



OUTPATIENT PHARMACY

TECHNICIAN'S USER MANUAL

Version 7.0
December 1997

(Revised January 2013)

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
01/2013	i-ii, v-vi 8 4, 6, 22, 23, 26n, 28, 29b, 29v, 36, 52, 55, 56 18a-18d 26e-26e2 27, 48, 55a 29f-29g2 79-84 85	PSO*7*390	Updated Revision History & Table of Contents Added new option Check Interaction Added Creatinine Clearance (CrCl) and Body Surface Area (BSA), when available, to the header area of Patient and Medication Profile displays Added new option Check Drug Interaction Added information regarding clinic orders Update Hidden Actions Added drug allergy changes Update Glossary Update Index (G. Tucker, PM; S. Heiress, Tech Writer)
09/2012	i, ii, vi, 55a – 55d	PSO*7*386	Added section on HOLD and UNHOLD functionality. (N.Goyal, PM; J. Owczarzak, Tech Writer)
02/2012	i-ii, v-vi, 14, 34, 37-40, 42- 43, 45a-45h, 63, 66, 68a-b, 70, 79-83	PSO*7*385 PSO*7*359	Added signature alert Expanded ECME Numbers to twelve digits Corrected typos Updated wording on p. 34 from “a message” to “messages” Updated Service Code values Added CHAMPVA functionality Added TRICARE to Glossary Added CHAMPVA to Glossary (S. Spence, PM; C. Smith, Tech Writer)
04/2011	i v, vi 4 5 8 21 22 24	PSO*7*251	The following changes are included in this patch: -Updated Revision History -Updated Table of Contents -Outpatient List Manager Screen Views -Added HP and H to Hold Status, and Added DF,DE,DP,DD and DA -Added Intervention menu hidden action information -Added DF,DE,DP,DD and DA, and Added HP and H to Hold Status -Replaced Medication Short Profile

Date	Revised Pages	Patch Number	Description
	25-26r 27 28-28b 29-29ff 50 54 75 77-78 79-84 85		-Added Intervention menu hidden action information -Inserted enhanced Order checks, Outpatient Pharmacy generated order checks -Added IN to Screen Scrape -Modified New Order Screen Scrape -Updated Entering a New Order, Added Allergy/ADR, Therapeutic Duplication, and CPRS Order Checks -Duplicate Drug examples -Duplicate Drug examples -CPRS Order Checks – How They Work -Error Messages -Added API, DATUP, DIF, DoD, ETC, FDB, HDR-Hx, and HDR-IMS to the Glossary, and updated page numbering -Updated Index to include Enhanced Drug-Drug Interactions, Duplicate Drug Order Check, Allergy/ADR Order Check Display, Therapeutic Duplication, and CPRS Order Checks, and updated page numbering (H. Whitney, Developer, S. Heiress, Tech Writer)
10/09	v, 11, 21-23, 61, 81	PSO*7*326	The Social Security Number was removed from print outs given to patients. The patient lookup has been expanded to include the ability to look up by prescription number or wand a barcode with the prescription from many options. (E. Wright, PM; S. B. Gilbert, Tech Writer)
08/09	All	PSO*7*320	The following changes are included in this patch. <ul style="list-style-type: none"> • Remote Data prompt, notification, and screen have been added. • A hidden action, DR [Display Remote], has been added. • "THIS PATIENT HAS PRESCRIPTIONS AT OTHER FACILITIES" prints at the end of the Pull Early from Suspense report. (G. Tucker, PM; S. B. Scudder, Tech Writer)

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 VA Medical Center.

(This page included for two-sided copying.)

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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

Allergy Indicator

The screenshot shows a terminal-style interface with the following sections:

- Screen Title:** Patient Information Feb 09, 2006 16:31:03 Page: 1 of 2
- Header Area:**
 - OPPATIENT17, ONE
 - PID: 000-12-3456 Ht (cm): 175.26 (08/06/2000)
 - DOB: AUG 30,1948 (57) Wt (kg): 108.18 (01/14/2006)
 - SEX: MALE
 - +
- List Area (Scrolling region):**
 - Eligibility: SERVICE CONNECTED 50% to 100% SC%: 70
 - RX PATIENT STATUS: SC LESS THAN 50%
 - Disabilities:
 - 1313 TWIN OAKS LANE
 - ANYVILLE HOME PHONE: 555-555-8361
 - ALABAMA 12345 CELL PHONE:
 - Prescription Mail Delivery: Regular Mail WORK PHONE:
- Message Window:**
 - Allergies
 - Verified: PEANUTS,
 - + Enter ?? for more actions
- Action Area:**
 - EA Enter/Edit Allergy/ADR Data PU Patient Record Update
 - DD Detailed Allergy/ADR List EX Exit Patient List
 - Select Action: Quit//

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. Outpatient Pharmacy hidden actions are displayed with the letters (OP) next to the action.

Example: Showing more Indicators and Definitions

Order Status and CMOP Indicators

Allergy Indicator

Copay Indicator

ePharmacy Indicator

Pending Orders

Flagged Order

Non-VA Meds Orders

Return To Stock Indicator

Medication Profile		May 22, 2006 10:44:56		Page: 1 of 1					
OPPATIENT16, ONE		PID: 000-24-6802		Ht (cm): 177.80 (02/08/2004)					
DOB: APR 3, 1941 (65)		SEX: MALE		Wt (kg): 90.45 (02/08/2004)					
CrCL: 102.4 (est.) (CREAT:1.0mg/dL 10/30/12)		BSA (m2): 2.08							
Non-VA Meds on File		Last entry on 01/13/01							
#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP	
-----ACTIVE-----									
1	503902	ACETAMINOPHEN 500MG TAB	60	AT	05-22	05-22	3	30	
2	503886\$	DIGOXIN (LANOXIN) 0.2MG CAP	60	A>	05-07	05-07	5	30	
3	503871\$	HISTOPLASMIN 1ML	1	A	03-14	03-14R	5	30	
4	100002042\$e	NALBUPHINE HCL INJ 10MG/ML	1	A	03-14	03-14	5	30	
5	100002040\$	SALICYLIC ACID 40% OINT (OZ)	1	S	03-14	03-17	5	30	
-----DISCONTINUED-----									
6	503881	BACLOFEN 10MG TABS	30	DC	04-07	05-01	2	30	
7	100002020A\$	TIMOLOL 0.25% OPTH SOL 10ML	1	DE	02-03	02-03	5	30	
8	10000205	HALOPERIDOL 20MG TAB	1	DF	02-03	02-03	5	30	
9	8201954	BILAFUMIN .05 MG CAP	1	DP	01-03	03-03	5	30	
10	6041972	RONINPENSATE 15MG SA TAB	1	DD	03-03	04-03	5	30	
11	3012001	PRESTANUS 1% SOL	1	DA	02-03	02-03	5	30	
-----HOLD-----									
12	8251996	VONITRATE CAL 325MG EC TAB	1	HP	02-03	02-03	5	30	
13	100001942	ABDOMINAL PAD 7 1/2 X 8 STERILE	1	H	09-28	09-28	5	30	
-----NON-VERIFIED-----									
14	100002039\$	BACLOFEN 10MG TABS	30	N	03-14	03-14	5	30	
-----PENDING-----									
15	AMPICILLIN 250MG CAP		QTY: 40		ISDT: 05-29		REF: 0		
16	SIMETHICONE 40MG TAB		QTY: 30		ISDT: 05-30		REF: 3		
-----NON-VA MEDS (Not dispensed by VA)-----									
GINKO EXT 1 TAB ONCE A DAY BY MOUTH					Date Documented: 01/13/01				
IBUPROFEN 50MG TAB					Date Documented: 12/10/00				
Enter ?? for more actions									
PU	Patient Record Update				NO	New Order			
PI	Patient Information				SO	Select Order			
Select Action: Quit//									

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 Computerized Patient Records System (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		BSA (m2): 2.08			
CrCL: 78.1(est.) (CREAT:1.0mg/dL 6/24/03)		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.



Not all functionality displayed in this section (i.e., hidden and speed actions) is available to pharmacy technicians.

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. Outpatient Pharmacy hidden actions are displayed with the letters (OP) next to the 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]	Toggles the menu of actions to be displayed/not displayed automatically.
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 prescription 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.
Check Interactions [CK]	Allows a user to perform order checks against the patient’s active medication profile with or without a prospective drug.
DIN	Displays available drug restriction/guideline information for the Dispense Drug and Orderable Item associated with the selected medication order.
Intervention Menu (IN)	Allows a user to enter a new intervention or delete, edit, print and view an existing intervention.
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], or Non-VA Meds Report [NV].

Chapter 5.5: Check Drug Interaction

This chapter describes the *Check Drug Interaction* option shown on the Outpatient Pharmacy Manager [PSO MANAGER] menu and the Pharmacist Menu [PSO USER1].

Check Drug Interaction

[PSO CHECK DRUG INTERACTION]

This option allows a user to check drug interactions between two or more drugs.

```
Select Outpatient Pharmacy Manager Option: CHECK Drug Interaction
Drug 1:   WARFARIN 2MG TABS           BL110
         ...OK? Yes//   (Yes)

Drug 2: SIMVASTATIN 40MG TAB
         Lookup: GENERIC NAME
SIMVASTATIN 40MG TAB           CV350
         ...OK? Yes//   (Yes)

Drug 3:

Now Processing Enhanced Order Checks!  Please wait...

*** DRUG INTERACTION(S) ***
=====
***Significant*** with SIMVASTATIN 40MG TAB and
                   WARFARIN 2MG TABS

CLINICAL EFFECTS:  Increase hypoprothrombinemic effects of warfarin.

=====
Press Return to Continue...:

Display Professional Interaction monograph? N// YES

DEVICE: HOME//   SSH VIRTUAL TERMINAL   Right Margin: 80//

-----
Professional Monograph
Drug Interaction with SIMVASTATIN 40MG TAB and WARFARIN 2MG TABS
This information is generalized and not intended as specific medical
advice. Consult your healthcare professional before taking or
discontinuing any drug or commencing any course of treatment.

MONOGRAPH TITLE:  Selected Anticoagulants/Selected HMG-CoA Reductase
Inhibitors

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

MECHANISM OF ACTION:  The exact mechanism of this interaction is
unknown. The HMG-CoA reductase inhibitor may inhibit the hepatic
hydroxylation of warfarin. The HMG-CoA reductase inhibitors, which
are highly plasma protein bound, may displace warfarin from its
binding site.
```

Press Return to Continue or "^" to Exit:

Professional Monograph

Drug Interaction with SIMVASTATIN 40MG TAB and WARFARIN 2MG TABS

CLINICAL EFFECTS: Increase hypoprothrombinemic effects of warfarin.

PREDISPOSING FACTORS: None determined.

PATIENT MANAGEMENT: Patients should be monitored for changes in prothrombin time when a HMG Co-A reductase inhibitor is added to or discontinued from warfarin therapy, or if the dosage of the HMG Co-A reductase inhibitor is adjusted.

DISCUSSION: Case reports in the medical literature and to the manufacturer have documented an interaction between lovastatin and warfarin. A case report has documented an interaction between pravastatin and fluindione (an orally administered indanedione anticoagulant), suggesting that pravastatin could also interact similarly with warfarin. Information concerning a potential interaction with simvastatin is conflicting. A case report has documented an interaction between simvastatin and acenocoumarol while another case report showed no interaction with warfarin. One group of authors reported three case reports of increased international normalized ratios (INRs) following the addition of fluvastatin to warfarin therapy. The addition of rosuvastatin to patients stabilized on warfarin resulted in clinically significant changes in INR.

Press Return to Continue or "^" to Exit:

Professional Monograph

Drug Interaction with SIMVASTATIN 40MG TAB and WARFARIN 2MG TABS

REFERENCES:

- 1.Ahmad S. Lovastatin. Warfarin interaction. Arch Intern Med 1990 Nov; 150(11):2407.
- 2.Hoffman HS. The interaction of lovastatin and warfarin. Conn Med 1992 Feb; 56(2):107.
- 3.Iliadis EA, Konwinski MF. Lovastatin during warfarin therapy resulting in bleeding. Pa Med 1995 Dec;98(12):31.
- 4.Personal communication. Merck & Co., Inc. 1991.
- 5.Trenque T, Choisy H, Germain ML. Pravastatin: interaction with oral anticoagulant?. BMJ 1996 Apr 6;312(7035):886.
- 6.Grau E, Perella M, Pastor E. Simvastatin-oral anticoagulant interaction. Lancet 1996 Feb 10;347(8998):405-6.
- 7.Gaw A, Wosornu D. Simvastatin during warfarin therapy in hyperlipoproteinaemia. Lancet 1992 Oct 17;340(8825):979-80.
- 8.Trilli LE, Kelley CL, Aspinall SL, Kroner BA. Potential interaction between warfarin and fluvastatin. Ann Pharmacother 1996 Dec; 30(12):1399-402.

Press Return to Continue or "^" to Exit:

Professional Monograph

Drug Interaction with SIMVASTATIN 40MG TAB and WARFARIN 2MG TABS

- 9.Crestor (rosuvastatin calcium) US prescribing information. AstraZeneca Pharmaceuticals LP February, 2012.

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Enter RETURN to continue or '^' to exit:

Display Professional Interaction monograph? N// O

(This page included for two-sided copying.)

Chapter 7: 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
- last four digits of the patient's SSN
- 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 and or action 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 via backdoor Pharmacy
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

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      ID#:      0777
      (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) :
CrCL: <Not Found>      BSA (m2) : _____

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-----

Example: Medication Profile – Long Format (continued)

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.

Example: Medication Profile – Long Format (continued)

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.

SIG: TAKE ONE TABLET EVERY 8 HOURS

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Clinic Orders

Clinic orders are created via CPRS generally using the Meds Inpatient tab or the IV Fluids tab. Drug orders that have a clinic and an appointment date and time are considered clinic orders. The clinic must be defined with 'ADMINISTER INPATIENT MEDS?' prompt answered YES under the SETUP A CLINIC [SDBUILD] option in the Scheduling package. Defining the clinic in this manner ensures that an appointment date and time are defined. Orders placed via backdoor inpatient medications are not considered clinic orders.

MOCHA v1.0 Enhancements 1 adds drug interaction and therapeutic duplication order checks for clinic orders to Outpatient Pharmacy. Previously Inpatient Medications package performed order checks on active, pending, and non-verified clinic orders. With the MOCHA v1.0 Enhancements 1, Inpatient medications will perform enhanced order checks for recently discontinued and expired inpatient medications clinic orders.

For both packages, the system will display clinic orders in a standard format to differentiate them from Inpatient Medications and Outpatient Pharmacy order checks.

Discontinued/expired orders must have a stop date within the last 90 days to be evaluated during enhanced order checks. For pending clinic orders, a variety of start and stop dates are available based on the information that the provider enters during initial order entry. The following are the scenarios that drive which dates will be displayed for the clinic order:

- If there are start/stop dates defined, they are displayed.
- If there are no stop/start dates defined, the 'requested start/stop dates' will be displayed with the word "Requested" prior to the start/stop date header.
- If there are no requested start/stop dates defined, the order date will be displayed and the start/stop date headers will be displayed with "*****" for the date.
- If there is either a requested start date or a requested stop date, the available date will be displayed and "*****" will be displayed for the undefined date.

Unit Dose Clinic Order Check example:

```
Now Processing Enhanced Order Checks! Please wait...
This patient is receiving the following order(s) that have a CRITICAL Drug
Interaction with CIMETIDINE 300 MG:
```

```
  Clinic Order: PHENYTOIN 100MG CAP (DISCONTINUED)
    Schedule: Q8H
    Dosage: 100MG
  Start Date: FEB 27, 2012@13:00
  Stop Date: FEB 28, 2012@15:22:27
```

```
Concurrent use of cimetidine or ranitidine may result in elevated levels
of and toxicity from the hydantoin. Neutropenia and thrombocytopenia have
been reported with concurrent cimetidine and phenytoin.
```

IV Clinic Order Check example:

```
This patient is receiving the following order(s) that have a CRITICAL Drug
Interaction with WARFARIN 2MG TAB:
```

```
Clinic Order: POTASSIUM CHLORIDE 20 MEQ (ACTIVE)
Other Additive(s): MAGNESIUM SULFATE 1 GM (1), CALCIUM GLUCONATE 1 GM (2),
                  HEPARIN 1000 UNITS, CIMETIDINE 300 MG
Solution(s): DEXTROSE 20% 500 ML 125 ml/hr
              AMINO ACID SOLUTION 8.5% 500 ML 125 ml/hr
Start Date: APR 05, 2012@15:00
Stop Date: APR 27, 2012@24:00
```

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

Therapeutic Duplication - IV and Unit Dose clinic order therapeutic duplications display in the same format as drug interactions.

Unit Dose Clinic Order Check example:

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

Drug(s) Ordered:

POTASSIUM CHLORIDE 30 MEQ

Clinic Order: POTASSIUM CHLORIDE 10MEQ TAB (PENDING)

Schedule: BID

Dosage: 20MEQ

Requested Start Date: NOV 20, 2012@17:00

Stop Date: *****

Class(es) Involved in Therapeutic Duplication(s): Potassium

IV Order Check example:

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

Drug(s) Ordered:

CEFAZOLIN 1 GM

Clinic Order: CEFAZOLIN 2 GM (PENDING)

Solution(s): 5% DEXTROSE 50 ML

Order Date: NOV 20, 2012@11:01

Start Date: *****

Stop Date: *****

Clinic Order: CEFAZOLIN SOD 1GM INJ (EXPIRED)

Solution(s): 5% DEXTROSE 50 ML

Start Date: OCT 24, 2012@16:44

Stop Date: OCT 25, 2012@24:00

Class(es) Involved in Therapeutic Duplication(s): Beta-Lactams,
Cephalosporins, Cephalosporins - 1st Generation

Duplicate Drug Order Check

The Duplicate Drug order check is 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.

Users have the capability to discontinue duplicate orders. 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 DRUG CHECK FOR CLERK outpatient site parameter is set to 'No', no discontinue action is allowed for a clerk on a duplicate drug check. If a medication order is being entered through the pharmacy backdoor options it will be deleted. If finishing a pending order, the user will be forced to discontinue it.

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 30 days or less will be included in the list of medications to be checked.

The Duplicate Drug warning displays the following information for a local or remote outpatient medication order:

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
```

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:

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

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:

- a. 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.
- b. 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.
- c. 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.
- d. If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO, and a clerk (no PSORPH key) is finishing a pending order:
 - d1. 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.
 - d2. When the VERIFICATION outpatient site parameter is set to YES and the duplicate drug is a remote order
 - d2a. A duplicate drug warning will be displayed
 - d2b. The clerk will be allowed to finish the order
 - d2c. The finished order will have a status of non-verified
 - d3. When the VERIFICATION outpatient site parameter is set to NO, the clerk will not be allowed to finish the order.
 - d4. 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.

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:
.

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
 CrCL: 102.4 (est.) (CREAT:1.0mg/dL 10/30/12) BSA (m2): 1.78

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY 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

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

Entering a New Order

If a double question mark (??) is entered at the “Select Action” prompt, the following hidden actions will display in the action area. Actions that apply only to outpatient orders are followed by (OP).

```
The following actions are also available:
RP Reprint (OP)          DN Down a Line          LS Last Screen
RN Renew (OP)           RD Re Display Screen   FS First Screen
DC Discontinue (OP)     PT Print List          GO Go to Page
RL Release (OP)         PS Print Screen        + Next Screen
RF Refill (OP)          > Shift View to Right  - Previous Screen
PP Pull Rx (OP)         < Shift View to Left  ADPL Auto Display(On/Off)
IP Inpat. Profile (OP)  SL Search List         CK Check Interactions
RS Reprint Sig Log      RDD Fill/Rel Date Disply IN Intervention Menu
CM Manual Queue to CMOP DR Display Remote       UP Up a Line
OTH Other OP Actions    QU Quit
```

First, a patient is selected.

Example: Entering a New Order

```
Select Pharmacy Technician's Menu Option: PATient Prescription Processing
Select PATIENT NAME: 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>
```

[Patient Information Screen skipped]



If RDI is active and 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. See the Displaying a Patient’s Remote Prescriptions section later in Entering a New Order for more details.

Although “Quit” is the default at the “Select Action” prompt shown on the Patient Information screen, <Enter> at this prompt quits the screen and displays the Medication Profile. This Medication Profile includes any Non-VA Med orders documented via the CPRS GUI package.

```
Medication Profile Jun 12, 2001 14:12:21 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)
CrCL: 102.4 (est.) (CREAT:1.0mg/dL 10/30/12) BSA (m2): 2.08
```

#	RX #	DRUG	QTY	ST	DATE	ISSUE	LAST REF	DAY
							FILL	SUP

```

-----ACTIVE-----
1 503904$      AMPICILLIN 250MG CAP          80 E 05-25 05-25 0 10
2 503886$      DIGOXIN (LANOXIN) 0.2MG CAP        60 A> 05-07 05-07 5 30
-----DISCONTINUED-----
3 503902      ACETAMINOPHEN 500MG TAB          60 DC>05-22 05-22 3 30

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

```

Typing in the letters “NO” at the “Select Action” prompt 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

```

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
 CrCL: 102.4(est.) (CREAT:1.0mg/dL 10/30/12) BSA (m2): 1.78

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF	DAY	
-----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	

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//

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...
.

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!

Prospective Drug: DILTIAZEM (DILACOR XR) 240MG SA CAP
Causative Agent: DILTIAZEM
Historical/Observed: OBSERVED
Severity: MODERATE
Ingredients: DILTIAZEM (REMOTE(SITE(S))),
Signs/Symptoms: ITCHING, WATERING EYES, ANOREXIA, NAUSEA, VOMITING,
ANXIETY, DROWSINESS, DRY MOUTH, DRY NOSE, RASH,
Drug Class: CV200 CALCIUM CHANNEL BLOCKERS (REMOTE(SITE(S))),
Provider Override Reason: N/A - Order Entered Through Vista

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!

Prospective Drug: SEPTRA DS TAB
Causative Agent: SULFADIAZINE/SULFAMERAZINE/SULFAMETHAZINE
Historical/Observed: HISTORICAL
Severity: Not Entered
Signs/Symptoms: ITCHING,WATERING EYES, ANOREXIA, NAUSEA,VOMITING,
ANXIETY, DROWSINESS,
Drug Class: AM650 SULFONAMIDE/RELATED ANTIMICROBIALS (LOCAL),
Provider Override Reason: N/A - Order Entered Through Vista

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 24,2008

+

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!

    Prospective Drug: SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
    Causative Agent: SULFADIAZINE/SULFAMERAZINE/SULFAMETHAZINE
    Historical/Observed: HISTORICAL
        Severity: Not Entered
    Ingredients: SULFAMETHOXAZOLE (LOCAL), TRIMETHOPRIM (LOCAL AND
        REMOTE(S))
    Signs/Symptoms: ITCHING,WATERING EYES, ANOREXIA,
        NAUSEA,VOMITING, ANXIETY, DROWSINESS,
    Drug Class: AM650 SULFONAMIDE/RELATED ANTIMICROBIALS
        (LOCAL AND REMOTE(S)),
    Provider Override Reason: N/A - Order Entered Through Vista

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
```

(This page included for two-sided copying.)

```

(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
  CrCL: <Not Found>                               BSA (m2): _____
                                                    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

```

Example: Entering a New Order for ePharmacy Billing (continued)

```
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

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

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						
CrCL: <Not Found>		BSA (m2): _____				
#	RX #	DRUG	ISSUE	LAST	REF	DAY
			QTY ST	DATE	FILL	REM SUP
-----ACTIVE-----						
1	100003840e	PREDNISONE 5MG TAB	30 A>	11-02	11-02	5 30
<div style="border: 1px solid black; padding: 5px; display: inline-block; margin-top: 10px;"> Denotes ePharmacy Rx </div>						
Enter ?? for more actions						
PU	Patient Record Update		NO	New Order		
PI	Patient Information		SO	Select Order		
Select Action: Quit//						

Example: Changed NDC:

Or Modified NDC

```
Select ePharmacy Menu Option:  NDC Validation

WAND BARCODE or enter Rx#:

Rx: 102009          Fill: 0          Patient: OPPATIENT,ONE
Drug: BIPERIDEN 2MG TAB          NDC: 00044-0120-04

** This NDC has not been validated.

PRODUCT NDC: 00044-0120-04// 00044-0120-05 00044-0120-05

Prescription 102009 successfully submitted to ECME for claim generation.

Claim Status:
Reversing and Rebilling a previously submitted claim...
IN PROGRESS-Waiting to start
IN PROGRESS-Building the transaction
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
E REVERSAL ACCEPTED
IN PROGRESS-Building the claim
IN PROGRESS-Building the HL7 packet
IN PROGRESS-Transmitting
E PAYABLE

NDC match confirmed.

WAND BARCODE or enter Rx#:
```

Using the Copy Action

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)  REJ  View REJECT          FS  First Screen
VF  Verify (OP)        IN   Intervention Menu     GO  Go to Page
CO  Copy (OP)           DA   Display Drug AllergiesLS  Last Screen
RP  Reprint (OP)       DIN  Drug Restr/Guide (OP)PS  Print Screen
HD  Hold (OP)          +   Next Screen          PT  Print List
UH  Unhold (OP)        -   Previous Screen      QU  Quit
PI  Patient Information <  Shift View to Left  RD  Re Display Screen
PP  Pull Rx (OP)       >   Shift View to Right  SL  Search List
IP  Inpat. Profile (OP) ADPL Auto Display(On/Off) UP  Up a Line
OTH Other OP Actions   DN   Down a Line
```

Use the Copy action to make a duplicate order. Any field of the newly created order can be edited. The original order will remain active, but the duplicate order check will be processed before the new order can be accepted.

Example: Using the Copy Action (continued)

Nature of Order Activity	Require E. Signature	Print Chart Copy	Print on 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> W
 WAS THE PATIENT COUNSELED: NO// <Enter>NO

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

Rx # 503919 06/12/01
 OPPATIENT16,ONE #60
 TAKE ONE TABLET BY MOUTH TWICE A DAY

NADOLOL 40MG TAB
 OPPROVIDER4,TWO OPPHARMACIST4,THREE
 # of Refills: 11

Is this correct? YES// <Enter>...
 -Rx 503916 has been discontinued...

SC Percent: 20%
 Disabilities:

KNEE CONDITION	10% - SERVICE CONNECTED
TRAUMATIC ARTHRITIS	10% - SERVICE CONNECTED
TRAUMATIC ARTHRITIS	0% - SERVICE CONNECTED
SEPTUM, NASAL, DEVIATION OF	0% - SERVICE CONNECTED
RESIDUALS OF FOOT INJURY	0% - SERVICE CONNECTED

Was treatment for Service Connected condition? **NO**

The Medication Profile screen is redisplayed at this point. Note that the orders tagged for patient copy charges have a dollar sign (\$) after the RX #.

Medication Profile Jun 12, 2001 15:03:10 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)

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST REF DATE	FILL	REM	SUP
-----ACTIVE-----									
1	503904\$	AMPICILLIN 250MG CAP	80	E	05-25	05-25	0	10	
2	503886\$	DIGOXIN (LANOXIN) 0.2MG CAP	60	A>	05-07	05-07	5	30	
3	503919\$	NADOLOL 40MG TAB	60	A>	06-12	06-12	11	30	
-----DISCONTINUED-----									
4	503902	ACETAMINOPHEN 500MG TAB	60	DC>	05-22	05-22	3	30	

Enter ?? for more actions

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

Select Action: Quit//

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: 123123 A BIRMINGHAM PHONE: (205)4444444 ALABAMA 35235 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 CrCL: <Not Found> BSA (m2): _____							
#	RX #	DRUG	QTY ST	ISSUE DATE	LAST FILL	REF REM	DAY 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-----

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								
CrCL: <Not Found>		BSA (m2): _____						
#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----ACTIVE-----								
1	100003853e	PREDNISONE 5MG TAB	30	A>	11-04	11-04	5	30
Enter ?? for more actions								
PU	Patient Record Update		NO	New Order				
PI	Patient Information		SO	Select Order				
Select Action: Quit//								

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)	REJ	View REJECT	FS	First Screen
VF	Verify (OP)	IN	Intervention Menu	GO	Go to Page
CO	Copy (OP)	DA	Display Drug AllergiesLS		Last Screen
RP	Reprint (OP)	DIN	Drug Restr/Guide (OP)	PS	Print Screen
HD	Hold (OP)	+	Next Screen	PT	Print List
UH	Unhold (OP)	-	Previous Screen	QU	Quit
PI	Patient Information	<	Shift View to Left	RD	Re Display Screen
PP	Pull Rx (OP)	>	Shift View to Right	SL	Search List
IP	Inpat. Profile (OP)	ADPL	Auto Display(On/Off)	UP	Up a Line
OTH	Other OP Actions	DN	Down 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 technician to process renewals for existing orders.

Example: Renewing a Prescription

[This example begins after an order has been selected from the Medication Profile screen.]

```
OP Medications (ACTIVE)          Jun 12, 2001 15:08:43          Page: 1 of 3
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)
  CrCL: 78.1(est.) (CREAT:1.0mg/dL 2/19/99)  BSA (m2): 2.08
-----
Rx #: 503886$
(1) *Orderable Item: DIGOXIN CAP,ORAL
(2)   CMOP Drug: DIGOXIN (LANOXIN) 0.2MG CAP
(3)   *Dosage: .2 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: CAPSULE
      *Route: ORAL (BY MOUTH)
      *Schedule: Q12H
(4) Pat Instructions: TAKE AFTER MEALS
      Provider Comments: TAKE AFTER MEALS
      SIG: TAKE ONE CAPSULE BY MOUTH EVERY 12 HOURS TAKE AFTER MEALS
(5) Patient Status: SERVICE CONNECTED
(6) Issue Date: 05/07/01          (7) Fill Date: 05/07/01
+ Enter ?? for more actions
-----
DC  Discontinue          PR  Partial          RL  Release
ED  Edit                RF  Refill           RN  Renew
Select Action: Next Screen// RN Renew
-----
FILL DATE: (6/12/2001 - 6/13/2002): TODAY// <Enter>
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
Nature of Order: WRITTEN// <Enter> W
WAS THE PATIENT COUNSELED: NO// Y ES
WAS COUNSELING UNDERSTOOD: NO// Y ES

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

Now Renewing Rx # 503886 Drug: DIGOXIN (LANOXIN) 0.2MG CAP

Now doing order checks. Please wait...

503886A DIGOXIN (LANOXIN) 0.2MG CAP QTY: 60
# OF REFILLS: 5 ISSUED: 06-12-01
SIG: TAKE ONE CAPSULE BY MOUTH EVERY 12 HOURS TAKE AFTER MEALS
FILLED: 06-12-01
ROUTING: WINDOW PHYS: OP PROVIDER4,TWO

Edit renewed Rx ? Y// <Enter> ES
```

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

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.
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 Interfaces
APSP	Originally Indian Health Service Pharmacy's name space now owned by the Outpatient Pharmacy software.
BSA	<p>Body Surface Area. The Dubois formula is used to calculate the Body Surface Area using the following formula:</p> $BSA (m^2) = 0.20247 \times \text{Height (m)}^{0.725} \times \text{Weight (kg)}^{0.425}$ <p>The equation is performed using the most recent patient height and weight values that are entered into the vitals package.</p> <p>The calculation is not intended to be a replacement for independent clinical judgment.</p>
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.

Acronym/Term	Definition
CrCL	Creatinine Clearance. The CrCL value which displays in the pharmacy header is identical to the CrCL value calculated in CPRS. The formula approved by the CPRS Clinical Workgroup is the following: Modified Cockcroft-Gault equation using Adjusted Body Weight in kg (if ht > 60in) This calculation is not intended to be a replacement for independent clinical judgment.
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 VA custom and standard commercial-off-the-shelf (COTS) vendor database changes to update the production and pre-production centralized MOCHA databases at Austin and Philadelphia.
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.
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 system
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.
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.
HDR-Hx	Health Data Repository Historical

Acronym/Term	Definition
HDR-IMS	Health Data Repository- Interim Messaging Solution
HFS	Host File Server.
Health Insurance Portability and Accountability Act of 1996 (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 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.
Order	Request for medication.

Acronym/Term	Definition
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 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	<p>A prescription can have one of the following statuses.</p> <p>Active - A prescription with this status can be filled or refilled.</p> <p>Canceled - This term is now referred to throughout the software as Discontinued. (See Discontinued.)</p> <p>Discontinued - This status is used when a prescription was made inactive either by a new prescription or by the request of a physician.</p> <p>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.</p> <p>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.</p> <p>Expired - This status indicates the expiration date has passed.</p> <p>*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.</p> <p>Hold - A prescription that was placed on hold due to reasons determined by the pharmacist.</p> <p>Non-verified - There are two types of non-verified statuses. Depending on a site parameter, prescriptions entered by a technician do not become active</p>

Acronym/Term	Definition
	<p>until a pharmacist reviews them. Until such review, they remain non-verified and cannot be printed, canceled or edited except through the <i>Verification</i> menu.</p> <p>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 prescription.</p> <p>Pending - A prescription that has been entered through OERR.</p> <p>Refill - A second or subsequent filling authorized by the provider.</p> <p>Suspended - A prescription that will be filled at some future date.</p>
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.
TRICARE	<p>TRICARE is the uniformed service health care program for:</p> <ul style="list-style-type: none"> • 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 <p>There are differences in how prescriptions for TRICARE beneficiaries are processed versus how prescriptions are processed for veterans.</p>

Acronym/Term	Definition
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.
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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