
  2 100739       ECMEPAT,TWO(8887)        BENZTROPINE 2MG TAB  79 :REFILL TOO SO
    Payer Message:
  3 101960       OPTRICARE,ONE(4789)      ACETAZOLAMIDE 250MG  79 :REFILL TOO SO
    Payer Message:
                              CHAMPVA - Non-DUR/RTS
  4 101358       OPCVACARE,ONE(7895)      BACLOFEN 10MG TABS   07 :M/I Cardholde
    Payer Message:
                              TRICARE - Non-DUR/RTS
  5 101980       OPTRICARE,ONE(4789)      DANTROLENE 25MG CAP  14 :M/I Eligibili
    Payer Message:





         Select the entry # to view or ?? for more actions
```

```
DR  Sort by Drug          RE  Sort by Reason        RX  Sort by Prescription
PA  Sort by Patient       RF  Screen Refresh        GI  Group by Insurance
Select: Quit// ??
The following actions are also available:
TRI  Show/Hide TRICARE     CVA  Show/Hide CHAMPVA     FS   First Screen
+    Next Screen          LS   Last Screen          SL   Search List
-    Previous Screen      GO   Go to Page           ADPL Auto Display(On/Off)
UP   Up a Line            RD   Re Display Screen    PT   Print List
DN   Down a Line          PS   Print Screen         QU   Quit

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

(This page included for two-sided copying.)

Example of TRICARE and CHAMPVA rejects removed from display:

```
Insurance Rejects-Worklist    Aug 13, 2008@16:04:05          Page:    1 of    1
Division  : ALBANY ISC
Selection : ALL UNRESOLVED REJECTS
  # Rx#          PATIENT(ID) [^]          DRUG                 REASON
  1 101238       ECMEIBTEST,ONE(5566)     MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
    Payer Message:
  2 100739       ECMEPAT,TWO(8887)        BENZTROPINE 2MG TAB  79 :REFILL TOO SO
    Payer Message:
  3 101960       OPTRICARE,ONE(4789)      ACETAZOLAMIDE 250MG  79 :REFILL TOO SO
    Payer Message:
```

```
          Select the entry # to view or ?? for more actions
DR  Sort by Drug          RE  Sort by Reason        RX  Sort by Prescription
PA  Sort by Patient       RF  Screen Refresh        GI  Group by Insurance
Select: Quit// ??
The following actions are also available:
TRI  Show/Hide TRICARE     CVA  Show/Hide CHAMPVA    FS   First Screen
+    Next Screen          LS   Last Screen          SL   Search List
-    Previous Screen      GO   Go to Page           ADPL Auto Display(On/Off)
UP   Up a Line            RD   Re Display Screen    PT   Print List
DN   Down a Line          PS   Print Screen         QU   Quit

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

2. Processing of TRICARE and CHAMPVA Rejections – TRICARE/CHAMPVA Eligible Bypass/Override Functions

- A bypass function is provided to allow continued processing of prescriptions for TRICARE and CHAMPVA eligible inpatients who's Patient status = Inpatient at the time the prescription is issued.

  In the following example a patient who has been admitted into a VA hospital (Patient status = Inpatient) is allowed to go on a weekend "pass" and issued outpatient medications such as OTC drugs or supplies for the weekend. The system displays the Non-Billable Reason "TRICARE INPATIENT/DISCHARGE" on the screen. The display of this Non-Billable Reason is due to the patient having Patient status = Inpatient, the patient is a TRICARE patient with TRICARE Insurance and an outpatient medication, OTC or Supply was issued.

```
ISSUE DATE: OCT 31,2010//   (OCT 31, 2010)
FILL DATE:  (10/31/2010 - 11/01/2011): OCT 31,2010//   (OCT 31, 2010)
Nature of Order: WRITTEN//        W
WAS THE PATIENT COUNSELED: NO// NO

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

Rx # XXXX885           10/31/10
TRICARE,ONE(XXX-XX-XXXX) #3
TAKE 1 BY MOUTH 9

ACETAMINOPHEN 160MG/5ML ELIXIR (OZ)
VHAPROVIDER,ONE        JOHN,DOE
# of Refills: 5


Is this correct? YES//


TRICARE INPATIENT/DISCHARGE


Another New Order for TRICARE,ONE? YES//
```

The following is a sample of the View Prescription ECME Log update. The Non-Billable Reason "TRICARE INPATIENT/DISCHARGE" is now displayed on the View Prescription ECME Log. The TRICARE INPATIENT/DISCHARGE status allows the system to record why a TRICARE prescription was allowed to be bypassed.

Example: View Prescription ECME Log entry: TRICARE INPATIENT/DISCHARGE

```
Rx View (Active)             Oct 26, 2010@17:07:34          Page:    4 of    4
 TRICARE,ONE                                <NO ALLERGY ASSESSMENT>
  PID: XXX-XX-XXXX                                Ht(cm): ______(_____)
  DOB: MAR 16,19xx (xx)                           Wt(kg): ______(______)
+____________________________________________________________________________

Label Log:
#   Date        Rx Ref                    Printed By
==============================================================================
There are NO Labels printed.

ECME Log:
#   Date/Time           Rx Ref          Initiator Of Activity
================================================================================
1   10/26/10@16:04:50   ORIGINAL        JOHN,DOE
Comments: TRICARE-Not ECME Billable: TRICARE INPATIENT/DISCHARGE ]




            Enter ?? for more actions

     Select Action:Quit//
```

In a similar situation where a prescription is issued to a CHAMPVA patient with Patient status = Inpatient, the Non-Billable Reason "CHAMPVA INPATIENT/DISCHARGE" would be displayed on the reject processing screen and in the View Prescription ECME Log.

TRICARE/CHAMPVA Eligible Outpatient Override Function

- **An override function is provided to allow continued processing of prescriptions for** TRICARE or CHAMPVA eligible outpatients when a rejected response is received from the TRICARE or CHAMPVA payer/PBM.
- The Reject Action prompt will default to "Quit". If the Q (Quit) action is selected, the rejected claim will go to the TRICARE or CHAMPVA section, as appropriate, of the Pharmacy Third Party Payer Rejects – Worklist. If the D (Discontinue) action is selected, the next prompt "Nature of Order" will default to "Service Reject". The I (Ignore) action is available if the user holds the "PSO TRICARE/CHAMPVA" security key and if selected, continued processing will occur.
- The Reject Action prompt will be updated to a default of "Quit".

Example of Reject Notification Screen Non-DUR/RTS with the default action of D (Discontinue)

```
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response
E REJECTED
    21 - M/I Product/Service ID

          *** TRICARE - REJECT RECEIVED FROM THIRD PARTY PAYER ***
-------------------------------------------------------------------------
 Division : XXXX DIVISION                              NPI#: XXXXXXXXXX
 Patient  : TRICARE,ONE(XXXX)  Sex: M           DOB: OCT 1,19XX(XX)
 Rx/Drug  : XXX5341/0 - AMOXICILLIN 250MG CA         ECME#: 000002345678
 Reject(s): M/I Product/Service ID (21)  Received on NOV 01, 2010@09:30:03.

 Insurance    : EXPRESS SCRIPT                  Contact:
 Group Name   : TRICARE                    Group Number: DODA
-------------------------------------------------------------------
   Select one of the following:

        I         (I)GNORE – FILL Rx WITHOUT CLAIM SUBMISSION
        D         (D)iscontinue - DO NOT FILL PRESCRIPTION
        Q         (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)


(I)gnore,(D)iscontinue,(Q)uit: Q//Discontinue

Nature of Order: SERVICE REJECT//

Requesting PROVIDER: VHAPROVIDER,ONE           111     PHYSICIAN
```

In the following example a prescription is rejected from the Third Party Payer with a reject code of (88) DUR REJECT. The pharmacist has the option to Discontinue, Ignore, Override or Quit.

h

The Ignore action is only displayed for holders of the PSO TRICARE/CHAMPVA security key.

Example of Reject Notification Screen DUR/RTS

```
88 - DUR Reject Error

            *** TRICARE - REJECT RECEIVED FROM THIRD PARTY PAYER ***
   ----------------------------------------------------------------------
   Division : XXXXXX                                    NPI#: 9999999999
   Patient  : OPPATIENT,TRICARE (XXXX)           Sex: F DOB: OCT 17,19XX(XX)
   Rx/Drug  : 2718XXX/0 - BALNETAR 7.5 OZ             ECME#: 00000431XXXX
   Reject(s): DUR REJECT (88).  Received on NOV 01, 2010@07:08:44.

   Insurance    : EXPRESS SCRIPTS                 Contact:
   Group Name   : TRICARE                    Group Number: DODA
   ----------------------------------------------------------------------
     Select one of the following:

          O         (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
          I         (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION
          D         (D)iscontinue - DO NOT FILL PRESCRIPTION
          Q         (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)


(O)verride,(I)gnore,(D)iscontinue,(Q)uit: Q// i  (I)GNORE - FILL Rx WITHOUT CLAI
M SUBMISSION
You are bypassing claims processing. Do you wish to continue? NO// y  YES
```

- For Non-Billable TRICARE or CHAMPVA rejects, a Non-Billable Notification Screen is provided to allow continued processing of prescriptions. The Reject Action prompt will default to“Discontinue”. If the action D (Discontinue) is selected, the prompt “Nature of Order” will default to “Service Reject”. The I (Ignore) action is available if the user holds the “PSO TRICARE/CHAMPVA” security key and if it is selected, continued processing will occur. If the action Q (Quit) is selected, the Non-Billable TRICARE or CHAMPVA eligible prescription will go to the **Pharmacy Third Party Payer Rejects – Worklist** utilizing either Reject Code “eT” with reject description “TRICARE-DRUG NON BILLABLE” or Reject Code “eC” with reject description “CHAMPVA-DRUG NON BILLABLE.” (The reject codes “eT” and “eC” are for use internal to the VistA system only and have no relation to any NCPDP reject code listing.) The new entry will be displayed in the TRICARE or CHAMPVA section of the **Pharmacy Third Party Payer Rejects – Worklist**, as applicable.

In the following example a TRICARE Active Duty patient with Outpatient status submits an OTC, Non-Billable drug or supplies prescription for dispensing. The pharmacist will have the option of Discontinuing the Rx, Ignoring the Rx or Quitting. Discontinue is the option displayed below.

Example of Non-Billable Notification Screen

```
Is this correct? YES//

DRUG NOT BILLABLE

                    *** TRICARE - NON-BILLABLE ***
   ---------------------------------------------------------------------
   Division : XXXX DIVISION                          NPI#: XXXXXXXXXX
   Patient  : TRICARE,ONE(XXX-XX-XXXX)  Sex: M        DOB: JAN 1,19XX(XX)
   Rx/Drug  : XXX5339/0 - DOCUSATE NA 100MG CA
   Date/Time: OCT 31, 2010@12:22:10
   Reason   : Drug not billable
   ---------------------------------------------------------------------
   This is a non-billable TRICARE prescription.
       Select one of the following:
            D         (D)iscontinue - DO NOT FILL PRESCRIPTION
            Q         (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)
            I         (I)gnore – FILL Rx WITHOUT CLAIM SUBMISSION

(D)iscontinue,(Q)uit, (I)gnore: D// Discontinue

Nature of Order: SERVICE REJECT//

Requesting PROVIDER: VHAPROVIDER,ONE           111     PHYSICIAN
```

In the following example a TRICARE Active Duty patient with Outpatient status submitted an OTC, Non-Billable drug or Supplies prescription for dispensing. The pharmacist selected the Quit option to send the prescription to the worklist for further review. The Non-Billable drug is displayed on the Pharmacy Third Party Payer Rejects – Worklist with a reason code “eT”.

(This page included for two-sided copying.)

Example of Pharmacy Third Party Payer Rejects – Worklist

```
Insurance Rejects-Worklist    Oct 31, 2010@09:15:58          Page:    2 of    5
Division  : ALBANY ISC
Selection : ALL UNRESOLVED REJECTS
  # Rx#          PATIENT(ID) [^]          DRUG                 REASON
  Payer Message:
                              TRICARE - Non-DUR/RTS
 13 102xxx       OPTRICARE,ONE(4789)      DIAZOXIDE 300MG INJ  eT :TRICARE-DRUG NON
    Payer Message:
 14 102xxx       OPTRICARE,ONE(4789)      MANNITOL 15% S.S. LV 22 :M/I Dispense
    Payer Message:
 15 1028xxx      OPTRICARE,ONE(4789)      METHOCARBAMOL 750MG  34 :M/I Submissio
    Payer Message:
 16 103xxx       OPTRICARE,ONE(4789)      BENZTROPINE 2MG TAB  07 :M/I Cardholde
    Payer Message:
 17 103xxx       OPTRICARE,ONE(4789)      DEXAMETHASONE 0.5MG  07 :M/I Cardholde
    Payer Message:
 18 102xxx       TRICARE,ONLYTRICAR(3939) NEODECADRON OPHTMALI 07 :M/I Cardholde
    Payer Message:
 19 102xxx       TRICARE,ONLYTRICAR(3939) GENTAMICIN OPHTHALMI 07 :M/I Cardholde
    Payer Message:
+         Select the entry # to view or ?? for more actions
DR  Sort by Drug          RE  Sort by Reason        RX  Sort by Prescription
PA  Sort by Patient       RF  Screen Refresh        GI  Group by Insurance
Select: Next Screen//
```

- The Non-Billable TRICARE prescriptions will appear on the Reject Information screen shown in the example below once the TRICARE Non-Billable claim has been selected from the Pharmacy Third Party Payer Rejects – Worklist. The screen will display:
- ECME# field – will be blank
- Insurance Information – will be blank
- Reject code section will have the reject code eT and status will state “NO CLAIM SUBMITTED”
- Available Actions will be DC – Discontinue Rx, VW -View Rx, MP – Medication Profile, FIL – Fill Rx and IGN Ignore Reject (FIL and IGN will require PSO TRICARE/CHAMPVA Security key)
- Available Hidden Actions will be COM – Add Comments, ED – Edit Rx and all other standard List Manager hidden actions
- If the action DC is chosen, the system will discontinue the prescription and the prompt “Nature of Order” will default to “SERVICE REJECT”
- The following actions will ***not*** be selectable when processing a TRICARE or CHAMPVA eligible Non-Billable reject: Resubmit Claim (RES)/Change Suspense Date (CSD)/Submit Override Codes (OVR)/Submit Clarif Code (CLA)/Submit Prior Auth (PA)/Suspense Date Calculation (SDC)/Submit Mult Actions (SMA).. If selected for a TRICARE reject, an error message will appear: “[action] not allowed for TRICARE Non-Billable claim”. If selected for a CHAMPVA reject, an error message will appear: “[action] not allowed for CHAMPVA Non-Billable claim”. The only actions available are to Discontinue, Fill the prescription, View prescription or Medication Profile.

Example of Non-Billable Product Reject Information Screen

```
Reject Information (TRICARE)  Oct 30, 2010@10:15:01              Page:   1 of     1
Division : ECME DIVISION                                        NPI#: XXXXXXXXXX
Patient  : TRICARE,TWO(XXX-XX-XXXX)  Sex: M                      DOB: JUL 1,19XX(XX)
Rx#      : ###4928/0        ECME#:                   Date of Service: Mar 16, 2009
CMOP Drug: DOCUSATE NA 100MG CA                            NDC Code: 54629-0600-01

REJECT Information (TRICARE)
Reject Type    : TRICARE DRUG NOT BILLABLE(eT) received on OCT 17, 2010@13:19:22
Reject Status  : NO CLAIM SUBMITTED
Payer Addl Msg : Not ECME Billable: DRUG NOT BILLABLE
Reason Code    :
DUR Text       :


COMMENTS
- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

INSURANCE Information
Insurance      :
Contact        :
BIN            :
Group Number   :
Cardholder ID  :

          Enter ?? for more actions
VW  View Rx               FIL Fill Rx                CSD Change Suspense Date
MP  Medication Profile    DC  Discontinue Rx         IGN Ignore Reject
RES Resubmit Claim        OVR Submit Override Codes
Select Item(s): Next Screen //
```

Example of Non-Billable Product Reject Information Screen displaying the action RES (Resubmit Claim) error message

```
Reject Information (TRICARE)  Nov 11, 2010@12:37:30              Page:   1 of     2
Division : ECME DIVISION                                        NPI#:
Patient  : OPPATIENT,TRICARE(XXX-XX-XXXX)  Sex: F                DOB: OCT 7,19XX(XX)
Rx#      : 27XXXXX/0         ECME#:                   Date of Service: Sep 16, 2010
Drug     : ALUMINUM HYDROXIDE GEL 320MG/5ML SUSP             NDC Code: 00054-3035-63

REJECT Information (TRICARE)
Reject Type    : TRICARE DRUG NOT BILLABLE(eT) received on SEP 16, 2010@13:07:12
Reject Status  : NO CLAIM SUBMITTED
Payer Addl Msg : Not ECME Billable: DRUG NOT BILLABLE
Reason Code    :
DUR Text       :

COMMENTS
- SEP 16, 2010@13:07:12 - Transferred by  (XXXXXXXX,XXXX)

INSURANCE Information
Insurance      :
Contact        :
BIN            :
Group Number   :
+        RES not allowed for TRICARE Non-Billable claim.
VW  View Rx               FIL Fill Rx                CSD Change Suspense Date
MP  Medication Profile    DC  Discontinue Rx         IGN Ignore Reject
RES Resubmit Claim        OVR Submit Override Codes
Select Item(s): Next Screen//
```

Reject Information Screen – Electronic Signature and TRICARE/CHAMPVA Justification

This action requires the security key PSO TRICARE/CHAMPVA.

- A user must hold the "PSO TRICARE/CHAMPVA" security key to perform the Fill Rx (FIL) and Ignore Reject (IGN) actions on the Third Party Payer Rejects – Worklist and the "Ignore" action on the TRICARE or CHAMPVA Reject Notification screen. If the user holds the security key "PSO TRICARE/CHAMPVA", the prompt will display: "You are bypassing claims processing. Do you wish to continue?" If the user enters (No=Default), the user will return to the reject notification screen. If the user selects Yes to continue, the system will mimic the current Ignore action/functionality and allow processing of the prescription. The user will be prompted to enter their electronic signature code and asked to enter data into the TRICARE Justification or CHAMPVA Justification field, which is required. The user will be allowed to "^" out of the process. If the user opts to "^" out of the process, they will be taken back to the Reject Information screen prompt.

In the following example a TRICARE patient with Outpatient status submits a prescription for processing and a rejected response is received from the TRICARE payer/PBM. The pharmacist initially sends the prescription to the Third Party Payer Rejects – Worklist then later decides to finish processing the prescription and chooses the FIL action.

Example of Reject Information Screen – Electronic Signature and TRICARE Justification

```
Reject Information (TRICARE)  Sep 30, 2010@10:25:13              Page:   1 of     1
Division : ECME DIVISION                                     NPI#: XXXXXXXXXX
Patient  : TRICARE,TWO(XXX-XX-XXXX)  Sex: M                   DOB: JAN 1,19XX(XX)
Rx#      : XXX4928/0        ECME#: 000001231234    Date of Service: Feb 08, 2009
CMOP Drug: ACARBOSE 25MG TAB                              NDC Code: 00026-2863-52

REJECT Information (TRICARE)
Reject Type    : M/I Cardholder ID (07) received on JUL 10, 2010@12:22:10
Reject Status  : OPEN/UNRESOLVED - E REJECTED
Payer Addl Msg :
Reason Code    :
DUR Text       :

COMMENTS
- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

INSURANCE Information
Insurance      : EXPRESS SCRIPTS
Contact        :
BIN            : 741852
Group Number   : DODA
Cardholder ID  : XXXXXXX

          Enter ?? for more actions
VW  View Rx             FIL Fill Rx                CSD Change Suspense Date
MP  Medication Profile  DC  Discontinue Rx         IGN Ignore Reject
RES Resubmit Claim      OVR Submit Override Codes
Select Item(s): Quit/FIL


You are bypassing claims processing. Do you wish to continue (Y/N)? No/Yes
```

```
Enter your Current Signature Code:    SIGNATURE VERIFIED
TRICARE Justification: Patient required medication
```

- If the user does not hold the security key “PSO TRICARE/CHAMPVA”, an on screen alert to the user will display “Action Requires <PSO TRICARE/CHAMPVA> security key” as displayed in the below example. The user will need to press any key to return to the Reject Information screen.

(This page included for two-sided copying.)

Example of Reject Information Screen – Security Key – ALERT

```
Reject Information (TRICARE)  Sep 30, 2010@10:25:13              Page:   1 of     1
Division : ECME DIVISION                                       NPI#: XXXXXXXXXX
Patient  : TRICARE,TWO(XXXX)  Sex: M                            DOB: JAN 1,19XX(XX)
Rx#      : XXX4928/0        ECME#: 000001231234    Date of Service: Feb 08, 2009
CMOP Drug: ACARBOSE 25MG TAB                              NDC Code: 00026-2863-52

REJECT Information (TRICARE)
Reject Type    : M/I Cardholder ID (07) received on JUL 10, 2010@12:22:10
Reject Status  : OPEN/UNRESOLVED - E REJECTED
Payer Addl Msg :
Reason Code    :
DUR Text       :

COMMENTS
- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

INSURANCE Information
Insurance      : EXPRESS SCRIPTS
Contact        :
BIN            : 741852
Group Number   : DODA
Cardholder ID  : XXXXXXX
+        Action Requires <PSO TRICARE/CHAMPVA> Security Key
VW  View Rx             FIL Fill Rx                CSD Change Suspense Date
MP  Medication Profile  DC  Discontinue Rx         IGN Ignore Reject
RES Resubmit Claim      OVR Submit Override Codes
Select Item(s): Next Screen//
```

- The person that resolves TRICARE and CHAMPVA non-DUR/RTS rejects is dependent upon the type of reject. Dispense As Written (DAW) reject code 22 can be resolved by the pharmacy staff by editing the prescription and entering the appropriate DAW code which results in a claims resubmission. Other insurance-related rejects (missing eligibility or cardholder ID number) are resolved by the Outpatient Pharmacy Electronic Claims Coordinator (OPECC). Once the rejection has been resolved, the Reject Information screen under the pharmacy reject worklist shows the status of the prescription as E PAYABLE. At this point the user may select the FIL action that will prompt for label print.

```
Reject Information (TRICARE)  Sep 30, 2010@10:25:13              Page:   1 of     1
Division : ECME DIVISION                                       NPI#: XXXXXXXXXX
Patient  : TRICARE,TWO(XXXX)  Sex: M                            DOB: JAN 1,19XX(XX)
Rx#      : XXX4928/0      ECME#: 000001231234      Date of Service: Feb 08, 2009
CMOP Drug: ACARBOSE 25MG TAB                              NDC Code: 00026-2863-52

REJECT Information (TRICARE)
Reject Type    : M/I Cardholder ID (07) received on JUL 10, 2010@12:22:10
Reject Status  : OPEN/UNRESOLVED - E REJECTED
Payer Addl Msg :
Reason Code    :
DUR Text       :

COMMENTS
- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

INSURANCE Information
  Insurance      : EXPRESS SCRIPTS
  Contact        :
  BIN            : 741852
  Group Number   : DODA
  Cardholder ID  : XXXXXXX
         Enter ?? for more actions
VW  View Rx               FIL Fill Rx               OVR Submit Override Codes
MP  Medication Profile    DC  Discontinue Rx        CSD Change Suspense Date
Select Item(s): Quit// FIL   Fill Rx
                    [Closing all rejections for prescription 102059:
                         07 - ...OK]


Print Label? ? YES//

Select LABEL PRINTER: HOME//   UCX/TELNET    Right Margin: 80//
```

- For rejects that remain in suspense, the user will be allowed to process the rejection as indicated above; however no labels will be printed until the prescription is pulled early or printed from suspense. Upon resolving the reject, the user will be notified of this information. CMOP prescriptions will function in the same manner.

Other Rejects

[PSO REJECTS WORKLIST]

Rejects under the OTHER REJECTS section of the screen contain non-clinical rejects and are resolved in the same manner as DUR/RTS rejects. The comments section denotes whether the reject was transferred automatically as is the case in the example below or "Transferred by OPECC" will denote those rejects where the OPECC manually transferred them to pharmacy for resolution.

The following example shows the user selecting to resolve sequence 16 from the Third Party Payer Rejects - Worklist option shown above. The user selects ED to edit the DAW code for the prescription, then resubmits the claim afterward. Since the claim was payable, both the RTS reject in sequence 13 and the DAW reject in sequence 16 were marked resolved. Also both are removed from the worklist after submission. The user then proceeds to Patient Prescription Processing option to view the ECME logs which show that claim resubmission was payable and that both rejects have been resolved.

```
Reject Information(UNRESOLVED)Jul 30, 2008@14:54:51          Page:    1 of    2
Division : CHEYENNE VAM&ROC                                 NPI#: 1164471991
Patient  : OPPATIENT,FOUR(666-55-9987)  Sex: M              DOB: OCT 20,1965(42)
Rx#      : 2055203/1        ECME#: 000001615102 Date of Service: Jul 15, 2008
CMOP Drug: DANAZOL 50MG CAP                            NDC Code: 00024-0304-06

REJECT Information
Reject Type    : 22 - M/I Dispense As Written- received on JUL 30, 2008@14:32:16
Reject Status  : OPEN/UNRESOLVED
Payer Addl Msg :
Reason Code    :
DUR Text       :

OTHER REJECTS
79 - Refill Too Soon

COMMENTS
- JUL 30, 2008@14:32:16 - Automatically transferred due to override for reject
  code. (OPHARM,ONE)

+         Enter ?? for more actions
VW  View Rx               IGN Ignore Reject         OVR Submit Override Codes
MP  Medication Profile    RES Resubmit Claim        CSD Change Suspense Date
Select: Next Screen// ed   ED




                              Jul 30, 2008@14:54:53

                Rx #: 2055203$e
 (1) *Orderable Item: DANAZOL CAP,ORAL
 (2)       CMOP Drug: DANAZOL 50MG CAP
 (3)         *Dosage: 50 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: CAPSULE
              *Route: ORAL (BY MOUTH)
           *Schedule: BID
 (4)Pat Instructions:
                 SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
 (5)  Patient Status: OUTPT NON-SC
 (6)      Issue Date: 07/11/08               (7)  Fill Date: 07/11/08
      Last Fill Date: 07/15/08 (Window)
Select Action: Next Screen//    NEXT SCREEN
```

```
   Last Release Date:                        (8)      Lot #:
             Expires: 07/12/09                          MFG:
(9)      Days Supply: 3                     (10)  QTY (CAP): 6
(11)    # of Refills: 11                          Remaining: 10
(12)        Provider: OPPROVIDER,ONE
(13)         Routing: MAIL                   (14)     Copies: 1
(15)          Clinic: Not on File
(16)        Division: CHEYENNE VAM&ROC (442)
(17)      Pharmacist:
(18)         Remarks: New Order Created by copying Rx # 2055182.
(19)      Counseling: NO
(20)     Refill Data
(21)        DAW Code: 0 - NO PRODUCT SELECTION INDICATED
         Finished By: OPHARM,ONE
+         Enter ?? for more actions
DC   (Discontinue)        PR   (Partial)            RL   (Release)
ED   Edit                 RF   (Refill)             RN   (Renew)
Select Action: Next Screen// 21
DAW CODE: 0// ?

OP Medications (SUSPENDED)    Jul 30, 2008@14:54:55          Page:    2 of    3
OPPATIENT,FOUR
  PID: 666-55-9987                                  Ht(cm): _______ (______)
  DOB: OCT 20,1965 (42)                             Wt(kg): _______ (______)
+
-----------------------------------------------------------------------------

    Answer with BPS NCPDP DAW CODE
   Choose from:
   0        NO PRODUCT SELECTION INDICATED
   1        SUBSTITUTION NOT ALLOWED BY PRESCRIBER
   2        SUBSTITUTION ALLOWED-PATIENT REQUESTED PRODUCT DISPENSED
   3        SUBSTITUTION ALLOWED-PHARMACIST SELECTED PRODUCT DISPENSED
   4        SUBSTITUTION ALLOWED-GENERIC DRUG NOT IN STOCK
   5        SUBSTITUTION ALLOWED-BRAND DRUG DISPENSED AS A GENERIC
   6        OVERRIDE
   7        SUBSTITUTION NOT ALLOWED-BRAND DRUG MANDATED BY LAW
   8        SUBSTITUTION ALLOWED-GENERIC DRUG NOT AVAILABLE IN MARKETPLACE
   9        OTHER

DAW CODE: 0// 1 - SUBSTITUTION NOT ALLOWED BY PRESCRIBER
Are You Sure You Want to Update Rx 2055203? Yes//   YES





OP Medications (SUSPENDED)    Jul 30, 2008@14:55:21          Page:    2 of    3
OPPATIENT,FOUR
  PID: 666-55-9987                                  Ht(cm): _______ (______)
  DOB: OCT 20,1965 (42)                             Wt(kg): _______ (______)
+
-----------------------------------------------------------------------------
   Last Release Date:                        (8)      Lot #:
             Expires: 07/12/09                          MFG:
(9)      Days Supply: 3                     (10)  QTY (CAP): 6
(11)    # of Refills: 11                          Remaining: 10
(12)        Provider: OPPROVIDER,ONE
(13)         Routing: MAIL                   (14)     Copies: 1
(15)          Clinic: Not on File
(16)        Division: CHEYENNE VAM&ROC (442)
(17)      Pharmacist:
(18)         Remarks: New Order Created by copying Rx # 2055182.
(19)      Counseling: NO
(20)     Refill Data
(21)        DAW Code: 1 - SUBSTITUTION NOT ALLOWED BY PRESCRIBER
         Finished By: OPHARM,ONE
+         Enter ?? for more actions
DC   (Discontinue)        PR   (Partial)            RL   (Release)
ED   Edit                 RF   (Refill)             RN   (Renew)
Select Action: Next Screen// ^
```

```
Reject Information(UNRESOLVED)Jul 30, 2008@14:55:28          Page:    1 of    2
Division : CHEYENNE VAM&ROC                                 NPI#: 1164471991
Patient  : OPPATIENT,FOUR(666-55-9987)  Sex: M              DOB: OCT 20,1965(42)
Rx#      : 2055203/1        ECME#: 000001615102 Date of Service: Jul 15, 2008
CMOP Drug: DOCUSATE NA 100MG CA                       NDC Code: 54629-0600-01

REJECT Information
Reject Type    : 22 - M/I Dispense As Written- received on JUL 30, 2008@14:32:16
Reject Status  : OPEN/UNRESOLVED
Payer Addl Msg :
Reason Code    :
DUR Text       :

OTHER REJECTS
79 - Refill Too Soon

COMMENTS
- JUL 30, 2008@14:32:16 - Automatically transferred due to override for reject
  code. (OPHARM,ONE)

+         Enter ?? for more actions
VW  View Rx               IGN Ignore Reject         OVR Submit Override Codes
MP  Medication Profile    RES Resubmit Claim        CSD Change Suspense Date
Select: Next Screen// RES   Resubmit Claim


     When you confirm, a new claim will be submitted for
     the prescription and this REJECT will be marked
     resolved.

     Confirm? YES//
Prescription 2055203 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Transmitting
E PAYABLE
                                                          Please wait...

Insurance Rejects-Worklist    Jul 30, 2008@14:38:38          Page:    2 of    3
Division  : CHEYENNE VAM&ROC
Selection : ALL UNRESOLVED REJECTS
  # Rx#          PATIENT(ID) [v]          DRUG                 REASON
    Payer Message:
 13 2055202      OPPATIENT,FOUR(9987)     BACLOFEN 10MG TAB    79 :REFILL TOO SO
    Payer Message:
 14 2055155      OPPATIENT,FOUR(9987)     BENAZEPRIL HCL 40MG  79 :REFILL TOO SO
    Payer Message:
                                  OTHER REJECTS
15 2055134A     OPPATIENT,FOUR(9987)     CALCIUM GLUCONATE 65 22 :M/I Dispense
    Payer Message:



+         Select the entry # to view or ?? for more actions
DR  Sort by Drug          RE  Sort by Reason        RX  Sort by Prescription
```

```
PA  Sort by Patient       RF  Screen Refresh        GI  Group by Insurance
Select: Next Screen//^
```

(This page included for two-sided copying.)

Below is taken from Patient Prescription Processing option for the Rx in this example:

```
Medication Profile            Jul 30, 2008@15:03:25          Page:    1 of    2
OPPATIENT,FOUR
  PID: 666-55-9987                                  Ht(cm): _______ (______)
  DOB: OCT 20,1965 (42)                             Wt(kg): _______ (______)
  SEX: MALE                                                                   .
                                                                 ISSUE  LAST REF DAY
 #  RX #         DRUG                                     QTY ST  DATE  FILL REM SUP

-------------------REFILL TOO SOON/DUR REJECTS (Third Party)--------------------
 1 2055202$e     BACLOFEN 10MG TAB                         14 S> 07-08 12-12  11   3
 2 2055155$e     BENAZEPRIL HCL 40MG TAB                    1 S> 06-24 06-26  10   1
 3 2055134A$e    CALCIUM GLUCONATE 650MG TAB                4 A> 06-16 07-30  10   2
-------------------------------------ACTIVE-------------------------------------
 4 2055174$e     ACEBUTOLOL HCL 200MG CAP                   1 S> 06-26 06-27  11   1
 5 2055123$e     BACITRACIN 500 UNT/GM OPHTHALMIC OINT      1 AT 06-13 06-14  10  30
 6 2055203$e     DANAZOL 50MG CAP                           6 S> 07-11 07-15  10   3
 7 2055183$e     FAMCICLOVIR 125MG TAB                      2 AT 06-26 06-26  11   2
 8 2055215$      GABAPENTIN 100MG CAP                       6 S> 07-30 07-30  11   3
 9 2055186$e     HALOPERIDOL 0.5MG TAB                      2 AT 06-26 06-26  11   4
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   (Refill)             RN   Renew
Select Action: Next Screen// AL   AL
OP Medications (SUSPENDED)    Jul 30, 2008@15:03:25          Page:    1 of    3
OPPATIENT,FOUR
  PID: 666-55-9987                                  Ht(cm): _______ (______)
  DOB: OCT 20,1965 (42)                             Wt(kg): _______ (______)

                Rx #: 2055203$e
 (1) *Orderable Item: DANAZOL CAP,ORAL
 (2)       CMOP Drug: DANAZOL 50MG CAP
 (3)         *Dosage: 50 (MG)
                Verb: TAKE
      Dispense Units: 1
                Noun: CAPSULE
              *Route: ORAL (BY MOUTH)
           *Schedule: BID
 (4)Pat Instructions:
                 SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
 (5)  Patient Status: OUTPT NON-SC
 (6)      Issue Date: 07/11/08               (7)  Fill Date: 07/11/08
      Last Fill Date: 07/15/08 (Window)
+         Enter ?? for more actions
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   (Refill)             RN   Renew
Select Action: Next Screen// AL    AL

Select Activity Log by  number
1.  Refill      2.  Partial      3.  Activity     4.  Labels
5.  Copay       6.  ECME         7.  CMOP Events  8.  All Logs:  (1-8): 8// 6


Rx #: 2055203   Original Fill Released:
Routing: Mail      Finished by: OPPHARM,ONE

ECME Log:
#   Date/Time           Rx Ref          Initiator Of Activity
==============================================================================
```

```
1   7/11/08@10:13:11    ORIGINAL        OPPHARM,ONE
Comments: ECME:PULLED FROM SUSPENSE(NDC:00024-0303-06)-E PAYABLE-p OPP INSURANCE
2   7/30/08@14:32:17    REFILL 1        OPPHARM,TWO
Comments: ECME:PULLED FROM SUSPENSE(NDC:00024-0303-06)-E REJECTED-p OPP INSURANCE
3   7/30/08@14:55:56    REFILL 1        OPPHARM,TWO
Comments: Submitted to ECME:REJECT WORKLIST-E PAYABLE

ECME REJECT Log:
#  Date/Time Rcvd    Rx Ref    Reject Type     STATUS     Date/Time Resolved
==============================================================================
1  7/30/08@14:32:16  REFILL 1  M/I Dispense As RESOLVED   7/30/08@14:55:40
Comments: AUTOMATICALLY CLOSED (CLAIM RE-SUBMITTED)
2  7/30/08@14:32:16  REFILL 1  REFILL TOO SOON RESOLVED   7/30/08@14:55:40
Comments: AUTOMATICALLY CLOSED (CLAIM RE-SUBMITTED)
```

```
          Enter ?? for more actions

Select Action:Quit//
```

View ePharmacy Rx

[BPS RPT VIEW ECME RX]

The *View ePharmacy Rx* option allows you to view information for one prescription, combining information from Outpatient Pharmacy, Integrated Billing and ECME. More information on this report is available in the *Electronic Claims Management Engine (ECME) User Manual*.

(This page included for two-sided copying.)

MailMan Message for Open/Unresolved Rejects

When prescriptions remain on the Third Party Payer Reject – Worklist over the specified number of days, the system will send a Mailman Message. This message will be sent to the PSO REJECTS BACKGROUND MESSAGE mail group. Those users needing access to this information will need to be added manually to this mail group

The specified number of days referred to above is the number of days an uncommented reject can remain on the reject worklist without being included in the nightly reject worklist alert mail message. The number of days are defined in the EPHARMACY SITE PARAMETERS file (#52.86) in the REJECT WORKLIST DAYS field.

The following are the criteria for generating a Mailman message regarding a rejected claim:

- Prescription is active
- Prescription is unreleased
- Claim is on the Reject Worklist for specified number of days or greater, and
- Claim has no comments added within date range.

Adding a comment to the reject will automatically reset the clock for the alert. The specified number of days will be site configurable and stored in EPHARMACY SITE PARAMETERS file (#52.86). The initial patch default setting will be five (5) days; however, the site will be able to reset the parameter between one (1) and thirty (30) to generate the alert message. MailMan message will be sent as a Priority message, and there will be a separate MailMan message for each division. The following is an example of the message:

```
Subj: ePharmacy - OPEN/UNRESOLVED REJECTS LIST for ALBANY ISC  [#2680833]
07/25/08@11:52  53 lines
From: OUTPATIENT PHARMACY PACKAGE  In 'IN' basket.   Page 1  *New*
-------------------------------------------------------------------------------
The prescriptions listed below are third party electronically billable and can
not be filled until the rejection is resolved.  No action to resolve the
rejection has taken place within the past 1 days.

Please use the THIRD PARTY PAYER REJECTS WORKLIST option to resolve the
rejection or add a comment to the rejection.

Unresolved rejects will not be sent to CMOP or the local print queue for
filling.  They will continue to show on the rejects list until acted upon.
                                                            FILL      REJECT
  # RX/FILL      PATIENT(ID)         DRUG                   DATE      DATE
-------------------------------------------------------------------------------
  1 100805/1     IBSCDC,TWO(2828)    SIMETHICONE 40MG TAB     6/5/08    6/5/08
     Reason:  79 :Refill Too Soon

  2 101149/0     OPPATIENT,TH(7789)  DIAZEPAM 10MG S.T.       6/9/08    6/9/08
     Reason:  75 :Prior Authorization Required
    COMMENT: JUN 09, 2008@18:04:35 - Automatically transferred due to
             Override for reject code. (PHARM,ONE)

  3 100928/0     IBPATIENT,QFO(567)  ETHACRYNIC ACID 50MG S.  5/7/08    6/23/08
     Reason:  31 :Submission Clarification Code
    COMMENT: JUN 23, 2008@15:02:11 - Transferred by OPECC. (OPECC,ONE)
Enter RETURN to continue or '^' to exit:
```

Alerts for Discontinued CMOP Prescription

Discontinued by a Background Process

When a CMOP prescription with a status of Transmitted or Retransmitted is discontinued by a background process to the Outpatient Pharmacy options, e.g. CPRS or Registration V. 5.3 packages, an email will be sent to the PSX EXTERNAL DISPENSE ALERTS mail group. If no recipients are defined in the new mail group, the message will be sent to PSXCMOPMGR key holders stating that a prescription was just discontinued and that the CMOP status for the discontinued prescription was either Transmitted or Retransmitted.

```
Subj: TROY - DC Alert on CMOP Rx 123456789 TRANSMITTED  [#90494]
03/03/09@17:37 8 lines
From: POSTMASTER  In 'IN' basket.   Page 1  *New*
-------------------------------------------------------------------------
             Rx #: 123456789   Fill: 0
          Patient: OUTPATIENT,DCONE (6660)
             Drug: TAMOXIFEN CITRATE 10MG TABS
        Rx Status: DISCONTINUED BY PROVIDER
Processing Status: TRANSMITTED to CMOP on 02/27/09
         Provider: OPPROVIDER, PROV

********    Please contact CMOP or take appropriate action    ********

Enter message action (in IN basket): Ignore//
-------------------------------------------------------------------------
```

Discontinued by a Foreground Pharmacy Process

When a CMOP prescription with a status of Transmitted or Retransmitted is discontinued by a foreground Pharmacy process due to a duplicate drug scenario that would trigger the duplicate to be discontinued, then the Processing Status field of the duplicate drug message is highlighted to alert the user.

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

                   Rx #: 123456789
                  Drug: A AND Z OINTMENT
                 SIG: APPLY 1 TUBE TO AFFECTED AREA TWICE A DAY
                 QTY: 1                     Refills remaining: 5
              Provider: OPPROVIDER, PROV                Issued: 11/27/09
                Status: Active                  Last filled on: 11/27/09
     Processing Status: Transmitted to CMOP on 11/27/09
                                                  Days Supply: 5
-------------------------------------------------------------------------------
```

In the above example, the line “Processing Status: Transmitted to CMOP on 11/27/09” is bold.

List One Patient's Archived Rx's

[PSO ARCHIVE LIST RX'S]

This option shows the basic patient demographics and the prescription numbers and dates of archiving for archived prescriptions for this patient.

Manual Print of Multi-Rx Forms

[PSO LM MULTI-RX PRINT]

This option allows the user to reprint the Multi-Rx Refill Request form on laser label stock without having to reprint the entire prescription labels. The user will receive a system confirmation that this form has been queued to print.

Example: Manually Printing Multi-Rx Forms

```
Select Rx (Prescriptions) Option: MANual Print of Multi-Rx Forms

Enter patient to reprint Multi-Rx refill form for: OPPATIENT2,ONE

Select LABEL DEVICE: LEX2  LEX2$PRT  Bay Pines


Multi-Rx form queued to print
```

Reprint an Outpatient Rx Label
[PSO RXRPT]

The label reprint function allows a single label or many copies of the same label to be reproduced. When the patient is enrolled in ScripTalk®, a message is displayed to the user indicating this and prompting the user to use the ScripTalk® label for the prescription bottle.

Example: Reprinting an Outpatient Rx Label

```
Select Rx (Prescriptions) Option: REPRINT AN OUTPATIENT RX LABEL

Reprint Prescription Label: 400693       ADHESIVE TAPE WATERPROOF 1IN ROLL
Patient is a ScripTalk patient. Use ScripTalk label for prescription bottle.

Number of Copies? :  (1-99): 1// <Enter>
Print adhesive portion of label only? N// <Enter> O
Reprint the FDA Medication Guide? No// YES
Comments:

Rx # 400693            06/27/03
OPPATIENT16,ONE                     #1

AS DIR ON AFFECTED AREA

ADHESIVE TAPE WATERPROOF 1IN ROLL
OPPROVIDER3O,TWO            OPPHARMACIST4,THREE
# of Refills: 2

Select LABEL DEVICE: L8150$PRT  COPY ROOM 1A


ALBANY's FDA Medication Guide Printer(s) on file:

     BIRM1$PRT(Default)
     L8150$PRT


Select FDA MED GUIDE PRINTER: BIRM1$PRT// <Enter>


LABEL(S) QUEUED TO PRINT
```

When reprinting, you can choose whether or not you want to resend to a dispensing device using an external interface. If you do choose to resend, then the prescription will be sent to the dispensing system, and an entry will be made in the label log. This documents that this was a reprint and also resent to the dispensing system device. If you do not resend the prescription to the dispensing device, then only one entry is made in the label log.

Example: Reprinting an Outpatient Rx Label – Multiple Dispensing Device

```
Select Rx (Prescriptions) Option: REPRINT AN OUTPATIENT RX LABEL

Reprint Prescription Label: 100002987       BACLOFEN 10MG TABS
Number of Copies? :  (1-99): 1//
Print adhesive portion of label only? ? No//   NO
Do you want to resend to Dispensing System Device? No// y  YES
Comments: Multipe dispensing devices

Rx # 100002987         05/02/11
OPPATIENT,TEN              #7

TAKE ONE TABLET BY BY MOUTH EVERY DAY FOR 7 DAYS

BACLOFEN 10MG TABS
OPPHARMACIST,FOUR          OPPHARMACIST,NINE
# of Refills: 7

Select LABEL DEVICE: LEXMARK5$PRT


LABEL(S) QUEUED TO PRINT


PRESCRIPTIONS SENT TO:
   SCRIPTPRO1
     100002987      BACLOFEN 10MG TABS

STORAGE DEVICES
   SCRIPTCENTER
     100002987      BACLOFEN 10MG TABS
```

Signature Log Reprint
[PSO SIGLOG REPRINT]

This option allows the user to reprint the Signature Log for a prescription. The system will prompt for a prescription number and printer device. The user will receive a system confirmation that this log has been queued to print.

Example: Reprinting a Signature Log

```
Select Rx (Prescriptions) Option:  Signature Log Reprint

Reprint Signature Log for Prescription:    100002277A     PREDNISONE 20MG S.T.

Select LABEL DEVICE: LEX2  LEX2$PRT  Bay Pines

Signature Log Reprint queued
```

View Prescriptions
[PSO VIEW]

View the most complete information available for a specific prescription. The activity log lists the date, reason, prescription reference (Rx Ref), the initiator of the activity, and comments. The label log lists the date, prescription (Rx Ref), the person who printed it, and comments. Prescriptions with a deleted status cannot be viewed.

Chapter 20: Updating a Patient's Record

This chapter describes the option used for updating a patient's record.

Update Patient Record

[PSO PAT]

Use this option to update the patient information currently in the computer. Patient records can also be updated while being viewed by using the *Patient Record Update* screen action. If implementing Other Language Modifications, use either to set a patient's other language preference.

In support of Registration patch DG*5.3*522, the Outpatient Pharmacy software provides for the automatic population of city, state, and county based on entry of a zip code.

Example: Updating a patient record

```
Select Outpatient Pharmacy Manager Option: UPDATE Patient Record

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

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

WEIGHT(Kg):                              HEIGHT(cm):
DISABILITIES: ARTHRITIS-10% (SC), FOREARM CONDITION-5% (NSC),
              FOREARM CONDITION-4% (NSC), BENIGN EYE GROWTH-0% (NSC),
              LOSS OF FIELD OF VISION-20% (SC),

ALLERGIES:

ADVERSE REACTIONS:
```

If the PSO site parameter is set to allow editing of patient data, this prompt, "Do you want to update the Permanent address/phone? //N", is displayed. If the user enters "NO", then the software will not allow the user to update the permanent address and Bad Address Indicator fields.

```
Do you want to update the address/phone? N// Y  YES
 Update (P)ermanent address, (T)emporary, or (B)oth: BOTH// <Enter>
STREET ADDRESS [LINE 1]: 4500 S MAIN ST// 4800 S MAIN ST
STREET ADDRESS [LINE 2]: ADDRESS LINE2// <Enter>  ADDRESS LINE2
STREET ADDRESS [LINE 3]: LINE 3 OF ADDRESS// <Enter>  LINE 3 OF ADDRESS
ZIP+4: 53705// <Enter>  53705

     Select one of the following:

          1         MADISON*
```

----------example continues----------

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

    Please enter 1 if the address is 'UNDELIVERABLE', 2 if the patient
    is 'HOMELESS', or 3 for 'OTHER' bad address reasons.
    Choose from:
    1        UNDELIVERABLE
    2        HOMELESS
    3        OTHER
Are you sure that you want to save the above changes? YES
Change saved.
```

Changes to the permanent address/Bad Address Indicator will not be saved until the prompt “Are you sure that you want to save the above changes?” is answered YES.

```
Press ENTER to continue:

Temporary Address:


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

Press Return to continue: <Enter>

PHONE NUMBER [CELLULAR]:
CNH CURRENT:
FEE HOSPITAL I.D.:
TEMPORARY ADDRESS ACTIVE?: NO//
REMARKS:

     >>PHARMACY PATIENT DATA<<

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

Chapter 21: Verifying Prescriptions

This chapter describes the option and methods used for verifying prescriptions.

Verification

[PSO VER]

The *Verification* menu is used by pharmacists to verify prescriptions with a non-verified status; obtain a listing of those remaining non-verified prescriptions; or calculate the number of non-verified prescriptions by entering the patient or the clerk.

The following options are available on the *Verification* menu:

- *List Non-Verified Scripts*
- *Non-Verified Counts*
- *Rx Verification by Clerk*

If the verification site parameter is set to yes, new prescriptions entered by a non-pharmacist (i.e., someone who does not hold the PSORPH key) will be put in a non-verified status, entered into the non-verified orders file, and will not be made active (nor will labels be printed) until they are reviewed and verified by a pharmacist. Once new and renewed prescriptions for a patient are verified, all labels for that patient will be printed together. If a patient has refills only, these labels will be printed as they are entered.

A pharmacist may choose to verify all entries made by a particular technician rather than all the prescriptions for an individual patient.

Prescriptions in a non-verified status cannot be canceled, edited, or deleted through the usual options. If a non-verified prescription is autocanceled on admission, it can be reinstated, but it returns to the non-verified status.

When the VERIFICATION outpatient site parameter is set to ‘No’, a user who does not hold the PSORPH key will not be allowed to finish a pending order.

The *Patient Prescription Processing* [PSO LM BACKDOOR ORDERS] and *Complete Orders from OERR* [PSO LMOE FINISH] options have been modified to incorporate the above functionality.

List Non-Verified Scripts
[PSO VRPT]

This option allows the user to obtain a list of all scripts remaining in a status of 'Non-Verified' by either patient or entering clerk.

Example: Non-verified prescriptions (sorted by patient)

```
Select Outpatient Pharmacy Manager Option: Verification

Select Verification Option:  List Non-Verified Scripts
Sort By Patient or Clerk: P// <Enter> ATIENT
DEVICE: HOME//  [Select Print Device]

                            NON-VERIFIED PRESCRIPTIONS
                            AS OF JUL 16,2007@14:49:54
                                 SORTED BY PATIENT
                      (# indicates Critical Drug Interaction)
   Patient name                                                     Page: 1
Rx #         Issued    Drug                                        Entry By
-------------------------------------------------------------------------------

  OPPATIENT,FIVE
100001860A   04/01/04  ACETAMINOPHEN 1000MG TABLET                10000000028

  OPPATIENT,FOUR
100001591A   07/27/98  ASPIRIN BUFFERED 325MG TAB                       11733

  OPPATIENT,ONE
100001853    10/23/02  ERYTHRITYL TETRANIT. 10MG TAB              10000000022

  OPPATIENT,TWELVE
100001854    11/25/02  ACETAMINOPHEN 1000MG TABLET                10000000022
100001798A   04/19/99  INSULIN NPH U-100 INJ (PORK)                        100


Select Verification Option:
```

Non-Verified Counts
[PSO NVCNT]

This option allows the user to obtain a count of the number of prescriptions remaining in a status of non-verified.

Example: Total of Non-verified prescriptions

```
Select Verification Option:  NON-Verified Counts
DEVICE: HOME//  [Select Print Device]


                        NON-VERIFIED PRESCRIPTION COUNTS
                              JUL 16,2007@14:57:34

TOTAL NUMBER OF NON-VERIFIED PRESCRIPTIONS : 12

NUMBER OF PATIENTS WITH ONE OR MORE NON-VERIFIED PRESCRIPTIONS : 9

(NOTE: Total number of patients listed here may not always equal the number at
the bottom, since some patients at the bottom may be counted more than once,
possibly having non-verified Rx's entered on different days.)

                    # of                  # of
     Date     Non-verified Rx's    Different Patients
     ----     -----------------    ------------------

   07-27-98           1                     1
   05-18-99           2                     1
   06-22-00           2                     2

TOTAL                 5                     4

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

Rx Verification by Clerk
[PSO VR]

This option verifies prescriptions in the non-verified status by entering the clerk.

Verifying ePharmacy Orders

Verifying an ePharmacy order is similar to finishing an order. After the user reviews the ePharmacy order and chooses to accept the order, the billing data is sent to ECME, which sends a message back to Outpatient Pharmacy displaying the status of the claim. The ECME section of the Activity Log is also updated.

```
RX: 101435   PATIENT: OPPATIENT,FOUR (000-01-1322P)
STATUS: Non-Verified
      DRUG: ENTEX CAP
       QTY: 10     10 DAY SUPPLY
       SIG: TAKE 25MG BY BY MOUTH EVERY DAY FOR 10 DAYS WITH FOOD
    LATEST: 11/05/2005               # OF REFILLS: 0  REMAINING: 0
    ISSUED: 11/05/2005                    PROVIDER:
    LOGGED: 11/05/2005                    CLINIC: NOT ON FILE
   EXPIRES: 11/15/2005                    DIVISION: ALBANY ISC (500)
       CAP: NON-SAFETY                    ROUTING: WINDOW
  ENTRY BY: OPPHARMACIST,ONE              VERIFIED BY:

PATIENT STATUS : SC LESS THAN 50%         COPIES : 1
EDIT:  (Y/N/P): N// NO
VERIFY FOR OPPHARMACIST4,THREE ? (Y/N/Delete/Quit): Y// <Enter>


Prescription 100003840 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Gathering claim info
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE

Another New Order for OPPATIENT,FOUR? YES//
```

Chapter 22: CPRS Order Checks: How They Work

Introduction

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

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

Order Check Data Caching

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

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

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

(This page included for two-sided copying.)

Chapter 23: Error Messages

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

Error Information

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

Two Levels of Error Messages

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

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

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

Chapter 24: FDA Medication Guides

Medication Guides are paper handouts that come with many prescription medicines. These guides address issues that are specific to particular drugs and drug classes, and they contain FDA approved information that can help patients avoid serious adverse events. The FDA requires that medication guides be issued with certain prescribed drugs and biological products when the agency determines that: certain information is necessary to prevent serious adverse effect; patient decision-making should be informed by information about a known serious side effect with a product; or patient adherence to directions for the use of a product are essential to its effectiveness. The VA maintains a web-enabled repository of all approved FDA Medication Guides, both current and archived versions of the documents. Following is the link to this repository:

http://vaww.national.cmop.va.gov/FDAMedGuides/

Displaying an FDA Medication Guide

The system provides users the ability to display individual FDA Medication Guides for a specific prescription when one is available.

Outpatient Pharmacy provides an option under the OTH hidden action within the Patient Prescription Processing [PSO LM BACKDOOR] option, aka 'Backdoor Pharmacy', allowing users to retrieve the Medication Guide associated with a prescription similar to the reprint of the PMI. Users may retrieve an FDA Mediation Guide for a specific prescription by invoking the OTH (Other OP Actions) hidden action and selecting the new action, MG Display FDA Medication Guide.

A Java software component running on the user's PC will then display the FDA Medication Guide Adobe Acrobat document (.pdf) by automatically opening it through the Adobe Acrobat reader via Microsoft Internet Explorer.

Example 1: Displaying an FDA Medication Guide

```
--- Other OP Actions ---
           PN   Progress Note (OP)
           AP   Action Profile (OP)
           MI   Print Medication Instructions
           DO   Display Orders' Statuses
           MG   Display FDA Medication Guide

           Select Item(s): MG   Display FDA Medication Guide

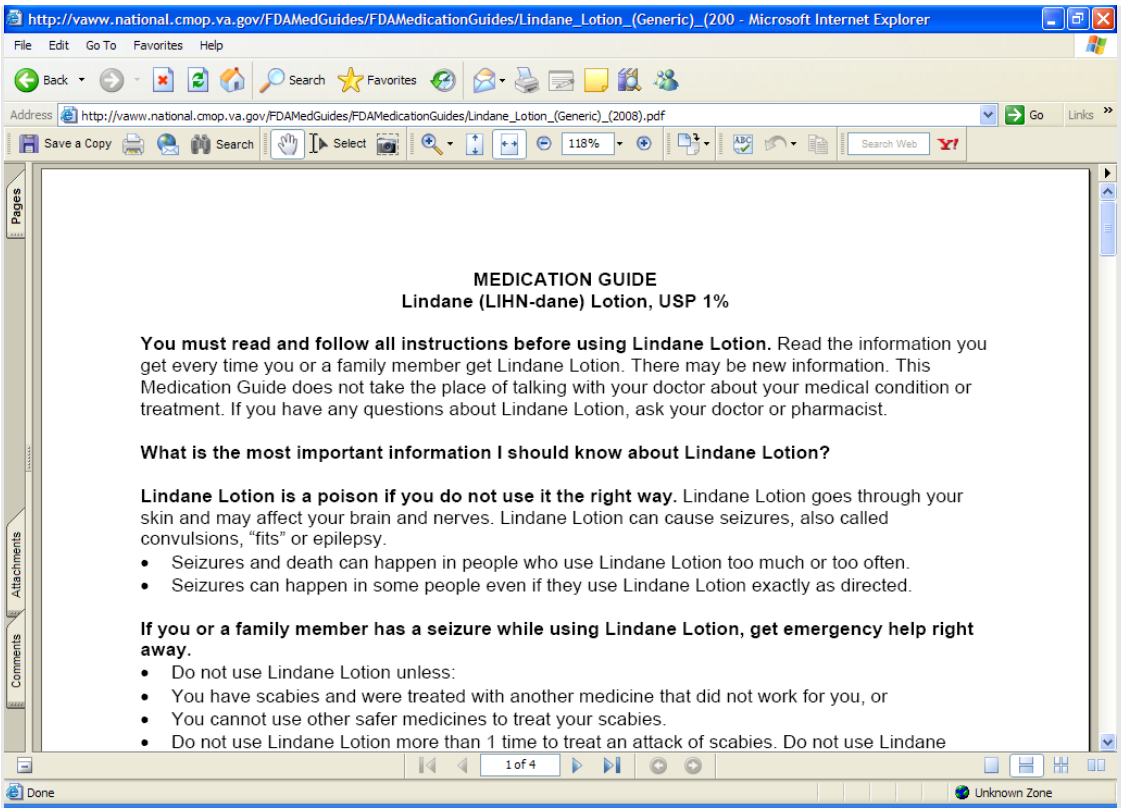
           The following URL provides the link to the FDA Medication Guide
           associated with this medication: Thin Client users; copy/paste the
           URL below into a browser to access the FDA Medication Guide for this
           drug:

          vaww.national.cmop.va.gov/FDAMedGuides/Lindane_(Generic)_(2008).pdf

Please wait...

Enter RETURN to continue, '?' for HELP, or '^' to exit:
```

The following Internet explorer browser will open automatically:



Example 2: Displaying an FDA Medication Guide for an Rx when the Java Software Component is not installed.

If a user tries to use this option from a computer which does not have the required Java software component installed, the following message will display:

```
Select Item(s): MG   Display FDA Medication Guide

The following URL provides the link to the FDA Medication Guide associated
with this medication. Thin Client users: copy/paste the URL below into a
browser to access the FDA Medication Guide for this drug:

vaww.national.cmop.va.gov/FDAMedGuides/Lindane_(Generic)_(2008).pdf

Please wait...

The system is unable to display FDA Med Guide automatically.

The FDA Medication Guide will not automatically open on Thin Client and some
types of encrypted sessions. If you do not believe this is the reason contact
your local technical support for assistance.

You can copy/paste the link above into your browser's address bar to retrieve
the FDA Medication Guide.

Enter RETURN to continue, '?' for HELP, or '^' to exit: ?
```

```
When unable to get the FDA Medication Guide to display, review the following
suggestion(s) for troubleshooting potential problems:

1) The browser did not open automatically. This may be due to the following:
   - You might be connected to VistA via Thin Client or an encrypted session
     that prevents the FDA Med Guide from automatically displaying. Please
     copy and paste the URL link below into your browser's address bar to
     retrieve the FDA Medication Guide:

 vaww.national.cmop.va.gov/FDAMedGuides/Lindane_Lotion_(Generic)_(2008).pdf

   - The computer might not have the required Java software component
     installed or the software might not be functioning properly. Please,
     contact technical support for assistance.

2) When doing a copy/paste of the link into the browser's address and an HTTP
   404 - File Not Found error is received. This may be due to the following:
   - A common issue exists when the link is displayed in two lines in the
     terminal screen. When you copy both lines at the same time and paste it
     into the browser's address, the second line is ignored by the browser
     resulting in a 'broken' link. To resolve this issue, copy and paste one
     line at a time from the terminal screen into the browser's address to
     make sure the complete link is used.
   - The FDA Medication Guide Server may be down at the moment. Please, wait
     a few minutes and try again. If the problem persists, contact technical
     support for assistance.

3) The browser opened automatically, however you receive an HTTP 404 - File
   Not Found error. This may be due to the following:
   - The FDA Medication Guide Server may be down at the moment. Please, wait
     a few minutes and try again. If the problem persists, contact technical
     support for assistance.
```

Example 3: Displaying an FDA Medication Guide for a medication that does not have an FDA Medication Guide on file.

If a user tries to use this option for a medication that does not have an FDA Medication Guide on file, the following message will display:

```
Select Item(s): MG   Display FDA Medication Guide

There is no FDA Medication Guide associated with this medication.

Enter RETURN to continue, '?' for HELP, or '^' to exit: ?

When unable to get the FDA Medication Guide to display, review the following
suggestion(s) for troubleshooting potential problems:

1) If no FDA Medication Guide exists for a product that you believe should
   have one, confirm that one is required by visiting the FDA website
   (www.fda.gov). If one is required, log a support ticket to request its
   addition. Please understand that there may be a delay between the time
   that a new Medication Guide is posted to the FDA website and when it is
   made available in VistA through a National Drug File data update patch.
```

(This page included for two-sided copying.)

Printing an FDA Medication Guide

The Outpatient Pharmacy application automatically prints an FDA Medication Guide on a separate, designated printer after printing the prescription label and PMI sheet, if one is available, for the medication being dispensed. Anytime a label is printed, the system ensures that if the specific drug has an associated medication guide, it will be printed whether the script is a normal fill, a partial fill or a refill.

When an FDA medication guide is sent to the printer, information is included in the footer of the document to identify the Patient, the Rx# and the date it was printed.

The system indicates when an associated medication guide exists on the prescription label printout. The printout contains the following statement on the same line where Additional Warnings appear: “Read FDA MED Guide.”

Site Parameters

[PSO SITE PARAMETERS]

There are new site parameters related to the automatic printing of FDA Medication Guides.

Example 1: Updating the FDA Medication Guide Print Server URL

```
Select Outpatient Pharmacy Manager Option: MAINtenance (Outpatient Pharmacy)

Select Maintenance (Outpatient Pharmacy) Option: SITE Parameter Enter/Edit

Select SITE NAME:    ALBANY  500
Would you like to see all site parameters for this division? Y// NO

NAME: ALBANY//
MAILING FRANK STREET ADDRESS: 114 HOLLAND AVE//
AREA CODE: 518//
PHONE NUMBER: 472-4307//
MAILING FRANK ZIP+4 CODE: 12180//
SITE NUMBER: 514//
NCPDP NUMBER: ^FDA
     1   FDA MED GUIDE PRINT SERVER URL
     2   FDA MED GUIDE PRINTER
CHOOSE 1-2: 1  FDA MED GUIDE PRINT SERVER URL
FDA MED GUIDE PRINT SERVER URL: ??
        This is the Uniform Resource Locator (URL) and Port Number for the Print

        Server running the Java Application responsible for automatically
        printing of the Food and Drug Administration (FDA) Medication Guides for

        the division (e.g., 'http://10.4.21.22:8092/').

FDA MED GUIDE PRINT SERVER URL: http://10.234.173.93:8092/
```

FDA Medication Guide Printer Selection

Upon logging into outpatient pharmacy, in addition to selecting the Label and Profile printers, the user is prompted to select the FDA Medication Guide printer as well. Only devices with a WINDOWS NETWORK PRINTER NAME field (#135) defined in the DEVICE file (#3.5) are selectable. The FDA Medication Guide printer can be changed at any point of the dispensing process. The user can also change the FDA Medication Guide printer through the Change Label Printer option [PSO CHANGE PRINTER].

Example 2: Selecting the Printer

```
Select OPTION NAME: PSO MAN
     1   PSO MANAGER       Outpatient Pharmacy Manager
     2   PSO MANUAL AUTO EXPIRE       Manual Auto Expire Rxs
CHOOSE 1-2: 1  PSO MANAGER     Outpatient Pharmacy Manager
Outpatient Pharmacy software - Version

Division:    ALBANY  500

          You are logged on under the ALBANY division.

Select PROFILE PRINTER: HOME//   GENERIC INCOMING TELNET

Select LABEL PRINTER: HOME//   GENERIC INCOMING TELNET

OK to assume label alignment is correct? YES//

ALBANY's FDA Medication Guide Printer(s) on file:

     BIRM1$PRT
     L8150$PRT

Select FDA MED GUIDE PRINTER: HINES FDA MED GUIDE PRINTER//   HINES


Bingo Board Display: OUTPATIENT//
```

The Default FDA Medication Guide Printer
[PSO SITE PARAMETERS]

Only one printer from the PHARMACY DIVISION file (#59) list of available printers used to print FDA Medication Guides may be selected as the default printer. The use of the list by the sites is optional. The user also has the ability to change the default FDA Medication Guide printer through the Site Parameter Enter/Edit option [PSO SITE PARAMETERS].

Example 3: Setting the Default FDA Medication Guide Printer

```
Select Outpatient Pharmacy Manager Option: MAINtenance (Outpatient Pharmacy)

Select Maintenance (Outpatient Pharmacy) Option: SITE Parameter Enter/Edit

Select SITE NAME:    ALBANY  500
Would you like to see all site parameters for this division? Y// NO

NAME: ALBANY//
```

```
MAILING FRANK STREET ADDRESS: 114 HOLLAND AVE//
AREA CODE: 518// ^FDA     1   FDA MED GUIDE PRINT SERVER URL
     2   FDA MED GUIDE PRINTER
CHOOSE 1-2: 2  FDA MED GUIDE PRINTER
Select FDA MED GUIDE PRINTER: BAY PINES FDA MED GUIDE PRINTER
         // ?
    Answer with FDA MED GUIDE PRINTER
   Choose from:
   SUPPORT LINE PRINTER
   BIRM1$PRT
   HINES FDA MED GUIDE PRINTER
   BAY PINES MED GUIDE PRINTER

        You may enter a new FDA MED GUIDE PRINTER, if you wish
        Enter the FDA Medication Guide printer for the division.
        Only devices with a Windows Network Printer Name are allowed.

 Answer with DEVICE NAME, or LOCAL SYNONYM, or $I, or VOLUME SET(CPU), or
     SIGN-ON/SYSTEM DEVICE, or FORM CURRENTLY MOUNTED
 Do you want the entire DEVICE List? N  (No)
Select FDA MED GUIDE PRINTER: BAY PINES MED GUIDE PRINTER
         // BIRM1  BIRM1$PRT    BHM     |PRN|\\VHAISPLAB5\BIRM1
         ...OK? Yes//   (Yes)

  FDA MED GUIDE PRINTER: BIRM1$PRT//
  DEFAULT PRINTER: ?
     Indicate whether the printer is the default FDA Medication Guide Printer
     for the division.
     Choose from:
       1        YES
  DEFAULT PRINTER: 1  YES
Select FDA MED GUIDE PRINTER:
```

Reprinting an FDA Medication Guide

[PSO LM BACKDOOR ORDERS]

The system allows the user to reprint the associated FDA Medication Guide for a given prescription fill (or the latest FDA Medication Guide available for the medication on the prescription when reprinting a prescription label) and for prescription fills sent to CMOP by invoking the RM action under the OTH (Other OP Actions) after selecting a specific prescription in Backdoor Pharmacy, as seen below. The system prompts the user whether to reprint a medication guide, if an FDA Medication Guide is associated with a Prescription, when reprinting a label. The Default is set to 'NO'.

Example 4: Drug Not matched to National Drug File

If a user tries to use this option for a medication that is not matched to the National Drug File, the following message will display:

```
--- Other OP Actions ---

PN   Progress Note (OP)
AP   Action Profile (OP)
MI   Print Medication Instructions
DO   Display Orders' Statuses
MG   Display FDA Medication Guide
RM   Reprint FDA Medication Guide
```

```
Select Item(s): RM   Reprint FDA Medication Guide
ACETAMINOPHEN 325MG C.T. not matched to the National Drug File (NDF)

Enter RETURN to continue:
```

Example 5: No FDA Medication Guide Associated with Drug

If a user tries to use this option for a medication that does not have an FDA Medication Guide on file, the following message will display:

```
--- Other OP Actions ---

PN   Progress Note (OP)
AP   Action Profile (OP)
MI   Print Medication Instructions
DO   Display Orders' Statuses
MG   Display FDA Medication Guide
RM   Reprint FDA Medication Guide

Select Item(s): RM   Reprint FDA Medication Guide

No FDA Medication Guide on file for this Rx.
Enter RETURN to continue:
```

Example 6: Reprinting an FDA Medication Guide for a Medication that has an FDA Medication Guide on File

```
--- Other OP Actions ---

PN   Progress Note (OP)
AP   Action Profile (OP)
MI   Print Medication Instructions
DO   Display Orders' Statuses
MG   Display FDA Medication Guide
RM   Reprint FDA Medication Guide

Select Item(s): RM   Reprint FDA Medication Guide

ALBANY's FDA Medication Guide Printer(s) on file:

     BIRM1$PRT
     L8150$PRT

Select FDA MED GUIDE PRINTER: SUPPORT LINE PRINTER//   ROOM 234

Select FDA Medication Guide to reprint:

-------------------------------------------------------------------------------
 # FL  FDA MED GUIDE FILE NAME                                    TYPE   DATE
-------------------------------------------------------------------------------
 1  0  Lindane_Lotion_(Generic)_(2008).pdf                        WINDOW 07/02/11
 2  P1 Lindane_Lotion_(Generic)_(2008).pdf                        WINDOW 08/16/11
 3  1  Lindane_Lotion_(Generic)_(2008).pdf                        WINDOW 09/21/11

 4     Lindane_Lotion_(Generic)_(2008).pdf                        LATEST

Select FDA Med Guide (1-4): 3 Lindane_Lotion_(Generic)_(2008).pdf

FDA Medication Guide sent to printer.

Enter RETURN to continue:
```

Example 7: Reprinting FDA Medication Guide from Profile

```
OP Medications (ACTIVE)       Oct 04, 2011@10:52:23          Page:    1 of    2
OUTPATNM,CATHLEEN                                <NO ALLERGY ASSESSMENT>
  PID: 666-00-0704                                Ht(cm): _______ (______)
  DOB: FEB 1,1955 (56)                            Wt(kg): _______ (______)
--------------------------------------------------------------------------------
                Rx #: 300411$
 (1) *Orderable Item: LINDANE SHAMPOO
 (2)            Drug: LINDANE 1% SHAMPOO
                Verb: SHAMPOO
 (3)         *Dosage: 1
              *Route: ORAL (BY MOUTH)
           *Schedule: QD
 (4)Pat Instructions:
                 SIG: SHAMPOO 1 BY MOUTH EVERY DAY
 (5)  Patient Status: SC LESS THAN 50%
 (6)      Issue Date: 09/02/11               (7)  Fill Date: 09/02/11
      Last Fill Date: 09/02/11 (Window)
   Last Release Date:                         (8)      Lot #:
            Expires: 09/02/12                           MFG:
+---------Enter ?? for more actions-----------------------------------------
DC   Discontinue          PR   Partial              RL   Release
ED   Edit                 RF   Refill               RN   Renew
Select Action: Next Screen// rp   RP
Number of Copies? :  (1-99): 1//
Print adhesive portion of label only? No//   NO
Reprint the FDA Medication Guide? No// YES
Comments: TESTING SINGLE RX REPRINT

Rx # 300411            09/02/11
OUTPATNM,CATHLEEN             #1
SHAMPOO 1 BY MOUTH EVERY DAY

LINDANE 1% SHAMPOO
ROBERTSON,MARK           ROCHA,MARCELO
# of Refills: 5

Press Return to Continue:
```

Changing the FDA Medication Guide Printer

[PSO CHANGE PRINTER]

Users have the ability to change the currently selected FDA Medication Guide printer through the Change Label Printer option [PSO Change Printer.]

Example 8: Changing the FDA Med Guide Printer

```
Select Outpatient Pharmacy Manager Option:  Change Label Printer
Select PROFILE PRINTER: TELNET-IN//   GENERIC INCOMING TELNET

Select LABEL PRINTER: TELNET-IN//   GENERIC INCOMING TELNET

OK to assume label alignment is correct? YES//

ALBANY's FDA Medication Guide Printer(s) on file:

     BIRM1$PRT
```

```
     L8150$PRT
Select FDA MED GUIDE PRINTER: BIRM1$PRT// hines  HINES FDA MED GUIDE PRINTER  HI
NES
```

Prompt During Label Print

The system prompts the user to select a different FDA Medication Guide printer when printing labels, if at least one FDA Medication Guide is associated with a Prescription label being printed.

Label Log and CMOP Event Log Display

The Label Log as well as the CMOP Event Log displays the FDA MED Guide URL under the Comments line to denote that an FDA Medication Guide printed along with the label or that there was one associated with the medication when the prescription fill was transmitted to CMOP.

Example 9: Label Log and CMOP Event Log Display

```
Label Log:
#   Date        Rx Ref                    Printed By
==============================================================================
1   10/04/11    ORIGINAL                  ROCHA,MARCELO
Comments: From RX number 300418
FDA Med Guide: Lindane_Lotion_(Generic)_(2008).pdf
```

```
CMOP Event Log:
Date/Time             Rx Ref  TRN-Order       Stat             Comments
==============================================================================
10/04/11@0943         Orig    15-1            TRAN
FDA Med Guide: NSAIDs_(Class)_(2009).pdf
```

Audit Trail for FDA Medication Guide Printing

The system stores the unique FDA Medication Guide document name for each fill being transmitted to CMOP in the PRESCRIPTION file (#52).

Automatically Printing FDA Medication Guides is Optional

The FDA Medication Guide automatic printing functionality is an **optional** functionality. Each pharmacy division may choose to turn this functionality ON or OFF. Reasons a pharmacy division might choose to turn the FDA Medication Guide automatic printing functionality OFF are:

- FDA Medication Guides print on a different printer than the prescription labels. High-volume window prescription dispensing sites may not have the necessary resources for collating FDA Medication Guides with their corresponding prescription labels.

- Automated-dispensing systems such as Optfill also perform the prescription label printing, which usually happens at a later time than when the labels are printed in VistA. Since FDA Medication

Guides automatically print at the same time labels print from VistA, medication guides may print too early in the dispensing process, causing confusion.

To turn the FDA Medication Guide automatic printing functionality OFF or to not turn it ON for a specific pharmacy division, make sure the FDA MED GUIDE PRINT SERVER URL field has no value. This field can be edited via the Site Parameter Enter/Edit [PSO SITE PARAMETERS] option, as shown below.

Whether the functionality is being turned ON or OFF, the prescription label printed from VistA will still include the note "Read FDA Med Guide" when one is associated with the medication being dispensed.

Example 10: Updating the FDA Med Guide Print Server URL Field

```
Select Outpatient Pharmacy Manager Option: SUPERvisor Functions

          Add New Providers
          Daily Rx Cost
          Delete a Prescription
          Edit Provider
          Initialize Rx Cost Statistics
          Inter-Divisional Processing
          Inventory
          Lookup Clerk by Code
          Monthly Rx Cost Compilation
          Patient Address Changes Report
          Pharmacist Enter/Edit
          Purge Drug Cost Data
          Recompile AMIS Data
          Site Parameter Enter/Edit
          View Provider

Select Supervisor Functions Option: SITE Parameter Enter/Edit

Select SITE NAME: ALBANY    500
Would you like to see all site parameters for this division? Y// NO

NAME: ALBANY//
MAILING FRANK STREET ADDRESS: 114 HOLLAND AVE//
AREA CODE: 518//
PHONE NUMBER: 472-4307//
MAILING FRANK ZIP+4 CODE: 12208//
SITE NUMBER: 500//
NCPDP NUMBER:

...

LOGICAL LINK: PSO DISP//
PROCESS AUTO REFILLS FOR INPAT:
PROCESS AUTO REFILLS FOR CNH:
FDA MED GUIDE PRINT SERVER URL: ??
      This is the Uniform Resource Locator (URL) and Port Number for the Print
      Server running the Java Application responsible for automatically
      printing of the Food and Drug Administration (FDA) Medication Guides for
      the division (e.g.,'http://10.4.21.22:8092/').

FDA MED GUIDE PRINT SERVER URL:
```

Make sure this field is blank (no value).

(This page included for two-sided copying.)

Chapter 225: Security Keys

A security key is a unique entry in the Security Key file (^DIC(19.1,) which may prevent access to a specific option or action by including the key as part of the option's entry in the Option file (^DIC(19,). Only users entered in the Holder field of the Security Key file may access the option or action.

New or Modified Security Keys

PSO TRICARE/CHAMPVA

PSO*7*385 renamed the PSO TRICARE security key to PSO TRICARE/CHAMPVA. Please see TRICARE/CHAMPVA Eligible Outpatient Override Function for further information on this security key.

PSO TRICARE/CHAMPVA MGR

PSO*7*385 renamed the PSO TRICARE MGR security key to PSO TRICARE/CHAMPVA MGR. Please see TRICARE CHAMPVA Bypass/Override Report for further information on this security key.

PSO TECH ADV

PSO*7*386 added the PSO TECH ADV security key for use of holding and unholding prescriptions. Please see Holding and Unholding a Prescription for further information on this security key.

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Glossary

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

Acronym/Term	Definition
Action Profile	A list of all active and recently canceled or expired prescriptions for a patient sorted by classification. This profile also includes a signature line for each prescription to allow the physician to cancel or renew it.
Activity Log	A log, by date, of changes made to or actions taken on a prescription. An entry is made in this log each time the prescription is edited, canceled, reinstated after being canceled, or renewed. An entry will be made into this log each time a label is reprinted. A CMOP activity log will contain information related to CMOP dispensing activities.
ADD	Automated Dispensing Device
Allergy/ADR Information	Includes non-verified and verified allergy and/or adverse reaction information as defined in the Adverse Reaction Tracking (ART) package. The allergy data is sorted by type (DRUG, OTHER, FOOD). If no data is found for a category, the heading for that category is not displayed.
AMIS	Automated Management Information System
Answer Sheet	An entry in the DUE ANSWER SHEET file. It contains the questions and answers of a DUE questionnaire. This term is also used to refer to the hard copy representation of a DUE ANSWER SHEET entry.
API	Application Programming Interface**s**
APSP	Originally Indian Health Service Pharmacy's name space now owned by the Outpatient Pharmacy software.
Bypass	Take no action on a medication order.
CHAMPVA	CHAMPVA (Civilian Health and Medical Program of the Department of Veterans Affairs) is a cost-shared health benefits program established for the dependents and survivors of certain severely disabled and/or deceased veterans.
CMOP	Consolidated Mail Outpatient Pharmacy.
CPRS	Computerized Patient Record System. CPRS is an entry point in VistA that allows the user to enter all necessary orders for a patient in different packages (e.g., Outpatient Pharmacy, Inpatient Pharmacy, etc.) from a single entry point.
Critical	Interactions with severe consequences that require some type of action (finding facts, contacting prescribers) to prevent potential serious harm.
DATUP	Data Update (DATUP). Functionality that allows the Pharmacy Enterprise Customization System (PECS) to send out custom and standard commercial-off-the-shelf (COTS) vendor database changes to update the two centralized databases at Austin and Martinsburg.

Acronym/Term	Definition
DEA	Drug Enforcement Agency
DEA Special Handling	The Drug Enforcement Agency special Handling code used for drugs to designate if they are over-the counter, narcotics, bulk compounds, supply items, etc.
DHCP	See VistA.
DIF	Drug Information Framework
Dispense Drug	The Dispense Drug name has the strength attached to it (e.g., Acetaminophen 325 mg). The name alone without a strength attached is the Orderable Item name.
DNS	Domain Name Server
DoD	Department of Defense
Dosage Ordered	After the user has selected the drug during order entry, the dosage ordered prompt is displayed.
Drug/Drug Interaction	The pharmacological or clinical response to the administration of a drug combination different from that anticipated from the known effects of the two agents when given alone.
DUE	Drug Usage Evaluation
ETC	Enhanced Therapeutic Classification
Expiration/Stop	The date on which a prescription is no longer active. Typically, this date is 30 days after the issue date for narcotics, 365 days after the issue date for other medications and 365 days after the issue date for supplies.
FDB	First DataBank
Finish	Term used for completing orders from Order Entry/Results Reporting V. 3.0.
GUI	Acronym for Graphical User Interface.
HDR-Hx	Health Data Repository Historical
HDR-IMS	Health Data Repository- Interim Messaging Solution
Issue Date	The date on which the prescription was written. This date is usually, but not always, the same as the first fill date. This date cannot be later than the first fill date.
HFS	Host File Server.
Health Insurance Portability and Accountability Act of1996 (HIPAA)	A Federal law that makes a number of changes that have the goal of allowing persons to qualify immediately for comparable health insurance coverage when they change their employment relationships. Title II, Subtitle F, of HIPAA gives HHS the authority to mandate the use of standards for the electronic exchange of health care data; to specify what medical and administrative code sets should be used within those standards; to require the use of national identification systems for health care patients, providers, payers (or plans), and employers (or sponsors); and to specify the

Acronym/Term	Definition
	types of measures required to protect the security and privacy of personally identifiable health care information. Also known as the Kennedy-Kassebaum Bill, the Kassebaum-Kennedy Bill, K2, or Public Law 104-191.
JCAHO	Acronym for Joint Commission on Accreditation of Healthcare Organizations
Label/Profile Monitor	A file for each printer which records, in the order in which they were printed, the last 1000 labels or profiles printed on that printer. This allows a rapid reprint of a series of labels or profiles that were damaged by a printer malfunction or other event.
Local Possible Dosages	Free text dosages that are associated with drugs that do not meet all of the criteria for Possible Dosages.
Medication Instruction File	The MEDICATION INSTRUCTION file is used by Unit Dose and Outpatient Pharmacy. It contains the medication instruction name, expansion and intended use.
Medication Order	A prescription.
Medication Profile	A list of all active or recently canceled or expired prescriptions for a patient sorted either by date, drug, or classification. Unlike the action profile, this profile is for information only and does not provide a signature line for a physician to indicate action to be taken on the prescription.
Medication Routes File	The MEDICATION ROUTES file contains medication route names. The user can enter an abbreviation for each route to be used at the local site. The abbreviation will most likely be the Latin abbreviation for the term.
Med Route	The method in which the prescription is to be administered (e.g., oral, injection).
NCCC	Acronym for National Clozapine Coordinating Center.
Non-Formulary Drugs	The medications, which are defined as commercially available drug products not included in the VA National Formulary.
Non-VA Meds	Term that encompasses any Over-the-Counter (OTC) medications, Herbal supplements, Veterans Health Administration (VHA) prescribed medications but purchased by the patient at an outside pharmacy, and medications prescribed by providers outside VHA. All Non-VA Meds must be documented in patients' medical records.
OPAI	Outpatient Pharmacy Automated Interface
Order	Request for medication.
Orderable Item	An Orderable Item name has no strength attached to it (e.g., Acetaminophen). The name with a strength attached to it is the Dispense drug name (e.g., Acetaminophen 325mg).
Partial Prescription	A prescription that has been filled for a quantity smaller than requested. A possible reason for a partial fill is that a patient is to return to the clinic in ten days but the prescription calls for a thirty-day supply. Partials do count as workload but do not count against the total number of refills for a

Acronym/Term	Definition
	prescription.
Payer	In health care, an entity that assumes the risk of paying for medical treatments. This can be an uninsured patient, a self-insured employer, or a health care plan or Health Maintenance Organization (HMO).
Pending Order	A pending order is one that has been entered by a provider through CPRS without Pharmacy finishing the order. Once Pharmacy has finished the order, it will become active.
Pharmacy Narrative	OUTPATIENT NARRATIVE field that may be used by pharmacy staff to display information specific to the patient.
Polypharmacy	The administration of many drugs together.
POE	Acronym for Pharmacy Ordering Enhancements (POE) project. Patch PSO*7*46 contains all the related changes for Outpatient Pharmacy.
Possible Dosages	Dosages that have a numeric dosage and numeric dispense units per dose appropriate for administration. For a drug to have possible dosages, it must be a single ingredient product that is matched to the DRUG file. The DRUG file entry must have a numeric strength and the dosage form/unit combination must be such that a numeric strength combined with the unit can be an appropriate dosage selection.
Prescription	This term is now referred to throughout the software as medication orders.
Prescription Status	A prescription can have one of the following statuses. **Active -** A prescription with this status can be filled or refilled. **Canceled -** This term is now referred to throughout the software as Discontinued. (See Discontinued.) **Discontinued -** This status is used when a prescription was made inactive either by a new prescription or by the request of a physician. **Discontinued (Edit) -** Discontinued (Edit) is the status used when a medication order has been edited and causes a new order to be created due to the editing of certain data elements. **Deleted -** This status is used when a prescription is deleted. Prescriptions are no longer physically deleted from the system, but marked as deleted. Once a prescription is marked deleted no access is allowed other than view. **Expired -** This status indicates the expiration date has passed. *Note: A prescription that was canceled or has expired more recently than the date specified by the cutoff date, typically 120 days in the past, can still be acted upon. **Hold -** A prescription that was placed on hold due to reasons determined by the pharmacist. **Non-verified -** There are two types of non-verified statuses. Depending on a site parameter, prescriptions entered by a technician do not become active until a pharmacist reviews them. Until such review, they remain non-verified and cannot be printed, canceled or edited except through the *Verification* menu. The second non-verified status is given to prescriptions when a drug/drug interaction is encountered during the new order entry or editing of a

Acronym/Term	Definition
	prescription. **Pending -** A prescription that has been entered through OERR. **Refill -** A second or subsequent filling authorized by the provider. **Suspended -** A prescription that will be filled at some future date.
Progress Notes	A component of Text Integration Utilities (TIU) that can function as part of CPRS.
Provider	The person who authorized an order. Only users identified as providers who are authorized to write medication orders may be selected.
Reprinted Label	Unlike a partial prescription, a reprint does not count as workload.
Questionnaire	An entry in the DUE QUESTIONNAIRE file. This file entry contains the set of questions related to a DUE as well as the drugs being evaluated.
Schedule	The frequency by which the doses are to be administered, such as Q8H, BID, NOW, etc.
Sig	The instructions printed on the label.
Significant	The potential for harm is either rare or generally known so that it is reasonable to expect that all prescribers have taken this information into account.
Speed Actions	See Actions.
Suspense	A prescription may not be able to be filled on the day it was requested. When the prescription is entered, a label is not printed. Rather, the prescription is put in the RX SUSPENSE file to be printed at a later date.
Third (3rd) Party Claims	Health care insurance claims submitted to an entity for reimbursement of health care bills.
Time In	This is the time that the patient's name was entered in the computer.
Time Out	This is the time that the patient's name was entered on the bingo board monitor.
TIU	Text Integration Utilities; a package for document handling, that includes Consults, Discharge summary, and Progress Notes, and will later add other document types such as surgical pathology reports. TIU components can be accessed for individual patients through the CPRS, or for multiple patients through the TIU interface.
TRICARE	TRICARE is the uniformed service health care program for: • active duty service members and their families • retired service members and their families • members of the National Guard and Reserves and their families • survivors, and • others who are eligible There are differences in how prescriptions for TRICARE beneficiaries are processed versus how prescriptions are processed for veterans.

Acronym/Term	Definition
Units per Dose	The number of Units (tablets, capsules, etc.) to be dispensed as a Dose for an order. Fractional numbers will be accepted for medications that can be split.
VistA	Acronym for Veterans Health Information Systems and Technology Architecture, the new name for Decentralized Hospital Computer Program (DHCP).
Wait Time	This is the amount of time it took to fill the prescription. It is the difference between Time In and Time Out. For orders with more than one prescription, the wait time is the same for each.

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