



NATIONAL DRUG FILE (NDF)

USER MANUAL

Version 4.0
October 1998

(Revised February 2009)

Revision History

The table below lists changes made since the initial release of this manual. Each time this manual is updated, the Title Page lists the new revised date and this page describes the changes. Either update the existing manual with the Change Pages document, or replace it with the updated manual.

Note: The Change Pages document may include unedited pages needed for two-sided copying. Only edited pages display the patch number and revision date in the page footer.

Date	Revised Pages	Patch Number	Description
02/2009	40, 40A-B, 41A-D	PSN*4*169	Updated screen captures for options Inquire to VA Product Info For Local Drug [PSNLOOK] and Inquire to National Files [PSNACT] to reflect additional data displayed and minor changes to the display. REDACTED
09/03	iii, 4, 7, 16, 37B-37D, 53-54	PSN*4*70	<ul style="list-style-type: none"> - Added the new options, <i>Local Drugs Excluded from Drug-Drug Interactions</i> and <i>VA Products Excluded from Drug-Drug Interactions</i> to the Menu list and the Reports section. - Corrected the name of the DEA, SPECIAL HDLG field. - Corrected a drug name in the <i>Local Drug/VA Print Name Report</i>. - Updated the TOC and the Index with the new reports.
07/03	Title Page, i, 7-10, 25-26, 41A-C	PSN*4*65	<ul style="list-style-type: none"> - Replaced the Title Page and Revision History page. - Updated introduction to include DEA/PKI changes. - Updated screen captures changed by this patch.
02/2003	Title Page, i-ii, 41D-46, 51, 52	PSN*4*62	<ul style="list-style-type: none"> - Replaced the Title Page and Revision History page. - Updated the <i>Print a PMI Sheet</i> option and example. - Updated the Glossary for the PMI Sheet term. - (Included pages for double-sided printing.)
09/2001	Title Page, i, ii, 41D, 42	Developer Request	<ul style="list-style-type: none"> - Replaced the Title Page (and associated blank page) and the Revision History page (and associated blank page after it p. ii.) - The <i>Print a PMI Sheet</i> option stated that a specific vendor supplied the information for these sheets and the verbiage was changed to a “commercial vendor”.

Date	Revised Pages	Patch Number	Description
03/2001	Title Page, i, ii, iii, iv, 4, 37A-B, 53	PSN*4*48	<p>– Replaced the Title Page (and associated blank page), and pages i, ii (blank), iii, and iv (blank), which include the Revision History and Table of Contents. Pages ii and iv have no changes, but were included for two-sided printing only.</p> <p>– Replaced pages 4 and 53 with the new pages. Pages 3 and 54 have no changes, but were included for two-sided printing only.</p> <p>– Inserted pages 37A-37B, which introduce the new <i>Local Drug/VA Print Name Report</i> option. Pages 37 and 38 have no changes, but were included for two-sided printing only.</p>
02/2000	4, 5, 6, 8, 9, 17, 34, 41, 41A-C	PSN*4*22	Added a new option called <i>Inquire to National Files</i> .

Example 1: Inquire to Local Drug File by Generic Name Chosen (cont.)

GENERIC NAME: DISOPYRAMIDE 150MG CAP

VA DRUG CLASS CODE:

PRICE/DISPENSING UNIT: 0.160

MESSAGE:

SYNONYM(S) :

NORPACE

You may look-up by DRUG GENERIC NAME or VA CLASS CODE

Enter a "G" for GENERIC NAME or a "C" for VA CLASS CODE: <RET>

Inquire to VA Product Info For Local Drug [PSNLOOK] Synonym: PNIN

This option was formerly known as *Lookup National Drug Info in Local File*. This option allows you to look up entries in the local DRUG file (#50). It will display information found in the VA PRODUCT file (# 50.68) for the VA Product Name to which the local drug is matched.

Example: Lookup National Drug Info in Local File

Select Inquiry Options Option: PNIN Inquire to VA Product Info For Local Drug

This option will allow you to look up entries in your local DRUG file. It will display National Drug File software match information.

Exclude Interaction check=Y, Override DF Exclude from Dosage Check =N

Note that the Exclude Drg-Drg Interaction Ck field only displays when set to 'Yes.' If a dosage form has been excluded from dosage checks that fact will be displayed next to the dosage form.

Select DRUG GENERIC NAME: HYDROCORTISONE 1% CREAM DE200

DRUG Generic Name: HYDROCORTISONE 1% CREAM

VA Product Name: HYDROCORTISONE 1% CREAM, TOP

VA Generic Name: HYDROCORTISONE

Dosage Form: CREAM, TOP (Exclude from Dosing Cks)

Strength: 1 Units: %

National Formulary Name: HYDROCORTISONE CREAM, TOP

VA Print Name: HYDROCORTISONE 1% CREAM

VA Product Identifier: H0055

Transmit To CMOP: YES

VA Dispense Unit: GM

PMIS: HYDROCORTISONE - TOPICAL

Active Ingredients:

HYDROCORTISONE

Str: 1

Unt: %

Press Return to Continue:

Primary Drug Class: DE200

CS Federal Schedule: None

Single/Multi Source Product:

Max Single Dose:

Min Single Dose:

Max Daily Dose:

Min Daily Dose:

Max Cumulative Dose:

National Formulary Indicator: Yes

Exclude Drg-Drg Interaction Ck: Yes (No check for Drug-Drug Interactions)

Override DF Exclude from Dosage Checks: No

In this example, the Dosage Form of 'Oil' is excluded from dosage checks, but since the Override DF Exclude from Dosage Checks is set to 'Yes', dosage checks will be performed for the VA Product, 'Cod Liver Oil.'

Select DRUG GENERIC NAME: Cod liver oil

1 COD LIVER OIL VT801
2 COD LIVER OIL/TALC/ZINC OXIDE 40% OINT DE900
CHOOSE 1-2: 1 COD LIVER OIL VT801

DRUG Generic Name: COD LIVER OIL

VA Product Name: COD LIVER OIL

VA Generic Name: COD LIVER OIL

Dosage Form: OIL (Exclude from Dosing Cks)

Strength:

National Formulary Name: COD LIVER OIL OIL

VA Print Name: COD LIVER OIL

VA Product Identifier: C0504

Transmit To CMOP: YES

VA Dispense Unit: ML

PMIS: None

Active Ingredients:

COD LIVER OIL

Str:

Press Return to Continue:

Primary Drug Class: VT801

CS Federal Schedule: None

Single/Multi Source Product:

Max Single Dose:

Min Single Dose:

Max Daily Dose:

Min Daily Dose:

Max Cumulative Dose:

National Formulary Indicator: No

Override DF Exclude from Dosage Checks: Yes (Dosage Checks shall be performed)

Exclude Interaction check=not set, Override DF Exclude from Dosage Check =Y
In this example, the Dosage Form of 'Powder,Oral' IS NOT excluded from dosage checks, but since the Override DF Excluded from Dosage Checks is set to 'Yes', dosage checks will not be performed for the VA Product , 'Thick-It Powder'.

Select DRUG GENERIC NAME: THICK-IT POWDER TN200

DRUG Generic Name: THICK-IT POWDER

VA Product Name: THICK-IT POWDER

VA Generic Name: THICK-IT

Dosage Form: POWDER,ORAL

Strength:

National Formulary Name: THICK-IT POWDER,ORAL

VA Print Name: THICK-IT POWDER

VA Product Identifier: T0557

Transmit To CMOP: YES

VA Dispense Unit: GM

PMIS: None

Active Ingredients:

CORN STARCH

Str:

Press Return to Continue: <ENTER>

Primary Drug Class: TN200

CS Federal Schedule: 0 Unscheduled

Single/Multi Source Product:

Max Single Dose:

Min Single Dose:

Max Daily Dose:

Min Daily Dose:

Max Cumulative Dose:

National Formulary Indicator: Yes

Override DF Exclude from Dosage Checks: Yes (No Dosage Checks performed)

NDC/UPN Inquiry

[PSNUPN] **Synonym: NDCU**

With this option you can enter an NDC or UPN to get the corresponding information displayed to the screen. This data comes from the NDC/UPN file (#50.67).

Example: Inquiry using an NDC

```
Select Inquiry Options Option: NDC NDC/UPN Inquiry

This option allows you to pick an NDC or UPN and the corresponding
information from NDC/UPN file will be displayed to the screen.

Do you want to Inquire on an NDC or UPN:

    Select one of the following:

        N          NDC
        U          UPN

Enter response: NDC// <ENTER>
Select NDC/UPN: 510002014150
    1  510002014150  86849
    2  510002014150  86850
CHOOSE 1-2: 2 86850

NDC: 510002014150                OTX/RX Indicator:
Manufacturer: FEDERAL SUPPLY
Trade Name: COTTON BALL
Package Size: 2000                Package Type: BAG
Do you want to Inquire on an NDC or UPN:

    Select one of the following:

        N          NDC
        U          UPN

Enter response: NDC// <ENTER>
Select NDC/UPN: <ENTER>
```

Inquire to National Files [PSNACT] Synonym: NAT

The Inquire to National Files displays information related to products contained within the national files. The product may be selected by entering the VA Product Name, CMOP ID or NDC.

Select Inquiry Options Option: **NAT** Inquire to National Files

This option allows you to lookup NDF file information three ways (VA Product Name, NDC, or CMOP ID number).

LOOKUP BY (VA) PRODUCT, (N)DC, OR (C)MOP ID ?

Example 1: NDF Inquiry by VA Product Name

```
Select VA PRODUCT NAME: hydrocortisone
  1  HYDROCORTISONE 0.1% CREAM, TOP
  2  HYDROCORTISONE 0.25% CREAM, TOP
  3  HYDROCORTISONE 0.25% LOTION
  4  HYDROCORTISONE 0.25%/NEOMYCIN SO4 0.5% CREAM, TOP
  5  HYDROCORTISONE 0.5% AEROSOL, TOP
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1  HYDROCORTISONE 0.1% CREAM, TOP
```

```
VA Product Name: HYDROCORTISONE 0.1% CREAM, TOP
VA Generic Name: HYDROCORTISONE
```

```
Dose Form: CREAM, TOP (Exclude from Dosing Cks)
```

```
Strength: 0.1 Units: %
National Formulary Name: HYDROCORTISONE CREAM, TOP
VA Print Name: HYDROCORTISONE 0.1% CREAM
VA Product Identifier: H0161 Transmit to CMOP: Yes VA Dispense Unit: GM
PMIS: None
Active Ingredients: HYDROCORTISONE Strength: 0.1 Units: %
```

```
Primary VA Drug Class: DE200
Secondary VA Drug Class:
CS Federal Schedule:
National Formulary Indicator: Yes
National Formulary Restriction:
```

```
Exclude Drg-Drg Interaction Ck: Yes (No check for Drug-Drug Interactions)
Override DF Exclude from Dosage Checks: No
Press return to continue or '^' to exit:
```

..... report continues on the next page

Example 1: NDF Inquiry by VA Product Name (cont.)

NDC: 000749040201 UPN:
VA Product Name: HYDROCORTISONE 0.1% CREAM, TOP
Manufacturer: MILL MARK PHARM Trade Name: HYDROCORTISONE
Route: TOPICAL
Package Size: 20 GM Package Type: TUBE

NDC: 000166069539 UPN:
VA Product Name: HYDROCORTISONE 0.1% CREAM, TOP
Manufacturer: MALLARD Trade Name: HYDROCORTISONE
Route: TOPICAL
Package Size: 454 GM Package Type: JAR

Example 2: NDF Inquiry by NDC

LOOKUP BY (VA) PRODUCT, (N)DC, OR (C)MOP ID ? n NDC
NDC (N) or UPN (U) ? n NDC
Enter NDC with or without Dashes (-): 000223145302 98650
...OK? Yes// <ENTER> (Yes)

NDC: 000223145302 UPN:
VA Product Name: PLACEBO TAB
Manufacturer: CONSOLIDATED MC Trade Name: PLACEBO
Route: ORAL
Package Size: 1000 Package Type: BOTTLE
VA Product Name: PLACEBO TAB
VA Generic Name: PLACEBO
Dose Form: TAB
Strength: Units:
National Formulary Name: PLACEBO TAB
VA Print Name: PLACEBO CAP/TAB
VA Product Identifier: P0256 Transmit to CMOP: Yes VA Dispense Unit: CAP/TAB
PMIS: None
Active Ingredients: LACTOSE Strength: 10 Units: %WW
CELLULOSE Strength: 3 Units: %WW
STARCH Strength: 87 Units: %WW

Example 2: NDF Inquiry by NDC (cont.)

Primary VA Drug Class: XX000
Secondary VA Drug Class:
CS Federal Schedule:
Press return to continue or '^' to exit:

National Formulary Indicator: No
National Formulary Restriction:

**Exclude Drg-Drg Interaction Ck will
only display if it is set to Yes.**

Override DF Exclude from Dosage Checks: Yes (No dosage checks performed)

Example 3: NDF Inquiry by CMOP ID Number

LOOKUP BY (VA) PRODUCT, (N)DC, OR (C)MOP ID ? c CMOP ID
CMOP ID: c0504 COD LIVER OIL

VA Product Name: COD LIVER OIL
VA Generic Name: COD LIVER OIL

Dose Form: OIL (Exclude from Dosing Cks)

Strength: Units:
National Formulary Name: COD LIVER OIL OIL
VA Print Name: COD LIVER OIL
VA Product Identifier: C0504 Transmit to CMOP: Yes VA Dispense Unit: ML
PMIS: None
Active Ingredients: COD LIVER OIL Strength: Units:

Primary VA Drug Class: VT801
Secondary VA Drug Class:
CS Federal Schedule:
National Formulary Indicator: No
National Formulary Restriction:

Override DF Exclude from Dosage Checks: Yes (Dosage Checks shall be performed)

Press return to continue or '^' to exit:

NDC: 000395063594 UPN:
VA Product Name: COD LIVER OIL
Manufacturer: WALMEAD Trade Name: COD LIVER OIL
Route: ORAL
Package Size: 120 ML Package Type: BOTTLE

NDC: 000395063794 UPN:
VA Product Name: COD LIVER OIL
Manufacturer: WALMEAD Trade Name: COD LIVER OIL, MINT FLAVORED
Route: ORAL
Package Size: 120 ML Package Type: BOTTLE

Example 3: NDF Inquiry by CMOP ID Number (cont.)

NDC: 000003092630 UPN:
VA Product Name: COD LIVER OIL
Manufacturer: BRISTOL-MYERS SQUIBB Trade Name: COD LIVER OIL
Route: ORAL
Package Size: 120 ML Package Type: BOTTLE

NDC: 000395063516 UPN:
VA Product Name: COD LIVER OIL
Manufacturer: WALMEAD Trade Name: COD LIVER OIL
Route: ORAL
Package Size: 473 ML Package Type: BOTTLE
Press return to continue or '^' to exit:

NDC: 000395063716 UPN:
VA Product Name: COD LIVER OIL
Manufacturer: WALMEAD Trade Name: COD LIVER OIL, MINT FLAVORED
Route: ORAL
Package Size: 473 ML Package Type: BOTTLE

NDC: 000527073427 UPN:
VA Product Name: COD LIVER OIL
Manufacturer: LANNETT Trade Name: COD LIVER OIL
Route: ORAL
Package Size: 473 ML Package Type: BOTTLE

NDC: 000395063528 UPN:
VA Product Name: COD LIVER OIL
Manufacturer: WALMEAD Trade Name: COD LIVER OIL
Route: ORAL
Package Size: 3840 ML Package Type: BOTTLE

NDC: 000527073428 UPN:
VA Product Name: COD LIVER OIL
Manufacturer: LANNETT Trade Name: COD LIVER OIL
Route: ORAL
Package Size: 3840 ML Package Type: BOTTLE
Press return to continue or '^' to exit:

Printing a Patient Medication Information Sheet

Print a PMI Sheet

[PSNPMIS] **Synonym: PMIS**

This option allows you to print a Patient Medication Information Sheet (PMI).

These medication information sheets can be provided to patients, explaining how and why to take a medication and the possible side effects. A commercial vendor supplies the information provided in the Patient Medication Information Sheets. This information is updated periodically to provide new medication information sheets and changes to existing sheets.

If the PMI Sheet does not print and the message “Drug is not linked to a valid Medication Information Sheet for language selected” is printed instead, the user should select another language and re-print the medication sheet. If this still does not work, then the user should contact the NDF Manager for further assistance.

Example: Print a PMI Sheet

```
Select National Drug File Menu Option: PMIS Print a PMI Sheet
Select DRUG GENERIC NAME: ACET <RET>
  1  ACETAMINOPHEN 160MG/5ML (TYLENOL) ELIX      CN103      DISP/ML (120ML/BT)
  2  ACETAMINOPHEN 160MG/5ML SUGAR-ALC-FREE     CN103      N/F          FOR SPECIAL
USE IN SELECT DIABETIC PATIENTS
  3  ACETAMINOPHEN 160MG/5ML UNIT DOSE CUP      CN103      (TK) INPATIENT USE
ONLY. AVAILABLE 10ML/CUP
  4  ACETAMINOPHEN 325MG (NONRENEWABLE) 12'S    CN103      CHOOSE ONLY TO
REFLECT ACUTE CARE DISPENSING
  5  ACETAMINOPHEN 325MG (TYLENOL) TAB         CN103      CMOP DISP/MULT 100'S
Press <RETURN> to see more, '^' to exit this list, OR

CHOOSE 1-5: 5 ACETAMINOPHEN 325MG (TYLENOL) TAB  CN103      CMOP DISP/MULT 100'S

Select DRUG GENERIC NAME: <RET>

  Select one of the following:

      1  English
      2  Spanish

Select Language : 1 English
How many copies? : (1-100): 1// <RET>
DEVICE: [Select Print Device]
```

..... *example continues on the next page*