

# INPATIENT MEDICATIONS

# **NURSE'S USER MANUAL**

Version 5.0 December 1997

(Revised December 2013)

# **Revision History**

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

Date	Revised	Patch	Description
Dute	Pages	Number	Description
12/2013	i-iv, 29, 29a-29b, 48, 48a- 48d, 74m, 74x, 127, 127a- 127b, 139- 142	PSJ*5*279	Added IV Bag Logic, Infusion Rate T@0, Pre-Exchange Report, and Missing Dose Request Printer functionalities. Updated Glossary and Index. REDACTED
04/2013	i-x, 11, 12, 13-14, 14a, 16d- 16f, 74m- 74x, 77, 98, 100- 101, 140- 141	PSJ*5*275	Added Clinic Orders functionality REDACTED
01/2013	i v 5 vii, 9, 11 10, 20, 140 16, 16a, 16c, 26, 40, 40a, 40c, 41- 42, 52, 57, 67, 71, 74a, 74c, 74d, 77, 99, 104, 106, 107, 111, 114 73a-73d 74f-74f1	PSJ*5*260 PSJ*5*268	Updated Revision History Updated Table of Contents Fix text wrapping (Page 1 of 1) in screen Added new option Check Drug Interaction & Display Drug Allergies Change label for OCI  Added Creatinine Clearance (CrCl) and Body Surface Area (BSA)  Added new section for Check Drug Interactions function Added Clinic Orders information
	74f2 124		Drug allergy update Added Hidden Action Check Interactions & Display Drug

i

Patch umber	Description
	Allergies, and update OCI
	Updated Glossary
	Updated Index
	REDACTED
J*5*267	Added No Allergy Assessment logic
	Updated Special Instructions/Other Print Info
	DED A COTED
	REDACTED
J*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
	REDACTED
J*5*235	Updated 'Note' section regarding Expected First Dose REDACTED
J*5*243	Removed the acronym PD on Cover page
	Update Revision History
	Update Index
	Revised the existing display in the <i>Non-Verified/Pending Orders</i>
	[PSJU VBW] option from a pure alphabetic listing of patient
	names, to a categorized listing by priority. Added "priority" to
	Index. REDACTED
J*5*181	Updated Revision History
- 101	Updated Table of Contents
	New Example: Patient Information Screen
	New Example: Non-Verified/Pending Orders
	J*5*254  J*5*243  J*5*181

Date	Revised	Patch	Description
	Pages	Number	
	18 20 26-27 33-34b 35-39 40-40d 46 67 71	Number	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
	72-73 74		Updated Order Checks New Example: Local Outpatient Order Display and New Example: Remote Outpatient Order Display
	74a-74c 74d-74f 74f-74g 105		Duplicate Therapy Drug-Drug Interaction CPRS Order Checks Updated Example: Authorized Absence/Discharge
	119-120 121-122 123-136 137-140		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-	PSJ*5*113	Added new Order Validation Requirements.  Removed Duplicate Order Check Enhancement functionality, PSJ*5*175 (removed in a prior patch).
	137 77, 100, 103, 108- 110, 112, 114		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

Date	Revised Pages	Patch Number	Description
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-	PSJ*5*175	Modified outpatient header text for display of duplicate orders.
	74d		Added new functionality to Duplicate Drug and Duplicate Class definitions.
	5, 12, 16- 17, 26, 34-38, 41-42, 72-73	PSJ*5*160	Modifications for remote allergies, to ensure all allergies are included when doing order checks using VA Drug Class; Analgesic order checks match against specific class only; check for remote data interoperability performed when entering patient's chart; and list of remote allergies added to Patient Information screen.
			REDACTED
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.
			REDACTED
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.
			REDACTED
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.  REDACTED
01/2005	All	PSJ*5*111	Reissued entire document to include updates for Inpatient Medications Orders for Outpatients and Non-Standard Schedules.  REDACTED

#### • "Select SOLUTION:"

There can be any number of solutions in an order, depending on the type. It is even possible to require zero solutions when an additive is pre-mixed with a solution. If no solutions are chosen, the system will display a warning message, in case it is an oversight, and gives the opportunity to add one. The nurse may enter an IV solution or IV solution synonym.

When a solution is chosen, if an active drug text entry for the Dispense Drug and/or Orderable Item linked to this solution exists, then the prompt, "Restriction/Guideline(s) exist. Display?:" will be displayed along with the corresponding defaults. The drug text indicator will be <**DIN**> and will be displayed on the right side of the IV Type on the same line. This indicator will be highlighted.

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

#### • "INFUSION RATE:"

The infusion rate is the rate at which the IV is to be administered. This value, in conjunction with the total volume of the hyperal or the admixture type, is used to determine the time covered by one bag; hence, the system can predict the bags needed during a specified time of coverage. This field is free text for piggybacks. For admixtures, a number that will represent the infusion rate must be entered. The nurse can also specify the # of bags per day that will be needed. This will automatically populate the NUMBER OF LABELS PER DAY (NLPD) field.

**Example:** 125 = 125 ml/hr (IV system will calculate bags needed per day), 125@2 = 125 ml/hr with 2 labels per day, Titrate@1 = Titrate with 1 label per day. The format of this field is either a number only or free text only, or [FREE TEXT@NUMBER OF LABELS PER DAY.]

#### **Intermittent IV Orders**

The schedule and administration times for intermittent orders are used to determine the number of daily scheduled labels. The use of the @ symbol for intermittent IV orders is not allowed.

# **Continuous IV Orders**

A 2 digit numeric field is added to the NON-VERIFIED ORDERS file (#53.1) and to the IV (#100) multiple of the PHARMACY PATIENT file (#55).

- Printed IV labels do not display the NLPD field regardless of value.
- The NLPD field, if populated, determines the number of labels that will print when the *Scheduled Labels (IV)* [PSJI LBLS] option is run for continuous IV orders.
- The NLPD field is not sent to BCMA.

- When an Infusion Rate is received from CPRS in the format Rate@Labels, the "@" symbol is used to separate the Infusion Rate into its respective INFUSION RATE and NLPD component fields
- The number of labels per day is always shown next to the infusion rate, when the infusion rate is free text or the number of labels has been entered by the user, or when the number of labels has been received from CPRS. The INFUSION RATE field must be selected when editing. There is no field number reference for NLPD.
- Edits to the NLPD field never create a new order
- The NLPD field is not populated when the number of labels is system calculated based on a numeric infusion rate.
- The following rules apply to the use of the "@" symbol in the Infusion Rate: The number entered after the "@" symbol populates the NLPD field. Anything entered before the "@" symbol displays in the INFUSION RATE field. The "@" symbol will not be visible in the display of the Infusion Rate.

#### **Example:**

```
INFUSION RATE: 50 ml/hr// Titrate@0

NUMBER OF LABELS PER DAY: 0//
```

When the infusion rate is entered as free text, a minimum of two characters is required for the order level validation for Infusion rate for Inpatient Medications or CPRS orders.

#### **Example:**

```
INFUSION RATE: 50 ml/hr// INFUSE SLOWLY
```

When the infusion rate is numeric, the NLPD is optional. When entering free text in THE INFUSION RATE field, the NLPD is required with no default. Numeric entry of 0-99 is allowed; all other entries are invalid.

• A new order is not created when a change is made to the NLPD field.

When the INFUSION RATE field is selected, an NLPD prompt displays.

#### **Example:**

```
NUMBER OF LABELS PER DAY: //
```

An abbreviation entered in the INFUSION RATE field is replaced with expanded text, if the abbreviation has been defined in the INFUSION INSTRUCTIONS file (#53.47.)

#### **Example:**

```
INFUSION RATE: 50 ml/hr// T ... Now Expanding Text

Input expanded to Titrate

Press Return to Continue
```

A minimum of 2 characters and a maximum of 30 characters may be entered into the INFUSION RATE field. The special character "^" is not allowed. A warning message displays if the free text entry contains less than the minimum requirement of 2 characters or more than the maximum requirement of 30 characters.

#### **Example: Warning Message**

```
INFUSION RATE: 50 ml/hr// P  
Free text entries must contain a minimum of 2 characters and a maximum of 30 characters.  
INFUSION RATE: 50 \text{ ml/hr//}
```

The INFUSION INSTRUCTIONS file (#53.47) allows the user to add to or edit the abbreviations or expanded text by storing the infusion rate abbreviations, up to 9 characters, and the associated expanded text, a minimum of 2 characters and a maximum of 30 characters.

Help Text is provided for the infusion rate when? or?? is entered.

When an order is received from CPRS, Inpatient Medications accepts infusion rates in both ml/hr and as "infuse over time." In the Order View screen, for orders with an IV Type considered Intermittent, the infusion rate will display as "infuse over" followed by the time. For example, infuse over 30 minutes.

**Note:** If an administration time(s) is defined, the number of labels will reflect the administration time(s) for the intermittent IVPB type orders.

# • "MED ROUTE:" (Regular and Abbreviated)

Inpatient Medications uses the medication route provided by CPRS as the default when finishing an IV order, and transmits any updates to an order's medication route to CPRS.

Inpatient Medications determines the default medication route for a new order entered through Inpatient Medications, and sends the full Medication Route name for display on the BCMA VDL.

This is the administration route to be used for the order. If a Medication Route is identified for the selected Orderable Item, it will be used as the default for the order. Inpatient Medications applies the Medication Route provided by CPRS as the default when finishing an IV order.

- If no medication route is specified, Inpatient Medications will use the Medication Route provided by CPRS as the default when finishing an IV order.
- If updates are made to the medication route, Inpatient Medications will transmit any updates to an order's Medication Route to CPRS.
- Inpatient Medications determines the default Medication Route for a new order.
- Inpatient Medications sends the full Medication Route name for display on the BCMA VDL.

#### • "SCHEDULE:"

This prompt occurs on piggyback and intermittent syringe orders. Schedules must be selected from the ADMINISTRATION SCHEDULE file, with the following exceptions:

- Schedule containing PRN: (Ex. TID PC PRN). If the schedule contains PRN, the base schedule must be in the ADMINISTRATION SCHEDULE file.
- Day of week schedules (Ex. MO-FR or MO-FR@0900)
- Admin time only schedules (Ex. 09-13)

#### • "ADMINISTRATION TIME:"

This is free text. The pharmacist might want to enter the times of dose administration using military time such as 03-09-15-21. Administration times must be entered in a two or four digit format. If multiple administration times are needed, they must be separated by a dash (e.g., 09-13 or 0900-1300). This field must be left blank for odd schedules, (e.g., Q16H).

#### • "OTHER PRINT INFO:"

The system allows a word processing entry of unlimited free text. For new order entry, when Other Print Info is added, the nurse is prompted whether to flag this field for display in a BCMA message box. When finishing orders placed through CPRS, where the Provider Comments are not too long to be placed in this field, the nurse is given the option to copy the comments into this field. Should the nurse choose to copy and flag these comments for display in a BCMA message box on the VDL, an exclamation mark "!" will appear in the order next to this field.

The following menu choices regarding copying of provider comments are available:

• Y Yes (copy) – This will copy Provider Comments into the Other Print Info field.

(This page included for two-sided copying.)

#### **Example: Edit an Order (continued)**

NON-VERIFIED UNIT DOSE Sep 13	, 2 00 15:26:46	Pa	ge: 1 c	of 2
PSJPATIENT1, ONE War	d: 1 EAST			
PID: 000-00-0001 Room-Be	d: B-12	Ht (cm):	(	)
DOB: 08/18/20 (80)	Ū	Wt(kg):	(	)
*(1)Orderable Item: AMPICILLIN CAP				
Instructions:				
*(2)Dosage Ordered: 500MG				
Duration:		*(3)Start:	09/13/00	20:
*(4) Med Route: ORAL				
		*(5) Stop:	09/27/00	24:00
(6) Schedule Type: CONTINUOUS				
*(8) Schedule: QID				
(9) Admin Times: 01-09-15-20				
*(10) Provider: PSJPROVIDER, ONE				
(11) Special Instructions:				
(12) Dispense Drug		U/D	Inactive	Date
AMPICILLIN 500MG CAP		1		
+ This change will cause a n	ew order to be o	created.		
ED Edit	AC ACCEPT			
Select Item(s): Next Screen//				

If the ORDERABLE ITEM or DOSAGE ORDERED fields are edited, the Dispense Drug data will not be transferred to the new order. If the Orderable Item is changed, data in the DOSAGE ORDERED field will not be transferred. New Start Date/Time, Stop Date/Time, Login Date/Time, and Entry Code will be determined for the new order. Changes to other fields (those without the asterisk) will be recorded in the order's activity log.

If the DISPENSE DRUG is edited, an entry in the order's activity log is made to record the change.

#### IV Bag/Label Parameters

This section describes IV Parameters in Bar Code Medication Administration (BCMA). The BCMA IV bag/label parameters determine the status of an order's IV labels after an IV order is edited. The BCMA IV parameters are used to determine if an order's previously printed IV labels are valid (or invalid) after an edit occurs.

BCMA IV parameters are defined primarily by division, and may also be defined by ward location. If no parameters have been defined for a given ward, orders associated with that ward will use the IV parameters for the division associated with the ward.

The following fields are available in the BCMA IV parameters on the IV Order Entry screen:

- Additive
- Strength
- Bottle
- Solution
- Volume

- Infusion Rate
- Med Route
- Schedule
- Admin Time
- Remarks
- Other Print Info
- Provider
- Start Date/Time
- Stop Date/Time
- Provider Comments.

Each field offers a selection of Warning, Non-Verify, and Invalid Bag.

If a field is set to Warning, and an order is changed, the IV bags from the old order are carried to the new order and are available on the BCMA VDL. When a nurse scans the bar code on an IV bag, a Warning message alerts them about fields that have changed.

If a field is set to Non-Verify, and an order is changed, the IV bags from the old order are carried to the new order and are available on the BCMA VDL. When a nurse scans the bar code on an IV bag, NO warning message displays.

If a field is set to Invalid Bag, and an order is changed, the IV bags from the old order do not carry to the new order or display on the BCMA VDL.

# **Editing Orders when an Invalid IV Bag Event Occurs**

The pharmacist is provided a list of invalidated IV bags when an Invalid Bag event has occurred.

An Invalid Bag event occurs when both of the following conditions are met:

- A change is made to any IV order field that matches a BCMA IV Bag site parameter field that is set to "Invalid Bag."
- IV labels were available for the order prior to the change.



Note: Order changes may originate in Inpatient Medications or CPRS.

If an Invalid Bag event occurs, the following is displayed after the edited order's status is changed to ACTIVE:

- The edited field that triggered the IV bags to be invalidated
- The Date and time of each invalidated IV label
- The label ID of each invalidated IV bag
- The status of each invalidated IV bag
- The Count status of each invalidated IV bag.
- The BCMA Action Date/Time of each invalidated IV bag

#### **Example: Invalid Labels Cannot be Reprinted or Scanned**

A pause occurs before the display scrolls to the top of the screen.

After the user enters "YES," a prompt to print a list of Invalidated IV labels to a device or RETURN to continue displays.

# **Example: Prompt to Print**

```
Enter 'P' to print list of Invalidated Labels or RETURN to continue: p PRINT

DEVICE: HOME//
```

When P is entered at the "Enter P" prompt, the following is displayed in the report:

- Location (current Ward or Clinic)
- Patient Name
- Medication (IV Additive, IV Solution, or Orderable Item)
- Date/time
- V# of the IV bag
- Status
- Count
- BCMA Action-Date/time

#### **Example: List of Invalidated Labels Report**

When the screen is full, a pause for the report output occurs, if the user selects the device option to print to the screen.

When an invalid bag event occurs, all IV labels associated with the edited order that have not already been invalidated are invalidated. IV labels that were previously invalidated as a result of prior edits are not displayed.

Following the "REASON FOR ACTIVITY:" prompt, the "Print new replacement labels? NO// Y" prompt displays to allow the pharmacist to print replacement labels when the following conditions occur:

- A non-starred field is changed.
- The IV parameter is set to Invalid Bag for an edited field.

#### **Example: Print New Replacement IV Labels**

```
REASON FOR ACTIVITY: test

Print new replacement labels? NO// YES

8 Labels needed for doses due at ...
```

IV labels printed prior to an order edit are displayed as available when edits are made to fields set to Warning or Non-Verify in the BCMA IV Parameters.

#### **Example: IV Labels Available and Print New Replacement Labels**

```
The following IV labels are available:

Label Date/Time Unique ID Status
08/02/12 09:57 8157V178
08/02/12 09:57 8157V179
08/02/12 09:57 8157V180
08/02/12 09:57 8157V181
08/02/12 09:57 8157V182

Print new replacement labels? N// Y
```

The BCMA availability of IV bags may be viewed using the Label Log action. All IV labels that have been invalidated are displayed in the label log file with "NO" in the "Available in BCMA" column.

The label log file displays the status of the IV label as either available or not available in BCMA.

# **Example: Label Log Display**

Labels will not be available in BCMA under the following conditions:

- When the status is Reprint, Recycled, Destroyed or Cancelled.
- When the action is Given, Infusing, Stopped or Completed.
- When an Invalid Bag Event has occurred.

After the above information is displayed in the label log, the below prompt displays for associated linked orders, if they exist. The default is "Y//."

#### **Example: Associated Linked Orders Prompt**

Do you wish to see labels from linked (edited) orders? Y//

The clinic location's abbreviation, or the full clinic name if no abbreviation exists, prints on the IV label when the CLINIC field (#126) is populated. The ward location name is printed when the CLINIC field is null. The name "OPT. IV." is printed if neither the clinic location name nor the ward location name is populated.

# 4.10. Pharmacy - Edit Clinic Med Orders Start Date/Time [PSJ ECO]

The *Edit Clinic Med Orders Start Date/Time* [PSJ ECO] option allows the user to change the selected date/range of all active or non-verified clinic orders (Unit Dose, IV, IVP/IVPB) to a new single START DATE/TIME for a patient(s) within a selected clinic. This option provides:

- An action that allows the pharmacist to edit the Start Date/Time of a patient order
- Patient selection by medication order start date and by Clinic Group, Clinic, or Patient
- A patient profile display of active or non-verified Clinic medication orders for date/time range selected
- Automatic retrieval, one patient at a time, based on the type of patient selection, when editing a medication Start Date/Time for one or multiple patient Clinic medication orders. Date/Time edits are confirmed for each patient
- Actions to view the patient's full order entry profile, details of specific clinic and nonclinic orders
- Various warnings and message prompts to the user when certain profile or order conditions occur, allowing the user to view, exit, or proceed with the edit process

# 4.10.1. Search Med Orders Date Entry

A search med orders date entry prompt is the first prompt from the *Edit Clinic Med Orders Start Date/Time* [PSJ ECO] menu option:

- The Begin Search Date defaults to "TODAY//" (current date).
- The End Search Date defaults to the entered Begin Search Date. The End Search Date shall not precede the Begin Search Date.

#### Example: Prompt that End Search Date Shall Not Precede Begin Search Date

```
Begin Search Date: TODAY//06/01 (JUN 01, 2012)

End Search Date: Jun 01, 2012// 05/15 (MAY 15, 2012)

Response must not precede 6/1/2012.

End Search Date: Jun 01, 2012//
```

- Time entry with the date is optional.
- The search results include all active or non-verified clinic orders within the selected date range, not just those with a start date within the range. Current business rules apply for date/time validation entry.

#### **Example: Prompt to Search Begin and End Dates**

```
Search for Active and Non-Verified CLINIC Medication Orders
that fall within the date range selected below:

Begin Search Date: TODAY// (default to current date)

End Search Date: (default to the entered Begin Search Date:)
```

# 4.10.2. Search by Clinic, Clinic Group or Patient

The entry prompt "Search by CLINIC (C), CLINIC GROUP (G), or PATIENT (P):" allows the user to search by clinic, clinic group or patient, with no default, from the *Edit Clinic Med Orders Start Date/Time* [PSJ ECO] menu option.

#### **Example: Prompt to Select Clinic, Clinic Group or Patient**

```
Search by CLINIC (C), CLINIC GROUP (G) or PATIENT (P):
```

The appropriate entry prompt "C," "G," or "P" is provided and allows the user to enter a Clinic, Clinic Group or Patient name. Current business rules apply to the entry of clinic name, clinic group or patient name.

**Table: Prompt Entry for Clinic, Clinic Group or Patient** 

<b>Entry Result</b>	System Prompt	<b>User Entry</b>
С	"SELECT CLINIC:"	Clinic name – case inclusive
		(display clinics that are
		marked allow clinic orders)
G	"SELECT CLINIC GROUP"	Clinic group name
P	"SELECT PATIENT:"	Patient name

The entry prompt, "SELECT CLINIC:" or "SELECT PATIENT:" is repeated allowing the user to select multiple clinics or multiple patients by entering individual names for the search. A blank return stops the search, and the process continues.

#### 4.10.3. Select Patient from Clinic

If the user selects "Clinic," the numbered list of active patients' full names displays in alphabetical order by last name for all active or non-verified clinic orders (Unit Dose, IV, IVP, IVPB) from the med orders date/time range entered.

#### **Example: Display Patient List**

```
CLINIC ORDERS - PATIENT CLINIC

No. PATIENT

1 CPRSPATIENT, ONE (0091)
2 CPRSPATIENT, TWO (5555)
3 CPRSPATIENT, THREE (0038)
Select 1 - 3:
```

If the user selects "Clinic," an entry prompt of "Select N-N:" displays. N-N represents the begin/end number of displayed patients. The user may select one or multiple patients. Current business rules apply to numbered entry list selection.

#### **Example: Selecting ON HOLD Orders**

# 4.10.9.3. Complex Orders

If the user selects complex orders, the message: "Complex Orders cannot be edited – no changes will be applied to any of the following Complex order components:......" displays. ES action changes to complex orders are not allowed.

#### **Example: Selecting Complex Orders**

#### 4.10.9.4. Orders for More than One Clinic

If the user selects orders for more than one clinic, the message: "You have selected orders from different clinics do you want to continue?" displays:

- If the user answers "NO," the Clinic Order Entry profile view of order(s) for the selected patient(s) re-displays.
- If the user answers "YES," the process continues.

#### 4.10.9.5. Orders with different Start Date/Times

If the user selects orders for more than one Start Date/Time, the message: "You have selected orders with different Start Date/Time, do you want to proceed?" displays:

- If the user answers "NO," the Clinic Order Entry profile view of order(s) for the selected patient(s) re-displays.
- If the user answers "YES," the process continues.

#### 4.10.9.6. Orders for More than one Clinic with Different Start Date/Times

If the user selects orders for more than one clinic with different Start Date/Times, the message below displays:

# **Example: Orders for More than One Clinic with Different Start Date/Times**

```
You have selected orders from different clinics
and with different Start Date/Times.

Do you want to continue?
You have selected orders from different clinics
and with different Start Date/Times.
```

- If the user answers "NO," the Clinic Order Entry profile view of order(s) for the selected patient(s) re-displays.
- If the user answers "YES," the process continues.

# 4.10.9.7. System Auto Adjusts the Start Time to the Current Time

The system will auto adjust the start date/time to "NOW" for <u>pending CPRS</u> clinic orders with a start/date time in the past.

For example, when the order was created in CPRS, the current 'NOW' Start Time was 13:02, but when the pending order is selected in Inpatient Medications, the current 'NOW' Start Time is 13:12.

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 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. User's may also define a Missing Dose Request printer and a Pre-Exchange Report printer.

**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.

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**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-theshelf (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**.

The Dispense Drug is pulled from the DRUG file (#50) **Dispense Drug** 

> 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.

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