INPATIENT MEDICATIONS

NURSE'S USER MANUAL

Version 5.0
December 1997

(Revised January 2013)

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
01/2013	i	PSJ*5*260	Updated Revision History
	v	PSJ*5*268	Updated Table of Contents
	5		Fix text wrapping (Page 1 of 1) in screen
	vii, 9, 11		Added new option Check Drug Interaction & Display Drug Allergies
	10, 20, 140		Change label for OCI Action
	16, 16a, 16c, 26, 40, 40a, 40c, 41-42, 52, 57, 67, 71, 74a, 74c, 74d, 77, 99, 104, 106, 107, 111, 114		Added Creatinine Clearance (CrCl) and Body Surface Area (BSA)
	73a-73d		Added new section for Check Drug Interactions function
	74f-74f1		Added Clinic Orders information
	74f2		Drug allergy update
	124		Added Hidden Action Check Interactions & Display Drug Allergies, and update OCI
	125-138		Updated Glossary
	139-142		Updated Index
			<mark>REDACTED</mark>
09/2012	i-iii, 12, 12a-12b, 14, 14a-14b, 16d-16f, 24b-24d, 26-27, 27a-27b, 30, 30a-30b, 59, 59a-59b	PSJ*5*267	Added No Allergy Assessment logic
			Updated Special Instructions/Other Print Info
	131		<mark>REDACTED</mark>

Date	Revised Pages	Patch Number	Description
01/2012	i-iv v-vi 10 20 23 35 47, 53, 60 74d 74f-74g 74k 74l 124, 127, 131, 133, 134 137-140	PSJ*5*254	Updated Table of Contents Added Order Checks/Interventions (OCI) to "Hidden Actions" section Defined OCI Indicator Updated Schedule Type text Updated text under Interventions Menu Updated Pharmacy Interventions for Edit, Renew, and Finish orders Added note to Drug-Drug Interactions Added note to Drug-Allergy Interactions Added "Display Pharmacist Intervention" section Defined Historical Overrides/Interventions Updated Glossary Updated Index <mark>REDACTED</mark>
09/2011	65	PSJ*5*235	Updated 'Note' section regarding Expected First Dose <mark>REDACTED</mark>
07/2011	Cover Page i, 16 140	PSJ*5*243	Removed the acronym PD on Cover page Update Revision History Update Index Revised the existing display in the *Non-Verified/Pending Orders* [PSJU VBW] option from a pure alphabetic listing of patient names, to a categorized listing by priority. Added "priority" to Index. <mark>REDACTED</mark>
04/2011	i v-vi 12 13 15-16d 18 20 26-27 33-34b 35-39 40-40d 46 67 71 72-73	PSJ*5*181	Updated Revision History Updated Table of Contents New Example: Patient Information Screen New Example: Non-Verified/Pending Orders Updated: Example: Short Profile, HOURS OF RECENTLY DC/EXPIRED field (#7) and INPATIENT WARD PARAMETERS file (#59.6) information, and Example: Profile. Updated "Select DRUG:" New Example: Dispense Drug with Possible Dosages and New Example: Dispense Drug with Local Possible Dosages New Example: New Order Entry New Example: New Order Entry (Clinic Location) New Examples of all the New Interventions Updated the View Profile and New Example: Profile View New Medication Profile Discontinue Type Codes New Example: Flagged Order New Example: Inpatient Profile Updated Order Checks

Date	Revised Pages	Patch Number	Description
	74 74a-74c 74d-74f 74f-74g 105 119-120 121-122 123-136 137-140		New Example: Local Outpatient Order Display and New Example: Remote Outpatient Order Display Duplicate Therapy Drug-Drug Interaction CPRS Order Checks Updated Example: Authorized Absence/Discharge Summary (continued) CPRS Order checks: How they work Error Messages Glossary - fix page numbering Index - new entries and fix page numbering REDACTED
06/2010	i-vi, 22-23, 23a-23b, 24, 24a-24b, 74a-74b, 74e-74f, 133, 136-137 77, 100, 103, 108-110, 112, 114	PSJ*5*113	Added new Order Validation Requirements. Removed Duplicate Order Check Enhancement functionality, PSJ*5*175 (removed in a prior patch). Miscellaneous corrections. REDACTED
12/2009	60a, 60b vi	PSJ*5*222	Added description of warning displayed when finishing a Complex Unit Dose Order with overlapping admin times. Corrected page numbers in Table of Contents. REDACTED
07/2009	48	PSJ*5*215	When Dispense Drug is edited for an active Unit Dose, an entry is added to the activity log. REDACTED
02/2009	125	PSJ*5*196	Update to IV Duration REDACTED
08/2008	19-37, 58-59, 65, 134	PSJ*5*134	Inpatient Medication Route changes added, plus details on IV type changes for infusion orders from CPRS, pending renewal functions, and expected first dose changes. REDACTED
10/2007	iv, 74a-74d 5, 12,	PSJ*5*175	Modified outpatient header text for display of duplicate orders. Added new functionality to Duplicate Drug and Duplicate Class definitions. Modifications for remote allergies, to ensure all allergies are included when doing order checks using VA Drug Class;

Date	Revised Pages	Patch Number	Description
	16- 17, 26, 34-38, 41-42, 72-73	PSJ*5*160	Analgesic order checks match against specific class only; check for remote data interoperability performed when entering patient's chart; and list of remote allergies added to Patient Information screen. <mark>REDACTED</mark>
07/2007	79a-79b, 86a-86b, 92a-92b	PSJ*5*145	On 24-Hour, 7-Day, and 14-Day MAR Reports, added prompt to include Clinic Orders when printing by Ward or Ward Group. Also added prompt to include Ward Orders when printing by Clinic or Clinic Group. <mark>REDACTED</mark>
05/2007	24	PSJ*5*120	Modified Inpatient Medications V. 5.0 to consider the duration the same way as all other stop date parameters, rather than as an override. <mark>REDACTED</mark>
12/2005	1, 73-74b	PSJ*5*146	Remote Data Interoperability (RDI) Project: Removed document revision dates in Section 1. Introduction. Updated Section 4.9. Order Checks, to include new functionality for remote order checking. <mark>REDACTED</mark>
01/2005	All	PSJ*5*111	Reissued entire document to include updates for Inpatient Medications Orders for Outpatients and Non-Standard Schedules. <mark>REDACTED</mark>

Table of Contents

Since the documentation is arranged in a topic oriented format and the screen options are not, a menu tree is provided below for the newer users who may need help finding the explanations to the options.

Menu Tree	Topic-Oriented Section
Align Labels (Unit Dose)	Output Options
Discontinue All of a Patient's Orders	Order Options
EUP Edit Inpatient User Parameters	Maintenance Options
Hold All of a Patient's Orders	Order Options
IOE Inpatient Order Entry	Order Options
IPF Inpatient Profile	Order Options
Check Drug Interaction	Order Options
INQuiries Menu…	Inquiries Option
Dispense Drug Look-Up	Inquiries Option
Standard Schedules	Inquiries Option
Label Print/Reprint	Output Options
Non-Verified/Pending Orders	Order Options
Order Entry	Order Options
PAtient Profile (Unit Dose)	Output Options
Reports Menu…	Output Options
24 Hour MAR	Output Options
7 Day MAR	Output Options
14 Day MAR	Output Options
Action Profile #1	Output Options
Action Profile #2	Output Options
AUthorized Absence/Discharge Summary	Output Options
Extra Units Dispensed Report	Output Options
Free Text Dosage Report	Output Options
INpatient Stop Order Notices	Output Options
Medications Due Worksheet	Output Options
Patient Profile (Extended)	Output Options

(This page included for two-sided copying.)

3.   List Manager

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

This new screen will give the user:

- More pertinent information

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

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

Inpatient List Manager

Screen Title   **CWAD* Indicator**

```
Patient Information            Sep 15, 2000 11:32:08          Page:   1 of 1
PSJPATIENT2,TWO                     Ward: 1 West                        <A>
   PID: 000-00-0002           Room-Bed: A-6      Ht(cm): 167.64 (04/21/99)
   DOB: 02/22/42 (58)                            Wt(kg): 85.00 (04/21/99)
   Sex: MALE                                     Admitted: 09/16/99
    Dx: TEST PATIENT                    Last transferred: ********

Allergies - Verified: CARAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE,
                       CHOCOLATE, NUTS, STRAWBERRIES, DUST
         Non-Verified: AMOXICILLIN, AMPICILLIN, TAPE, FISH,
                       FLUPHENAZINE DECANOATE
               Remote:
    Adverse Reactions:
 Inpatient Narrative: Inpatient narrative for PSJPATIENT2
Outpatient Narrative: This patient doesn't like waiting at the pickup window.
He gets very angry.

-------------Enter ?? for more actions-------------------------------------------
PU Patient Record Update             NO New Order Entry
DA Detailed Allergy/ADR List         IN Intervention Menu
VP View Profile
Select Action: View Profile//
```

Header Area (bracket covering header lines)

List Area (scrolling region) (bracket covering middle lines)

Message Window (pointing to Enter ?? line)

Action Area (bracket covering bottom lines)

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

Screen Title: The screen title changes according to what type of information List Manager is displaying (e.g., Patient Information, Non-Verified Order, Inpatient Order Entry, etc.).

CWAD Indicator: This indicator will display when the crises, warnings, allergies, and directives information has been entered for the patient. (This information is entered via the Text Integration Utilities (TIU) package.) When the patient has Allergy/Adverse Drug Reaction (ADR) data defined, an "<A>" is displayed to the right of the ward location to alert the user of the existence of this information.

> **Note:** This data may be displayed using the Detailed Allergy/ADR List action). Crises, warnings, and directives are displayed respectively, "<C>","<W>","<D>". This data may be displayed using the CWAD hidden action. Any combination of the four indicators can display.

Header Area: The header area is a "fixed" (non-scrollable) area that displays the patient's demographic information. This also includes information about the patient's current admission. The status and type of order are displayed in the top left corner of the heading, and will include the priority (if defined) for pending orders.

List Area: (scrolling region): This is the section that will scroll (like the previous version) and display the information that an action can be taken on. The Allergies/Reactions line includes non-verified and verified Allergy/ADR information as defined in the Allergy package. The allergy data is sorted by type (DRUG, OTHER, FOOD). If no data is found for a category, the heading is displayed as "Allergies/Reactions: No Allergy Assessment". The Inpatient and Outpatient Narrative lines may be used by the inpatient pharmacy staff to display information specific to the current admission for the patient.

Message Window: This section displays a plus sign (+), if the list is longer than one screen, and informational text (i.e., Enter ?? for more actions). If the plus sign is entered at the action prompt, List Manager will "jump" forward to the next screen. The plus sign is only a valid action if it is displayed in the message window.

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

Synonym	Action	Description
RPL	Reprint Pick List	Allows reprint of a pick list
SND	Send Pick list to ATC	Allows a pick list to be sent to the ATC (Automated Tablet Counter)
UP	Update Pick List	Allows an update to a pick list
RET	Returns/Destroyed Menu	Displays the Returns/Destroyed options
RR	Report Returns	Allows entry of units returned for a Unit Dose order
RD	Returns/Destroyed Entry (IV)	Allows entry of units returned or destroyed for an order
PRO	Patient Profiles	Displays the *Patient Profile Menu*
IP	Inpatient Medications Profile	Generates an Inpatient Profile for a patient
IV	IV Medications Profile	Generates an IV Profile for a patient
UD	Unit Dose Medications Profile	Generates a Unit Dose Profile for a patient
OP	Outpatient Prescriptions	Generates an Outpatient Profile for a patient
AP1	Action Profile #1	Generates an Action Profile #1
AP2	Action Profile #2	Generates an Action Profile #2
EX	Patient Profile (Extended	Generates an Extended Patient Profile
CWAD	CWAD Information	Displays the crises, warnings, allergies, and directives information on a patient
DA	Display Drug Allergies	Displays signs/symptoms of an allergy associated to a med order
CK	Check Interaction	Allows a user to perform order checks against the patient's active medication profile with or without a prospective drug.

The following actions are available while in the Unit Dose Order Entry Profile.

Synonym	Action	Description
DC	Speed Discontinue	Speed discontinue one or more orders (This is also available in the *Inpatient Order Entry* and *Order Entry (IV) options*.)
RN	Speed Renew	Speed renewal of one or more orders
SF	Speed Finish	Speed finish one or more orders
SV	Speed Verify	Speed verify one or more orders

The following actions are available while viewing an order.

Synonym	Action	Description
CO	Copy an order	Allows the user to copy an active, discontinued, or expired Unit Dose order
DIN	Drug Restriction/Guideline Information	Displays the Drug Restriction/Guideline Information for both the Orderable Item and Dispense Drug
I	Mark Incomplete	Allows the user to mark a Non-Verified Pending order incomplete
JP	Jump to a Patient	Allows the user to begin processing another patient
N	Mark Not to be Given	Allows the user to mark a discontinued or expired order as not to be given
OCI	Overrides/Interventions	Indicates there are associated CPRS Overrides and/or Pharmacist Interventions. When the OCI displays on the Order Detail screen, the user can type "OCI" to display associated CPRS Provider Overrides and/or Pharmacist Interventions.

4. Order Options

The *Unit Dose Medications* option is used to access the order entry, patient profiles, and various reports, and is the main starting point for the Unit Dose system.

Example: Unit Dose Menu

```
Select Unit Dose Medications Option: ?

        Align Labels (Unit Dose)
        Discontinue All of a Patient's Orders
  EUP   Edit Inpatient User Parameters
  ESD   Edit Patient's Default Stop Date
        Hold All of a Patient's Orders
  IOE   Inpatient Order Entry
  IPF   Inpatient Profile
        Check Drug Interaction
        INQuiries Menu ...
        Label Print/Reprint
        Non-Verified/Pending Orders
        Order Entry
        PAtient Profile (Unit Dose)
        PIck List Menu ...
        Reports Menu ...
        Supervisor's Menu ...
```

Within the Inpatient Medications package there are three different paths the nurse can take to enter a new order or take action on an existing order. They are (1) *Order Entry*, (2) *Non-Verified/Pending Orders* and (3) *Inpatient Order Entry*. Each of these paths differs by the prompts that are presented. Once the nurse has reached the point of entering a new order or selecting an existing order, the process becomes the same for each path.

> **Note**: When the selected order type (non-verified or pending) does not exist (for that patient) while the user is in the *Non-Verified/Pending Orders* option, the user cannot enter a new order or take action on an existing order for that patient.

Patient locks and order locks are incorporated within the Inpatient Medications package. When a user (User 1) selects a patient through any of the three paths, *Order Entry*, *Non-Verified/Pending Orders,* or *Inpatient Order Entry*, and this patient has already been selected by another user (User 2), the user (User 1) will see a message that another user (User 2) is processing orders for this patient. This will be a lock at the patient level within the Pharmacy packages. When the other user (User 2) is entering a new order for the patient, the user (User 1) will not be able to access the patient due to a patient lock within the VistA packages. A lock at the order level is issued when an order is selected through Inpatient Medications for any action other than new order entry. Any users attempting to access this patient's order will receive a message that another user is working on this order. This order-level lock is within the VistA packages.

The three different paths for entering a new order or taking an action on an existing order are summarized in the following sections.

4.1. Order Entry

[PSJU NE]

The *Order Entry* option allows the nurse to create, edit, renew, hold, and discontinue Unit Dose orders while remaining in the Unit Dose Medications module.

The *Order Entry* option functions almost identically to the *Inpatient Order Entry* option, but does not include IV orders on the profile and only Unit Dose orders may be entered or processed.

After selecting the *Order Entry* option from the *Unit Dose Medications* option, the nurse will be prompted to select the patient. At the "Select PATIENT:" prompt, the user can enter the patient's name or enter the first letter of the patient's last name and the last four digits of the patient's social security number (e.g., P0001).

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

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

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

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

Example: Pharmacist Answers 'Yes' and Enters Allergy Information

```
Select PATIENT: PSJPATIENT1, ONE

NO ALLERGY ASSESSMENT exists for this patient!

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

Enter Causative Agent: LATEX

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


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


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


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

Example: Short Profile

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

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


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

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

Ward Groups

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

Clinics

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


1) Non-Verified Orders
2) Pending Orders


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

1) Unit Dose Orders
2) IV Orders


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

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

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

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

ORDERS NOT VERIFIED BY A PHARMACIST - BCMA

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

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

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

Select PRINT DEVICE: home;80;9999 COMPUTER ROOM

              I N P A T I E N T   M E D I C A T I O N S      03/16/11 10:32
                    VAMC: ZZ XXXXX-PRRTP (500PA)
- - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 BCMA,EIGHTY-PATIENT                    Ward: BCMA
   PID: 666-33-0080     Room-Bed: 12-B            Ht(cm): 167.64 (03/30/09)
   DOB: 04/07/35  (75)                            Wt(kg): 90.00 (03/30/09)
   Sex: FEMALE                               Admitted: 02/07/02
    Dx: HIGH FEVER
  CrCL: <Not Found>                         BSA (m2): 2.05
 Allergies: CODEINE, ASPIRIN, CAFFEINE, STRAWBERRIES
       ADR:
- - - - - - - - - - - - N O N - V E R I F I E D - - - - - - - - - - - - - - -
   1     ENOXAPARIN 30MG/0.3ML/SYR INJ          ? ***** ***** N
           Give: XXX SC XXX@09-13
   2     MULTIVITAMINS/MINERALS TAB             ? ***** ***** N
           Give: ONE TABLET PO QAM
   3     PREDNISONE TAB                         ? ***** ***** N
           Give: 2000MG PO NOW
- - - - - - - - - - - - - - - P E N D I N G - - - - - - - - - - - - - - - - -
   4     DOCUSATE NA CAP,ORAL                   ?  *****  *****  P
           Give: 100MG PO QAM
   5     ACETAMINOPHEN TAB                      ?  *****  *****  P
           Give: 325MG PO Q6H
   6    in CISPLATIN 250MG IN 0.9% NACL 250 ML  ?  *****  *****  P
   7    in CISPLATIN 250MG IN 0.9% NACL 250 ML 10?  *****  *****  P
   8    in CISPLATIN 250MG IN 0.9% NACL 250 ML 10?  *****  *****  P
   9 in DOPAMINE 400MG/D5W 1600MCG/ML 250 ML ? ***** *****  P
  10     in DOPAMINE IN 200ML D5W 200 ML 50MCG/KG/? ***** *****  P
  11     HEPARIN/SODIUM  CHLORIDE  INJ,SOLN     ?  *****  *****  P
           Give: IV CONTINUOUS DRIP

View ORDERS (1-11): 1


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

ORDER NOT VERIFIED
Self Med: NO

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

Select profile type for order processing.

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

```
Non-Verified/Pending Orders   Mar 16, 2011@10:33:08      Page:   1 of   2
BCMA,EIGHTY-PATIENT              Ward: BCMA                       A
  PID: 666-33-0080          Room-Bed: 12-B       Ht(cm): 167.64 (03/30/09)
  DOB: 04/07/35 (75)                             Wt(kg): 90.00 (03/30/09)
  Sex: FEMALE                              Admitted: 02/07/02
   Dx: HIGH FEVER              Last transferred: ********
 CrCL: <Not Found>                          BSA (m2): 2.05
--------------------------------------------------------------------------------
- - - - - - - - - - - - - - N O N - V E R I F I E D - - - - - - - - - - - - - -
  1    ENOXAPARIN 30MG/0.3ML/SYR INJ       C  04/05  07/14 N
         Give: XXX SC XXX@09-13
  2    MULTIVITAMINS/MINERALS TAB          C  09/21  12/20 N
         Give: ONE TABLET PO QAM
  3    PREDNISONE TAB                      O  09/21  10/21 N
         Give: 2000MG PO NOW
- - - - - - - - - - - - - - - P E N D I N G - - - - - - - - - - - - - - - - -
  4    DOCUSATE NA CAP,ORAL                ?  *****  ***** P
         Give: 100MG PO QAM
  5    ACETAMINOPHEN TAB                   ?  *****  ***** P
         Give: 325MG PO Q6H
+------------Enter ?? for more actions----------------------------------------
PI  Patient Information            SO Select Order
PU  Patient Record Update          NO New Order Entry
Select Action: Next Screen//
```

The orders on the profile are sorted first by status (ACTIVE, NON-VERIFIED, NON-VERIFIED COMPLEX, PENDING RENEWALS, PENDING COMPLEX, PENDING, RECENTLY DISCONTINUED/EXPIRED), then alphabetically by SCHEDULE TYPE. Pending orders with a priority of STAT are listed first and are displayed in a bold and blinking text for easy identification. After SCHEDULE TYPE, orders are sorted alphabetically by DRUG (the drug name listed on the profile), and then in descending order by START DATE.

Example: Short Profile

```
Inpatient Order Entry       Jun 12, 2006@23:12:54       Page:   1 of   1
PSJPATIENT11, ONE            Ward: 2ASM
  PID: 000-55-3421          Room-Bed: 102-1      Ht(cm):_____ (_____)
  DOB: 12/02/23 (82)                             Wt(kg): 100.00 (06/24/03)
  Sex: MALE                                Admitted: 12/11/01
 CrCL: <Not Found>                          BSA (m2): _____
   Dx: HE IS A PAIN.           Last transferred: 12/11/01


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

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

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

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


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


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

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

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

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

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

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

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

Example: Profile

```
Inpatient Order Entry        Jun 12, 2006@23:12:54         Page:   1 of   1
PSJPATIENT11, ONE              Ward: 2ASM
  PID: 000-55-3421           Room-Bed: 102-1      Ht(cm):_____(_____)
  DOB: 12/02/23 (82)                            Wt(kg): 100.00 (06/24/03)
  Sex: MALE                             Admitted: 12/11/01
   Dx: HE IS A PAIN.           Last transferred: 12/11/01
 CrCL: <Not Found>                          BSA (m2): _____

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

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

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


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

The nurse can enter a Patient Action at the "Select Action: Quit//" prompt in the Action Area of the screen or choose a specific order or orders.

When the nurse holds the PSJ RNURSE key, it will be possible to take any available actions on selected Unit Dose or IV orders and verify non-verified orders.

The following keys may be assigned if the user already holds the PSJ RNURSE key:

PSJ RNFINISH key will allow the nurse to finish Unit Dose orders.

PSJI RNFINISH key will allow the nurse to finish IV orders.

4.3. Inpatient Order Entry
[PSJ OE]

The *Inpatient Order Entry* option, if assigned, allows the nurse to create, edit, renew, hold, and discontinue Unit Dose and IV orders, as well as put existing IV orders on call for any patient, while remaining in the Unit Dose Medications module.

When the user accesses the *Inpatient Order Entry* option from the Unit Dose Medications module for the first time within a session, a prompt is displayed to select the IV room in which to enter orders. When only one active IV room exists, the system will automatically select that IV room. The user is then given the label and report devices defined for the IV room chosen. If no devices have been defined, the user will be given the opportunity to choose them. If this option is exited and then re-entered within the same session, the current label and report devices are shown. The following example shows the option re-entered during the same session.

Example: Inpatient Order Entry

```
Select Unit Dose Medications Option: IOE Inpatient Order Entry
You are signed on under the BIRMINGHAM ISC IV ROOM
Current IV LABEL device is: NT TELNET TERMINAL
Current IV REPORT device is: NT TELNET TERMINAL
Select PATIENT: PSJPATIENT1
```

At the "Select PATIENT:" prompt, the user can enter the patient's name or enter the first letter of the patient's last name and the last four digits of the patient's social security number (e.g., P0001).

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

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

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

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

Example: Pharmacist Answers 'Yes' and Enters Allergy Information

```
Select PATIENT: PSJPATIENT1, ONE

NO ALLERGY ASSESSMENT exists for this patient!

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

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

The nurse can enter an order set at this prompt. An order set is a group of pre-written orders. The maximum number of orders is unlimited. Order sets are created and edited using the *Order Set Enter/Edit* option found under the *Supervisor's Menu*.

Order sets are used to expedite order entry for drugs that are dispensed to all patients in certain medical practices or for certain procedures. Order sets are designed to be used when a recognized pattern for the administration of drugs can be identified. For example:

- A pre-operative series of drugs administered to all patients undergoing a certain surgical procedure.
- A certain series of drugs to be dispensed to all patients prior to undergoing a particular radiographic procedure.
- A certain group of drugs, prescribed by a provider for all patients, that is used for treatment on a certain medical ailment or emergency.

Order sets allow rapid entering of this repetitive information, expediting the whole order entry process. Experienced users might want to set up most of their common orders as order sets.

Order set entry begins like other types of order entry. At the "Select DRUG:" prompt, **S.NAME** should be entered. The **NAME** represents the name of a predefined order set. The characters **S.** tell the software that this will not be a single new order entry for a single drug, but a set of orders for multiple drugs. The **S.** is a required prefix to the name of the order set. When the user types the characters **S.?**, a list of the names of the order sets that are currently available will be displayed. If **S.** (<**Spacebar**> and <**Enter**>) is typed, the previous order set is entered.

After the entry of the order set, the software will prompt for the Provider's name and Nature of Order. After entry of this information, the first order of the set will automatically be entered. The options available are different depending on the type of order entry process that is enabled–regular, abbreviated, or ward. If regular or abbreviated order entry is enabled, the user will be shown one order at a time, all fields for each order of the order set and then the "Select Item(s): Next Screen //" prompt. The user can then choose to take an action on the order. Once an action is taken or bypassed, the next order of the order set will be entered automatically. After entry of all the orders in the order set, the software will prompt for more orders for the patient. At this point the user can proceed exactly as in new order entry, and respond accordingly.

When a drug is chosen, if an active drug text entry for the Dispense Drug and/or Orderable Item linked to this drug exists, then the prompt, "Restriction/Guideline(s) exist. Display?:" will be

displayed along with the corresponding defaults. The drug text indicator will be <**DIN**> and will be displayed on the right hand corner on the same line as the Orderable Item. This indicator will be highlighted.

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

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

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

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

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

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

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

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

Example: Dispense Drug with Possible Dosages

```
Select DRUG: BACLOFEN
  Lookup: GENERIC NAME
BACLOFEN 10 MG TAB MS200
        ...OK? Yes//   (Yes)
```

- **"STOP DATE/TIME:"** (Regular)

This is the date and time the order will automatically expire. The system calculates the default Stop Date/Time for order administration based on the STOP TIME FOR ORDER site parameter. The default date shown is the least of (1) the <IV TYPE> GOOD FOR HOW MANY DAYS site parameter (where <IV TYPE> is LVPs, PBs, etc.), (2) the NUMBER OF DAYS FOR IV ORDER field (found in the IV ADDITIVES file) for all additives in this order, (3) the DAY (nD) or DOSE (nL) LIMIT field (found in the PHARMACY ORDERABLE ITEM file) for the orderable item associated with this order or (4) the duration received from CPRS (if applicable). The Site Manager or Application Coordinator can change any fields. This package initially calculates a default Stop Date/Time, depending on the INPATIENT WARD PARAMETERS file except for one-time orders and Inpatient orders for Outpatients.

For a one-time order, the ward parameter, DAYS UNTIL STOP FOR ONE-TIME, is accessed. When this parameter is not available, the system parameter, DAYS UNTIL STOP FOR ONE-TIME, will be used to determine the stop date. When neither parameter has been set, the ward parameter, DAYS UNTIL STOP DATE/TIME, will be used instead of the start and stop date being equal.

- **"PROVIDER:"** (Regular and Abbreviated)

This identifies the provider who authorized the order. Only users identified as active Providers, who are authorized to write medication orders, may be selected.

- **"SELF MED:"** (Regular and Abbreviated)

Identifies the order as one whose medication is to be given for administration by the patient. This prompt is only shown if the 'SELF MED' IN ORDER ENTRY field of the INPATIENT WARD PARAMETERS file is set to On.

- **"NATURE OF ORDER:"** (Regular and Abbreviated)

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

Nature of Order	Description	Prompted for Signature in CPRS	Chart Copy Printed?
Written	The source of the order is a written doctor's order	No	No
Verbal	A doctor verbally requested the order	Yes	Yes
Telephoned	A doctor telephoned the service to request the order	Yes	Yes
Service Correction	The service is discontinuing or adding new orders to carry out the intent of an order already received	No	No

Nature of Order	Description	Prompted for Signature in CPRS	Chart Copy Printed?
Duplicate	This applies to orders that are discontinued because they are a duplicate of another order	No	Yes
Policy	These are orders that are created as a matter of hospital policy	No	Yes

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

Example: New Order Entry

```
Patient Information        Apr 26, 2012@12:34:57        Page:    1 of    1
PSJPATIENT1,ONE                      Ward: GENERAL                   A
   PID: 000-00-0202        Room-Bed: GENMED-2      Ht(cm):_____(_____)
   DOB: 05/16/70 (41)                              Wt(kg):_____(_____)
   Sex: FEMALE                                 Admitted: 10/12/10
    Dx: LUNG CANCER                     Last transferred: ********

Allergies - Verified: LATEX
        Non-Verified:

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

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

Inpatient Order Entry        Apr 26, 2012@12:35:21        Page:    1 of    2
PSJPATIENT1,ONE                      Ward: GENERAL                   A
   PID: 000-00-0202        Room-Bed: GENMED-2      Ht(cm):_____(_____)
   DOB: 05/16/70 (41)                              Wt(kg):_____(_____)
   Sex: FEMALE                                 Admitted: 10/12/10
    Dx: LUNG CANCER                     Last transferred: ********
  CrCL: <Not Found>                               BSA (m2):_____

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

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

```
INTERVENTION: CRITICAL DRUG INTERACTION

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

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

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

   Adverse Reactions:
 Inpatient Narrative:
Outpatient Narrative:

         Enter ?? for more actions

PU Patient Record Update              NO New Order Entry
DA Detailed Allergy/ADR List          IN Intervention Menu
VP View Profile
Select Action: View Profile//
```

4.4.5. View Profile

The View Profile action allows selection of a Long, Short, or NO profile for the patient. The profile displayed in the *Inpatient Order Entry* and *Non-Verified/Pending Orders* options will include IV and Unit Dose orders. The long profile shows all orders, including discontinued and expired orders. The short profile displays recently discontinued or expired orders based on parameter values found in the System parameter and inpatient ward parameter files.

Example: Profile View

```
Inpatient Order Entry          Oct 19, 2010@16:41:35          Page:    1 of    3
PSJPATIENT,ELEVEN                      Ward: 7AS
  PID: 666-00-2921          Room-Bed:              Ht(cm):_____(_____)
  DOB: 08/09/54 (56)                               Wt(kg):_____(_____)
  Sex: MALE                               Admitted: 06/09/10
   Dx: RESPIRATORY DISTRESS         Last transferred: ********
 CrCL: <Not Found>                          BSA (m2): _____

- - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - -
   1  ->AMIODARONE TAB                      C 10/19 11/18 A
         Give: 400MG PO TID
   2    CIMETIDINE TAB                       C 10/19 11/18 R
         Give: 300MG PO QHS
- - - - - - - - - - - - - - N O N - V E R I F I E D - - - - - - - - - - - - - -
   3    LOVASTATIN TAB                       C 10/19 11/18 N  NF
         Give: 20MG PO QPM
- - - - - - - - - N O N - V E R I F I E D   C O M P L E X - - - - - - - - - -
   4    HALOPERIDOL TAB                      C 10/19 11/18 N
          Give: 10MG PO BID
        HALOPERIDOL TAB                      C 10/19 11/18 N
          Give: 15MG PO QHS
- - - - - - - - - - - P E N D I N G   R E N E W A L S - - - - - - - - - - - -
   5    CIMETIDINE TAB                       ? ***** ***** P      10/19
          Give: 300MG PO QHS
- - - - - - - - - - - - P E N D I N G   C O M P L E X - - - - - - - - - - -
   6    PREDNISONE TAB                       ? ***** ***** P
          Give: 20MG PO QAM
        PREDNISONE TAB                       ?  *****  ***** P
          Give: 10MG PO QOD
        PREDNISONE TAB                       ?  *****  ***** P
          Give: 5MG PO QD
- - - - - - - - - - - - - - - P E N D I N G - - - - - - - - - - - - - - - - -
7    ACETAMINOPHEN TAB                       ? ***** ***** P
          Give: 650MG PO Q4H PRN
- - - - - - - - RECENTLY DISCONTINUED/EXPIRED (LAST 120 HOURS) - - - - - - - -
   8    ASPIRIN TAB,EC                       C 10/19 10/19 D
         Give: 325MG PO QHS
   9  ->NAPROXEN TAB                         C 10/19 10/19 D
         Give: 250MG PO BID
+        Enter ?? for more actions
PI  Patient Information              SO Select Order
PU  Patient Record Update           NO New Order Entry
Select Action: Next Screen//
```

The orders on the profile are sorted first by status (ACTIVE, NON-VERIFIED, NON-VERIFIED COMPLEX, PENDING RENEWALS, PENDING COMPLEX, PENDING, RECENTLY DISCONTINUED/EXPIRED), then alphabetically by SCHEDULE TYPE. Pending orders with a priority of STAT are listed first and are displayed in a bold and blinking text for easy identification. After SCHEDULE TYPE, orders are sorted alphabetically by DRUG (the drug name listed on the profile), and then in descending order by START DATE.

Example: Short Profile

```
Inpatient Order Entry        Jun 12, 2006@23:12:54        Page:    1 of    1
PSJPATIENT11, ONE                 Ward: 2ASM
   PID: 000-55-3421           Room-Bed: 102-1          Ht(cm): _____ (_____)
   DOB: 12/02/23 (82)                                  Wt(kg): 100.00 (06/24/03)
   Sex: MALE                                        Admitted: 12/11/01
   Dx: HE IS A PAIN.                          Last transferred: 12/11/01
  CrCL: <Not Found>                              BSA (m2): _____

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

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

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

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


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

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

If an order has been verified by pharmacy but has not been verified by nursing, it will be listed under the ACTIVE heading with an arrow (**->)** to the right of its number. A CPRS Med Order will have a "DONE" priority and will display a "d" to the right of the number on the long profiles. These orders will display under the Non-Active header.

Orders may be selected by choosing the Select Order action, or directly from the profile using the number displayed to the left of the order. Multiple orders may be chosen by entering the numbers of each order to be included separated by commas (e.g., 1,2,3), or a range of numbers using the dash (e.g., 1-3).

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

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

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

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

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

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

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

Example: Pending Complex Order in Profile View

```
Inpatient Order Entry        Mar 07, 2004@13:03:55        Page:    1 of    1
PSJPATIENT1,ONE                    Ward: 1 EAST
  PID: 000-00-0001           Room-Bed: B-12        Ht(cm):_____(_____)
  DOB: 08/18/20 (81)                               Wt(kg):_____(_____)
  Sex: MALE                                     Admitted: 03/03/04
   Dx: TESTING                         Last transferred: ********
 CrCL: 78.1(est.) (CREAT:1.0mg/dL 4/19/12)     BSA (m2): _____

- - - - - - - - - - - - P E N D I N G C O M P L E X - - - - - - - - - - -   - - - - -
 1      CAPTOPRIL TAB                           ? ***** *****  P
          Give: 25MG PO QDAILY
        CAPTOPRIL TAB                           ? ***** *****  P
          Give: 50MG PO BID
        CAPTOPRIL TAB                           ? ***** *****  P
          Give: 100MG PO TID




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

Example: Non-Verified Complex Order in Profile View

```
Inpatient Order Entry        Mar 07, 2004@13:03:55        Page:    1 of    1
PSJPATIENT1,ONE                    Ward: 1 EAST
  PID: 000-00-0001           Room-Bed: B-12        Ht(cm):_____(_____)
  DOB: 08/18/20 (81)                               Wt(kg):_____(_____)
  Sex: MALE                                     Admitted: 03/03/04
   Dx: TESTING                         Last transferred: ********
 CrCL: 78.1(est.) (CREAT:1.0mg/dL 4/19/12)     BSA (m2): _____

- - - - - - - - - - - - N O N - V E R I F I E D C O M P L E X - - - - - - - - - - - - -
 1      CAPTOPRIL TAB                           C 03/26 03/27 N
          Give: 25MG PO QDAILY
        CAPTOPRIL TAB                           C 03/28 03/29 N
          Give: 50MG PO BID
        CAPTOPRIL TAB                           C 03/30 03/31 N
          Give: 100MG PO TID




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

(This page included for two-sided copying.)

Example: Active Complex Order in Profile View

```
Inpatient Order Entry        Mar 07, 2004@15:00:05      Page:   1 of    1
PSJPATIENT1,ONE                   Ward: 1 EAST
   PID: 000-00-0001          Room-Bed: B-12      Ht(cm):_____(_____)
   DOB: 08/18/20 (81)                            Wt(kg):_____(_____)
   Sex: MALE                                  Admitted: 03/03/04
    Dx: TESTING                       Last transferred: ********
  CrCL: 78.1(est.) (CREAT:1.0mg/dL 4/19/12)     BSA (m2): _____

- - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - - -
  1     CAPTOPRIL TAB                      C 03/26 03/27  A
           Give: 25MG PO QDAILY
  2     CAPTOPRIL TAB                      C 03/28 03/29  A
           Give: 50MG PO BID
  3     CAPTOPRIL TAB                      C 03/30 03/31  A
           Give: 100MG PO TID




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

4.4.6.   Patient Information

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

Example: Patient Information

```
Patient Information         Sep 13, 2000 15:04:31      Page:   1 of    1
PSJPATIENT1,ONE                   Ward: 1 EAST
   PID: 000-00-0001          Room-Bed: B-12      Ht(cm):        (        )
   DOB: 08/18/20 (80)                            Wt(kg):_____(_____)
   Sex: MALE                                  Admitted: 05/03/00
    Dx: TESTING                       Last transferred: ********

 Allergies/Reactions: No Allergy Assessment
 Remote:
 Adverse Reactions:
 Inpatient Narrative: Narrative for Patient PSJPATIENT1
 Outpatient Narrative:







          Enter ?? for more actions
PU Patient Record Update              NO New Order Entry
DA Detailed Allergy/ADR List          IN Intervention Menu
VP View Profile
Select Action: View Profile//
```

Example: Patient Information Screen for Outpatient Receiving Inpatient Medications

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

   Dx: TESTING                            Discharged: 01/13/98

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

Clinic:                  Date/Time of Appointment:
Clinic A                 May 23, 2003/9:00 am
Flu Time Clinic          June 6, 2003/10:00 am
         Enter ?? for more actions
PU Patient Record Update              NO New Order Entry
DA Detailed Allergy/ADR List          IN Intervention Menu
VP View Profile
Select Action: View Profile//
```

4.4.7. Select Order

The Select Order action is used to take action on a previously entered order by selecting it from the profile, after the patient is selected and length of profile is chosen (i.e., short or long).

Example: Selecting an Order

```
Inpatient Order Entry       Mar 07, 2002@13:01:56        Page:    1 of   1
PSJPATIENT1,ONE                  Ward: 1 EAST
   PID: 000-00-0001       Room-Bed: B-12      Ht(cm): _____  (_____)
   DOB: 08/18/20 (81)                         Wt(kg): _____  (_____)
   Sex: MALE                             Admitted: 05/03/00
   Dx: TESTING                   Last transferred: ********
 CrCL: <Not Found>                     BSA (m2): _____

 - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - -
   1    in 0.9% SODIUM CHLORIDE 1000 ML 125 ml/hrC 03/07 03/07  E
   2    in 5% DEXTROSE 50 ML 125 ml/hr         C 03/06  03/06  E
   3    CEPHAPIRIN 1 GM                        C  03/04  03/09  A
        in DEXTROSE 5% IN N. SALINE 100 ML QID
   4    ASPIRIN CAP,ORAL                       O  03/07  03/07  E
          Give: 650MG PO NOW
 - - - - - - - - - - - - - - P E N D I N G - - - - - - - - - - - - - - - -
   5    in DEXTROSE 10% 1000 ML 125 ml/hr      ? ***** *****  P


       Enter ?? for more actions
PI  Patient Information              SO Select Order
PU Patient Record Update            NO New Order Entry
Select Action: Quit// 1
```

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

4.5.4. Hold

Only active orders may be placed on hold. Orders placed on hold will continue to show under the ACTIVE heading on the profiles until removed from hold. Any orders placed on hold through the pharmacy options cannot be released from hold using any of the CPRS options. An entry is placed in the order's Activity Log recording the user who placed/removed the order from hold and when the action was taken.

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

Example: Place an Order on Hold

```
ACTIVE UNIT DOSE              Feb 25, 2001@21:25 50        Page:    1 of    2
PSJPATIENT1,ONE                      Ward: 1 EAST
   PID: 000-00-0001          Room-Bed: B-12     Ht(cm):         (          )
   DOB: 08/18/20 (80)                           Wt(kg):_____(_____)

*(1)Orderable Item: ASPIRIN TAB                                   <DIN>
       Instructions:
 *(2)Dosage Ordered: 650MG
          Duration:                         *(3)Start: 02/26/01  14:
 *(4)     Med Route: ORAL
                                            *(5) Stop: 02/28/01  24:00
  (6) Schedule Type: CONTINUOUS
 *(8)       Schedule: QDAILY
  (9)   Admin Times: 1440
*(10)       Provider: PSJPROVIDER,ONE [es]
 (11) Special Instructions:

 (12) Dispense Drug                         U/D        Inactive Date
      ASPIRIN BUFFERED 325MG TAB            2
+        Enter ?? for more actions
DC Discontinue          ED  Edit            AL Activity Logs
HD  Hold                RN  Renew
FL  Flag                VF  (Verify)
Select Item(s): Next Screen// HD    Hold

Do you wish to place this order 'ON HOLD'? Yes// <Enter> (Yes)
NATURE OF ORDER: WRITTEN//  <Enter>        W...
COMMENTS:
  1>TESTING
  2>
EDIT Option: .  <Enter>
Enter RETURN to continue or '^' to exit: <Enter>
----------------------------------report continues----------------------------
```

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

Example: Place an Order on Hold (continued)

```
HOLD UNIT DOSE            Feb 25, 2001@21:27:57      Page:   1 of   2
PSJPATIENT1,ONE                 Ward: 1 EAST
   PID: 000-00-0001       Room-Bed: B-12      Ht(cm):_____ (_____)
   DOB: 08/18/20 (80)                         Wt(kg):_____ (_____)

 *(1)Orderable Item: ASPIRIN TAB                              <DIN>
       Instructions:
 *(2)Dosage Ordered: 650MG
          Duration:                      *(3)Start: 02/26/01  14:40
 *(4)     Med Route: ORAL
                                         *(5) Stop: 02/28/01  24:00
  (6) Schedule Type: CONTINUOUS
 *(8)      Schedule: QDAILY
  (9)   Admin Times: 1440
*(10)      Provider: PSJPROVIDER,ONE [es]
 (11) Special Instructions:

 (12) Dispense Drug                         U/D       Inactive Date
       ASPIRIN BUFFERED 325MG TAB            2
+         Enter ?? for more actions
DC Discontinue        ED (Edit)          AL Activity Logs
HD Hold               RN (Renew)
FL Flag               VF (Verify)
Select Item(s): Next Screen//  <Enter>


HOLD UNIT DOSE            Feb 25, 2001@21:28:20      Page:   2 of   2
PSJPATIENT1,ONE                 Ward: 1 EAST
   PID: 000-00-0001       Room-Bed: B-12      Ht(cm):_____ (_____)
   DOB: 08/18/20 (80)                         Wt(kg):_____ (_____)
+
(7)Self Med:  NO

Entry By: PSJPROVIDER,ONE            Entry Date: 02/25/01  21:25

(13) Comments:
 TESTING




        Enter ?? for more actions
DC  Discontinue       ED  (Edit)        AL  Activity Logs
HD Hold               RN  (Renew)
FL  Flag              VF  (Verify)
Select Item(s): Quit//  <Enter>


Unit Dose Order Entry     Feb 25, 2001@21:30:15      Page:   1 of   1
PSJPATIENT1,ONE                 Ward: 1 EAST
   PID: 000-00-0001       Room-Bed: B-12      Ht(cm):_____ (_____)
   DOB: 08/18/20 (80)                         Wt(kg):_____ (_____)
   Sex: MALE                             Admitted: 05/03/00
    Dx: TESTING                    Last transferred: ********
 CrCL: <Not Found>                       BSA (m2):_____

- - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - -
  1    ASPIRIN TAB                    C 02/26 02/28  H
         Give: 650MG ORAL QDAILY




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

Viewing Renewed Orders

The following outlines what the user may expect following the renewal process:

1. The patient profile will contain the most recent renewal date in the Renewed field.

2. The patient detail will contain the most recent renewal date and time in the Renewed field.

3. The Activity Log will display the following:

   - ORDER EDITED activity, including the previous Stop Date/Time and the previous Provider (if a new Provider is entered at the time the order is renewed).

   - ORDER RENEWED BY PHARMACIST activity, including the pharmacist that renewed the order and the date and time that the RN (Renew) action was taken.

Example: Renewed Order in Profile View

```
Inpatient Order Entry        Feb 25, 2004@21:25:50        Page:   1 of   1
PSJPATIENT1,ONE                    Ward: 1 EAST
  PID: 000-00-0001            Room-Bed: B-12      Ht(cm):_____(_____)
  DOB: 08/18/20 (83)                              Wt(kg):_____(_____)
  Sex: MALE                               Admitted: 05/03/00
   Dx: TESTING              Last transferred: ********
 CrCL: <Not Found>                       BSA (m2): _____


 - - - - - - - - - - - - - - - A C T I V  - - - - - - - - - - - - - - - - -
  1    ASPIRIN TAB 650                      C  03/26  03/28  A    03/27
         Give: 650MG PO QDAILY




         Enter ?? for more actions
PI  Patient Information              SO Select Order
PU Patient Record Update            NO New Order Entry
Select Action: Quit// 1
```

Example: Renewed Order in Detailed Order View

```
ACTIVE UNIT DOSE              Feb 25, 2004@21:25 50        Page:    1 of    2
PSJPATIENT1,ONE                     Ward: 1 EAST
   PID: 000-00-0001          Room-Bed: B-12        Ht(cm):_____(_____)
   DOB: 08/18/20 (80)                              Wt(kg):_____(_____)

*(1)Orderable Item: ASPIRIN TAB                                  <DIN>
        Instructions:
 *(2)Dosage Ordered: 650MG
          Duration:                         *(3)Start: 03/26/04  14:40
 *(4)     Med Route: ORAL                      Renewed: 03/27/04  11:00
                                            *(5) Stop: 03/28/04  24:00
   (6) Schedule Type: CONTINUOUS
 *(8)      Schedule: QDAILY
   (9)   Admin Times: 1440
*(10)        Provider: PSJPROVIDER,ONE [es]
 (11) Special Instructions:

 (12) Dispense Drug                         U/D        Inactive Date
      ASPIRIN BUFFERED 325MG TAB            2
+        Enter ?? for more actions
DC  Discontinue         ED  (Edit)            AL  Activity Logs
HD  Hold                RN  Renew
FL  Flag                VF  (Verify)
Select Item(s): Next Screen//
```

```
ACTIVE UNIT DOSE            Feb 25, 2004@21:28:20        Page:    2 of    2
PSJPATIENT1,ONE                     Ward: 1 EAST
   PID: 000-00-0001          Room-Bed: B-12        Ht(cm):_____(_____)
   DOB: 08/18/20 (80)                              Wt(kg):_____(_____)
+
(7)Self Med: NO

Entry By: PSJPROVIDER,ONE               Entry Date: 03/25/04  21:25
Renewed By: PSJPROVIDER,ONE
(13) Comments:
 TESTING




        Enter ?? for more actions
DC  Discontinue         ED  (Edit)            AL  Activity Logs
HD  Hold                RN  (Renew)
FL  (Flag)              VF  (Verify)
Select Item(s): Quit//  <Enter>
```

Discontinuing a Pending Renewal

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

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

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

Example: Flagged Order

```
Inpatient Order Entry          Feb 11, 2(11@13:05:49          Page:    1 of    1
--------------------------------------------------------------------------------------------
ZZZRETFIVEEIGHTYSIX,PATIENT       Ward: ALB-PRR                         A
  PID: 000-00-1234            Room-Bed:              Ht(cm): 187.9  (05/03/10)
  DOB: 04/07/70 (40)                               Wt(kg): 74.00  (05/03/10)
  Sex: MALE                               Admitted: 07/02/97
   Dx: SICK                         Last transferred: ********
 CrCL: <Not Found>                        BSA (m2): 1.97
--------------------------------------------------------------------------------------------
 - - - - - - - - - - - - - P E N D I N G - - - - - - - - - - - - - - - -
    1    ACETAZOLAMIDE INJ                       ? ***** ***** P
         Give: 500MG/1VIAL IV NOW
    2    ACETAZOLAMIDE INJ                       ? ***** ***** P
         Give: 500MG/1VIAL IV Q12H
    3    VINCRISTINE INJ                         ? ***** ***** P
         Give: 3MG/3ML IVP BID



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

4.5.9.   Speed Actions

From the list of orders in the patient's profile, the nurse can select one or more of the orders on which to take action. The nurse can quickly discontinue this patient's orders by selecting Speed Discontinue, or quickly renewing an order by selecting Speed Renew. Other "quick" selections include Speed Finish and Speed Verify.

Note: Any orders placed through the Med Order Button cannot be Speed Discontinued.

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

4.6. Discontinue All of a Patient's Orders

[PSJU CA]

The *Discontinue All of a Patient's Orders* option allows a nurse to discontinue all of a patient's orders. Also, it allows a ward clerk to mark all of a patient's orders for discontinuation. If the ALLOW USER TO D/C ORDERS parameter is turned on to take action on active orders, then the ward clerk will also be able to discontinue orders. This ALLOW USER TO D/C ORDERS parameter is set using the *Inpatient User Parameter's Edit* option under the *PARameter's Edit Menu* option, which is under the *Supervisor's Menu* option.

This option is then used to discontinue the selected orders. If a non-verified or pending order is discontinued, it is deleted completely from the system.

4.7. Hold All of a Patient's Orders

[PSJU HOLD ALL]

The *Hold All of a Patient's Orders* option allows a nurse to place all of a patient's active orders on hold in order to temporarily stop the medication from being dispensed, or take all of the patient's orders off of hold to restart the dispensing of the medication.

The option will take no action on individual orders that it finds already on hold. When this option is used to put all orders on hold, the system will print labels for each medication order newly put on hold, indicating on the label that the medication is on hold. Also, the profile will notify the user that the patient's orders have been placed on hold; the letter **H** will be placed in the Status/Info column on the profile for each formerly active order.

When the option is used to take all orders off of hold, the system will reprint labels for the medication orders that were taken off hold and indicate on the label that the medication is off hold. Again, this option will take no action on individual orders that it finds were not on hold. The profile will display to the user that the patient's orders have been taken off hold.

Example 1: Hold All of a Patient's Orders

```
Select Unit Dose Medications Option: Hold All of a Patient's Orders

Select PATIENT: PSJPATIENT2,TWO     000-00-0002   02/22/42   A-6

DO YOU WANT TO PLACE THIS PATIENT'S ORDERS ON HOLD? Yes// <Enter> (Yes)

HOLD REASON: SURGERY SCHEDULED FOR 9:00AM
...a few moments, please....................DONE!
```

Example: Inpatient Profile

```
Select Unit Dose Medications Option: IPF Inpatient Profile

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

```
Select PATIENT: PSJPATIENT11,ONE               000-55-3421   08/18/20   1 EAST

Select another PATIENT: <Enter>

SHORT, LONG, or NO Profile? SHORT// <Enter>  SHORT

Show PROFILE only, EXPANDED VIEWS only, or BOTH: PROFILE// BOTH

Show SHORT, LONG, or NO activity log? NO// SHORT

Select PRINT DEVICE: 0;80 NT/Cache virtual TELNET terminal
```

```
Inpatient Order Entry        Jun 12, 2006@23:12:54       Page:   1 of   1
PSJPATIENT11, ONE                 Ward: 2ASM
  PID: 000-55-3421           Room-Bed: 102-1        Ht(cm): _____ (_____)
  DOB: 12/02/23 (82)                               Wt(kg): 100.00 (06/24/03)
  Sex: MALE                                  Admitted: 12/11/01
   Dx: Breathing Difficulty         Last transferred: 12/11/01
 CrCL: <Not Found>                        BSA (m2): _____

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

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

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

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

4.9. Order Checks

Order checks (allergy/adverse drug reactions, drug-drug interactions, duplicate therapy, dangerous medications for patient over 64 years of age, Glucophage lab results, and Aminoglycosides ordered) are performed when a new medication order is placed through Inpatient Medications or when various actions are taken on medication orders through the Inpatient Medications application. This functionality will ensure the user is alerted to possible adverse drug reactions and will reduce the possibility of a medication error due to the omission of an order check when a non-active medication order is acted upon.

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

The following actions will initiate an order check:

- Action taken through Inpatient Medications to enter a medication order will initiate order checks (allergy, drug-drug interaction, and duplicate therapy) against existing medication orders.

- Action taken through Inpatient Medications to finish a medication order placed through CPRS will initiate order checks (allergy, drug-drug interaction, and duplicate therapy) against existing medication orders.

- Action taken through IV Menu to finish a medication order placed through CPRS will initiate order checks (allergy, drug-drug interaction, and duplicate therapy) against existing medication orders.

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

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

- Action taken through IV Menu to copy a medication order, thereby creating a new order.

The following are the different items used for the order checks:

- Checks each Dispense Drug within the Unit Dose order for allergy/adverse drug reactions.

- Checks each Dispense Drug within the Unit Dose order against existing orders for drug-drug interaction, and duplicate therapy.

- Checks each additive within an IV order for drug-drug interaction, and duplicate therapy against solutions or other additives within the order.

- Checks each IV order solution for allergy/adverse reactions.

- Checks each IV order solution for drug-drug interaction against other solutions or additives within the order if they are defined as a PreMix.

- Checks each IV order additive for allergy/adverse reaction.

- Checks each IV order additive for drug-drug interaction, and duplicate therapy against existing orders for the patient.

- Checks each IV order solution for drug-drug interaction against existing orders for the patient.

Override capabilities are provided based on the severity of the order check, if appropriate.

Order Checks will be displayed/processed in the following order:

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

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

4.9a. Check Drug Interactions
[PSJ CHECK DRUG INTERACTION]

The Check Drug Interaction option allows a user to check for a drug interaction and Therapeutic Duplications between two or more drugs. This option shall be placed on the Unit Dose Medications [PSJU MGR] Menu, and the IV [PSJI MGR] Menu.

Example: Checking for drug interactions

```
Select IV Menu Option: Check Drug Interaction
Drug 1:    CIMETIDINE 300MG TAB         GA301
        ...OK? Yes//   (Yes)

Drug 2: WARFARIN 5MG TAB
  Lookup: GENERIC NAME
WARFARIN 5MG TAB           BL110
        ...OK? Yes//   (Yes)

Drug 3:

Now Processing Enhanced Order Checks! Please wait...



*** DRUG INTERACTION(S) ***
============================================================
***Critical*** with WARFARIN 5MG TAB and
             CIMETIDINE 300MG TAB

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


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

Display Professional Interaction monograph? N// YES

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




--------------------------------------------------------------------------------
Professional Monograph
Drug Interaction with WARFARIN 5MG TAB and CIMETIDINE 300MG TAB
    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/Cimetidine

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

MECHANISM OF ACTION: Inhibition of warfarin hepatic metabolism. The effect appears to be greater on the less active R-warfarin than on the S-warfarin.

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

Press Return to Continue or "^" to Exit:

Professional Monograph
   Drug Interaction with WARFARIN 5MG TAB and CIMETIDINE 300MG TAB

PREDISPOSING FACTORS: None determined.

PATIENT MANAGEMENT: Coadministration of cimetidine and warfarin should be avoided. If they are administered concurrently, monitor anticoagulant activity and adjust the dose of warfarin indicated. The H-2 antagonists famotidine and nizatidine are unlikely to interact with warfarin. The time of highest risk for a coumarin-type drug interaction is when the precipitant drug is initiated or discontinued. Contact the prescriber before initiating, altering the dose or discontinuing either drug.

DISCUSSION: The majority of drug interaction reports involving H-2 antagonists and warfarin have occurred with cimetidine. Reports of a possibly significant interaction between ranitidine and warfarin have been equivocal. Famotidine and nizatidine do not appear to affect prothrombin time.

Press Return to Continue or "^" to Exit:

Professional Monograph
   Drug Interaction with WARFARIN 5MG TAB and CIMETIDINE 300MG TAB

REFERENCES:
1. Silver BA, Bell WR. Cimetidine potentiation of the hypoprothrombinemic effect of warfarin. Ann Intern Med 1979 Mar;90(3):348-9.
2. Wallin BA, Jacknowitz A, Raich PC. Cimetidine and effect of warfarin. Ann Intern Med 1979 Jun;90(6):993.
3. Serlin MJ, Sibeon RG, Breckenridge AM. Lack of effect of ranitidine on warfarin action. Br J Clin Pharmacol 1981 Dec;12(6):791-4.
4. Kerley B, Ali M. Cimetidine potentiation of warfarin action. Can Med Assoc J 1982 Jan 15;126(2):116.
5. Desmond PV, Mashford ML, Harman PJ, Morphett BJ, Breen KJ, Wang YM. Decreased oral warfarin clearance after ranitidine and cimetidine. Clin Pharmacol Ther 1984 Mar;35(3):338-41.
6. Toon S, Hopkins KJ, Garstang FM, Rowland M. Comparative effects of ranitidine and cimetidine on the pharmacokinetics and pharmacodynamics of warfarin in man. Eur J Clin Pharmacol 1987;32(2):165-72.

Press Return to Continue or "^" to Exit:

Professional Monograph
   Drug Interaction with WARFARIN 5MG TAB and CIMETIDINE 300MG TAB
7. Cournot A, Berlin I, Sallord JC, Singlas E. Lack of interaction between nizatidine and warfarin during chronic administration. J Clin Pharmacol 1988 Dec;28(12):1120-2.
8. Hussey EK, Dukes GE. Do all histamine2-antagonists cause a warfarin drug interaction?. DICP 1989 Sep;23(9):675-9.
9. Hunt BA, Sax MJ, Chretien SD, Gray DR, Frank WO, Lalonde RL. Stereoselective alterations in the pharmacokinetics of warfarin enantiomers with two cimetidine dose regimens. Pharmacotherapy 1989; 9(3):184.
10. Baciewicz AM, Morgan PJ. Ranitidine-warfarin interaction. Ann Intern Med 1990 Jan 1;112(1):76-7.

```
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--------------------------------------------------------------------------------

Enter RETURN to continue or '^' to exit:


Display Professional Interaction monograph? N// O
```

(This page included for two-sided copying.)

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

Example: Local Outpatient Order Display

```
Duplicate Drug in Local Rx:

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

Example: Remote Outpatient Order Display

```
Duplicate Drug in Remote Rx:

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

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

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

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

```
Inpatient Order Entry        Mar 16, 2011@12:10:42        Page:    1 of    2
BCMA,EIGHTEEN-PATIENT            Ward: 7A GEN                          A
  PID: 666-33-0018        Room-Bed:              Ht(cm): 175.26 (12/15/08)
  DOB: 04/07/35 (75)                             Wt(kg): 100.00 (12/15/08)
  Sex: FEMALE                             Admitted: 01/31/02
   Dx: UPSET                          Last transferred: 06/04/10
  CrCL: 78.1(est.) (CREAT:1.0mg/dL 4/19/12)      BSA (m2): 2.21
-------------------------------------------------------------------------------
- - - - - - - - - - N O N - V E R I F I E D C O M P L E X - - - - - - - - - -
   1    LITHIUM TAB,SA                          C 10/13 10/15 N
          Give: 450MG PO QID
        LITHIUM TAB,SA                          C 10/13 10/15 N
          Give: 10000MG PO Q4H
   2    RILUZOLE TAB                            C 10/13 10/15 N
          Give: 50MG PO BID
+------------Enter ?? for more actions---------------------------------------
PI  Patient Information              SO Select Order
PU  Patient Record Update            NO New Order Entry
Select Action: Next Screen// no   New Order Entry

Select DRUG: sim
    Lookup: DRUG GENERIC NAME
    1    SIMETHICONE 40MG CHEW TAB          GA900     N/F
    2    SIMETHICONE 40MG/0.6ML DROPS          GA900
    3    SIMETHICONE 80MG CHEW TAB          GA900
    4    SIMVASTATIN 10MG TAB           CV350
    5    SIMVASTATIN 20MG TAB           CV350
Press <RETURN> to see more, '^' to exit this list, '^^' to exit all lists, OR
CHOOSE 1-5: 5   SIMVASTATIN 20MG TAB       CV350

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

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

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


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

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


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

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

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

Now creating Pharmacy Intervention
For SIMVASTATIN 20MG TAB

PROVIDER:    PSJPROVIDER,ONE           TP
RECOMMENDATION: 8 NO CHANGE

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


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

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

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

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

Press Return to continue...

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

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

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


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

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

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

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

NON-VERIFIED UNIT DOSE       Mar 16, 2011@12:10:24       Page:   1 of   2
BCMA,EIGHTEEN-PATIENT              Ward: 7A GEN                      A
   PID: 666-33-0018          Room-Bed:           Ht(cm): 175.26 (12/15/08)
   DOB: 04/07/35 (75)                            Wt(kg): 100.00 (12/15/08)
--------------------------------------------------------------------------------
*(1)Orderable Item: SIMVASTATIN TAB
      Instructions:
*(2)Dosage Ordered: 40MG
         Duration:                         (3)Start: 03/16/11  12:10
*(4)     Med Route: ORAL (BY MOUTH)
                                           (5) Stop: 03/18/11  24:00
 (6) Schedule Type: CONTINUOUS
*(8)      Schedule: QPM
 (9)   Admin Times: 2100
      SIMVASTATIN 20MG TAB                    2
+        Enter ?? for more actions
DC  Discontinue        ED  Edit            AL Activity Logs
HD  (Hold)             RN  (Renew)
FL  Flag               VF  Verify
Select Item(s): Next Screen// vf   Verify
...a few moments, please.....

Pre-Exchange DOSES:

ORDER VERIFIED.

Enter RETURN to continue or '^' to exit:

Select DRUG:

Select IV TYPE:

Inpatient Order Entry        Mar 16, 2011@12:10:42       Page:   1 of   2
BCMA,EIGHTEEN-PATIENT              Ward: 7A GEN                      A
   PID: 666-33-0018          Room-Bed:           Ht(cm): 175.26 (12/15/08)
   DOB: 04/07/35 (75)                            Wt(kg): 100.00 (12/15/08)
   Sex: FEMALE                            Admitted: 01/31/02
    Dx: UPSET                     Last transferred: 06/04/10
  CrCL: 78.1(est.) (CREAT:1.0mg/dL 4/19/12)    BSA (m2): 2.21
--------------------------------------------------------------------------------
 - - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - -
  1    INDINAVIR CAP,ORAL                    C 03/16 03/17 A
         Give: 400MG PO QDAY
  2    SIMVASTATIN TAB                       C 03/16 03/18 A
         Give: 40MG PO QPM
 - - - - - - - - - N O N - V E R I F I E D C O M P L E X - - - - - - - - - -
  3    LITHIUM TAB,SA                        C 10/13 10/15 N
         Give: 450MG PO QID
       LITHIUM TAB,SA                        C 10/13 10/15 N
         Give: 10000MG PO Q4H
  4    RILUZOLE TAB                          C 10/13 10/15 N
         Give: 50MG PO BID
+        Enter ?? for more actions
PI  Patient Information             SO Select Order
PU  Patient Record Update           NO New Order Entry
Select Action: Next Screen//
```

- **Drug-Drug Interactions** - Drug-drug interactions will be either critical or significant. If the Dispense Drug selected is identified as having an interaction with one of the drugs the patient is already receiving, the order the new drug interacts with will be displayed.

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

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

Example: Drug-Drug Interactions Display

```
Inpatient Order Entry        Mar 16, 2011@12:04:33        Page:   1 of   2
BCMA,EIGHTEEN-PATIENT              Ward: 7A GEN                       A
  PID: 666-33-0018           Room-Bed:               Ht(cm): 175.26 (12/15/08)
  DOB: 04/07/35 (75)                                 Wt(kg): 100.00 (12/15/08)
  Sex: FEMALE                                  Admitted: 01/31/02
   Dx: UPSET                          Last transferred: 06/04/10
  CrCL: 78.1(est.) (CREAT:1.0mg/dL 4/19/12)    BSA (m2): 2.21
---------------------------------------------------------------------------------
- - - - - - - - - - N O N - V E R I F I E D C O M P L E X - - - - - - - - - - -
   1    LITHIUM TAB,SA                         C 10/13 10/15 N
          Give: 450MG PO QID
        LITHIUM TAB,SA                         C 10/13 10/15 N
          Give: 10000MG PO Q4H
   2    RILUZOLE TAB                           C 10/13 10/15 N
          Give: 50MG PO BID
        RILUZOLE TAB                           C 10/15 10/16 N
          Give: 10000MG PO Q4H
- - - - - - - - - - - - - P E N D I N G C O M P L E X - - - - - - - - - - - - -
   3    HALOPERIDOL TAB                        ? ***** ***** P
          Give: 40MG PO BID
          Enter ?? for more actions
PI  Patient Information               SO Select Order
PU  Patient Record Update             NO New Order Entry
Select Action: Quit// no   New Order Entry

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

Now Processing Enhanced Order Checks! Please wait...

Press Return to continue...


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

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

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


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

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

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

Now creating Pharmacy Intervention
For INDINAVIR SULFATE 400MG CAP

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

RECOMMENDATION: 8 NO CHANGE

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


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


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

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

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

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

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

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

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

Press Return to continue...


NATURE OF ORDER: WRITTEN//        W

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


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

  (12) Dispense Drug                              U/D          Inactive Date
       INDINAVIR SULFATE 400MG CAP                1
+------------Enter ?? for more actions--------------------------------------------
DC Discontinue            ED  Edit              AL Activity Logs
HD  (Hold)                RN  (Renew)
FL  Flag                  VF  Verify
Select Item(s): Next Screen//    NEXT SCREEN
```

4.9a.1. 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 1 Enhancement 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 1 Enhancement 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
```

- **Drug-Allergy Interactions** – Drug allergy interactions will be either critical or significant. If the Dispense Drug selected is identified as having an interaction with one of the patient's allergies, the allergy the drug interacts with will be displayed.

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

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

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

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

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

    Prospective Drug: DILTIAZEM 120MG SA CAP
      Causative Agent: DILTIAZEM
 Historical/Observed: OBSERVED
            Severity: MODERATE
         Ingredients: DILTIAZEM (LOCAL),
      Signs/Symptoms: ITCHING,WATERING EYES, ANOREXIA, NAUSEA,VOMITING,
                      ANXIETY, DROWSINESS, DRY MOUTH, DRY NOSE, RASH,
          Drug Class: CV200 CALCIUM CHANNEL BLOCKERS (LOCAL),
   Provider Override Reason: N/A - Order Entered Through VistA

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

6.   Output Options

Most of the Output Options are located under the *Reports Menu* option on the *Unit Dose Medications* menu. The other reports are located directly on the *Unit Dose Medications* menu.

6.1   PAtient Profile (Unit Dose)
[PSJU PR]
The *PAtient Profile (Unit Dose)* option allows a user to print a profile (list) of a patient's orders for the patient's current or last (if patient has been discharged) admission, by group (**G**), ward (**W**), clinic (**C**), or patient (**P**). When group is selected, a prompt to select by ward group (**W**) or clinic group (**C**) displays. If the user's terminal is selected as the printing device, this option will allow the user to select any of the printed orders to be shown in complete detail, including the activity logs, if any.

Example: Patient Profile

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

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

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

Select another PATIENT: <Enter>

SHORT, LONG, or NO Profile? SHORT// <Enter>  SHORT

Show PROFILE only, EXPANDED VIEWS only, or BOTH: PROFILE// <Enter>

Select PRINT DEVICE: <Enter> NT/Cache virtual TELNET terminal
```

```
                U N I T   D O S E   P R O F I L E          09/13/00  16:20
                    SAMPLE HEALTHCARE SYSTEM
- - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
PSJPATIENT1,ONE                  Ward: 1 EAST
    PID: 000-00-0001      Room-Bed: B-12            Ht(cm):_____(_____)
    DOB: 08/18/20  (80)                             Wt(kg):_____(_____)
    Sex: MALE                               Admitted: 05/03/00
     Dx: TESTING
   CrCL: <Not Found>                        BSA (m2): _____
 Allergies: No Allergy Assessment
      ADR:
- - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - - -
   1  -> AMPICILLIN CAP                       C  09/07  09/21  A   NF
          Give: 500MG PO QID
   2  -> HYDROCORTISONE CREAM,TOP             C 09/07 09/21  A    NF
          Give: 1% TOP QDAILY
   3  -> PROPRANOLOL 10MG U/D                 C 09/07 09/21  A    NF
          Give: PO QDAILY

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

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

Example: Patient Profile (continued)

```
   ----------------------------------------------------------------------------
Patient: PSJPATIENT1,ONE                      Status: ACTIVE
Orderable Item: AMPICILLIN CAP
  Instructions:
Dosage Ordered: 500MG
     Duration:                                Start: 09/07/00  15:00
    Med Route: ORAL (PO)                       Stop: 09/21/00  24:00
 Schedule Type: CONTINUOUS
     Schedule: QID
   Admin Times: 01-09-15-20
     Provider: PSJPROVIDER,ONE  [w]
                                           Units   Units   Inactive
 Dispense Drugs                       U/D  Disp'd  Ret'd   Date
----------------------------------------------------------------------------
 AMPICILLIN 500MG CAP                  1    0       0

ORDER NOT VERIFIED
Self Med: NO
Entry By: PSJPROVIDER,ONE                       Entry Date: 09/07/00  13:37
```

6.2.   Reports Menu
[PSJU REPORTS]

The *Reports Menu* option contains various reports generated by the Unit Dose package.

Note: All of these reports are <u>QUEUABLE</u>, and it is <u>strongly suggested</u> that these reports be queued when run.

Example: Reports Menu

```
Select Reports Menu Option: ?

    7       7 Day MAR
    14      14 Day MAR
    24      24 Hour MAR
    AP1     Action Profile #1
    AP2     Action Profile #2
            AUthorized Absence/Discharge Summary
            Extra Units Dispensed Report
            Free Text Dosage Report
            INpatient Stop Order Notices
            Medications Due Worksheet
            Patient Profile (Extended)
```

Example: Action Profile #1

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

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

Select PATIENT: PSJPATIENT1,ONE      000-00-0001   08/18/20   1 EAST
Select another PATIENT: <Enter>
Enter medication type(s): 2,3,6// 1
...this may take a few minutes...(you should QUEUE this report)...
Select PRINT DEVICE: <Enter> NT/Cache virtual TELNET terminal

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

```
                      UNIT DOSE ACTION PROFILE #1       09/11/2000 11:01
                        SAMPLE HEALTHCARE SYSTEM
                   (Continuation of VA FORM 10-1158)             Page: 1
---------------------------------------------------------------------------
   This form is to be used to REVIEW/RENEW/CANCEL existing active medication
 orders for inpatients. Review the active orders listed and beside each order
 circle one of the following:
                           R - to RENEW the order
                           D - to DISCONTINUE the order
                           N - to take NO ACTION (the order will remain
                               active until the stop date indicated)

   A new order must be written for any new medication or to make any changes
 in dosage or directions on an existing order.
---------------------------------------------------------------------------
 PSJPATIENT1,ONE              Ward: 1 EAST
   PID: 000-00-0001      Room-Bed: B-12        Ht(cm):_____ (_____)
   DOB: 08/18/1920  (80)                       Wt(kg):_____ (_____)
   Sex: MALE                                   Admitted: 05/03/2000
   Dx: TESTING
   CrCL: <Not Found>                           BSA (m2): _____

 Allergies: No Allergy Assessment
      ADR:
---------------------------------------------------------------------------
 No. Action    Drug                         ST Start Stop  Status/Info
 - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - -
  1  R D N AMPICILLIN 1 GM                      C 09/07 09/14 A
           in 0.9% NACL 100 ML QID
           Special Instructions: THIS IS AN INPATIENT IV EXAMPLE

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

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

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




          _____    _____
          Date AND Time       PHYSICIAN'S SIGNATURE


       MULTIDISCIPLINARY REVIEW
            (WHEN APPROPRIATE)
                              _____
                              PHARMACIST'S SIGNATURE

                              _____
                              NURSE'S SIGNATURE
```

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

Example: Action Profile #1 Report (continued)

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

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

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

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

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


              _____        _____
                 Date AND Time         PHYSICIAN'S SIGNATURE

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

6.2.5   Action Profile #2
[PSJU AP-2]

The *Action Profile #2* option is similar to the *Action Profile #1* option (see previous report) with the added feature that the nurse can show only expiring orders, giving in effect, stop order notices (see *INpatient Stop Order Notices*).

The user can run the *Action Profile #2* option by group (**G**), ward (**W**), clinic (**C**), or patient (**P**). When group is selected, a prompt to select by ward group (**W**) or clinic group (**C**) displays. If this option is run by patient, the opportunity to select as many patients as desired is given, but the user will not get a report if the patient has no <u>active</u> orders.

If the option for a ward or a ward group is chosen, a prompt to choose the ward or ward group for which the user wants to run the option is displayed. The user will then be asked to sort (print) Action Profiles by team (**T**) or treating provider (**P**). If Ward Group of ^OTHER is entered, the user will not be given a sort (print) option; it will automatically sort by treating provider and print a report of Outpatients that are receiving Inpatient Medications and that meet the report parameters.

At the "Print (A)ll active orders, or (E)xpiring orders only? A//" prompt, the user can choose to print all active orders for the patient(s) selected, or print only orders that will expire within the date range selected for the patient(s) selected.

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

It is recommended that the action profiles be printed on two-part paper, if possible. Using two-part paper allows a copy to stay on the ward and the other copy to be sent to the pharmacy.

Note: This report uses a four-digit year format.

6.2.6. AUthorized Absence/Discharge Summary
[PSJU DS]

The *AUthorized Absence/Discharge Summary* option creates a report to allow the user to determine what action to take on a patient's Unit Dose orders if the patient is discharged from the hospital or will leave the hospital for a designated period of time (authorized absence). The form is printed so that the provider can place the active orders of a patient on hold, not take any action on the order, or continue the order upon discharge or absence. If the provider wishes to continue the order upon discharge, then he or she can identify the number of refills, the quantity, and the number of days for the order to remain active. If no action is taken on the order, it will expire or be discontinued.

The user can run the Authorized Absence Discharge Summary by ward group, ward, or by patient. If the user chooses to run this report by patient, the opportunity is given to select as many patients as desired, but only patients with <u>active</u> orders will print.

If the option by ward or ward groups is chosen, the user will be prompted for start and stop date. Entry of these dates is not required, but if a start and stop date is entered, a discharge summary will print only for those patients that have at least one order that will be active between those dates. If the user does not enter a start date, all patients with active orders will print (for the ward or ward group chosen). If a clinic visit has been scheduled, the date will print. If more than one has been scheduled, only the first one will print. It is recommended that this report be queued to print when user demand for the system is low.

For co-payment purposes, information related to the patient's service connection is shown on the first page of the form (for each patient). If the patient is a service-connected less than 50% veteran, the provider is given the opportunity to mark each non-supply item order as either SERVICE CONNECTED (SC) or NON-SERVICE CONNECTED (NSC).

Note: This report uses a four-digit year format.

Example: Authorized Absence/Discharge Summary

```
Select Reports Menu Option: AUthorized Absence/Discharge Summary

Print BLANK Authorized Absence/Discharge Summary forms? NO// <Enter>

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

Select PATIENT: PSJPATIENT2,TWO     000-00-0002   02/22/42   1 West

Select another PATIENT: <Enter>
...this may take a few minutes...(you should QUEUE this report)...

Select PRINT DEVICE: <Enter>  TELNET
-------------------------------------report continues-----------------------------
```

Example: Authorized Absence/Discharge Summary (continued)

```
                    AUTHORIZED ABSENCE/DISCHARGE ORDERS      09/19/2000 12:43
                          VAMC: REGION 5 (660)
VA FORM: 10-7978M
Effective Date:                                                   Page: 1
================================================================================
Instructions to the physician:
   A. A prescription blank (VA FORM 10-2577F) must be used for:
        1. all class II narcotics
        2. any medications marked as 'nonrenewable'
        3. any new medications in addition to those entered on this form.
   B. If a medication is not to be continued, mark "TAKE NO ACTION".
   C. To continue a medication, you MUST:
        1. enter directions, quantity, and refills
        2. sign the order, enter your DEA number, and enter the date AND time.
================================================================================
PSJPATIENT2,TWO             Ward: 1 West
  PID: 000-00-0002     Room-Bed: A-6            Ht(cm):_____(_____)
  DOB: 02/22/1942 (58)    Team: * NF *          Wt(kg):_____(_____)
  Sex: MALE                            Last Admitted: 06/24/1998
  Dx: KDJF                                Discharged: 12/11/12
 CrCL: <Not Found>                         BSA (m2): _____
Allergies: CARAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE, CHOCOLATE,
          NUTS, STRAWBERRIES, DUST
NV Aller.: AMOXICILLIN, AMPICILLIN, TAPE, FISH, FLUPHENAZINE DECANOATE
     ADR:


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

             *** THIS PATIENT HAS NON-VERIFIED ORDERS. ***

    ____ AUTHORIZED ABSENCE <96 HOURS    _AUTHORIZED ABSENCE >96 HOURS
         NUMBER OF DAYS:_____   (NO REFILLS allowed on AA/PASS meds)

    ____ REGULAR DISCHARGE   _OPT NSC      _SC

    Service Connected:
    Disabilities: NONE STATED

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

    ____ TAKE NO ACTION (PATIENT WILL NOT RECEIVE MEDICATION)

    Outpatient Directions: _____

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


    _____  _____  _____
    Physician's Signature          DEA #         Date AND Time

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

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

Example: Authorized Absence/Discharge Summary (continued)

```
                    AUTHORIZED ABSENCE/DISCHARGE ORDERS              Page: 2
                       VAMC: REGION 5 (660)
  VA FORM: 10-7978M
  PSJPATIENT2,TWO                      000-00-0002      02/22/1942
-----------------------------------------------------------------------------
                                                    Schedule      Cost per
  No.     Medication                                Type          Dose
-----------------------------------------------------------------------------
   2 BENZOYL PEROXIDE 10% GEL (2OZ)                  CONTINUOUS    3.78
     Inpt Dose: APPLY SMALL AMOUNT TOP QDAILY
     Special Instructions: TEST

     ___ TAKE NO ACTION (PATIENT WILL NOT RECEIVE MEDICATION)

     Outpatient Directions: _____

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


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

     ___ TAKE NO ACTION (PATIENT WILL NOT RECEIVE MEDICATION)

     Outpatient Directions: _____

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


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

     ___ TAKE NO ACTION (PATIENT WILL NOT RECEIVE MEDICATION)

     Outpatient Directions: _____

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


     _____  _____  _____
     Physician's Signature              DEA #          Date AND Time
=============================================================================
   OTHER MEDICATIONS:

  5 Medication:_____

     Outpatient Directions:_____

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


     _____  _____  _____
     Physician's Signature              DEA #          Date AND Time
-----------------------------------------------------------------------------
  6 Medication:_____

     Outpatient Directions: _____

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


     _____  _____  _____
     Physician's Signature              DEA #          Date AND Time
Enter RETURN to continue or '^' to exit: <Enter>
```

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

Example: Authorized Absence/Discharge Summary (continued)

```
                    AUTHORIZED ABSENCE/DISCHARGE INSTRUCTIONS 09/19/2000 12:43
                              VAMC: REGION 5 (660)
VA FORM: 10-7978M
Effective Date:
===============================================================================
PSJPATIENT2,TWO               Ward: 1 West
   PID: 000-00-0002        Room-Bed: A-6          Ht(cm):_____(_____)
   DOB: 02/22/1942 (58)    Team: * NF *           Wt(kg):_____(_____)
   Sex: MALE                          Last Admitted: 06/24/1998
    Dx: KDJF                             Discharged: 12/11/12
  CrCL: <Not Found>                        BSA (m2): _____
Allergies: CARAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE, CHOCOLATE,
           NUTS, STRAWBERRIES, DUST
NV Aller.: AMOXICILLIN, AMPICILLIN, TAPE, FISH, FLUPHENAZINE DECANOATE
      ADR:


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

     Next scheduled clinic visit:
===============================================================================
DIETARY INSTRUCTIONS: (Check One)
 __ NO RESTRICTIONS __ RESTRICTIONS (Specify) _____

   _____

   _____


===============================================================================
PHYSICAL ACTIVITY LIMITATIONS: (Check One)
 __ NO RESTRICTIONS __ RESTRICTIONS (Specify) _____

   _____

   _____


===============================================================================
 SPECIAL INSTRUCTIONS: (list print information, handouts, or other
 instructions pertinent to patient's condition)_____

   _____

   _____


===============================================================================
DIAGNOSES: _____

   _____

   _____


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

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

Example: Authorized Absence/Discharge Summary (continued)

```
                   AUTHORIZED ABSENCE/DISCHARGE INSTRUCTIONS 09/19/2000 12:43
                         VAMC: REGION 5 (660)
VA FORM: 10-7978M
Effective Date:
================================================================================
PSJPATIENT2,TWO              Ward: 1 West
   PID: 000-00-0002     Room-Bed: A-6          Ht(cm):_____(_____)
   DOB: 02/22/1942 (58)   Team: * NF *         Wt(kg):_____(_____)
   Sex: MALE                           Last Admitted: 06/24/1998
    Dx: KDJF                             Discharged: 12/11/12
  CrCL: <Not Found>                       BSA (m2): _____
Allergies: CARAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE, CHOCOLATE,
         NUTS, STRAWBERRIES, DUST
NV Aller.: AMOXICILLIN, AMPICILLIN, TAPE, FISH, FLUPHENAZINE DECANOATE
     ADR:


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

     Next scheduled clinic visit:


     _____     _____
     Nurse's Signature                         Date AND Time


     _____     _____
     Physician's Signature                     Date AND Time


         ========================================
         >>>>> I HAVE RECEIVED AND UNDERSTAND <<<<<
         >>>>> MY DISCHARGE INSTRUCTIONS      <<<<<
         ========================================

     _____     _____
     Patient's Signature                       Date And Time








PSJPATIENT2,TWO                    000-00-0002             02/22/1942
```

6.2.7. Extra Units Dispensed Report
[PSJU EUDD]

The *Extra Units Dispensed Report* option allows the user to print a report showing the amounts, date dispensed, and the initials of the person who entered the dispensed drug. This can be printed by ward group, ward, or by patient. If the user chooses to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the profile may be sorted by patient name or room-bed.

Example: Extra Units Dispensed Report

```
Select Reports Menu Option: EXtra Units Dispensed Report


Enter Start Date and Time: T@1000 (SEP 19, 2000@10:00)
Enter Ending Date and Time: T@2400  (SEP 19, 2000@24:00)


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

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


Select another PATIENT: <Enter>
Select output device: 0;80  TELNET

this may take a while...(you should QUEUE the Extra Units Dispensed report)



                           EXTRA UNITS DISPENSED REPORT        PAGE: 1
                 REPORT FROM: 09/19/00 10:00 TO: 09/19/00  24:00


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


DRUG NAME                                   UNIT  DATE          DISP.
                                                  DISPENSED     BY

ACETAMINOPHEN 650 MG SUPP                      3  09/19/00  12:54 MV
                                               5  09/19/00  12:54 MV
   .......................................     8

BENZOYL PEROXIDE 10% GEL (2OZ)                 2  09/19/00  12:58 PM
   .......................................     2

RANITIDINE 150MG                               3  09/19/00  12:54 MV
                                               3  09/19/00  12:58 PM

   .......................................     6

  TOTAL FOR PSJPATIENT2,TWO..................  16

Press Return to continue...
```

Example: Inpatient Stop Order Notices

```
Select Reports Menu Option: INpatient Stop Order Notices

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

Select PATIENT:    PSJPATIENT2,TWO   000-00-0002  02/22/42  1 West

Enter start date: T (SEP 19, 2000)

Enter stop date: T+7 (SEP 26, 2000)

List IV orders, Unit Dose orders, or All orders: ALL// <Enter>

Select PRINT DEVICE: 0;80   TELNET

...this may take a few minutes...
                    ...you really should QUEUE this report, if possible...
Enter RETURN to continue or '^' to exit: <Enter>
```

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


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

 PSJPATIENT2,TWO              Ward: 1 West
   PID: 000-00-0002      Room-Bed: A-6           Ht(cm):_____(_____)
   DOB: 02/22/1942 (58)     Team: * NF *         Wt(kg):_____(_____)
   Sex: MALE                             Last Admitted: 06/24/1998
    Dx: KDJF                                Discharged: 12/11/12
  CrCL: <Not Found>                            BSA (m2): _____
 Allergies: CARAMEL, CN900, LOMEFLOXACIN, PENTAMIDINE, PENTAZOCINE, CHOCOLATE,
         NUTS, STRAWBERRIES, DUST
 NV Aller.: AMOXICILLIN, AMPICILLIN, TAPE, FISH, FLUPHENAZINE DECANOATE
     ADR:


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

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

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

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

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

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

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




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

6.2.10. Medications Due Worksheet
[PSJ MDWS]

The *Medications Due Worksheet* option creates a report that lists active medications (Unit Dose and IV) that are due within a selected 24-hour period. The user will be able to select by ward group, ward, or individual patients. If the user chooses to select by ward, the administration teams may be specified. The default for the administration team is ALL and multiple administration teams may be entered. If selecting by ward or ward group, the Medications Due Worksheet may be sorted by administration time, patient name, or room-bed. However, if the user chooses to select by patient, multiple patients can be entered.

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

For IV orders that have no schedule, the projected administration times will be calculated based on the order's volume, flow rate, and start time. An asterisk (*****) will be printed for the administration times instead of the projected administration times.

If the MAR ORDER SELECTION DEFAULT prompt for the ward parameter is defined, the default will be displayed at the "Enter medication type(s):" prompt.

The default choice is 2 or Non-IV Medications only if:

1. The MAR ORDER SELECTION DEFAULT parameter was not defined.
2. Selection by Ward group.
3. Selected by patients and patients are from different wards.

The PRN medication orders will be printed if the user enters **YES** at the "Would you like to include PRN Medications (Y/N)? NO//" prompt. PRN orders will be listed after all continuous and one-time orders are printed.

Example: Medications Due Worksheet

```
Select Reports Menu Option: MEDications Due Worksheet

Would you like to include PRN Medications (Y/N)? NO// YES

Enter Start Date and Time: T@1000 (SEP 19, 2000@10:00)

Enter Ending Date and Time: T@2400 (SEP 19, 2000@24:00)

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

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

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

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

Example: Medications Due Worksheet (continued)

```
MEDICATIONS DUE WORKSHEET For: PSJPATIENT2,TWO                   Page:  1
Report from: 09/19/00 10:00 to: 09/19/00 24:00        Report Date: 09/19/00
Continuous/One time Orders for: ALL MEDS


For date: 09/19/00


PSJPATIENT2,TWO      A-6        12:00 09/18 | 09/18  12:00 | 09/22/00  22:00
000-00-0002                          RANITIDINE TAB
1 West                               Give: 150MG PO BID
                                     RN/LPN Init: _____

                                     09/18 | 09/18 12:00 | 09/22/00  22:00
                                     THEOPHYLLINE CAP,SA
                                     Give: 400MG PO QID
                                     TESTING
                                     RN/LPN Init:

                             *     09/19 | 09/19 12:00 | 09/22/00  18:00
                                     AMPICILLIN 1 GM
                                     in
                                     0.45% NACL 1000 ML QID
                                     IV  QID
                                     RN/LPN Init: _____

                             15:00 09/18 | 09/18 12:00 | 09/22/00  22:00
                                     RANITIDINE TAB
                                     Give: 150MG PO BID
                                     RN/LPN Init: _____

                                     09/18 | 09/18 12:00 | 09/22/00  22:00
                                     THEOPHYLLINE CAP,SA
                                     Give: 400MG PO QID
                                     TESTING
                                     RN/LPN Init: _____

                             20:00 09/18 | 09/18 12:00 | 09/22/00  22:00
                                     RANITIDINE TAB
                                     Give: 150MG PO BID
                                     RN/LPN Init: _____

                                     09/18 | 09/18 12:00 | 09/22/00  22:00
                                     THEOPHYLLINE CAP,SA
                                     Give: 400MG PO QID
                                     TESTING
                                     RN/LPN Init:



* Projected admin. times based on order's volume, flow rate, and start time.

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

6.2.11. Patient Profile (Extended)
[PSJ EXTP]

The *Patient Profile (Extended)* option creates a report to allow the viewing of all the orders on file for a patient. The user can view all of the orders that have not been purged or enter a date to start searching from.

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

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

Date to start searching from (optional):  083101

Select another PATIENT: <Enter>

Show PROFILE only, EXPANDED VIEWS only, or BOTH: PROFILE// BOTH

Show SHORT, LONG, or NO activity log? NO// SHORT

Select PRINT DEVICE: <Enter>  DECSERVER
```

```
                INPATIENT  MEDICATIONS     02/28/02 14:12
                      VAMC: XXXXX, NY (500)
- - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
PSJPATIENT1,ONE                  Ward: 1 EAST
  PID: 000-00-0001        Room-Bed: B-12        Ht(cm):_____  (_____)
  DOB: 08/18/20  (81)                           Wt(kg):_____  (_____)
  Sex: MALE                            Admitted: 05/03/00
   Dx: TESTING                   Last transferred: ********
  CrCL: <Not Found>                    BSA (m2): _____
 Allergies: No Allergy Assessment
      ADR:
- - - - - - - - - - - - - - - - - A C T I V E - - - - - - - - - - - - - - - - -
   1     MULTIVITAMINS 5 ML                 C 02/28/02 03/30/02  A
         in 0.9% SODIUM CHLORIDE 1000 ML Q8H
   2     BACLOFEN TAB                       C 02/20/02 03/06/02 A
           Give: 10MG PO QDAILY
           PATIENT SPITS OUT MEDICINE
   3     PREDNISONE TAB                     C 02/25/02 03/11/02 A
           Give: 5MG PO TU-TH-SA@09
   4     RESERPINE TAB                      C 02/20/02 03/06/02 A
           Give: 1MG PO QDAILY
   5     PANCREATIN CAP,ORAL                O 02/21/02 03/23/02 A
           Give: 1 CAPSULE PO ONCE
- - - - - - - - - - - - - - - N O N - A C T I V E - - - - - - - - - - - - - - -
   6     CEFTAZIDIME INJ                    ? ******** ******** N
           Give: 1 GM IV QDAILY
   7     TRACE ELEMENTS INJ                 ? ******** ******** N
           Give: 1 ML IV QDAILY
- - - - - - - - - - - - - - - N O N - A C T I V E - - - - - - - - - - - - - - -
   8     in DEXTROSE 5% 1000 ML 1 ml/hr     ? ******** ********  P
   9     CEFAZOLIN INJ                      ? ******** ******** P
           Give: 1GM/1VIAL IVPB ONE TIME
  10     PENICILLIN INJ,SUSP               ? ******** ******** P
           Give: 600000UNT/1ML IM BID
  11     PENICILLIN INJ,SUSP               ? ******** ******** P
           Give: 600000UNT/1ML IM QDAILY
- - - - - - - - - - - - - - - N O N - A C T I V E - - - - - - - - - - - - - - -
  12     CEFAZOLIN 1 GM                     C 11/02/01 12/07/01  E
         in 5% DEXTROSE 1000 ML QID
  13     zC2TESTDRUG 1 LITER                C 12/14/01 12/21/01  E
         in 5% DEXTROSE 1000 ML QDAILY
Enter RETURN to continue or '^' to exit: <Enter>
```

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

10. Glossary

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

ListMan Action Prompts

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

Patient/Order Action Prompts

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

Patient/Order Action Prompts
(continued)

	OC	On Call
	NL	Print New IV Labels
	RL	Reprint IV Labels
	RC	Recycled IV
	DT	Destroyed IV
	CA	Cancelled IV

Hidden Action Prompts

	LBL	Label Patient/Report
	JP	Jump to a Patient
	OTH	Other Pharmacy Options
	MAR	MAR Menu
	DC	Speed Discontinue
	RN	Speed Renew
	SF	Speed Finish
	SV	Speed Verify
	CO	Copy
	N	Mark Not to be Given
	I	Mark Incomplete
	DIN	Drug Restr/Guide
	DA	Display Drug Allergies
	OCI	Overrides/Interventions
	CK	Check Interactions

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

Activity Reason Log   The complete list of all activity related to a patient order. The log contains the action taken, the date of the action, and the user who took the action.

Activity Ruler   The activity ruler provides a visual representation of the relationship between manufacturing times, doses due, and order start times. The intent is to provide the on-the-floor user with a means of tracking activity in the IV room and determining when to call for doses before the normal delivery. The activity ruler can be enabled or disabled under the *SIte Parameters (IV)* option.

Additive	A drug that is added to an IV solution for the purpose of parenteral administration. An additive can be an electrolyte, a vitamin or other nutrient, or an antibiotic. Only an electrolyte or multivitamin type additives can be entered as IV fluid additives in CPRS.
ADMINISTRATION SCHEDULE File	File #51.1. This file contains administration schedule names and standard dosage administration times. The name is a common abbreviation for an administration schedule type (e.g., QID, Q4H, PRN). The administration time entered is in military time, with each time separated from the next by a dash, and times listed in ascending order.
Administering Teams	Nursing teams used in the administration of medication to the patients. There can be a number of teams assigned to take care of one ward, with specific rooms and beds assigned to each team.
Admixture	An admixture is a type of intravenously administered medication comprised of any number of additives (including zero) in one solution. It is given at a specified flow rate; when one bottle or bag is empty, another is hung.
APSP INTERVENTION File	File #9009032.4. This file is used to enter pharmacy interventions. Interventions in this file are records of occurrences where the pharmacist had to take some sort of action involving a particular prescription or order. A record would record the provider involved, why an intervention was necessary, what action was taken by the pharmacists, etc.
Average Unit Drug Cost	The total drug cost divided by the total number of units of measurement.
BSA	Body Surface Area. The Dubois formula is used to calculate the Body Surface Area using the following formula: $$BSA\ (m^2) = 0.20247 \times Height\ (m)^{0.725} \times Weight\ (kg)^{0.425}$$ The equation is performed using the most recent patient height and weight values that are entered into the vitals package. The calculation is not intended to be a replacement for independent clinical judgment.

BCMA	A VistA computer software package named Bar Code Medication Administration. This package validates medications against active orders prior to being administered to the patient.
Calc Start Date	Calculated Start Date. This is the date that would have been the default Start Date/Time for an order if no duration was received from CPRS. Due to the existence of a duration, the default Start Date/Time of the order becomes the <u>expected first dose</u>.
Calc Stop Date	Calculated Stop Date. This is the date that would have been the default Stop Date/Time for an order if no duration was received from CPRS. Due to the existence of a duration, the default Stop Date/Time of the order becomes the expected first dose plus the duration.
Chemotherapy	Chemotherapy is the treatment or prevention of cancer with chemical agents. The chemotherapy IV type administration can be a syringe, admixture, or a piggyback. Once the subtype (syringe, piggyback, etc.) is selected, the order entry follows the same procedure as the type that corresponds to the selected subtype (e.g., piggyback type of chemotherapy follows the same entry procedure as regular piggyback IV).
Chemotherapy "Admixture"	The Chemotherapy "Admixture" IV type follows the same order entry procedure as the regular admixture IV type. This type is in use when the level of toxicity of the chemotherapy drug is high and is to be administered continuously over an extended period of time (e.g., hours or days).
Chemotherapy "Piggyback"	The Chemotherapy "Piggyback" IV type follows the same order entry procedure as the regular piggyback IV type. This type of chemotherapy is in use when the chemotherapy drug does not have time constraints on how fast it must be infused into the patient. These types are normally administered over a 30 - 60 minute interval.
Chemotherapy "Syringe"	The Chemotherapy "Syringe" IV type follows the same order entry procedure as the regular syringe IV type. Its administration may be continuous or intermittent. The pharmacist selects this type when the level of toxicity of the chemotherapy drug is low and needs to be

infused directly into the patient within a short time interval (usually 1-2 minutes).

Child Orders   One or more Inpatient Medication Orders that are associated within a Complex order and are linked together using the conjunctions AND and OR to create combinations of dosages, medication routes, administration schedules, and order durations.

Clinic Group   A clinic group is a combination of outpatient clinics that have been defined as a group within Inpatient Medications to facilitate processing of orders.

Complex Order   An order that is created from CPRS using the Complex order dialog and consists of one or more associated Inpatient Medication orders, known as "child" orders.

Continuous IV Order   Inpatient Medications IV order not having an administration schedule. This includes the following IV types: Hyperals, Admixtures, Non-Intermittent Syringe, and Non-Intermittent Syringe or Admixture Chemotherapy.

Continuous Syringe   A syringe type of IV that is administered continuously to the patient, similar to a hyperal IV type. This type of syringe is commonly used on outpatients and administered automatically by an infusion pump.

Coverage Times   The start and end of coverage period designates administration times covered by a manufacturing run. There must be a coverage period for all IV types: admixtures and primaries, piggybacks, hyperals, syringes, and chemotherapy. For one type, admixtures for example, the user might define two coverage periods; one from 1200 to 0259 and another from 0300 to 1159 (this would mean that the user has two manufacturing times for admixtures).

CPRS   A VistA computer software package called Computerized Patient Record Systems. CPRS is an application in VistA that allows the user to enter all necessary orders for a patient in different packages from a single application. All pending orders that appear in the Unit Dose and IV modules are initially entered through the CPRS package.

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 Drug-Drug Interaction   One of two types of drug-drug interactions identified by order checks. The other type is a "significant" drug-drug interaction

Cumulative Doses   The number of IV doses actually administered, which equals the total number of bags dispensed less any recycled, destroyed, or cancelled bags.

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.

Default Answer   The most common answer, predefined by the system to save time and keystrokes for the user. The default answer appears before the two slash marks (//) and can be selected by the user by pressing <**Enter**>.

Dispense Drug   The Dispense Drug is pulled from the DRUG file (#50) and usually has the strength attached to it (e.g., Acetaminophen 325 mg). Usually, the name alone without a strength attached is the Orderable Item name.

Delivery Times   The time(s) when IV orders are delivered to the wards.

Dosage Ordered   After the user has selected the drug during order entry, the dosage ordered prompt is displayed.

DRUG ELECTROLYTES file   File #50.4. This file contains the names of anions/cations, and their concentration units.

DRUG file   File #50. This file holds the information related to each drug that can be used to fill a prescription.

Duration	The length of time between the Start Date/Time and Stop Date/Time for an Inpatient Medications order. The default duration for the order can be specified by an ordering clinician in CPRS by using the Complex Dose tab in the Inpatient Medications ordering dialog.
Electrolyte	An additive that disassociates into ions (charged particles) when placed in solution.
Entry By	The name of the user who entered the Unit Dose or IV order into the computer.
Hospital Supplied Self Med	Self-medication, which is to be supplied by the Medical Center's pharmacy. Hospital supplied self med is only prompted for if the user answers Yes to the SELF MED: prompt during order entry.
Hyperalimentation (Hyperal)	Long term feeding of a protein-carbohydrate solution. Electrolytes, fats, trace elements, and vitamins can be added. Since this solution generally provides all necessary nutrients, it is commonly referred to as Total Parenteral Nutrition (TPN). A hyperal is composed of many additives in two or more solutions. When the labels print, they show the individual electrolytes in the hyperal order.
Infusion Rate	The designated rate of flow of IV fluids into the patient.
INPATIENT USER PARAMETERS file	File #53.45. This file is used to tailor various aspects of the Inpatient Medications package with regards to specific users. This file also contains fields that are used as temporary storage of data during order entry/edit.
INPATIENT WARD PARAMETERS file	File #59.6. This file is used to tailor various aspects of the Inpatient Medications package with regards to specific wards.
Intermittent Syringe	A syringe type of IV that is administered periodically to the patient according to an administration schedule.
Internal Order Number	The number on the top left corner of the label of an IV bag in brackets ([ ]). This number can be used to speed up the entry of returns and destroyed IV bags.
IV ADDITIVES file	File #52.6. This file contains drugs that are used as additives in the IV room. Data entered includes drug generic name, print name, drug information, synonym(s), dispensing units, cost per unit, days for IV

order, usual IV schedule, administration times, electrolytes, and quick code information.

IV CATEGORY file
File #50.2. This file allows the user to create categories of drugs in order to run "tailor-made" IV cost reports for specific user-defined categories of drugs. The user can group drugs into categories.

IV Duration
The duration of an order may be entered in CPRS at the IV DURATION OR TOTAL VOLUME field in the IV Fluids order dialog. The duration may be specified in terms of volume (liters or milliliters), or time (hours or days). Inpatient Medications uses this value to calculate a default stop date/time for the order at the time the order is finished.

IV Label Action
A prompt, requesting action on an IV label, in the form of "Action ( )", where the valid codes are shown in the parentheses. The following codes are valid:
    P – Print a specified number of labels now.
    B – Bypass any more actions.
    S – Suspend a specified number of labels for the IV room to print on demand.

IV Room Name
The name identifying an IV distribution area.

IV SOLUTIONS file
File #52.7. This file contains drugs that are used as primary solutions in the IV room. The solution must already exist in the DRUG file (#50) to be selected. Data in this file includes: drug generic name, print name, status, drug information, synonym(s), volume, and electrolytes.

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

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

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

LVP	Large Volume Parenteral — Admixture. A solution intended for continuous parenteral infusion, administered as a vehicle for additive(s) or for the pharmacological effect of the solution itself. It is comprised of any number of additives, including zero, in one solution. An LVP runs continuously, with another bag hung when one bottle or bag is empty.
Manufacturing Times	The time(s) that designate(s) the general time when the manufacturing list will be run and IV orders prepared. This field in the *SIte Parameters (IV)* option (IV ROOM file (#59.5)) is for documentation only and does not affect IV processing.
MEDICATION ADMINISTERING TEAM file	File #57.7. This file contains wards, the teams used in the administration of medication to that ward, and the rooms/beds assigned to that team.
MEDICATION INSTRUCTION file	File #51. This file is used by Outpatient Pharmacy and Unit Dose Special Instructions. (Not used by IV Other Print Info.) It contains the medication instruction name, expansion, and intended use.
MEDICATION ROUTES file	File #51.2. This file contains medication route names. The user can enter an abbreviation for each route to be used at their site. The abbreviation will most likely be the Latin abbreviation for the term.
Medication Routes/ Abbreviations	Route by which medication is administered (e.g., oral). The MEDICATION ROUTES file (#51.2) contains the routes and abbreviations, which are selected by each VAMC. The abbreviation cannot be longer than five characters to fit on labels and the MAR. The user can add new routes and abbreviations as appropriate.
Non-Formulary Drugs	The medications that are defined as commercially available drug products not included in the VA National Formulary.
Non-VA Meds	Term that encompasses any Over-the-Counter (OTC) medications, Herbal supplements, Veterans Health Administration (VHA) prescribed medications but purchased by the patient at an outside pharmacy, and medications prescribed by providers outside VHA. All Non-VA Meds must be documented in patients' medical records.

Non-Verified Orders	Any order that has been entered in the Unit Dose or IV module that has not been verified (made active) by a nurse and/or pharmacist. Ward staff may not verify a non-verified order.
Orderable Item	An Orderable Item name has no strength attached to it (e.g., Acetaminophen). The name with a strength attached to it is the Dispense Drug name (e.g., Acetaminophen 325mg).
Order Check	Order checks (drug-allergy/ADR interactions, drug-drug, duplicate drug, and duplicate drug class) are performed when a new medication order is placed through either the CPRS or Inpatient Medications applications. They are also performed when medication orders are renewed, when Orderable Items are edited, or during the finishing process in Inpatient Medications. This functionality will ensure the user is alerted to possible adverse drug reactions and will reduce the possibility of a medication error.
Order Sets	An Order Set is a set of N pre-written orders. (N indicates the number of orders in an Order Set is variable.) Order Sets are used to expedite order entry for drugs that are dispensed to all patients in certain medical practices and procedures.
Order View	Computer option that allows the user to view detailed information related to one specific order of a patient. The order view provides basic patient information and identification of the order variables.
Parenteral	Introduced by means other than the digestive track.
Patient Profile	A listing of a patient's active and non-active Unit Dose and IV orders. The patient profile also includes basic patient information, including the patient's name, social security number, date of birth, diagnosis, ward location, date of admission, reactions, and any pertinent remarks.
PECS	Pharmacy Enterprise Customization System. A Graphical User Interface (GUI) web-based application used to research, update, maintain, and report VA customizations of the commercial-off-the-shelf (COTS) vendor database used to perform Pharmacy order checks such as drug-drug interactions, duplicate therapy, and dosing.

Pending Order	A pending order is one that has been entered by a provider through CPRS without Pharmacy or Nursing finishing the order. Once Pharmacy or Nursing has finished and verified the order, it will become active.
PEPS	Pharmacy Enterprise Product System. A re-engineering of pharmacy data and its management practices developed to use a commercial off-the-shelf (COTS) drug database, currently First DataBank (FDB) Drug Information Framework (DIF), to provide the latest identification and safety information on medications.
Pharmacist Intervention	A recommendation provided by a pharmacist through the Inpatient Medications system's Intervention process acknowledging the existence of a critical drug-drug interaction and/or allergy/ADR interaction, and providing justification for its existence. There are two ways an intervention can be created, either via the Intervention Menu, or in response to Order Checks.
PHARMACY SYSTEM file	File #59.7. This file contains data that pertains to the entire Pharmacy system of a medical center, and not to any one site or division.
Piggyback	Small volume parenteral solution for intermittent infusion. A piggyback is comprised of any number of additives, including zero, and one solution; the mixture is made in a small bag. The piggyback is given on a schedule (e.g., Q6H). Once the medication flows in, the piggyback is removed; another is not hung until the administration schedule calls for it.
Possible Dosages	Dosages that have a numeric dosage and numeric dispense units per dose appropriate for administration. For a drug to have possible dosages, it must be a single ingredient product that is matched to the VA PRODUCT file (#50.68). The VA PRODUCT file (#50.68) entry must have a numeric strength and the dosage form/unit combination must be such that a numeric strength combined with the unit can be an appropriate dosage selection.
Pre-Exchange Units	The number of actual units required for this order until the next cart exchange.

Primary Solution   A solution, usually an LVP, administered as a vehicle for additive(s) or for the pharmacological effect of the solution itself. Infusion is generally continuous. An LVP or piggyback has only one solution (primary solution). A hyperal can have one or more solutions.

Print Name   Drug generic name as it is to appear on pertinent IV output, such as labels and reports. Volume or Strength is not part of the print name.

Print Name{2}   Field used to record the additives contained in a commercially purchased premixed solution.

Profile   The patient profile shows a patient's orders. The Long profile includes all the patient's orders, sorted by status: active, non-verified, pending, and non-active. The Short profile will exclude the patient's discontinued and expired orders.

Prompt   A point at which the system questions the user and waits for a response.

Provider   Another term for the physician/clinician involved in the prescription of an IV or Unit Dose order for a patient.

Provider Override Reason   A reason supplied by a provider through the CPRS system, acknowledging a critical drug-drug interaction and/or allergy/ADR interaction and providing justification for its existence.

PSJI MGR   The name of the *key* that allows access to the supervisor functions necessary to run the IV medications software. Usually given to the Inpatient Medications package coordinator.

PSJI PHARM TECH   The name of the *key* that must be assigned to pharmacy technicians using the IV module. This key allows the technician to finish IV orders, but not verify them.

PSJI PURGE   The *key* that must be assigned to individuals allowed to purge expired IV orders. This person will most likely be the IV application coordinator.

PSJI RNFINISH   The name of the *key* that is given to a user to allow the finishing of IV orders. This user must also be a holder of the PSJ RNURSE key.

PSJI USR1	The *primary menu option* that may be assigned to nurses.
PSJI USR2	The *primary menu option* that may be assigned to technicians.
PSJU MGR	The name of the *primary menu* and of the *key* that must be assigned to the pharmacy package coordinators and supervisors using the Unit Dose Medications module.
PSJU PL	The name of the *key* that must be assigned to anyone using the Pick List options.
PSJ PHARM TECH	The name of the *key* that must be assigned to pharmacy technicians using the Unit Dose Medications module.
PSJ RNFINISH	The name of the *key* that is given to a user to allow the finishing of a Unit Dose order. This user must also be a holder of the PSJ RNURSE key.
PSJ RNURSE	The name of the *key* that must be assigned to nurses using the Unit Dose Medications module.
PSJ RPHARM	The name of the *key* that must be assigned to a pharmacist to use the Unit Dose Medications module. If the package coordinator is also a pharmacist he/she must also be given this key.
Quick Code	An abbreviated form of the drug generic name (from one to ten characters) for IV orders. One of the three drug fields on which lookup is done to locate a drug. Print name and synonym are the other two. Use of quick codes will speed up order entry, etc.
Report Device	The device, identified by the user, on which computer-generated reports selected by the user will be printed.
Schedule	The frequency of administration of a medication (e.g., QID, QDAILY, QAM, STAT, Q4H).
Schedule Type	Codes include: **O** - one time (i.e., STAT - only once), **P** - PRN (as needed; no set administration times). **C**-continuous (given continuously for the life of the order; usually with set administration times). **R** - fill on request (used for items that are not automatically put in the cart - but are filled on the nurse's request. These can be multidose items (e.g., eye wash, kept for use by one patient and is filled on request when the supply is

exhausted)). And **OC** - on call (one time with no specific time to be given, i.e., 1/2 hour before surgery).

Scheduled IV Order

Inpatient Medications IV order having an administration schedule. This includes the following IV Types: IV Piggyback, Intermittent Syringe, IV Piggyback Chemotherapy, and Intermittent Syringe Chemotherapy.

Self Med

Medication that is to be administered by the patient to himself.

Standard Schedule

Standard medication administration schedules stored in the ADMINISTRATION SCHEDULE file (#51.1).

Start Date/Time

The date and time an order is to begin.

Status

A - active, **E** - expired, **R** - renewed (or reinstated), **D** - discontinued, **H** - on hold, **I** - incomplete, or **N** - non-verified, **U** – unreleased, **P** – pending, **O** – on call, **DE** – discontinued edit, **RE** – reinstated, **DR** – discontinued renewal.

Stop Date/Time

The date and time an order is to expire.

Stop Order Notices

A list of patient medications that are about to expire and may require action.

Syringe

Type of IV that uses a syringe rather than a bottle or bag. The method of infusion for a syringe-type IV may be continuous or intermittent.

Syringe Size

The syringe size is the capacity or volume of a particular syringe. The size of a syringe is usually measured in number of cubic centimeters (ccs).

TPN

Total Parenteral Nutrition. The intravenous administration of the total nutrient requirements of the patient. The term TPN is also used to mean the solution compounded to provide those requirements.

Units per Dose

The number of Units (tablets, capsules, etc.) to be dispensed as a Dose for an order. Fractional numbers will be accepted.

VA Drug Class Code   A drug classification system used by VA that separates drugs into different categories based upon their characteristics. IV cost reports can be run for VA Drug Class Codes.

VDL   Virtual Due List. This is a Graphical User Interface (GUI) application used by the nurses when administering medications.

Ward Group   A ward group indicates inpatient nursing units (wards) that have been defined as a group within Inpatient Medications to facilitate processing of orders.

WARD GROUP file   File #57.5. This file contains the name of the ward group, and the wards included in that group. The grouping is necessary for the pick list to be run for specific carts and ward groups.

Ward Group Name   A field in the WARD GROUP file (#57.5) used to assign an arbitrary name to a group of wards for the pick list and medication cart.

WARD LOCATION file   File #42. This file contains all of the facility ward locations and their related data, i.e., Operating beds, Bed section, etc. The wards are created/edited using the *Ward Definition* option of the ADT module.

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