



INPATIENT MEDICATIONS

TECHNICAL MANUAL/ SECURITY GUIDE

Version 5.0
December 1997

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Department of Veterans Affairs
Product Development

Revision History

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

Date	Revised Pages	Patch Number	Description
01/2013	i-ii 23 25 32 47-48 69-70b 86 94a 118 120-122	PSJ*5*260, PSJ*5*268	Updated Revision History Updated Routines: PSJADM, PSJCLNOC, PSJDGAL2, PSJDGCK, PSJOEA2, PSJUTL5 Sentence reworded by CPS Added option PSJ CHECK DRUG INTERACTION Added new Protocols Fix page numbering to eliminate pages with number 70 Changed wording in Section 14.5 Added Integration Agreement Added three new Hidden Actions Added BSA, CrCL, & DATUP to the Glossary REDACTED
12/2012	i-ii, vi-vii, 81-82, 82a- 82b	PSJ*5*284	Added instructions for editing the Device File for ATC Device to use Network Channel. REDACTED
09/2012	i, 21-23, 69, 94a	PSJ*5*267	Added new Routine Added new API Added new Integration Agreement REDACTED
01/2012	i-ii, v-viii 22, 23 69 94	PSJ*5*254	Updated Table of Contents Updated Routines Added API Added 5653 and 5654 Inpatient Medications Integration Agreements REDACTED
04/2011	i, v, vi, vii, vii, 5- 8b, (changed flow) 22, 23, 24, removed 25-26, changed	PSJ*5*181	Changes to <i>Revision History</i> , <i>Table of Contents</i> ; added new field to PHARMACY SYSTEM File (#59.7), added new field to the INPATIENT WARD PARAMETERS File (#59.6). Added information re: the Pharmacy Reengineering (PRE) API Manual under “ <i>Callable Routines</i> ”; removed entire section 5.3, Routine Mapping, and all its sub-sections; added Health Level Seven (HL7) data field under segment { RXC}. Added the following “ <i>Inpatient Medications Custodial Integration Agreements</i> ”: 4074, 4264, 4580, 5001, 5057; 5058, 5306, 5385. Added two

Date	Revised Pages	Patch Number	Description
	53, 85, 86, 93-94;94a-b, 121--130		packages, HWSC and VistALink, to <i>External Relationships</i> , under <i>Packages Needed to Run Inpatient Medications</i> . Added the following call routines and their entry points: OROCAPI, PSSDSAPD, PSSDSAPI, PSSFDBRT, PSODDPR4, PSODRDU2. Added the items DATUP, MOCHA, PECS, and PEPS in Glossary, which shifted all subsequent glossary items. Added routines PSJMISC2 & PSJOCVAR to the routines table and removed Section 5.3 REDACTED REDACTED
02/11	i, 53, 62, 64, 65	PSJ*5*226	Added to RXC section Field 5, “Additive Frequency” in HL7 Ordering Fields; updated Front Door – IV Fluids table with Field 5; updated Back Door – IV Fluids table with Field 5; updated example. REDACTED
06/10	i, 22-23	PSJ*5*113	Added routine PSGSICH1. REDACTED
02/10	i, 23	PSJ*5*214	Added PSJQUTIL to the routine list in Section 5.1 for Patients on Specific Drug(s) Multidivisional Enhancements Project. REDACTED
12/09	22-23	PSJ*5*222	Added routine PSGOEF2. REDACTED
08/08	vi, 23, 51-53, 57-58, 60-61, 63, 65, 65a-65b	PSJ*5*134	Parameters for escaping special characters added. New HL7 messages added. New routines added. HL7 order fields table contains an asterisk for each field that has special escaping characters. REDACTED
02/07	74-76	PSJ*5*178	MED ROUTE now appears in larger font on IV labels from the Zebra bar code printer. Med ROUTE now prints on the IV labels for bar-code enabled printers, and it prints in larger font than surrounding text. REDACTED
09/06	23, 94	PSJ*5*172	Encapsulation Cycle II project: Added PSJ53P1 to the Routine List in Section 5.1. Added DBIA 4537 to DBIA list. Changed the date on the Title Page to December 1997. REDACTED
05/06	v-viii 8a-8b 66-68b	PSJ*5*154	In Section 2.2.2 Added “PRIORITIES FOR NOTIFICATION” field. In Section 9.5, made correction to include the priority of ASAP in notifications. Added information regarding the three

Date	Revised Pages	Patch Number	Description
			notifications parameters. REDACTED
12/2005	23	PSJ*5*146	Remote Data Interoperability (RDI) Project: Added PSJLMUT2 to the Routine List in Section 5.1. REDACTED
11/2005	All	PSJ*5*163	Encapsulation Cycle II project: Added PSJ59P5 to the Routine List in Section 5.1. Added DBIA 4819 to DBIA list. Deleted DBIAs 172, 634, and 1882 from the DBIA list. Reissued entire document due to a page numbering issue. REDACTED

(This page included for two-sided copying.)

Preface

This technical manual is written for the Information Resources Management Service (IRMS) Chief/Site Manager and the Automated Data Processing Application Coordinator (ADPAC) for implementation and installation of the Inpatient Medications package. The main text of the manual outlines routine descriptions, file list, site configuration issues, variables, resource requirements, and package security.

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PSIVUTL	PSIVUTL1	PSIVUWL	PSIVVW1
PSIVWCR	PSIVWCR1	PSIVWL	PSIVWL1
PSIVWRP	PSIVXREF	PSIVXU	PSJ53P1
PSJ59P5	PSJAC	PSJADM	PSJADT
PSJADT0	PSJADT1	PSJADT2	PSJALG
PSJAPIDS	PSJBCMA	PSJBCMA1	PSJBCMA2
PSJBCMA3	PSJBCMA4	PSJBCMA5	PSJBLDOC
PSJCLNOC	PSJCOM	PSJCOM1	PSJCOMR
PSJCOMV	PSJDCHK	PSJDCU	PSJDDUT
PSJDDUT2	PSJDDUT3	PSJDEA	PSJDGAL
PSJDGAL2	PSJDGCK	PSJDIN	PSJDOSE
PSJDPT	PSJEEU	PSJEEU0	PSJENV
PSJEXP	PSJEXP0	PSJFTR	PSJGMRA
PSJH1	PSJHEAD	PSJHEH	PSJHIS
PSJHL10	PSJHL11	PSJHL2	PSJHL3
PSJHL4	PSJHL5	PSJHL6	PSJHL7
PSJHL9	PSJHLERR	PSJHLU	PSJHLV
PSJHVAR5	PSJLIACT	PSJLIFN	PSJLIFNI
PSJLIORD	PSJLIPRF	PSJLIUTL	PSJLIVFD
PSJLIVMD	PSJLMAL	PSJLMDA	PSJLMGUD
PSJLMHED	PSJLMPRI	PSJLMPRU	PSJLMUDE
PSJLMUT1	PSJLMUT2	PSJLMUTL	PSJLOAD
PSJLOI	PSJMAI	PSJMAI1	PSJMDIR
PSJMDIR1	PSJMDFS	PSJMEDS	PSJMISC
PSJMISC2	PSJMIV	PSJMON	PSJMP
PSJMPEND	PSJMPRT	PSJMPRTU	PSJMUTL
PSJNTEG	PSJNTEG0	PSJNTEG1	PSJO
PSJO1	PSJO2	PSJO3	PSJOC
PSJOCDC	PSJOCDI	PSJOCDS	PSJOCSDS
PSJOCDT	PSJOCERR	PSJOCOR	PSJOCVAR
PSJOE	PSJOE0	PSJOE1	PSJOEA
PSJOEA1	PSJOEA2	PSJOEEW	PSJOERI
PSJORAPI	PSJORDA	PSJOREN	PSJORMA1
PSJORMA2	PSJORMAR	PSJORP2	PSJORPOE
PSJORRE	PSJORRE1	PSJORREN	PSJORRN
PSJORRN1	PSJORUT2	PSJORUTL	PSJORRO
PSJP	PSJPATMR	PSJPDIR	PSJPDV
PSJPDV0	PSJPDV1	PSJPL0	PSJPR
PSJPR0	PSJPST50	PSJPXRM1	PSJQPR
PSJQUTIL	PSJRXI	PSJSPU	PSJUTL5

The following routines are not used in this version of Inpatient Medications. They were exported in the initial Kernel Installation and Distribution System (KIDS) build as Delete at Site.

PSGDCR	PSGDCT0	PSGEXP	PSGEXP0
PSGMMPST	PSGOROE0	PSGORU	PSGQOS
PSIVNVO	PSIVOEDO	PSIVOENT	PSIVOEPT
PSIVRD0	PSIVRD0	PSJMAN	PSJOAC
PSJOAC0	PSJOE8	PSJOE81	PSJOEE
PSJOER	PSJOER0	PSJORA	PSJORIN
PSJUTL	PSJUTL1	PSJUTL2	PSJUTL3

5.2. Callable Routines

Entry points provided by the Inpatient Medications package to other packages can be found in the External Relationships section of this manual. No other routines are designated as callable from outside of this package. Additional information on other external calls and their entry points can be found on the VA Software Document Library (VDL). Under the Clinical Section select the Pharm: Inpatient Medications page and then select the “API Manual - Pharmacy Reengineering (PRE)”.

5.2.1. Deleting Inpatient Routines

- Since this initial version is distributed using KIDS, the transport global is automatically deleted after the install. If the plan is to delete existing Inpatient Medications routines before loading V. 5.0, be sure not to delete PSGW* (Ward Stock) routines. These routines are not included as part of Inpatient Medications.
- The following Inpatient Medications routines were sent with a past version of the Kernel, and are no longer needed. They can be deleted.
 - PSGZ1TSK
 - PSGZ2TSK
 - PSIVZTSK



Note: It is okay if any of these routines are missing, because they are no longer used.

The information contained on pages 25 & 26 has been removed from the manual because mapping is no longer required now that all routines reside in ROU.

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7. Exported Options

7.1. Stand-alone Options

All of the Inpatient Medications package options are designed to stand-alone and can be accessed without first accessing the top-level menu. All of the options can be placed on menus other than their original menu without any additional editing.

7.2 Top-level Menus

There is no top-level menu for Inpatient Medications. The Inpatient Medications options are included in the IV and Unit Dose top-level menus.

7.2.1. Menu Assignment

Assign the following menus to the Inpatient Medications users:

- | | |
|------------------|---|
| PSJU MGR | This is the only Unit Dose Medications menu, and is to be assigned to all Unit Dose users. |
| PSJI MGR | This IV Medications menu is to be assigned to the pharmacists, inpatient supervisors, and package coordinators. |
| PSJI USR1 | This IV Medications menu is to be assigned to the nurses. |
| PSJI USR2 | This IV Medications menu is to be assigned to the pharmacy technicians. |

7.2.2 Menu Placement

It is strongly recommended that the user does not place the Inpatient Medications (IV and Unit Dose) menus under the Outpatient Pharmacy menu. It is suggested that they be placed on the same menu as the Outpatient Pharmacy menu instead.

Although it has been common practice to place the Inpatient Medications top-level menus under the Outpatient Pharmacy menu, this can cause <STORE> errors.

7.3 Options

The following options are exported with the Inpatient Medications package:

<u>Option Name</u>	<u>Menu Text</u>
PSJ AC SET-UP	AUto-Discontinue Set-Up
PSJ CD	Clinic Definition
PSJ CHECK DRUG INTERACTION	Check Drug Interaction
PSJ EXP	INpatient Stop Order Notices
PSJ EXTP	Patient Profile (Extended)
PSJ IWP EDIT	Inpatient Ward Parameters Edit
PSJ MDWS	Medications Due Worksheet
PSJ OAOPT	Order Action on Patient Transfer
PSJ OE	Inpatient Order Entry
PSJ PARAM EDIT MENU	PARAmeters Edit Menu
PSJ PDV	Patients on Specific Drug(s)
PSJ PR	Inpatient Profile
PSJ SEUP	Inpatient User Parameters Edit
PSJ SYS EDIT	Systems Parameters Edit
PSJ UD ALIGN LABEL	Align Unit Dose Labels
PSJ UEUP	Edit Inpatient User Parameters
PSJI 200	Correct Changed Names in IV Orders
PSJI ACTIVE	Active Order List (IV)
PSJI ALIGNMENT	Align Labels (IV)

9.3 Protocol Descriptions

The Inpatient Medications package sends the following protocols for use in V. 5.0. These protocols are automatically installed when the Inpatient Medications initial installation is run.

The protocols with “PAT” as part of their name assume that the patient has already been selected through CPRS before the protocol is selected. The other protocols will prompt the user for patients.

<u>Protocol Name</u>	<u>Item Text</u>
PSJ DISPLAY DRUG ALLERGIES	Display Drug Allergies
PSJ LM 14D MAR	14 Day MAR
PSJ LM 24H MAR	24 Hour MAR
PSJ LM 7D MAR	7 Day MAR
PSJ LM AP1	Action Profile #1
PSJ LM AP2	Action Profile #2
PSJ LM BPI HIDDEN ACTIONS	Brief Patient Info Hidden Actions Menu
PSJ LM BRIEF PATIENT INFO MENU	Brief Allergy Display
PSJ LM BYPASS	Bypass
PSJ LM CWAD	CWAD Information
PSJ LM DC	Discontinue
PSJ LM DETAILED ALLERGY	Detailed Allergy/ADR List
PSJ LM DETAILED ALLERGY MENU	ALLERGY/ADR LIST MENU
PSJ LM DIN	Drug Restriction/Guideline
PSJ LM DRUG CHECK	Check Interactions
PSJ LM EDIT ALLERGY/ADR DATA	Enter/Edit Allergy/ADR Data
PSJ LM EDIT NEW	
PSJ LM EXTP	Patient Profile (Extended)
PSJ LM FINISH	Finish
PSJ LM FINISH MENU	
PSJ LM FLAG	Flag
PSJ LM HOLD	Hold
PSJ LM INTERVENTION DELETE	Delete Pharmacy Intervention
PSJ LM INTERVENTION EDIT	Edit Pharmacy Intervention
PSJ LM INTERVENTION NEW ENTRY	Enter Pharmacy Intervention
PSJ LM INTERVENTION PRINTOUT	Print Pharmacy Intervention
PSJ LM INTERVENTION VIEW	View Pharmacy Intervention
PSJ LM IV NEW SELECT ORDER	
PSJ LM IV OE MENU	IV ORDER ENTRY MENU
PSJ LM IV SELECT ORDER	Select Order
PSJ LM LABEL PRINT/REPRINT MENU	Label Print/Reprint
PSJ LM MAR MENU	MAR Menu
PSJ LM MDWS	Medications Due Worksheet
PSJ LM NEW ORDER	New Order Entry

<u>Protocol Name</u>	<u>Item Text</u>
PSJ LM NEW ORDER FROM PROFILE	New Order Entry
PSJ LM NEW SELECT ALLERGY	
PSJ LM NEW SELECT ORDER	
PSJ LM OE MENU	ORDER ENTRY MENU
PSJ LM ORDER VIEW HIDDEN ACTIONS	Order View Hidden Actions Menu
PSJ LM OTHER PHARMACY OPTIONS	Other Pharmacy Options
PSJ LM OVERRIDES	Overrides/Interventions
PSJ LM PAT PR	Inpatient Medications Profile
PSJ LM PATIENT DATA	Patient Record Update
PSJ LM PATIENT INFO	Patient Information
PSJ LM PENDING ACTION	Pending Order Actions
PSJ LM PHARMACY INTERVENTION MENU	Pharmacy Intervention Menu
PSJ LM PNV JUMP	Jump to a Patient
PSJ LM PRINT OUTPATIENT PROFILE	Outpatient Prescriptions
PSJ LM PROFILE HIDDEN ACTIONS	Profile Hidden Actions Menu
PSJ LM PROFILE MENU	Patient Profiles
PSJ LM RETURNS/DESTROYED MENU	Returns/Destroyed Menu
PSJ LM SELECT ORDER	Select Order
PSJ LM SHOW PROFILE	View Profile
PSJ OR MENU	Inpatient Medications Ward Reports
PSJ OR PAT ADT	Inpatient Medications Actions on Patient ADT
PSJ OR PAT MENU	Inpatient Medications Patient Reports
PSJ OR PAT OE	Inpatient Medications
PSJ OR PAT OE MENU	Inpatient Medications
PSJ OR PAT PR	Inpatient Medications Profile
PSJ OR PAT PR MENU	Inpatient Medications Profiles
PSJ OR PR	Inpatient Medications Profile
PSJ PC IV AC/EDIT ACTION	IV ACCEPT EDIT ACTIONS
PSJ PC IV ACCEPT	Accept
PSJ PC IV CANCELLED	Cancelled
PSJ PC IV DESTROYED	Destroyed
PSJ PC IV LABELS ACTION	INDIVIDUAL IV LABEL ACTIONS
PSJ PC IV LOG	Activity Logs
PSJ PC IV NEW LABELS	PRINT NEW IV LABELS
PSJ PC IV RECYCLED	Recycled
PSJ PC IV REPRINT LABELS	Reprint IV label(s)
PSJ PC RETURN IV LABELS ACTION	RETURN IV LABELS ACTIONS
PSJ SELECT ALLERGY	Select Allergy
PSJI LM ACTIVE MENU	IV Active Order Actions
PSJI LM ACTIVITY LOG	View Activity Log
PSJI LM ALIGNMENT	Align Labels (IV)

<u>Protocol Name</u>	<u>Item Text</u>
PSJI LM DISCONTINUE	Discontinue
PSJI LM EDIT	Edit
PSJI LM FINISH	Finish
PSJI LM LABEL LOG	View Label Log
PSJI LM LBLI	Individual Labels (IV)
PSJI LM LBLR	Reprint Scheduled Labels (IV)
PSJI LM LBL S	Scheduled Labels (IV)
PSJI LM LOG MENU	IV Profile Log Menu
PSJI LM PAT PR	IV Medications Profile
PSJI LM PENDING ACTION	IV Pending Order Actions
PSJI LM RETURNS	Returns/Destroyed Entry (IV)
PSJI OR PAT FLUID OE	IV Fluids
PSJI OR PAT FLUID OE MENU	IV FLUIDS...
PSJI OR PAT HYPERAL OE	IV Hyperal
PSJI OR PAT PR	IV Medications Profile
PSJI OR PR	IV Medications Profile
PSJI PC HOLD	Hold
PSJI PC ONCALL	On Call
PSJI PC RENEWAL	Renew
PSJU LM ACCEPT	Accept
PSJU LM ACCEPT EDIT	Edit
PSJU LM ACCEPT MENU	
PSJU LM ACTIONS MENU	
PSJU LM ACTIVITY LOG	Activity Logs
PSJU LM AL	Align Labels (Unit Dose)
PSJU LM COPY	Copy
PSJU LM EDIT	Edit
PSJU LM HIDDEN ACTIONS	UD Hidden Actions
PSJU LM HIDDEN UD ACTIONS	Unit Dose Hidden Actions
PSJU LM LABEL	Label Print/Reprint
PSJU LM MARK INCOMPLETE	Mark Order As Incomplete
PSJU LM MARK NOT GIVE	Mark Order Not To Be Given
PSJU LM PAT PR	Unit Dose Medications Profile
PSJU LM PL	Pick List
PSJU LM PL MENU	Pick List Menu
PSJU LM PLDP	Enter Units Dispensed
PSJU LM PLEUD	Extra Units Dispensed
PSJU LM PLRP	Reprint Pick List
PSJU LM PLUP	Update Pick List
PSJU LM RENEW	Renew
PSJU LM RET	Report Returns (UD)
PSJU LM SPEED DISCONTINUE	Speed Discontinue
PSJU LM SPEED FINISH	Speed Finish

<u>Protocol Name</u>	<u>Item Text</u>
PSJU LM SPEED RENEW	Speed Renew
PSJU LM SPEED VERIFY	Speed Verify
PSJU LM VERIFY	Verify
PSJU OR 14D MAR	14 Day MAR (Unit Dose)
PSJU OR 7D MAR	7 Day MAR (Unit Dose)
PSJU OR AP-1	Action Profile #1
PSJU OR AP-2	Action Profile #2
PSJU OR DS	Authorized Absence/Discharge Summary (Unit Dose)
PSJU OR PAT 14D MAR	14 Day MAR (Unit Dose)
PSJU OR PAT 7D MAR	7 Day MAR (Unit Dose)
PSJU OR PAT AP-1	Action Profile #1 (Unit Dose)
PSJU OR PAT AP-2	Action Profile #2 (Unit Dose)
PSJU OR PAT DS	Discharge Summary (Unit Dose)
PSJU OR PAT PR	Unit Dose Medications Profile
PSJU OR PAT VBW	Non-Verified Orders (Unit Dose)
PSJU OR PR	Patient Profile (Unit Dose)
PSJU OR VBW	Non-Verified Orders (Unit Dose)
PSJU PLATCS	Send Pick List to ATC
VALM DOWN A LINE	Down a Line
VALM FIRST SCREEN	First Screen
VALM GOTO PAGE	Go to Page
VALM HIDDEN ACTIONS	Standard Hidden Actions
VALM LAST SCREEN	Last Screen
VALM LEFT	Shift View to Left
VALM NEXT SCREEN	Next Screen
VALM PREVIOUS SCREEN	Previous Screen
VALM PRINT LIST	Print List
VALM PRINT SCREEN	Print Screen
VALM QUIT	Quit
VALM REFRESH	Re-Display Screen
VALM RIGHT	Shift View to Right
VALM SEARCH LIST	Search List
VALM TURN ON/OFF MENUS	Auto-Display (On/Off)
VALM UP ONE LINE	Up a Line

10. Inpatient Medications and BCMA

Inpatient Medications is designed for use with the Bar Code Medication Administration (BCMA) package.

10.1. API Exchange

Patient and order information is exchanged between Inpatient Medications and BCMA. This exchange is possible through Application Program Interfaces (APIs).

APIs provided to BCMA

PSJBCMA - The entry point EN^PSJBCMA is provided by the Inpatient Medications package to return patient active orders to BCMA to be used in administering medications at patient's bedside. The SEND TO BCMA field (#3) in the CLINIC DEFINITION file (#53.46) allows the user to specify, by clinic, whether or not Inpatient Medication Orders for Outpatients will be sent to BCMA.

PSJBCMA1 - The entry point EN^PSJBCMA1 is provided by the Inpatient Medications package to return the detail information on a patient's order for BCMA to use.

PSJBCMA2 - The entry point EN^PSJBCMA2 is provided by Inpatient Medications package to return a patient order's activity logs for BCMA to use.

PSJBCMA3 - The purpose of this API is to get information from BCMA to put in the PHARMACY PATIENT FILE (#55). It also updates the BCMA status information for the bag associated with a Unique Bar Code ID label.

PSJBCMA4 - The purpose of this API is to allow BCMA to expire/reinstate Inpatient Medications orders based on an administration event.

PSJBCMA5 – The entry point GETSIOPI is provided by the Inpatient Medications package to return the Special Instructions or the Other Print Info associated with a specific Inpatient Medications order. The returned values will be retrieved from the word processing SPECIAL INSTRUCTIONS (LONG) field (#135) in the UNIT DOSE multiple (#62) in the PHARMACY PATIENT file (#55) for Unit Dose orders, or the OTHER PRINT INFO (LONG) – field (#154) in the IV multiple (#100) in the PHARMACY PATIENT file (#55).

PSGSICH1 - The entry point GETPROVL^PSGSICH1 is provided by the Inpatient Medications package to return CPRS Provider Overrides associated with a specific Inpatient Medications order. Entry point INTRDIC^PSGSICH1 is provided by the Inpatient Medications package to return Pharmacist Interventions associated with a specific Inpatient Medications order.

APIs provided to Inpatient Medications

EN^PSBIPM - The entry point EN^PSBIPM is provided by the BCMA package to provide information to Inpatient Medications to be used in determining the start date for a renewed order. [Database Integration Agreement (DBIA) # 3174].

MOB^PSBIPM - The entry point MOB^PSBIPM is provided by the BCMA package to provide Inpatient Medications with an array of data returned by the BCMA/CPRS Med Order function.

MOBR^PSBIPM - The entry point MOBR^PSBIPM is provided by the BCMA package to provide Inpatient Medications a way to notify BCMA that the BCMA/CPRS Med Order Button order has been processed or rejected. There is no return from this entry point.

10.2. Med Order Button

The BCMA/CPRS Med Order Button (Med Order) software is an integrated component of the VistA environment and uses bar code technology to electronically order, sign, and document STAT and NOW medications from verbal or telephoned medication orders for inpatients from the BCMA Virtual Due List (VDL). Medications are ordered and signed through the CPRS Inpatient Medication order dialog and are passed to the Inpatient Medications V. 5.0 software application as nurse-verified orders with the Priority of Done. The medications are documented as administered to the patient in the BCMA Medication Log and Medication Administration History (MAH).

The BCMA VDL has been modified to contain a Med Order button that allows the authorized user the ability to properly document a STAT or NOW medication order through BCMA. Each user must hold a special key to allow them access to the button on the BCMA VDL. There is a system parameter in BCMA that allows the site the added ability to turn off or on the functionality system wide.

When the Med Order button is activated, BCMA opens a CPRS Graphical User Interface (GUI) medication dialog ordering session. The medication dialog screen allows for the entry of STAT or NOW Unit Dose or IV Type orders within the same session. The user is able to scan a bar coded IEN or National Drug Code (NDC) number affixed to the product, to select the dispense drug for this administration. Pharmacy Orderable item, IV Additive, and IV Solution selection (based on dispense drug) occurs in the background and is automatic. Dispense drugs selected for IV Type orders that point to multiple active IV Additive or IV Solution file links require the user to make a single selection. Manual entry of the dispense drug into the medication field is allowed if bar codes are damaged or missing.

All orders entered through this interface are automatically marked as “Done” in CPRS GUI. Unit Dose, Piggyback, and Syringe (intermittent) orders are marked as “GIVEN” in BCMA and will not appear on the VDL. IV Type orders including Admixture and Syringe (non-intermittent) are marked as “INFUSING” in BCMA and will appear on the VDL for further interaction. CPRS GUI passes the order to Inpatient Medications for pharmacist verification. Order administration data will still be available to be edited through the BCMA menu option Edit Medication Log. All orders require an electronic signature.

The administration date/time box on the order screen defaults to the time the Med Order button was accessed. The user is allowed to edit this date/time to a date/time in the past since some STAT and NOW orders are actually entered after they are administered. The user will NOT be allowed to enter a date/time in the future.

Once the Unit Dose or IV Type order is entered and the accept order button is selected, the user will be taken back to the order screen to specify ordering dialog and enter additional orders.

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14. External Relationships

14.1 Packages Needed to Run Inpatient Medications

The Inpatient Medications package requires the minimum version, stated on the following external packages, to run effectively:

<u>PACKAGE</u>	<u>MINIMUM VERSION NEEDED</u>
Kernel	8.0
VA FileMan	22.0
MailMan	8.0
PIMS	5.3
CPRS	1.0
Outpatient Pharmacy	7.0
PDM	1.0
Dietetics	5.0
Bar Code Medication Administration	3.0
HealtheVet Web Services Client (HWSC)	1.0
VistALink	1.5

14.2 Unit Dose Medications and Ward Stock

The Inpatient Medications package also has a tie to the Automatic Replenishment/Ward Stock package so that if the site is running the Automatic Replenishment/Ward Stock package, the Inpatient Medications package will know which items in the DRUG file (#50) are ward stock items for each ward. The tie is a cross-reference under the PHARMACY AOU STOCK file (#58.1).

14.3 Unit Dose Medications and Drug Accountability

The Inpatient Medications package also has a tie to the Drug Accountability package so that if the site is running the Drug Accountability package, the Inpatient Medications package will know which items in the DRUG file (#50) are ward stock items for each ward. This cross-reference is the link between the Controlled Substances package and the Unit Dose package for determining ward-stocked drugs.

14.4 Calls Made by Inpatient Medications

The following external calls are supported via inter-package agreements:

ROUTINE	ENTRY POINTS USED
ECXUD1	^ECXUD1
ECXPIV1	^ECXPIV1
GMRVUTL	EN6
GMRADPT	EN1
GMRAOR	\$\$ORCHK
GMRAOR2	EN1
GMRAPEM0	EN2
OR3CONV	OTF
ORCONV3	PSJQOS
ORERR	EN
OROCAPI	\$\$AOC, \$\$DOC, \$\$GOC
ORUTL	READ
ORX1	NA
ORX2	LK,ULK
PSAPSI5	EN
PSBIPM	EN, MOB, MOBR
PSSDSAPD	\$\$DOSE, \$\$DRT
PSSDSAPI	\$\$BSA, \$\$DS, \$\$EXMT, \$\$FRQ, \$\$MRT, \$\$UNIT, \$\$SUP
PSSFDBRT	GROUTE
PSSHLSCH	EN
PSODDPR4	BLD
PSODRDU2	EN
SDROUT2	DIS
SDAMA203	SDIMO
VADPT	IN5, INP, PID, SDA

14.5 Introduction to Integration Agreements and Entry Points

The following integration agreements and entry points are provided for the associated packages; only those packages listed can use these integration agreements and entry points. For complete information regarding the IAs, please refer to the Integration Agreement Menu. It can be found in FORUM under DBA MENU > INTEGRATION CONTROL REGISTRATIONS.

5764 NAME: PSODGAL1
CUSTODIAL PACKAGE: OUTPATIENT PHARMACY
SUBSCRIBING PACKAGE: INPATIENT MEDICATIONS
ROUTINE: PSODGAL1

Example: How to Print DBIA Information from FORUM

Select FORUM Primary Menu Option: **DBA**

Select DBA Option: **INTEGRATI**on Agreements Menu

Select Integration Agreements Menu Option: **INQUIRE**

Select INTEGRATION REFERENCES: **DBIA296** 296 INPATIENT MEDICATIONS DBIA296 PS(50.8,
DEVICE: [Select Print Device]

INTEGRATION REFERENCE INQUIRY #296 OCT 1,1996 10:24 PAGE 1

296 NAME: DBIA296
CUSTODIAL PACKAGE: INPATIENT MEDICATIONS Birmingham
SUBSCRIBING PACKAGE: OUTPATIENT PHARMACY Birmingham
USAGE: Private APPROVED: APPROVED
STATUS: Active EXPIRES:
DURATION: Till Otherwise Agr VERSION:
FILE: 50.8 ROOT: PS(50.8,
DESCRIPTION: TYPE: File

Outpatient Pharmacy 6.0v will be printing a management report. In order to complete the report, we need to read ^PS(50.8 (IV STATS FILE). We are reporting the outpatient ward's number of dispensed units, average cost of the dispensed units, and the total costs of the dispensed units.

To obtain this data, we need to read the 0 node in subfile 50.804, the Average Drug Cost Per Unit field (#4) on the 0 node piece 5 in subfile 50.805, the Dispensed Units (Ward) field (#2) on the 0 node piece 2 in the subfile 50.808, and the B cross-reference in subfile 50.808.

GLOBAL MAP DATA DICTIONARY #50.8 -- IV STATS FILE STORED IN ^PS(50.8,
SITE: BIRMINGHAM ISC

^PS(50.8 D0,2,D1,1,0)=^50.804P^^ (#1) WARD ^PS(50.8,D0,2,D1,2,D2,0)=^^^
(#4) AVERAGE DRUG COST PER UNIT [5N] ^PS(50.8,D0,2,D1,2,D2,3,D3,0)=^ (#2)
DISPENSED UNITS (WARD) [2N] ^

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19 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

Patient/Order Action Prompts
(continued)

RN	Renew
AL	Activity Logs
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 Drug Interaction

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)* [PSJI SITE PARAMETERS] 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 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.

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.

BSA

Body Surface Area. The Dubois formula is used to calculate the Body Surface Area using the following formula:

$$BSA (m^2) = 0.20247 \times \text{Height (m)}^{0.725} \times \text{Weight (kg)}^{0.425}$$

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.

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., seven 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 the 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).

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.

CLINIC DEFINITION File

File #53.46. This file is used in conjunction with Inpatient Medications for Outpatients (IMO) to give the user the ability to define, by clinic, default stop dates, whether to auto-dc IMO orders, and whether to send IMO orders to BCMA.

CLINIC GROUP File

File #57.8. This file is used to provide grouping of clinics for the Non-Verified Pending option and miscellaneous reports.

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 Medications 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.

Cumulative Doses

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

Delivery Times

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

Dispense Drug

The Dispense Drug name has the strength attached to it (e.g., Acetaminophen 325 mg). The name alone without strength attached is the Orderable Item name.

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.

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 med 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)* [PSJI SITE

PARAMETERS] option (IV ROOM file (#59.5)) is for documentation only and does not affect IV processing.

MEDICATION ADMINISTERING TEAM 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 #51.2. This file is used by Unit Dose and Outpatient Pharmacy. It contains the medication instruction name, expansion, and intended use.

MEDICATION ROUTES 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.

MOCHA Medication Order Check Healthcare Application.

Non-Formulary Drugs The medications that are defined as commercially available drug products not included in the VA National Formulary.

Non-Verified Orders Any order that has been entered in the Unit Dose or IV Medications 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 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 by way of 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 via DATUP, 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 Services. A suite of services that includes Outpatient and Inpatient services.
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 involved in the prescription of an IV or Unit Dose order for a patient.

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 package coordinator.

PSJI PHARM TECH

The name of the *key* that must be assigned to pharmacy technicians using the IV Medications 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 <i>key</i> 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 <i>primary menu option</i> and of the <i>key</i> that must be assigned to the pharmacy package coordinators and supervisors using the Unit Dose Medications module.
PSJU PL	The name of the <i>key</i> that must be assigned to anyone using the <i>Pick List Menu</i> options.
PSJ PHARM TECH	The name of the <i>key</i> that must be assigned to pharmacy technicians using the Unit Dose Medications module.
PSJ RNFINISH	The name of the <i>key</i> 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 <i>key</i> that must be assigned to nurses using the Unit Dose Medications module.
PSJ RPHARM	The name of the <i>key</i> 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.
PSJ STAT NOW ACTIVE ORDER Mail Group	A mail group that notifies subscribers when a pending STAT or NOW order is made active.
PSJ STAT NOW PENDING ORDER Mail Group	A mail group that notifies subscribers when a pending STAT or NOW order has been received from CPRS.
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).
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.
STAT and NOW Order Notification	Sends a text message to subscribers of the PSJ STAT NOW mail groups when a pending STAT or NOW order has been received from CPRS or has been verified and made active.
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, Bedsection, etc. The wards are created/edited using the <i>Ward Definition</i> option of the Automatic Data Transmission (ADT) module.