

# **Outpatient Pharmacy (PSO)**

**Version 7.0**

## **Manager's User Manual**



**December 1997  
(Revised December 2021)**

**Department of Veterans Affairs (VA)  
Office of Information and Technology (OIT)**

## Revision History

When updates occur, the Title Page lists the new revised date and this page describes the changes. Bookmarks link the described content changes to its place within manual. There are no bookmarks for format updates. Page numbers change with each update; therefore, they are not included as a reference in the Revision History.

Date	Patch	Description
12/2021	PSO*7*622	<p>Updated Chapters 2 and 16:</p> <ul style="list-style-type: none"> <li>• Updated the <a href="#">Outpatient List Manager</a> and <a href="#">Indicators and Definitions</a> screenshots, described the <a href="#">Pregnancy/Lactation indicator</a>.</li> <li>• Added a definition of <a href="#">Preg/Lact Display</a>.</li> <li>• Updated the <a href="#">Medication Profile table, screenshot</a> and <a href="#">notes</a>.</li> <li>• Added information about the <a href="#">Women's Health Label</a>.</li> </ul>
09/2021	PSO*7*561	<ul style="list-style-type: none"> <li>• Updated <a href="#">Outpatient Pharmacy Hidden Actions</a>.</li> <li>• Updated <a href="#">CSD (Change Suspense Date)</a> description.</li> <li>• Added new section for <a href="#">Option "BY" Bypass 3/4 Day Supply</a> to the ePharmacy Menu.</li> <li>• Updated section <i>Using the Suspense Functions</i> to include the <a href="#">Hidden Action "BY" Bypass 3/4 Day Supply</a>.</li> <li>• Updated scenario when <a href="#">TRICARE or CHAMPVA patient does not have an active insurance policy</a> on file and corresponding screen displays.</li> <li>• Updated Title Page date, footers, Table of Contents</li> </ul> <p>MCCF EDI TAS ePharmacy Development Team</p>
8/2021	PSO*7*503	Updated <a href="#">PSO BARCODE MENU</a> section with Process Telephone Refills option
7/2021	PSO*7*630	<p>Updated State Prescription Monitoring Program (SPMP) section</p> <p>Updated PSO PROVIDER ADD section</p> <p>Updated PSO PROVIDER EDIT section</p> <p>Updated PSO PROVIDER INQUIRE section</p> <p>Updated Appendix A for ASAP Version 4.2 with new PRE09 data element: 537-538</p> <p>Updated PIV Card Certificate revoked and expired messages: 253-254, 522-523</p> <p>Added Chapter 32: Meds by Mail - Virtual Pharmacy Services</p>
7/2021	PSO*7*524	Added Chapter 19: Hazardous Medication Order Checks: 167-171
07/2021	PSO*7*636	<ul style="list-style-type: none"> <li>• Added the Copay Menu Option, Reset Copay Status List Manager</li> <li>• Added the section, Reset Copay Status List Manager</li> <li>• Updated Title page, Footers, Revision History, Table of Contents, and Index</li> </ul> <p>Liberty ITS</p>
03/2021	PSO*7*625	Updated State Prescription Monitoring Program (SPMP) section
12/2020	PSO*7*549	<p>Updated Third Party Payer Rejects – View/Process: 380</p> <p>Updated Result of Service Code Table: 367</p> <p>Updated Reason for Service Code Table: 368</p> <p>Updated Title Page date, footers, Table of Contents page numbers</p> <p>MCCF EDI TAS ePharmacy Development Team</p>

Date	Patch	Description
		REDACTED
09/2020	PSO*7*477	<ul style="list-style-type: none"> <li>Merged items from patches</li> <li>Updated the Title page, Revision History, Index, and Footers</li> </ul> REDACTED
06/2020	PSO*7*612	<ul style="list-style-type: none"> <li>Updated Register Clozapine Patient with enhancement information: 35 (Liberty ITS; REDACTED, Dev; REDACTED, TW)</li> </ul>
06/2020	PSO*7*546	<ul style="list-style-type: none"> <li>Moved and updated the <b>Medication Status Check</b> section</li> <li>Added the supervisor function, <b>Medication Status Check</b></li> <li>Updated the Title page, Revision History, Index, and Footers</li> </ul> REDACTED
06/2020	PSO*7*477	Update title page, Footers Added several notes about the EXCEPT conjunction: 246, 308, 331, 349 Remove reference to EXCEPT conjunction: 284 REDACTED
05/2020	PSO*7*608	Changed maximum number of days to pull from suspense from 10 to 15: 98, 434 Modified Print from Suspense File: 476 REDACTED
04/2020	PSO*7*544	Added two new messages for the Resubmit Claim action: 377 Updated Reporting criteria for Productivity/Revenue Report: 408 Updated Revision History, Footers, Table of Contents page numbers REDACTED
04/2020	PSO*7*574	Updated Revision History Updated Chapter 9: <ul style="list-style-type: none"> <li>Pharmacy Manager Menu Options corrected: 32</li> <li>Register Clozapine Patient: 33</li> <li>Editable Fields in Pharmacy Screenshot: 40</li> </ul> Corrected Errors in Chapter 9: <ul style="list-style-type: none"> <li>Temporary number: 66</li> <li>Pharmacist Flow: 67</li> </ul> REDACTED
07/2019	PSO*7*528	Updated Revision History Updated Table of Contents Updated Index Updated TRICARE CHAMPVA Override Report: 350, 363, 365, 379, 382, 385, 394, 495 REDACTED
5/2019	PSO*7*457	Updated Title Page Updated Revision History Updated Table of Contents Updated footers throughout Fully revised Chapter 9: Controlling the Dispensing of Clozapine Updated Index REDACTED

Date	Patch	Description
2/2019	PSO*7.0*481	Updated PSO Maintenance to include Non-VA Provider Import [NON-VA PROVIDER IMPORT] option being added by PSO*7.0*481. REDACTED
2/2019	PSO*7*532	Updated the popup message for if the query connection to the HDR/CDS Repository fails, in the OneVA Pharmacy Processing within Patient Prescription Processing section. REDACTED
1/2019	PSO*7.0*512	Ignored Rejects Report: 313 Information text to Edit Transfer Reject Code: 320 Look up by ECME# in View/Process: 322 Edit Claim Submitted (ECS): 325,328,333,334,336,337,338-339 Dual Eligible Submit from WL: 326 REDACTED
11/2018	PSO*7.0*452	Added information about new patient demographics and Clinical Alerts displayed in the List Manager header area when using the option [PSO P], [PSO VIEW], [PSO LM BACKDOOR ORDERS], or [PSO LMOE FINISH]. Expanded information about the High Cost Rx Report [PSO HI COST] option to include filtering the report by division. Added information about an early warning message sent to members of a new PHARMACY SUPERVISORS mail group indicating that a site is approaching the upper limit of the defined prescription numbering series. Expanded information about the Print from Suspense File [PSO PNDLBL] option to include the capability to print from the Suspense file by category. REDACTED
08/2018	PSO*7.0*482	Update title page, footers, View Prescription screen: 361, Ignored rejects from reject notification screen and reject information screen: 320-321, 323, 353, 354, 357 Add ignored rejects threshold to ePharmacy site parameters: 314, 315, 316 Add Patient Billing Notes: 246, 247, 250-251, 307, 321, 322, 324, 332,: 333, 335, 353, 356, 357, 359, 366 Add PSO ePharmacy Patient Comments: 364 REDACTED
05/2018	PSO*7*463	Added screenshot to Reset Copay Status/Cancel Charges [PSOCP RESET COPAY STATUS] and added short summary about elimination of prepaids (pg. 39 and 40) REDACTED
04/2018	PSO*7*519	Updates for OneVA Pharmacy Processing REDACTED
04/2018	PSO*7*502	Updates for ScripTalk enhancement Included a table with ScripTalk Error Messages Added display of Void Label Setup to ScripTalk Main Menu SCRIPTALK Printer Type Void Label Setup 508 & OIT Compliance update throughout (REDACTED, SQA)

Date	Patch	Description
02/2018	PSO*7*402	<p>Updated Patient Header Info Displays: 3, 38, 78-79, 81, 84-85, 147, 149-150, 152, 156, 158, 160, 167, 178, 180, 185, 210, 214, 219, 224, 226-228, 241, 243, 247-248, 251, 255-257, 258, 263-264, 265-266, 268, 271, 273, 275-276, 279, 283-285, 290, 294-295, 297, 302-304, 308-310, 359, 430, 435-436</p> <p>Updated Available Dosage List displays: 135, 137-142, 163, 167, 176, 185,186-189, 206, 212, 214, 217-218, 224, 226, 234-235, 238-239, 243, 258</p> <p>Updated Schedule prompt displays: 178, 185, 187, 189, 206, 212, 214, 219, 226, 235-236, 239-240, 243, 258, 236, 239-240</p> <p>Updated text for Schedule changes</p> <p>Updated Available Dosage list enhancement information: 236</p> <p>Updated Chapter 22 – Dosing Order Checks</p> <p>Updated Error Information Table: 206, 448</p>
11/2017	PSO*7.0*490	Modified List of Patients/Prescriptions for Recall Notice – Output REDACTED
11/2017	PSO*7*478	Update title page, Reject Information screen and add Print action to VER REDACTED
9/2017	PSO*7.0*422	Replaced references of “Do You want to Edit the SIG?” Chapter 21: Clinic Orders and Therapeutic Duplication, and Chapter 25: Patient Prescription Processing REDACTED
05/2017	PSO*7*479	Modifies the prompt to the user when printing an OneVA Pharmacy label. Chapter 1 & Verifying ePharmacy Orders REDACTED
12/2016	PSO*7*460	Updated title page to reflect new release month of December REDACTED
11/2016	PSO*7*460	<p>Updated copay activity log for Fixed Medication Copayment Tiers (FMCT)</p> <p>Updated Title Page to current OIT Standards</p> <p>Updated Revision History</p> <p>Updated Table of Contents</p> <p>Updated footer date to March 2014 per business request. REDACTED</p>
08/2016	PSO*7*448	<p>Updated Title Page to current OIT standards</p> <p>Update Revision History</p> <p>Updated Table of Contents</p> <p>Updated Using the Copy Action section</p> <p>Updated Holding and Unholding a Prescription section</p> <p>Updated examples to read “Veteran Prescription”</p> <p>Updated [PSO LM BACKDOOR ORDERS]</p> <p>Added Resubmitting an ePharmacy Order section</p> <p>Added Reversing an ePharmacy Order section</p> <p>Updated [PSO EPHARMACY MENU]</p> <p>Updated [PSO IGNORED REJECTS REPORT]</p> <p>Updated [PSO REJECTS VIEW/PROCESS]</p> <p>Updated [PSO REJECTS WORKLIST]</p> <p>[PSO BYPASS/OVERRIDE REPORT]</p>

Date	Patch	Description
		Added [PSO PRODUCTIVITY REVENUE REPORT] section Updated [PSO PNDLBL] REDACTED
07/2016	PSO*7*451	Updated View/Edit ASAP Definitions [PSO SPMP ASAP DEFINITIONS] option. Updated View/Edit SPMP State Parameters [PSO SPMP STATE PARAMETERS] option. Updated View/Export Batch [PSO SPMP BATCH VIEW/EXPORT] option. Added Manage Secure Shell (SSH) [PSO SPMP SSH KEY MANAGEMENT] option. Added PSO SPMP ADMIN to Security Keys Added reference to Appendix A – ASAP Definitions and updated ASAP version screen captures. Added PDMP to Glossary. Updated Index REDACTED
01/2016	PSO*7*427	Updated Cover Page to January 2016. Responded to customer comments on pages 287-288, 290. Updated View Prescription and Edit Prescription Screens, Updated Medication Profile, Open/Unresolved Bulletin, View/Process Third Party Reject, and Third Party Rejects Worklist in accordance with new functionality associated with PSO*7*427. REDACTED
06/2016	PSO*7*444	Added Ex. 5 re Medication Profile list item with Bad Address Indicator Max Day Supply has been added and now Days Supply can be entered from 1-365 for a drug. Added table comparing MAXIMUM DAYS SUPPLY values in files 50.68 and 50. Displaying the effect on the days supply. REDACTED
04/2016	PSO*7*411	Update Revision History Updated Table of Contents Updated screen captures (pg 210 is added text, not a screen) Add chapter for Allergy Order Checks Add chapter for Clinical Reminder Order Checks Update Chapter numbers Update Glossary Update Index REDACTED
3/2015	PSO*7*438	Updated help text for patient lookup. REDACTED
08/2014	POS*7*408	Updated [PSO AUTOQUEUE JOBS] option Updated Supervisor Functions Menu Added section for the new Supervisor Functions menu option: State Prescription Monitoring Program Menu [PSO SPMP MENU] and its options Added Appendix A: ASAP Definitions Added ASAP and SPMP to the Glossary

Date	Patch	Description
		Updated Index REDACTED
08/2014	PSO*7*313	Updated Outpatient Pharmacy Hidden Actions Updated Automate Internet Refill Added section on titration Updated [PSO LM BACKDOOR ORDERS] Updated [PSO BATCH BARCODE] Updated Activity Log Updated Glossary Updated Index REDACTED
03/2014	PSO*7*372, PSO*7*416  PSO*7*433	Renumber all pages Updated Revision History and Table of Contents. Added to the Related Manuals Added Order Check information Added Chapter 20 Dosing Order Checks Inserted, deleted, or updated Content Updated screens Update Glossary Update Index Added Lookup National Clean-Up Utility Data REDACTED
11/2013	PSO*7*421	Updated Revision History and Table of Contents. Multiple format fixes (doc corruption problem). Changed NCPDP number. Added content to record Reject Resolution Required, changes to ePharmacy Site Parameters screen, and the change from PSORPH to ePHARMACY SITE MANAGER security key. Added "Reject Resolution Required" term to glossary. Restored proper numerical sequence throughout the PSO Managers User Manual. This was done to overcome document corruption issues with page suffixes. This resequencing negates the need for change pages as the entire manual has changed. We recommend users print out entire document anew. REDACTED
05/2013	PSO*7*391	Updated Revision History Updated Table of Contents Modified [PSO PROVIDER EDIT], [PSO PROVIDER ADD], and [PSO PROVIDER INQUIRE]. Added [PSORXDL] option. Modified [PSO EXPIRE INITIALIZE] Modified [PSO RELEASE REPORT]. Modified [PSO LMOE FINISH]. New security key named "PSDRPH" introduced. Added Changes to Processing a Prescription section. Added Hash Counts and DEA Certification section Added two System Error messages

Date	Patch	Description
		Updated Index REDACTED
01/2013	PSO*7*390	Updated Revision History Updated Table of Contents Added new option Check Drug Interaction Added Creatinine Clearance (CrCL) and Body Surface Area (BSA), when available, to the header area of Patient and Medication Profile displays Added new option Check Drug Interaction Added information regarding clinic orders Added drug allergy changes Update Hidden Actions Fix page numbering Update Glossary Update Index REDACTED
09/2012	PSO*7*386	Updated TOC Added section on HOLD and UNHOLD functionality. Updated Flagging and Unflagging Pending Orders. Updated Activity Log for HOLD/UNHOLD comments. Added PSO TECH ADV key information. REDACTED
03/2012	PSO*7*354	Add an option to the Maintenance menu Added Site Parameter Added Domain Name Server (DNS) and mail tracking information A file named PHARMACY AUTOMATED DISPENSING DEVICES added. A new multiple named OPAI added to DISPENSING SYSTEM PRINTER sub-file. Added the acronym and definition of ADD and OPAI to the Glossary REDACTED
02/2012	PSO*7*385	Removed incorrect listing of View Additional Reject Info (ARI) action Added new actions Submit Multiple Actions (SMA) and Suspense Date Calculation (SMA) Added new option View ePharmacy Rx (VER) Added TRICARE and CHAMPVA examples of rejects on a new order Corrected earlier formatting errors Added signature alert Corrected typos Updated Service Code values Updated changed security key names Updated name of TRICARE CHAMPVA Bypass/Override Report Updated screen shots related to patch changes Updated wording based on reviewer feedback Added CHAMPVA functionality Added separate section to list changes to security keys Updated wording for ¾ Days Supply Hold Added rounding functionality for ¾ Days Supply Hold



Date	Patch	Description
		Added CHAMPVA to Glossary REDACTED
10/2011	PSO*7*359	Added new action View Additional Reject Info (ARI) Expanded ECME Numbers to twelve digits Updated screen shots related to patch changes Added TRICARE to Glossary Corrected typos Corrected formatting errors from 11/10 reissue REDACTED
09/2011	PSO*7*382	Added information regarding the new [PSO HRC PROFILE/REFILL] option. REDACTED
04/2011	PSO*7*251	Updated Revision History Updated Table of Contents Added Order Status Add the word "prompt" New OP Hidden Action Added site parameter Added example of site parameter Added codes New example Added information regarding Intervention Menu Hidden Actions Added blank page Added blank page Allergy/ADR Order Checks and Drug-Drug Interaction Enhancements Enhanced Order Checks Added remote order checking note CPRS Order Checks Added Intervention Menu to the screen example Incorporate dosing checks in verification process Incorporate dosing checks in verification process examples Verifying ePharmacy Orders Updated screens for Process Checks and Rx Verification CPRS Order Checks – How They Work Error Messages and Order Check Added API, DATUP, DIF, & FDB to the Glossary, and updated page numbering Updated Index to include Enhanced Drug-Drug Interactions, Duplicate Drug Order Check, Allergy/ADR Order Check Display and CPRS Order Checks, and updated page numbering REDACTED
11/2010	PSO*7*358	Added information regarding TRICARE Active Duty Bypass/Override details REDACTED

## **Preface**

This user manual describes the functional characteristics of Outpatient Pharmacy V. 7.0. It is intended for pharmacists and technicians who are familiar with the functioning of Outpatient Pharmacy in a Veterans Affairs Medical Center (VAMC).

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# Chapter 1: Introduction

---

The Outpatient Pharmacy V. 7.0 package:

- Provides a method for managing the medications given to Veterans who have visited a clinic or who have received prescriptions upon discharge from the hospital.
- Automatically generates prescription labels and prints refill request forms.
- Medication histories are kept online to permit checks for potential interactions.
- Profiles can be generated to assist the clinician in managing the patient's medication regimen.
- Management reports aid the pharmacy in controlling inventory and costs.

The primary benefits to the Veteran are the assurance that he or she is receiving the proper medication and the convenience of obtaining refills easily. The clinicians and pharmacists responsible for patient care benefit from a complete, accurate, and current medication profile available at any time to permit professional evaluation of treatment plans. Utilization, cost, and workload reports provide management cost controlling tools while maintaining the highest level of patient care.

The OneVA Pharmacy project (patch PSO\*7\*454 - December 2016) provided Pharmacists the capability to dispense prescriptions that originated in other VistA host sites. The OneVA Pharmacy User Manual and Installation Guide describe the site parameter required to use this functionality.

The OneVA Pharmacy patch, PSO\*7\*479, provided Pharmacists the ability to print a label when no error message is returned when retrieving the label information from the host system.





A number of site parameters allow the individual Department of Veterans Affairs Medical Center (VAMC) to customize the package to meet local needs.

## Documentation Conventions

This *Outpatient Pharmacy V. 7.0 Manager's User Manual* includes documentation conventions, also known as notations, which are used consistently throughout this manual. Each convention is outlined below.

**Table 1: Conventions / Notations**

Convention	Example
Menu option text is italicized.	There are eight options on the <i>Archiving</i> menu.
Screen prompts are denoted with quotation marks around them.	The "Dosage:" prompt displays next.
Responses in bold face indicate user input.	Select Orders by number: (1-6): 5
<Enter> indicates that the Enter key (or Return key on some keyboards) must be pressed. <Tab> indicates that the Tab key must be pressed.	Type Y for Yes or N for No and press <Enter>. Press <Tab> to move the cursor to the next field.

Convention	Example
 <p data-bbox="203 331 673 394">Indicates especially important or helpful information.</p>	 <p data-bbox="820 331 1414 394">Up to four of the last LAB results can be displayed in the message.</p>
 <p data-bbox="203 451 781 571">Indicates that options are locked with a particular security key. The user must hold the particular security key to be able to perform the menu option.</p>	 <p data-bbox="820 451 1252 514">This option requires the security key PSOLOCKCLOZ.</p>

## Getting Help

?, ??, ??? One, two, or three question marks can be entered at any of the prompts for online help. One question mark elicits a brief statement of what information is appropriate for the prompt. Two question marks provide more help, plus the hidden actions, and three question marks will provide more detailed help, including a list of possible answers, if appropriate.

## Related Manuals

The following manuals are located on the VistA Documentation Library (VDL) at: <http://www.va.gov/vdl>.

### Main Package Documentation

- *Outpatient Pharmacy V. 7.0 Release Notes*
- *Outpatient Pharmacy V. 7.0 Manager's User Manual*
- *Outpatient Pharmacy V. 7.0 Pharmacist's User Manual*
- *Outpatient Pharmacy V. 7.0 Technician's User Manual*
- *Outpatient Pharmacy V. 7.0 User Manual – Supplemental*
- *Outpatient Pharmacy V. 7.0 Technical Manual/Security Guide*
- *Dosing Order Check User Manual*
- *VistA to MOCHA Interface Document*
- *Installation Guide – OneVA Pharmacy*
- *Release Notes – OneVA Pharmacy*
- *User Manual – OneVA Pharmacy*

### Additional Documentation

Additional documentation related to specific projects is also located on the VDL. For example, there may be several different Release Notes documents, which apply to specific projects. Also, there may be several sets of “Change Page” documents, which apply to changes made only for a specific package patch.

# Chapter 2: List Manager

The screen displayed when processing an order has changed dramatically from the previous version of Outpatient Pharmacy (e.g., v. 6.0). The new screen was designed using List Manager.

This new screen gives more information and easier accessibility to vital reports and areas of a patient's chart.

Please take the time to read over the explanation of the screen and the actions that can now be executed at the touch of a key. This type of preparation before attempting to use List Manager will reduce the time and effort needed to become skilled in order processing with this new version of List Manager.

**Figure 1: Screen Overview**

## Outpatient List Manager

The screenshot shows the 'Outpatient List Manager' interface. At the top, it displays 'Patient Information' and 'Feb 09, 2006 16:31:03'. The page number is 'Page: 1 of 2'. The patient's name is 'OPPATIENT17, ONE'. Other details include 'PID: 000-12-3456', 'DOB: AUG 30, 1948 (57)', 'SEX: FEMALE', 'Ht (cm): 175.26 (08/06/2000)', 'Wt (kg): 108.18 (01/14/2006)', 'CrCL: <Not Found> (CREAT: Not Found)', and 'BSA (m2): 1.95'. There is a '+' sign below this information. The 'List Area (Scrolling region)' contains 'Eligibility: SERVICE CONNECTED 50% to 100% SC%: 70' and 'RX PATIENT STATUS: SC LESS THAN 50%'. Below this is 'Disabilities:' followed by '1313 TWIN OAKS LANE', 'ANYVILLE', 'ALABAMA 12345', and 'Prescription Mail Delivery: Regular Mail'. To the right of the address is 'HOME PHONE: 555-555-8361', 'CELL PHONE:', and 'WORK PHONE:'. The 'Action Area' at the bottom lists 'Allergies' with 'Verified: PEANUTS,' and a '+' sign. Below this is a menu with options: 'EA Enter/Edit Allergy/ADR Data', 'DD Detailed Allergy/ADR List', 'PU Patient Record Update', and 'EX Exit Patient List'. The prompt 'Select Action: Quit//' is at the bottom. Annotations include 'Allergy Indicator' pointing to the 'A' in '<A><LP>' and 'Pregnancy/Lactation Indicator' pointing to the 'LP' in '<A><LP>'.

**Table 2: Screen Area Descriptions**

Area	Description
Screen title	The screen title changes according to what type of information List Manager is displaying (e.g., Patient Information, Medication Profile, New OP Order (ROUTINE), etc.).



Area	Description
Allergy indicator	This indicator displays when there has been information entered into the ALLERGY field for the patient. The indicator displays "NO ALLERGY ASSESSMENT" if there is no allergy assessment for the patient.
Pregnancy/Lactation indicator	This indicator displays a P when the patient is pregnant and a L when the patient is lactating. The indicator does not display if the patient is not pregnant and is not lactating.
Header area	The header area is a "fixed" (non-scrollable) area that displays patient information, including demographic information and Clinical Alerts.
List area	(scrolling region) This area scrolls (like the previous version) and displays the information on which action can be taken.
Message window	This section displays a plus (+) sign, minus (-) sign, or informational text (i.e., Enter ?? for more actions). If a plus sign is entered at the action prompt, List Manager will "jump" forward a page. If a minus sign is displayed and entered at the action prompt, List Manager will "jump" back a screen. The plus and minus signs are only valid actions if they are displayed in the message window.
Action area	A list of actions display in this area of the screen. If a double question mark (??) is entered at the "Select Item(s)" prompt, a "hidden" list of additional actions that are available will be displayed.

**Figure 2: Indicators and Definitions**

**Order Status and CMOP Indicators**

**Allergy Indicator**

**Pregnancy/Lactation Indicator**

**Return To Stock Indicator**

**Copy Indicator**

**ePharmacy Indicator**

**Pending Orders**

**Flagged Order**

**Non-VA Meds Orders**

Medication Profile May 22, 2006 10:44:56 Page: 1 of 1  
 OPPATIENT16, ONE  
 PID: 000-24-6802 Ht (cm): 177.80 (02/08/2004)  
 DOB: APR 3, 1941 (65) Wt (kg): 90.45 (02/08/2004)  
 SEX: MALE Non-VA Meds on File  
 CrCL: 102.4 (est.) (CREAT:1.0mg/dL 10/30/12) BSA (m2): 2.08  
 Last entry on 01/13/01

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----ACTIVE-----								
1	503902	ACETAMINOPHEN 500MG TAB	60	AT	05-22	05-22	3	30
2	503886\$	DIGOXIN (LANOXIN) 0.2MG CAP	60	A>	05-07	05-07	5	30
3	503871\$	HISTOPLASMIN 1ML	1	A	03-14	03-14R	5	30
4	100002042\$e	NALBUPHINE HCL INJ 10MG/ML	1	A	03-14	03-14	5	30
5	100002040\$	SALICYLIC ACID 40% OINT (OZ)	1	S	03-14	03-17	5	30
-----DISCONTINUED-----								
6	503881	BACLOFEN 10MG TABS	30	DC	04-07	05-01	2	30
7	100002020A\$	TIMOLOL 0.25% OPTH SOL 10ML	1	DE	02-03	02-03	5	30
-----HOLD-----								
8	100001942	ABDOMINAL PAD 7 1/2 X 8 STERILE	1	H	09-28	09-28	5	30
-----NON-VERIFIED-----								
9	100002039\$	BACLOFEN 10MG TABS	30	N	03-14	03-14	5	30
-----PENDING-----								
10		AMPICILLIN 250MG CAP	QTY: 40		ISDT: 05-29		REF: 0	
11		SIMETHICONE 40MG TAB	QTY: 30		ISDT: 05-30		REF: 3	
-----NON-VA MEDS (Not dispensed by VA)-----								
		GINGKO EXT 1 TAB ONCE A DAY BY MOUTH			Date Documented: 01/13/01			
		IBUPROFEN 50MG TAB			Date Documented: 12/10/00			

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

All orders are grouped by like statuses and then listed alphabetically within the subgroup.

**Order Status:** The current status of the order. These statuses include:

- A Active
- S Suspended
- N Non-Verified or Drug Interactions
- HP Placed on hold by provider through CPRS
- H Placed on hold via backdoor Pharmacy
- E Expired
- DP Discontinued by provider through CPRS
- DE Discontinued due to edit via backdoor Pharmacy
- DC Discontinued via backdoor Pharmacy

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

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



A “B” will be appended to the above statuses if the Bad Address Indicator was set and there was no active temporary address at the time of the last label activity.

**Table 3: Indicators**

Indicators	Description
CMOP Indicators	There are two separate indicators when the drug in an order is marked for Consolidated Mail Outpatient Pharmacy (CMOP) processing. This indicator is displayed after the Order Status if applicable. <ul style="list-style-type: none"> <li>&gt; Drug for the prescription is marked for CMOP</li> <li>T Displayed when the last fill is either in a Transmitted or Retransmitted CMOP state. (This indicator can overwrite the “&gt;” indicator.</li> </ul>
Copay Indicator	A “\$” displayed to the right of the prescription number indicates the prescription is copay eligible.
ePharmacy Indicator	An ‘e’ displayed to the right of the prescription number indicates that the prescription is electronic third party billable.
Return to Stock Indicator	An “R” displayed to the right of the Last Fill Date indicates the last fill was returned to stock.
Pending Orders	Any orders entered through Computerized Patient Records System (CPRS), or another outside source, that have not been finished by Outpatient Pharmacy.
Non-VA Meds	Any over the counter (OTC) medications, herbal supplements, medications
Orders	prescribed by providers outside the VA, and medications prescribed by the VA, but purchased by the patient at an outside pharmacy are displayed here. Non-VA Meds orders cannot be placed or updated in Outpatient Pharmacy. The user can input information about a patient’s use of Non-VA Meds only through CPRS. However, the user can use either CPRS or Outpatient Pharmacy menu options to view Non-VA Meds data in a patient’s medical records.

Indicators	Description
Third Party Rejects	Any prescriptions that are rejected by third party payers because of Refill Too Soon (code 79) or Drug Utilization Review (DUR – code 88) are displayed in this section.

### Example: Showing Rejected Prescriptions

```

Medication Profile      August 12, 2006@12:35:04      Page: 1 of 1
OPPATIENT16,ONE      <A>
  PID: 000-24-6802      Ht (cm): 177.80 (02/08/2005)
  DOB: APR 3,1941 (65)      Wt (kg): 90.45 (02/08/2005)
  SEX: MALE
  CrCL: 78.1(est.) (CREAT:1.0mg/dL 6/24/03)      BSA (m2): 2.08
                                ISSUE  LAST  REF  DAY
                                QTY ST  DATE  FILL REM  SUP
-----REFILL TOO SOON/DUR REJECTS (Third Party)-----
1 51368009$e      DIGOXIN (LANOXIN) 0.05MG CAP      90 A> 02-16 02-16 3 90
2 51360563e      OXYBUTYNNIN CHLORIDE 15MG SA TAB      180 S> 02-15 05-06 0 90
-----ACTIVE-----
3 100003470e      ABSORBABLE GELATIN FILM      1 A 11-04 11-04 5 31
4 100003461      ACETAMINOPHEN 650MG SUPPOS.      10 A> 11-04 11-04 1 10
5 100003185e      ALBUMIN 25% 50ML      2 A 08-01 08-01 5 5
-----DISCONTINUED-----
6 100003530      ANALGESIC BALM 1 POUND      1 A 01-08 01-08 3 90
7 100003400      APPLICATORS, COTTON TIP STERILE      10 A 09-23 09-23 5 31

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

```

## Patient Demographics and Clinical Alerts

Patient demographic information and Clinical Alerts display in the List Manager header area when using certain Pharmacy options.

The demographic details are derived from existing patient information and include details such as date of birth, weight, height, and gender, as well as information about the patient’s primary care team and/or physician, physician contact numbers (office phone/pager), clinician remarks, and the assigned or recent facility where care is received, if available.

Clinical Alerts are used to convey important patient care information. Pharmacy Supervisors can enter one or more Clinical Alerts to make pharmacy personnel aware of things like drug interactions or the patient’s participation in clinical trials. Use the Clinical Alert Enter/Edit [PSO CLINICAL ALERT ENTER/EDIT] option to add, edit, or delete Clinical Alerts from a patient’s record.

```

Select OPTION NAME: PSO CLIN
1 PSO CLINIC COSTS      Clinic Costs
2 PSO CLINICAL ALERT ENTER EDIT      Clinical Alert Enter/Edit

```

Patient demographics and any Clinical Alerts are prominently displayed when using any of the following Pharmacy options:

- Medication Profile [PSO P]
- View Prescriptions [PSO VIEW]

- Patient Prescription Processing [PSO LM BACKDOOR ORDERS]
- Complete Orders from OERR [PSO LMOE FINISH]

### Example: Clinical Alerts Displayed with Patient Demographics

```

OPPATIENT16,ONE <A>
PID: 000-12-3456 Ht (cm): 175.26 (08/06/2000)
DOB: AUG 30,1948 (62) Wt (kg): 108.18 (01/14/2006)
SEX: MALE
Eligibility: SERVICE CONNECTED 50% to 100% SC%: 70
RX PATIENT STATUS: SC LESS THAN 50%

Extended Patient Demographics

Primary Care Team: GREEN TEAM Phone: (307)778-7533
PC Provider: PROVIDER,NINE TEN Position: PROV GREEN 7
Pager: 12345 Phone: 8001234567
Remarks: **PURPLE HEART RECIPIENT**
Assigned/Recent Facility: CHEYENNE VAMC

CLINICAL ALERTS:
AUG 16, 2017@08:53:38 ENROLLED IN CLINICAL TRIAL
OCT 06, 2017@11:54:32 REMOVED FROM CLINICAL TRIAL - ELEVATED BP

```



The Primary Care Team **Phone** number comes from the PHONE field in the TEAM file (#404.51).

The Provider **Phone** number comes from the OFFICE PHONE field in the NEW PERSON file (#200).

The Provider **Pager** number comes from either the DIGITAL PAGER or VOICE PAGER field in the NEW PERSON file (#200). If both fields are populated, then the digital pager number takes precedence and is displayed.

## Using List Manager with Outpatient Pharmacy

List Manager is a tool designed so that a list of items can be presented to the user for an action.

For Outpatient Pharmacy, the List Manager does the following:

- Allows the pharmacist or technician to browse through a list of actions
- Allows the pharmacist or technician to take action against those items
- Allows the user to select an action that displays an action or informational profile
- Allows the user to select a different action without leaving an option.

## Entering Actions

Actions are entered by typing the name(s), or synonym(s) at the “Select Item(s)” prompt. In addition to the various actions that may be available specific to a particular option, List Manager provides generic actions applicable to any List Manager screen. A double question mark (??) may be entered at the “Select Action” prompt for a list of all actions available. The following is a list of generic List Manager actions with a brief description. The synonym for each action is

shown in brackets following the action name. Entering the synonym is the quickest way to select an action.

**Table 4: Actions**

Action	Description
Next Screen [+]	Move to the next screen (may be shown as a default).
Previous Screen [-]	Move to the previous screen.
Up a Line [UP]	Move up one line.
Down a Line [DN]	Move down one line.
Shift View to Right [>]	Move the screen to the right if the screen width is more than 80 characters.
Shift View to Left [<]	Move the screen to the left if the screen width is more than 80 characters.
First Screen [FS]	Move to the first screen.
Last Screen [LS]	Move to the last screen.
Go to Page [GO]	Move to any selected page in the list.
Re Display Screen [RD]	Redisplay the current.
Print Screen [PS]	Prints the header and the portion of the list currently displayed.
Print List [PL]	Prints the list of entries currently displayed.
Search List [SL]	Finds selected text in list of entries.
Auto Display (On/Off) [ADPL]	Toggles the menu of actions to be displayed/not displayed automatically.
Quit [QU]	Exits the screen (may be shown as a default).

## Outpatient Pharmacy Hidden Actions

The Outpatient Pharmacy hidden actions will display with the previous hidden actions once a completed or finished order is selected and a double question mark (??) is entered at the “Select Action:” prompt.

The following hidden actions appear on the Medication Profile screen when utilizing Patient Prescription Processing [PSO LM BACKDOOR ORDERS] and can only be applied to one order at a time.

**Table 5: Hidden Actions**

Action	Description
Activity Logs [AL]	Displays the Activity Logs.
Copy [CO]	Allows the user to copy and edit an order.
Check Interactions [CK]	Allows a user to perform order checks against the patient's active medication profile with or without a prospective drug.
DIN	Displays available drug restriction/guideline information for the
	Dispense Drug and Orderable Item associated with the selected medication order.

Action	Description
Intervention Menu [IN]	Intervention menu allows the user to enter a new intervention or delete, edit, print, and view an existing intervention.
Hold [HD]	Places an order on a hold status.
Other OP Actions [OTH]	Allows the user to choose from the following sub-actions: Progress Note [PN] Action Profile [AP] Print Medication Instructions [MI] Display Orders' Statuses [DO] Non-VA Meds Report [NV]
Patient Information [PI]	Shows patient information, allergies, adverse reactions, and pending clinic appointments.
Pull Rx [PP]	Action taken to pull prescription(s) early from suspense.
BY	Bypass 3/4 Day Supply
Reprint [RP]	Reprints the label.
View Reject [REJ]	Allows the user to view and resolve the Refill Too Soon or Drug Utilization Review returned by the third party payer for a specific prescription/fill claim.
Unhold [UH]	Removes an order from a hold status.
Verify [VF]	Allows the pharmacist to verify an order a pharmacy technician has entered.

The PSO HIDDEN ACTIONS Protocol in PROTOCOL File (#101) includes two hidden actions, PSO LM BACKDOOR MARK AS TITRATION and PSO LM BACKDOOR TITRATION RX REFILL, which are both added to the PROTOCOL File (#101).

```

***** IMPORTANT *****
The enhancements related to Titration/Maintenance dose Rx are made only
for Outpatient Pharmacy package. The corresponding changes to CPRS package
are not included at this time. Therefore, the CPRS Order Copy and Order
Change functionalities will continue to function as is. Furthermore, there
will be no indication of a Titration/Maintenance order in the CPRS
application.
*****

```

There is also a hidden action, TR (Convert Titration Rx), in the Patient Prescription Processing [PSO LM BACKDOOR TITRATION RX REFILL] option. This action populates the MAINTENANCE DOSE RX (#45.2) field in the PRESCRIPTION File (#52). When a titration to maintenance prescription needs to be refilled so the patient can continue on the Maintenance Dose, this option allows the users to create a new prescription with the maintenance dose only. This process works similar to copying an existing prescription; however, it can only be used on prescriptions with the following characteristics:

- Rx is a complex order with a THEN conjunction
- Rx is released
- Rx status is ACTIVE
- Rx does not have refills previously ordered
- Rx # Of Refills is greater than 0 (zero)

Before the new Maintenance Rx can be accepted, the user is prompted to validate the QTY field for the new Rx, which may or may not be automatically re-calculated. Only the last dose from the original prescription is carried over to the new Maintenance Rx, and the # of Refills field is decreased by 1 because the new Maintenance Rx counts as a fill.

Once a user verifies the information for the Maintenance Rx is accurate, they can accept the Maintenance Rx. This action triggers a Duplicate Drug check against the original complex order, which must be discontinued before the new Maintenance Rx can be accepted. After the new Maintenance Rx is accepted, it will have the new indicator 'm' on the right side of the Rx # in the patient's Medication Profile.

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----ACTIVE-----								
1	100005436m	AMOXAPINE 50MG TAB	30	S	09-26	09-26	1	30
2	100005022	AMOXICILLIN 250MG CAP	30	A	08-18	08-18	11	30
3	100005035	KALETRA	3	A	09-29	09-29	0	3

## Speed Actions

These Outpatient Pharmacy actions are referred to as “speed actions” and appear on the Medication Profile screen. These actions can be applied to one or more orders at a time.

**Table 6: Speed Actions**

Action	Description
Reprint [RP]	Reprints the label.
Renew [RN]	A continuation of a medication authorized by the provider.
Refill [RF]	A second or subsequent filling authorized by the provider.
Reprint Signature [RS]	Reprints the signature log.
Discontinue [DC]	Status used when an order was made inactive either by a new order or by the request of a physician.
Release [RL]	Action taken at the time the order is filled and ready to be given to the patient.
Pull Rx [PP]	Action taken to pull prescription(s) early from suspense.
Inpat. Profile [IP]	Action taken to view an Inpatient Profile.
CM	Action taken to manually queue to CMOP.
Fill/Rel Date Disply [RDD]	Switch between displaying the FILL DATE column and the LAST RELD column.
Display Remote [DR]	Action taken to display a patient's remote prescriptions.


## Other Outpatient Pharmacy ListMan Actions

**Table 7: ListMan Actions**


Action	Description
Exit [EX]	Exit processing pending orders.
AC	Accept.
BY	Bypass.
DC	Discontinue.
ED	Edit.
FN	Finish.

## Other Screen Actions

**Table 8: Other Actions**

Action	Description
Edit/Enter Allergy/ADR Data [EA]	Provides access to the Adverse Reaction Tracking package to allow entry and/or edit of allergy adverse reaction data for the patient. See the Adverse Reaction Tracking package documentation for more information on allergy/ADR processing.
Detailed Allergy Display [DA]	Displays a detailed listing of the selected item from the patient's allergy/ADR list. Entry to the Edit Allergy/ADR Data action is provided with this list also.
Patient Record Update [PU]	Allows editing of patient data such as SSN, birth date, address, phone, and outpatient narrative. Patient data can also be updated using the <i>Update Patient Record</i> menu option. If implementing Other Language Modifications, either can be used to set a patient's other language preference.
New Order [NO]	Allows new orders to be entered for the patient.
Exit Patient List [EX]	Exit patient's Patient Information screen so that a new patient can be selected.
Refill Rx from Another VA Pharmacy (RF)	<p>OneVA Pharmacy (patch PSO*7*454) introduced the RF action item on the new 'REMOTE OP Medications' profile. The RF action item allows the Pharmacist to refill a prescription order that originated from another VA Pharmacy location.</p>  <p>Note: For additional information regarding OneVA Pharmacy RF processing go to the VA Software Document Library (VDL), select the Clinical section then choose the "Pharm: Outpatient Pharmacy" page. Locate the "User Manual – OneVA Pharmacy" document.</p>



Action	Description
Partial from Another VA Pharmacy (PR)	<p>OneVA Pharmacy (patch PSO*7*454) introduced the PR action item on the new 'REMOTE OP Medications' profile. The PR action item allows the Pharmacist to partial a prescription order that originated from another VA Pharmacy location.</p>  <p>Note: For additional information regarding OneVA Pharmacy PR processing go to the VA Software Document Library (VDL), select the Clinical section then choose the "Pharm: Outpatient Pharmacy" page. Locate the "User Manual – OneVA Pharmacy" document.</p>
Preg/Lact Display [PL]	Displays a detailed listing of the patient's current pregnant episode and current breastfeeding/lactating episode.

## Chapter 3: Using the Outpatient Pharmacy Manager Menu

---

This manual describes options available on the *Outpatient Pharmacy Manager* menu. This menu should be assigned to supervisors, package coordinators, and members of the Automated Data Processing (ADP)/Information Resources Management Service (IRMS) staff.

### Example: Accessing the *Outpatient Pharmacy Manager* menu

```
Select OPTION NAME: PSO MANAGER      Outpatient Pharmacy Manager
Outpatient Pharmacy software - Version 7.0
```

The following options are available on the *Outpatient Pharmacy Manager* menu.

- *Archiving*
- *Autocancel Rx's on Admission*
- *Bingo Board*
- *Change Label Printer*
- *Check Drug Interaction*
- *Clozapine Pharmacy Manager*
- *Copay Menu*
- *DUE Supervisor*
- *Enter/Edit Clinic Sort Groups*
- *External Interface Menu*
- *Label/Profile Monitor Reprint*
- *Maintenance (Outpatient Pharmacy)*
- *Medication Profile*
- *Output Reports*
- *Pharmacy Intervention Menu*
- *Process Drug/Drug Interactions*
- *Release Medication*
- *Return Medication to Stock*
- *Rx (Prescriptions)*
- *ScripTalk Main Menu*
- *Supervisor Functions*
- *Suspense Functions*
- *Update Patient Record*
- *Verification*

## Patient Lookup

The ability to look up a patient by prescription number or wand a barcode with the prescription has been added to the patient lookup prompt on the following options.

- *Patient Prescription Processing* [PSO LM BACKDOOR ORDERS]
- *Medication Profile* [PSO P]
- *Rx (Prescriptions)* [PSO RX]
- *Update Patient Record* [PSO PAT]
- *Manual Print of Multi-Rx Forms* [PSO LM MULTI-RX PRINT]
- *ScripTalk Patient Enter/Edit* [PSO SCRIPTALK PATIENT ENROLL]
- *Patient Address Changes Report* [PSO ADDRESS CHANGE REPORT]
- *List Prescriptions Not Mailed* [PSO BAI NOT MAILED]
- *Non-VA Meds Usage Report* [PSO NON-VA MEDS USAGE REPORT]
- *Enter New Patient* [PSO BINGO NEW PATIENT]
- *Action Profile (132 COLUMN PRINTOUT)* [PSO ACTION PROFILE]
- *Poly Pharmacy Report* [PSOPOLY]

The help text for patient lookup reads as follows.

```
Enter the prescription number prefixed by a # (ex. #XXXXXXX) or
Wand the barcode of the prescription. The format of the barcode is
NNN-NNNNNNN where the first 3 digits are your station number.
- OR -
Enter the universal Member ID number from the patient's VHIC Card
or wand the barcode of the VHIC card
- OR -
Answer with PATIENT NAME, or SOCIAL SECURITY NUMBER, or last 4 digits
of SOCIAL SECURITY NUMBER, or first initial of last name with last 4
digits of SOCIAL SECURITY NUMBER
Do you want the entire NNNNNNNN-Entry PATIENT List?
```

## Chapter 4: Using the Archive Menu Option

---

This chapter describes the options on the *Archiving* menu.



This menu is locked with the PSOA PURGE key. The PSOA PURGE key should be assigned to all persons responsible for performing these functions.

### Archiving [PSO ARCHIVE]

The *Archiving* menu is used to build a data warehouse and manage resources by saving prescription data to external storage devices like tape, disk, or CD-ROM and then purging old prescriptions, typically those that have expired more than a year ago.

There are eight options on the *Archiving* menu:

- *Find*
- *Save to Tape*
- *Tape Retrieval*
- *Archive to File*
- *File Retrieval*
- *Purge \*\*> Out of order: Unavailable*
- *List One Patient's Archived Rx's*
- *Print Archived Prescriptions*

### Find [PSO ARCHIVE FIND]

This option identifies prescriptions that have expired or have been canceled before the selected date; the default date given to the user is 360 days ago. As the *Find* option runs, it prints a dot on the screen for each prescription identified.

### Save to Tape [PSO ARCHIVE TAPE SAVE]

The *Save to Tape* option records all information about the archived prescriptions gathered by the *Find* option to magnetic tape. The tape must be opened for variable length records. The first part of the tape holds an index that lists alphabetically all patients for whom prescriptions are recorded on the tape and, for each patient, a list of his or her prescriptions.

### Tape Retrieval [PSO ARCHIVE TAPE RETRIEVE]

The *Tape Retrieval* option reads information from the tape and prints a summary of all prescriptions for the selected patient. This printed copy should be directed to a printer with 132-

column width. Because the retrieval option reads the index first to find the patient, the tape must be rewound before each retrieval. It should be emphasized that this retrieval simply prints the information about the prescriptions. It does not restore this information to the on-line database.

## Archive to File [PSO ARCHIVE FILE SAVE]

The *Archive to File* option records all information about the archived prescriptions gathered by the *Find* option to a Host File Server (HFS) file. The first part of the file holds an index that alphabetically lists all patients for whom prescriptions are recorded and, for each patient, a list of his or her prescriptions. With the proper file name convention (e.g., ARC0797.TMP, ARC0897.TMP, etc.). These files can be grouped and stored on any medium on the operating system for long-term storage. Subsequently, the file can be deleted from the system, in effect producing a manageable data warehouse and freeing up system resources.



Any file name may be chosen for the archiving file. However, it is suggested that a naming convention be used to group the files for easier retrieval

### Example: Archive to File

```
Select Outpatient Pharmacy Manager Option: ARCHiving
Select Archiving Option: ARCHIve to File

13 Rx'S will be archived. Ok to continue Y/N? NO// YES YES
Do you want a hardcopy of your archived prescriptions? NO// <Enter>

Host File Server Device: [Select Host File Server Device]
HOST FILE NAME: [Enter the unique name for the file.]

Recording information.....
Select Archiving Option:
```

## File Retrieval [PSO ARCHIVE FILE RETRIEVE]

This option reads information from the HFS file and prints a summary of all prescriptions for the selected patient. This printed copy should be directed to a printer with 132-column width. It should be emphasized that the file must be copied from the long-term storage medium back onto the system and that this retrieval simply prints the information about the prescriptions. It does not restore this information to the on-line database.

### Example: File Retrieval

```
Select Archiving Option: FILE Retrieval

Host File Server Device: [Select Host File Server Device]
```

HOST FILE NAME: **[Enter the unique name for the file.]**

Output Device: **[Select Print Device]**

Do you want to print the file index? **YES**

&^NEW  
OPPATIENT10,ONE%000987654^4541C,5107A,  
OPPATIENT6,ONE%000135790^5269A,  
OPPATIENT16,ONE%000246802^4713,  
OPPATIENT17,ONE%000123456^628,629,630,631,981B,  
OPPATIENT2,ONE%000234567^4778,  
OPPATIENT29,ONE%000876543^916A,  
OPPATIENT31,ONE%000357901^4631,  
OPPATIENT11,ONE%000468024^450,  
!

Enter Patient Name : **OPPATIENT17,ONE** 01-01-09 000123456 NO NSC VETERAN

THE FOLLOWING SCRIPTS WERE ARCHIVED FOR :

OPPATIENT17,ONE (000123456) - 628,629,630,631,981B,

OPPATIENT17,ONE ID#: 000123456 ELIG:  
456 STREET DOB: 08-30-1948 PHONE: 5556789  
CARBON HILL  
ALABAMA 32423  
CANNOT USE SAFETY CAPS.  
DISABILITIES:

REACTIONS: UNKNOWN

RX RETRIEVAL FOR OPPATIENT17,ONE 07/17/07

PAGE 1

Rx: 628 DRUG: ACETAMINOPHEN W/CODEINE 15MG TAB TRADE NAME: QTY: 90 30  
DAY SUPPLY

SIG: T1 TAB 23D PRN  
LATEST: JUN 8,2007 # OF REFILLS: 5 REMAINING: 5 PROVIDER:  
OPPROVIDER30,TWO  
ISSUED: JUN 8,2007 CLINIC: DR.ANYTOWN DIVISION: GENERAL  
HOSPITAL  
LOGGED: JUN 8,2007 ROUTING: Window CLERK CODE:  
OPCLERK2,FOUR  
EXPIRES: CAP: NON-SAFETY STATUS: Active  
FILLED: JUN 8,2007 PHARMACIST: VERIFYING PHARMACIST: LOT #:  
NEXT: JUN 28,2007 COPAY TYPE: PSO NSC RX COPAY NEWCOPAY

TRANSACTION #:  
REMARKS: New Order Created due to the editing of Rx # 479

RX RETRIEVAL FOR OPPATIENT17,ONE 07/17/07

PAGE 2

Rx: 629 DRUG: ACETAMINOPHEN W/CODEINE 15MG TAB TRADE NAME: QTY: 90  
30 DAY SUPPLY

SIG: T1 TAB 23D PRN  
LATEST: JUN 8,2007 # OF REFILLS: 5 REMAINING: 5 PROVIDER:  
OPPROVIDER30,TWO  
ISSUED: JUN 8,2007 CLINIC: DR.ANYTOWN DIVISION: GENERAL  
HOSPITAL  
LOGGED: JUN 8,2007 ROUTING: Window CLERK CODE:  
OPCLERK2,FOUR

```

EXPIRES:                               CAP: NON-SAFETY           STATUS: Active
FILLED: JUN 8,2007  PHARMACIST:         VERIFYING PHARMACIST: LOT #:
NEXT: JUN 28,2007   COPAY TYPE: PSO NSC RX COPAY NEWCOPAY
TRANSACTION #:
REMARKS: New Order Created due to the editing of Rx # 479

LABEL LOG
#      DATE          REFERENCE    PRINTED BY          COMMENT
=====
1      JUN 8,2007    ORIGINAL    OPCLERK2,FOUR      From RX number 629

[This report has been abbreviated to save space.]

```

## Purge \*Temporarily Out of Order\*

### [PSO ARCHIVE PURGE]



**Note:** This option is inactivated until further notice.

When active, this option deletes all archived prescriptions from the PRESCRIPTION file. On platforms other than PCs, the journaling of the prescription global should be disabled before running this option and then enabled again after the purge is completed.

## List One Patient's Archived Rx's

### [PSO ARCHIVE LIST RX'S]

This option displays the basic patient statistics and the prescription numbers and dates of archiving for all archived prescriptions for the selected patient.

```

Select Archiving Option: LIST One Patient's Archived Rx's

Show archived prescriptions for:   OPPPATIENT,TEN  OPPATIENT,TEN      YES      SC
VETERAN

DEVICE: HOME//  <Enter>  GENERIC INCOMING TELNET

OPPATIENT,TEN                ID#:   000-12-3499
4 ABBEY LANE                 DOB:   04-04-1944
ANYTOWN                     PHONE:  555-5678
NEW YORK                    ELIG:  EMPLOYEE

ARCHIVED: 09/10/06 - 100001174,
          01/06/07 - 100001229,100001232,

Please press RETURN to continue

```

## Print Archived Prescriptions

### [PSOARINDEX]

This option allows the user to print a list of archived prescriptions from the PHARMACY ARCHIVE file.

# Chapter 5: Autocanceling

---

This chapter describes the option for canceling prescriptions for patient who are admitted as inpatients.

## Autocancel Rx's on Admission [PSO AUTOCANCEL1]

Using the *Autocancel Rx's on Admission* option, a job can be tasked every night to cancel the outpatient prescriptions of patients who were admitted three (3) days previous. Enter the desired time to queue the job to run. The time set for the job to run can also be edited with this option. The job should be set to run at a time between 5:30 p.m. and 11:30 p.m. (or as convenient for the site).

```
Select Outpatient Pharmacy Manager Option: Autocancel Rx's on Admission

                                Edit Option Schedule
Option Name: PSO AUTOCANCEL
Menu Text: Autocancel on Admission                                TASK ID: 1090241

QUEUED TO RUN AT WHAT TIME: JUN 27,2007@12:02

DEVICE FOR QUEUED JOB OUTPUT:

QUEUED TO RUN ON VOLUME SET:

    RESCHEDULING FREQUENCY: 1D

        TASK PARAMETERS:

            SPECIAL QUEUEING:

s          SAVE
n          NEXT PAGE
r          REFRESH

COMMAND:                                Press <PF1>H for help    Insert
```



## Chapter 6: Using the Bingo Board Menu

---

This chapter describes the options available on the *Bingo Board* menu.

### **Bingo Board**

#### **[PSO BINGO BOARD]**

Pharmacy management uses the *Bingo Board* menu to control the bingo board functions. The bingo board notifies a patient that the prescription has been filled. This is accomplished by displaying the patient's name or a number on monitors located in the pharmacy and non-pharmacy (i.e., cafeteria) waiting areas.

The first prompts upon entering Outpatient Pharmacy are to enter the division and label printer. If more than one group has been defined, a prompt to enter a display group will appear. If only one group is defined, it is automatically selected, and no prompt appears. If no display group is defined, it is assumed that the site is not set up to run bingo board.

The following options are available on the *Bingo Board* menu:

- *BM*    *Bingo Board Manager*
- *BU*    *Bingo Board User*

### **Bingo Board Manager (BM)**

#### **[PSO BINGO MANAGER]**

The necessary options to set up the bingo board can be accessed through the *Bingo Board Manager* menu. Before data entry can begin, the division must be defined when entering the software package. Divisions are manager defined but should be consistent with local policies in order to keep the statistical data relevant. At least one division must be defined.

After the division has been defined, the display parameters must be defined through the *Enter/Edit Display* option. The display group is a uniquely defined location where the patient data will be displayed. As with the division parameter, at least one display group must be defined.

Names now display differently on the bingo board. Names and ticket numbers can be displayed alphabetically in one column, and new names to the board will appear in reverse video for a user-defined amount of time. The user enters the time when creating a display group and it is stored in the GROUP DISPLAY file.



IRMS must set up a dedicated device to be used for the bingo board. Only devices with the sub-type C-VT can be entered at the “DISPLAY DEVICE” prompt. A DEC VT-220 with a coaxial output connected to a cable ready TV monitor is all that is needed on the hardware side.

The following options are available on the *Bingo Board Manager* menu:

- *Enter/Edit Display*
- *Auto-Start Enter/Edit*
- *Print Bingo Board Statistics*
- *Print Bingo Board Wait Time*
- *Purge Bingo Board Data*
- *Start Bingo Board Display*
- *Stop Bingo Board Display*

## Enter/Edit Display

### [PSO BINGO ENTER/EDIT DISPLAY]

This option allows locations where the patient data will be displayed to be defined uniquely. Either a new display group name or the name of an existing group to edit or delete can be entered.

If the name is chosen at the “NAME/TICKET” prompt, the “TICKET #” prompt will not appear when a new patient is entered in the *Enter New Patient* option.

The display cannot be changed from name to ticket when patients are already in the Group Display. All patients must be purged using the *Purge Bingo Board Data* option for that Group Display. After the data is purged, the NAME/TICKET field must be edited using this option. Then the patient can be re-entered, and ticket numbers assigned.

### Example: Enter/Edit Display

```
Select Bingo Board Manager Option: Enter/Edit Display

Select GROUP DISPLAY NAME: MAIN
  Are you adding 'MAIN' as a new GROUP DISPLAY (the 3RD)? Y (Yes)

NAME: MAIN// <Enter> [The name of the Display Group.]
NAME/TICKET: NAME NAME [Select either Name or Ticket # to display.]
MESSAGE:
  1>WEST CLINIC VAMC
  2>[This is a free text field. The message will appear on the screen for the users to view.]
EDIT Option: <Enter>
TWO COLUMN DISPLAY: Y YES [Display names/ticket #'s in one or two column.]
DISPLAY WAIT TIME: Y YES [Average display waiting time.]
NORMAL WAIT TIME: 10 [Normal wait time (in minutes) is entered by the site.]
DISPLAY SETUP HELP TEXT: Y YES

In order to automatically start and stop the bingo board monitor,
a dedicated device must be setup by your IRM Service

Once a dedicated device is setup, the bingo board can be scheduled
to automatically start and/or stop at user-defined times.

Enter 'NO' at the DISPLAY SETUP HELP TEXT prompt not to display this help text.

DISPLAY DEVICE: ? [Device dedicated by IRMS for bingo board setup.]
  Only devices with Sub-type starting with "C-VT" are allowed.
  Answer with DEVICE NAME, or LOCAL SYNONYM, or $I, or VOLUME SET(CPU), or SIGN-ON/SYSTEM
  DEVICE, or FORM CURRENTLY MOUNTED
DISPLAY DEVICE: [Select print device.]
```

```
AUTO-START DISPLAY DEVICE: Y YES [Sets the display group to start automatically.]
Do you want to initialize auto-start now? NO// Y YES
Enter Start Time: ?

Enter time as HH:MM in 12 hour format (For example, '8:00' or '8:00AM').

Enter Start Time: 9:30am [Start time for the display group.]
Enter Stop Time: 4:00pm [Stop time for the display group.]
```



A time that is at least two minutes in the future must be entered at the “QUEUED TO RUN AT WHAT TIME” prompt.

The software will convert it to today’s date with the time entered. For example, to queue it to run later today and the current time is 8:00 a.m., a time like 9:30 a.m. can be entered. It will default to today’s date. To queue for tomorrow, enter a time like **T+1@00:00am/pm**. For example, to queue it for 8:30 a.m. and the current time is 3:00 p.m., **T+1(or tomorrow's date)@8:30am** must be entered.



If the local Outpatient Pharmacy only runs Monday-Friday, enter **D@00:00am/pm** (with D representing "Days of the Week) at the “RESCHEDULING FREQUENCY” prompt. For example, to queue it to run at 7:45 a.m. Monday through Friday, enter **D@7 : 45am**.

## Auto-Start Enter/Edit [PSO BINGO INITIALIZE]

This option is used to change the start and stop times of the display groups that have been set up to automatically start and/or stop each day. The scheduling time and frequency can also be changed using this option.

### Example: Auto-Start Enter/Edit

```
Select Bingo Board Manager Option: Auto-Start Enter/Edit

You want to edit Display Group(s) Start/Stop times? NO// Y YES
Select GROUP DISPLAY NAME: MAIN
Enter Start Time: 3:00AM// <Enter>
Enter Stop Time: 4:00PM// <Enter>

Select GROUP DISPLAY NAME:
```

See the *Enter/Edit Display* option for an example of the auto-start screen.

## Print Bingo Board Statistics [PSO BINGO REPORT PRINT]

With this option, a report can be generated covering a date range that can be sorted by single division or all divisions. Date ranges in the future are not allowed. The start date must be a date that precedes the end date.

The Bingo Board Report includes totals on number of patients, waiting time, and average waiting time.

```

Select Bingo Board Manager Option: Print
  1   Print Bingo Board Statistics
  2   Print Bingo Board Wait Time
CHOOSE 1-2: 1 Print Bingo Board Statistics

Start Date:   060907 (JUN 09, 2007)
Ending Date:  070907 (JUL 09, 2007)

Report all Divisions? N// Y YES
DEVICE: HOME// [Select print device.]

No data found for TROY division for this date range
No data found for ANYTOWN division for this date range
No data found for JAN division for this date range
No data found for VAL division for this date range

          B I N G O   B O A R D   R E P O R T   JUL 09, 2007
REPORT PERIOD: JUN 09, 2007 through JUL 09, 2007

|-----|
| DIVISION: All Divisions          DATE:                               |
|                                     (Time In Minutes)                 |
| TIME PERIOD  # PATIENTS SERVED  TOT WAIT TIME  AVG WAIT TIME  |
|-----|-----|-----|-----|
| Total                0                0.00                |
|-----|-----|-----|-----|

```

## Print Bingo Board Wait Time [PSO BINGO REPORT WAIT TIME]

This option allows a report to be printed that sorts the entries in the PATIENT NOTIFICATION (Rx READY) file by Display Group, then Wait Time. This report can be used to keep track of the bingo board activity for a given day. To keep a permanent record of this activity, this report can be printed each day, preferably at the end of the day. The following are definitions of the items found on this report.

**Table 9: Print Bingo Board Report**

Field	Description
Name	The name of the patient. For a patient with multiple entries, his/her name is printed only once.
Time In	The time that the patient's name was entered in the computer.
Time Out	The time that the patient's name was entered on the bingo board monitor.
Rx#	The prescription number.
Wait Time	The amount of time it took to fill the prescription. It is the difference between Time In and Time Out. For orders with more than one prescription, the wait time is the same for each.
Display	The Display Group that the entries were entered under. Multiple site hospitals may have multiple display groups set up to coincide with each site.

Field	Description
Total	A summation of all the Wait Times in the PATIENT NOTIFICATION (Rx READY) file. It includes the wait time of the patients with multiple entries. For example, if it took 3 minutes to fill each of the three prescriptions for OPPATIENT23,ONE, the Total function sums up the Wait Time as though it took 9 minutes.
Count	The number of Wait Time entries. It counts the number of wait time entries for each prescription, not each patient.
Mean	The average or middle value of the Wait Time range of values.
Minimum	The least Wait Time value in the range.
Maximum	The greatest Wait Time value in the range.
Dev. (Deviation)	A relative number that signifies the overall departure from the average.

If this report is not printed each day, data may be lost because many sites purge the PATIENT NOTIFICATION (Rx READY) file each morning.

### Example: Print Bingo Board Wait Time

```
Select Bingo Board Option: BM Bingo Board Manager

          BINGO BOARD CONTROL PANEL

Select Bingo Board Manager Option: PRINT
  1   Print Bingo Board Statistics
  2   Print Bingo Board Wait Time
CHOOSE 1-2: 2 Print Bingo Board Wait Time
DEVICE: [Select Print Device]

          (report follows)

BINGO BOARD WAIT TIME PRINTOUT                MAY 21,2007  15:34  PAGE 1
NAME                TIME          TIME          Rx#          WAIT
                   IN            OUT
-----
          DISPLAY: WAITING ROOM
OPPATIENT30,ONE    1503      1504      2004342      1
                   1503      1504      2004343      1
                   1503      1504      2004345      1
                   1509      1512      2004346      3
OPPATIENT14,ONE   1509      1512      2004350      3
                   1509      1512      2004354      3
OPPATIENT23,ONE   1509      1512      2002744      3
                   1509      1512      2006376      3
                   1509      1512      2006377      3
OPPATIENT19,ONE   1524      1527      2002403      3
                   1524      1527      2006034      3
OPPATIENT26,ONE   1524      1527      2002365      3
                   1524      1527      2002573      3
-----
TOTAL                33
COUNT              13
MEAN                  3
MINIMUM               1
MAXIMUM               3
DEV.                  1
```

## **Purge Bingo Board Data** **[PSO BINGO PURGE]**

With this option all entries can be deleted from the PATIENT NOTIFICATION (Rx READY) file.



It is recommended that data be purged each day. However, if data is not purged, it will not affect the accuracy of the bingo board statistics.

If this option is used before the end of the workday, all data will be lost except the statistical data on those prescriptions already picked up.

## **Start Bingo Board Display** **[PSO BINGO START]**

The *Start Bingo Board Display* option has been changed so that the bingo board can be started without tying up a terminal or requiring the user who starts it to have multiple sign-on capability. A site parameter has been added to indicate whether a dedicated device has been reserved. If so, the user is prompted to enter the device name. If a dedicated device is set up, the user is able to automatically start or stop the board via TaskMan. The user is also prompted for a Display Group that is saved as a site parameter. This option requires working with local IRMS to complete its setup.

Use this option to start the bingo board display. If there are no prescription entries yet, the message typed in the GROUP DISPLAY will cycle. When the entries begin, the message will be displayed and held for a period of time, then pages of numbers or names will be displayed until all the names have been shown. Then the cycle starts over.



The terminal that executes the option may or may not be the display terminal.

## **Stop Bingo Board Display** **[PSO BINGO STOP]**

This option is used to stop the bingo board display. The bingo board can be stopped and started as often as desired. It must be stopped if any changes are made to the display group currently being used. This option can be accessed from any terminal.



When the display is stopped and “Yes” entered at the purge prompt, a second prompt displays and allows either all of the display groups or a specific display group to be selected for purging.

## **Bingo Board User (BU)** **[PSO BINGO USER]**

The *Bingo Board User* menu enables use of the bingo board display. The options on this menu allow a patient's name or a number to be displayed, entered, or removed from the bingo board display located in the pharmacy area.

When the routing for an order is set to "Window", the entering of prescription orders stores information in the bingo board PATIENT NOTIFICATION (Rx READY) file. For new, renew, pull early from suspense, refill orders, barcode refill/renew, and finish process for orders entered via CPRS, the date and time is captured when the order is stored in this file. The same occurs for partials, except the time is captured when a prescription number is entered.

Releasing the prescription places the name or ticket number of the patient on the bingo board monitor if a display group exists and stores data in the WAITING TIME file. The options on this menu are used to manually enter, display, or remove a patient's name or number from the monitor.

The following options are available on the *Bingo Board User* menu:

- *Enter New Patient*
- *Display Patient's Name on Monitor*
- *Remove Patient's Name from Monitor*
- *Status of Patient's Order*

### **Enter New Patient** **[PSO BINGO NEW PATIENT]**

Use this option to enter the name of a new patient manually on the bingo board. Each prescription number for the patient's order must also be entered.

A "Ticket #" prompt displays if ticket number was chosen as the method of display in the *Enter/Edit Display* option on the *Bingo Board Manager* menu. The ticket number will be entered first, and at the next prompt each of the prescription numbers for that patient will be entered.

### **Display Patient's Name on Monitor** **[PSO BINGO DISPLAY PATIENT]**

Use this option to begin displaying the name or number of a patient whose prescription is ready. The message, "PRESCRIPTIONS ARE READY FOR:" appears as fixed text on the display screen. This option displays the following reminder for ECME billable prescriptions:

```
*** This Pharmacy Rx requires a patient signature! ***
```

## Remove Patient's Name from Monitor [PSO BINGO DELETE PATIENT]

After the patient picks up the prescription, the name or ticket number can be removed from the display either manually or through the barcode reader. This option displays the following reminder for ECME billable prescriptions: “\*\*\* This ePharmacy Rx requires a patient signature! \*\*\*”



It is recommended that a patient’s name be removed from the monitor as soon as the prescription is picked up.

## Status of Patient's Order [PSO BINGO STATUS]

This option enables checking of the number of prescriptions a patient has ready, the division, time in/time out, and the prescription number(s). There are four possible statuses:

**Table 10: Patient Order Status**

Status	Description
Pending	Active order input via CPRS that is in the PENDING OUTPATIENT ORDERS file.
Being Processed	Order that is in the PATIENT NOTIFICATION (Rx READY) file, but not displayed.
Ready For Pickup	Order that is in the PATIENT NOTIFICATION (Rx READY) file and is being displayed.
Picked Up	Order that has been picked up.

### Example: Status of Patient's Order

```
Select Bingo Board User Option: status of Patient's Order
Enter Patient Name: OPPATIENT17,ONE      08-30-48      000123456      NO      NSC VETERAN
      OPPATIENT17,ONE has the following orders for 10/31/06
Being Processed: ***Entered on OCT 31, 2006***
      Division: GENERAL HOSPITAL      Time In: 10:27      Time Out:
      Rx #: 500416,
Pending:
      Orderable Item: ACETAMINOPHEN      Provider: OPPROVIDER24,TWO
      Entered By: OPPHARMACIST28,THREE      Time In: 10/31/06@06:46
      Drug: ACETAMINOPHEN 325MG TAB UD      Routing: MAIL
Ready For Pickup:
      Division: GENERAL HOSPITAL      Time In: 10:36      Time Out: 10:46
      Rx #: 1022731,
Enter Patient Name:
```



## ScripTalk Mapping Error Messages

This is a list of the error messages that will be displayed on the screen for a site using the Bingo Board in the event of a mapping issue with the ScripTalk device when ScripTalk labels are printed.

**Table 11: Bingo Board Errors Messages**

<b>Error Level</b>	<b>Error Message</b>	<b>Why This Message is Being Displayed</b>
System	Please review ScripTalk mapped device setup.	The system has detected that there is a printer in the PRINTER TO BE MAPPED field, but no device has been selected.
System	NO SCRIPTALK PRINTER DEFINED FOR THIS DIVISION!	The system cannot find a division printer defined. However, there is a properly defined printer in the PRINTER TO BE MAPPED field.
System	There is no mapped printer and the division printer is set for manual.	There is no PRINTER TO BE MAPPED and the Division printer is set for manual. No ScripTalk label will print.
System	NO SCRIPTALK PRINTER DEFINED FRO THIS DIVISION! No mapped printer defined. No ScripTalk label will print.	No printers are defined so no label will print.

## Chapter 7: Changing the Label Printer

---

This chapter describes the *Change Label Printer* option.

### Change Label Printer [PSO CHANGE PRINTER]

This option allows the user to change the printer to which labels are printed.

```
Select Outpatient Pharmacy Manager Option: Change Label Printer  
Select LABEL PRINTER: LABELPRT2// <Enter> LABELPRT2  
  
OK to assume label alignment is correct? YES//<Enter>
```

# Chapter 8: Check Drug Interaction

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

## Check Drug Interaction [PSO CHECK DRUG INTERACTION]

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

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

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

Drug 3:

Now Processing Enhanced Order Checks! Please wait...

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

CLINICAL EFFECTS: Increase hypoprothrombinemic effects of warfarin.
=====
Press Return to Continue...:

Display Professional Interaction monograph? N// YES

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

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

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

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

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

Press Return to Continue or "^" to Exit:

Professional Monograph
Drug Interaction with SIMVASTATIN 40MG TAB and WARFARIN 2MG TABS
```

CLINICAL EFFECTS: Increase hypoprothrombinemic effects of warfarin.

PREDISPOSING FACTORS: None determined.

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

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

Press Return to Continue or "^" to Exit:

Professional Monograph

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

REFERENCES:

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

Press Return to Continue or "^" to Exit:

Professional Monograph

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

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

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


Display Professional Interaction monograph? N// O

## Chapter 9: Controlling the Dispensing of Clozapine

---

This chapter describes the options available through Outpatient Pharmacy for dispensing Clozapine. Please see the “MH NCC User Guide/Training Plan Manual” for detailed instructions on clozapine registration with NCC.

### Clozapine Pharmacy Manager [PSOL MANAGER]

 This option requires a security key, PSOLOCKCLOZ.

Use this menu to control the dispensing of Clozapine. The following options are available on this menu

- *Register Clozapine Patient*
- *Display Lab Tests and Results*
- *List of Override Prescriptions*
- *Edit Data for a Patient in the Clozapine Program*

### Display Lab Tests and Results [PSOLAB LIST]

With this option, lab test results for patients receiving Clozapine can be displayed and monitored. This option should be assigned to all appropriate pharmacists. Monitoring lab test results is required by the Circular 10-90-059 regarding patient management protocol for the use of Clozapine, and should be run as specified in the circular. Date ranges for prescription fills should be 7, 14, or 28 days and ranges for lab tests should be at least 30 days.



For an emergency registration, the pharmacist is authorized to dispense a maximum one-time, 4 day supply.

### Edit Data for a Patient in the Clozapine Program [PSOL EDIT]

Use this option to edit data for a patient who has already been enrolled in the Clozapine treatment program. It is typically used to re-register a patient whose treatment has been discontinued and who has rejoined the program.



Local users cannot edit Clozapine Status within the Clozapine module.



**Note:** There are only two applicable statuses for a patient: Active (A) or Discontinued (D). Previously Pre-Treatment (P) and On-Hold (H) statuses were used but are now obsolete.

If the patient is new to the program, the status automatically changes to Discontinued if the first clozapine prescription/order is not filled within 28 days of being marked Active.

Patch YS\*5.01\*90 allows for a monthly prescription as well as weekly and bi-weekly. The Active status is for a patient that has had a prescription within the last 7, 14, or 28 days. If the most recent prescription is over 56 days old, the patient status is now automatically discontinued and the patient must be re-registered.



Sex, race, and ZIP Code should be registered for each patient through Medical Administration Service (MAS)/Business Management Office.

For a description of how temporary registrations are handled, please see MH NCC User Manual/Training Guide.

### **List of Override Prescriptions [PSOLIST OVERRIDES]**

As described in Circular 10-90-059, a list of the Clozapine prescriptions entered can be generated by overriding the lockout. This option should be assigned to appropriate pharmacists and should be run weekly.

### **Register Clozapine Patient [PSOL REGISTER PATIENT]**

This option is used to register patients authorized to receive Clozapine by VHA's National Clozapine Coordinating Center (NCCC). Data required by manufacturers of the drug Clozapine is entered into the PHARMACY PATIENT file through this option. Patients registered in this program must have a ZIP code, date of birth, race, and sex entered in the PATIENT file. A patient is required to have an NCCC authorization number before this option can be utilized.

Patch PSO\*7\*612 allows for the registration process to occur automatically when a new clozapine authorization number is received from the NCCC. The Register Clozapine Patient [PSOL REGISTER PATIENT] option remains available via the automated registration process.

## **Clozapine Dispensing Overview**

The VA National Clozapine Coordination Center aggregates information for clozapine patients that is entered using the Register Clozapine Patient option, that is collected by the VistA software based on ANC laboratory results and pharmacy dispensing data, which is then reported

to the FDA/REMS program. All members of the Clozapine treatment team must be entered as users on the local system and must be given this key. All pharmacists who have the ability to override the lockouts in this option must also hold the key. These pharmacists should be identified by the pharmacy service representative of the Clozapine treatment team.

The following step must be taken before a prescription for Clozapine can be entered. If this information is missing, Clozapine prescriptions cannot be entered.

Any physician writing a prescription for Clozapine must have a DEA number or VA number entered in the NEW PERSON file. These can be added through the *Add New Providers* option on the *Supervisor's* menu. This must be done before the prescription is entered. The DEA or VA number cannot be entered during the new prescription entry process. With the release of YS\*5.01\*90, providers must also hold the YSCL AUTHORIZED security key.

When an order is placed, the system checks for the provider's DEA number or VA number first. CPRS has implemented an expiration field for the Provider DEA number. If the active DEA license expires, the Provider will be prevented from ordering/prescribing clozapine until the Provider DEA# is reactivated. Licenses are active for 2 years. There is no message that indicates the DEA number has expired. The user may need to check using the PSO PROVIDER EDIT. If the provider is not authorized, the pharmacist will receive the applicable message:

```
Provider must have a DEA# or VA# to write prescriptions for this drug.  
--OR--  
Provider must hold YSCL AUTHORIZED key to write prescriptions for clozapine
```

## Hierarchy for Addressing Clozapine Patient Override Conditions

The system determines which condition to address first when more than one condition is presented to the provider and the pharmacist:

1. If the patient is not actively registered, the system will first require that the patient have an active registration number which is either temporary or permanent. Patient registration must be addressed first in **all** scenarios; if the patient is not actively registered, the system will not return lab results. In the event of an emergency, the [Emergency Registration Override – Overview](#) addresses assigning a temporary local authorization number.



An Emergency registration requires that the patient have a Normal ANC of 1500 cmm or greater in the last 7 days with a matching WBC. Otherwise, NCCC will need to be contacted to assign a permanent number before any other overrides can be processed.

2. All clozapine treatment is based on the presence of an ANC result in the last 7 days with a matching WBC – if there are no ANC results, this condition must be addressed next before any other condition and requires an override. See [No ANC Results – Overview](#).
3. The next condition that must be addressed is if there is an ANC result in the last 7 days but no matching WBC. For example, if the system detects mild or moderate to severe neutropenia (ANC is present, but no matching WBC is found), the system will require the

No Matching WBC condition process flow be followed. An override is required. See No Matching WBC (ANC present) – Overview.



A Matching WBC result is collected at the same draw date/time as the ANC.

The following table illustrates the combinations of conditions and which must be addressed first.

**Table 12: Hierarchy for Addressing Clozapine Patients**

Condition	ANC Present?	Matching WBC?	Action
*No active registration	Yes	Yes	Address no active registration. REQUIRES Normal ANC result in last 7 days with matching WBC
Normal ANC result	Yes	Yes	No override needed
Normal ANC result	Yes	No	Address 'No WBC'
Mild Neutropenia	Yes	Yes	Address 'Mild neutropenia'
Mild Neutropenia	Yes	No	Address 'No WBC'
Moderate to Severe	Yes	Yes	Address 'Moderate/Severe neutropenia'
Moderate to Severe	Yes	No	Address 'No WBC'
No ANC	No	No/Yes	Address 'No ANC'

\*This condition must be addressed first in *all* situations. If there is no registration, no labs can be displayed.

Two override conditions cannot be combined into a single flow. There cannot be two override reason codes in one session.

The following highlighted sections illustrate new features for treating/managing patients taking clozapine.

## Clozapine Patient Authorization

Patients treated with clozapine must be enrolled in the clozapine treatment program at the NCCC and receive a valid authorization number with a status of Active. If the patient’s status changes from Active to Discontinued, a lockout will prevent being able to prescribe clozapine.



There are only two applicable statuses for a patient: Active (A) or Discontinued (D). Previously Pre-Treatment (P) and On-Hold (H) statuses were used but are now obsolete.

The option to override the condition when a patient is not actively registered is described in Emergency Registration Override – Overview. A temporary local authorization number is assigned in the event the patient has never been registered in the local VistA system or has been registered and is now on discontinued status. A patient that is discontinued due to inactivity in the program must be registered again and receive a new Clozapine Registration ID.



**Table 13: Clozapine Patient Status**

<b>Status</b>	<b>Pharmacist View</b>
Inpatient enrollment with NCCC	Patients are registered at the local facility where they are being treated. NCCC assigns a valid Authorization number indicating the patient status as 'Active'.
28 day trigger	If the patient is new to the program, the NCCC Patient Authorization status automatically changes to Discontinued if there is no active clozapine order in the first 28 days.
56 day trigger	If the patient is currently Active and an inpatient order or outpatient prescription has been activated, but there have been no new active clozapine prescriptions or orders within the past 56 days, the NCCC Patient Authorization status is automatically changed to Discontinued.
Temporary authorization number expiration trigger	If the patient has been assigned a temporary local authorization number, it will expire after the 4-day active period and if the NCCC has not yet issued a permanent Clozapine Authorization Number, the status automatically changes to Discontinued.



All status changes are automatic based on triggers. Pharmacists are not permitted to make manual changes from Active to Discontinued status.

<b>Status</b>	<b>Pharmacist View</b>
Nightly data transmission	The VistA system automatically notifies the NCCC of all status changes in the past 24 hours in the nightly data transmission and includes: site ID, patient name, last 4 of SSN, and trigger. For NCC data transmission, please see MH NCC Project User Guide/Training Plan - Section 3.10 Data Store and Transmission to National Clozapine data files.

## Safety Checks and Overrides

Safety checks, overrides, and data reporting using new ANC Lab values and monitoring guidelines are required for each new, edited, or copied order. For a Pending Order to make it to the Outpatient pharmacy, the system performed safety checks in CPRS.



Safety checks on CPRS Pending Orders must be repeated a second time in the Outpatient Pharmacy, in the event that the patient is no longer active, or the provider is no longer authorized.

**Table 14: CPRS Pending Orders**

Option	Pharmacist View
Menu option for Pending Orders	When the prescription originates in CPRS, the pharmacist processes the Pending Order from the following menu option: Complete Order from OERR [PSO LMOE FINISH]
Menu option for written prescription	When the order originates from a written prescription, the pharmacist processes the written prescription from the following menu option: Patient Prescription Processing [PSO LM BACKDOOR ORDERS]
Safety checks a second time for Pending Orders	Pending Orders from CPRS are required to pass the same safety checks a second time. The software validates that the patient is actively registered, and the provider is authorized to prescribe clozapine.
Safety check requirements for written orders	Written clozapine prescriptions in VistA Backdoor Pharmacy perform safety checks once.
Is patient actively registered?	The patient must be actively registered. This is the first safety check.  If the patient is not actively registered, the option to bypass registration is outlined in Emergency Registration Override – Overview.
Is provider authorized?	If the provider is not authorized, the pharmacist will receive the applicable message:  Provider must have a DEA# or VA# to write prescriptions for this drug.  --OR--  Provider must hold YSCL AUTHORIZED key to write prescriptions for clozapine



CPRS has implemented an expiration field for the provider DEA#. If the active DEA license expires, the provider will be prevented from prescribing clozapine until the provider DEA# is reactivated. Licenses are active for 2 years. There is no message that indicates the DEA# has expired. The user may need to check this file.

### **Authorized Pharmacist with PSOLOCKCLOZ key**

Any clozapine prescription that requires either a National or Local Override requires the pharmacist to have the PSOLOCKCLOZ key. For clozapine prescriptions, the only time a pharmacist is *not* required to have the PSOLOCKCLOZ key is when the ANC results are Normal within the last 7 days (equal to or greater than 1500 cmm) with a matching WBC.

**Table 15: Key Requirement**

Option	Pharmacist View
When is PSOLOCKCLOZ key required?	<p>The following conditions require the primary pharmacist and an Approving member of the clozapine team to both have the PSOLOCKCLOZ key:</p> <ul style="list-style-type: none"> <li>• Mild neutropenia – Local Override</li> <li>• Moderate to Severe neutropenia – National Override</li> <li>• No ANC Results – National Override or Special Conditions Local Override</li> <li>• ANC with No Matching WBC – National Override</li> <li>• Unregistered Patient – Emergency Registration Local Override with written order</li> </ul>
Verify pharmacist is authorized with PSOLOCKCLOZ key	<p>When the pharmacist, who is processing the Pending or Written Prescription that includes an override, does not hold the PSOLOCKCLOZ key, this message displays:</p> <p style="padding-left: 40px;">You Are Not Authorized to Override! See Clozapine Manager with PSOLOCKCLOZ key.</p> <p>Pending Orders return to pending status and written orders issue a hard stop and the prescription is deleted and not processed.</p>

## Approving Member with PSOLOCKCLOZ key

The authorized pharmacist is required to select an Approving Member of the clozapine team when an override is required. The Approving Member must have an active PSOLOCKCLOZ key but does not need to be a pharmacist. The primary pharmacist will select an Approving Member from a list before the order can be dispensed.



The Approving Member may or may not be aware their name was selected as an Approving Member. An auto-notification is sent via VistA Alerts when the override prescription is dispensed to inform them. Refer to Auto-Notify Provider and Approving Member.

**Table 16: Approving Member**

Option	Pharmacist View
Approving Member of the clozapine team	<p>During processing of the prescription, the primary pharmacist will be prompted with the following message:</p> <p style="padding-left: 40px;">Approving member of the clozapine team</p> <p>The pharmacist is required to select from a list of approved members with the PSOLOCKCLOZ key by entering a partial name or entering “??”.</p>



When searching for an Approving Member, two “??” must be entered. If only one “?” is entered, the system returns information that is not related and is out of the control of the pharmacy application.

## Auto-Notify Provider and Approving Member


When a clozapine prescription is activated, an auto-notification that the override prescription is completed is sent to the Provider and the Approving Member via VistA Alerts. The VistA Alert displays in both GUI and VistA Backdoor Pharmacy.

The alert is a non-actionable information alert. When the Provider or Approving Member clicks on the alert it is automatically deleted from the view.

The VistA Alert message includes:

- Patient name [concatenated] and last 4 of SSN
- Alert Date/Time
- Message: CLOZAPINE OVERRIDE RX PROCESSED with the Alert Date/Time attached at the end

**Table 17: Auto-notification Alerts**

Alert	Provider / Pharmacist View
Auto-notification via VistA Alerts	<p>An auto-notification is sent when any National or Local Override is required to process the clozapine prescription.</p>  <p>It is possible that an Approving Member of the clozapine team may not be aware that their name was used for the override.</p> <p>The alert is viewable in both GUI and VistA Backdoor Pharmacy.</p>
Non-actionable alert	Once the alert is viewed, the user clicks on the alert and it is deleted from the view. No other action is needed.
Sample GUI VistA Alert	The GUI VistA Alert is accessed through CPRS. A sample screen is shown in the figure below.

**Figure 3: Auto-notification**

Notifications						
Info	Patient	Location	Urgency	Alert Date/Time	Message	Forwarded By/When
I	BADSJE,TLRA Z (2304)		n/a	05/23/2016@15:09	CLOZAPINE OVERRIDE RX PROCESSED :MAY 23, 2016@15:09:40	

## Edit Order (ED) – Safety Checks for New Order

### Editable fields in Pharmacy

During pharmacy processing, there are several fields that are editable – delineated by an asterisk (\*). When fields with an \* are edited, the system will discontinue the current order and create a new order.



New clozapine orders that are created through Edit Order will perform order and safety checks when the new order is created.

**Figure 4: Editable Pharmacy Fields**

```

New OP Order (ROUTINE)          Feb 04, 2020@16:19:10          Page: 1 of 2
TPATIENT,EIGHT
PID: 523-83-0956                Ht(cm): _____ (_____)
DOB: JUL 29,1954 (65)           Wt(kg): _____ (_____)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): _____
-----
Orderable Item: CLOZAPINE (MYLAN) TAB
(1) Drug: CLOZAPINE 100MG (MYLAN) TAB
(2) Patient Status: OUTPT NON-SC
(3) Issue Date: FEB 4,2020      (4) Fill Date: FEB 4,2020
(5) Dosage Ordered: 100 (MG)
    Verb: TAKE
    Dispense Units: 1
        Noun: TABLET
        Route: ORAL (BY MOUTH)
        Schedule: ONCE DAILY
(6)Pat Instruction:
    SIG: TAKE ONE TABLET BY MOUTH ONCE DAILY
+ Enter ?? for more actions
AC Accept                        ED Edit
Select Action: Next Screen//
    
```

## Default Expiration Dates

### Default Expiration Date Management for Doses of Clozapine

When a patient is on a management dose of clozapine, the system defaults the expiration date for the following:

- 7 days default for a patient on weekly dispense frequency (W) can be edited to less than the default 7 days
- 14 days default for a patient on bi-weekly dispense frequency (B) can be edited to less than the default 14 days
- 28 days default for a patient on monthly dispense frequency (M) can be edited to less than the default 28 days

## Copy Order (CO) – Safety Checks for New Order

The pharmacist may use the Copy Order option to copy patient and medication information to create a new order. This has no effect on the original order. The copy function can be from an active, discontinued, or expired order.



New clozapine orders that are created through Copy Order will perform order and safety checks when the new order is created.

**Table 18: Copy Order**

Option	Pharmacist View
Copy Order (CO) access in VistA Backdoor	The pharmacist may locate this hidden menu by entering two '??'.

**Figure 5: Copy Order Example**

Enter ?? for more actions					
DC	Discontinue	PR	Partial	RL	Release
ED	Edit	RF	Refill	RN	Renew
The following actions are also available:					
AL	Activity Logs (OP)	REJ	View REJECT	>	Shift View to Right
VF	Verify (OP)	VER	View ePharmacy Rx	ADPL	Auto Display(On/Off)
CO	Copy (OP)	RES	Resubmit Claim	DN	Down a Line
TR	Convert Titration Rx	REV	Reverse Claim	FS	First Screen
TM	Titration Mark/Unmark	IN	Intervention Menu	GO	Go to Page
RP	Reprint (OP)	DA	Display Drug Allergies	LS	Last Screen
HD	Hold (OP)	DIN	Drug Restr/Guide (OP)	PS	Print Screen
UH	Unhold (OP)	EP	Print eRx	PT	Print List
PI	Patient Information	ECS	Edit Claim Submitted	QU	Quit
PP	Pull Rx (OP)	+	Next Screen	RD	Re Display Screen
IP	Inpat. Profile (OP)	-	Previous Screen	SL	Search List
OTH	Other OP Actions	<	Shift View to Left	UP	Up a Line
Type <Enter> to continue or '^' to exit:					



For complex orders, Copy Order is not typically used by the pharmacist. However, if Copy Order is used for a complex order, the pharmacist can only copy the child orders.

## Renew Order – Blocked in OP

The Renew order option (RN) is blocked and is not functional in Outpatient Pharmacy. In addition, the provider is unable to renew an order in CPRS.

**Table 19: Renew Order**

Option	Pharmacist View
Outpatient Pharmacy Renew Order (RN) blocked in VistA Backdoor	The Renew (RN) function displays on the menu to the OP pharmacist. If the OP pharmacist enters RN to renew an order, the following messages displays: >>>Renew may not be selected at this point.

## Override Reason Codes

The system generates override reason codes that are presented to the pharmacist when processing a prescription that requires an override to dispense clozapine. Prior override reason codes have been retired and are no longer applicable, except #7 NCCC AUTHORIZED.

**Table 20: Override Reason Codes**

<b>Code</b>	<b>Short Description</b>	<b>Long Description</b>
7	NCCC AUTHORIZED	NCCC Authorized National Override in effect allowing the prescription to proceed without valid, safe (normal or mild neutropenia) blood test results. (Added in 2006 software update).
8	REGISTER NON-DUTY HR/WEEKEND (MAX4DAY)	Emergency Registration Local Override allows patient without a local Clozapine registration to continue Clozapine treatment during non-duty hours/weekends (not to exceed 4 days) until the provider can register him on the next NCCC duty day.
9	PRESCRIBER APPROVED 4 DAY SUPPLY	Special Conditions Local Override to dispense a 4 day supply to a patient without ANC lab results in the last 7 days.
10	MILD NEUTROPENIA PRESCRIBER APPROVED	Mild Neutropenia Local Override for patients with ANC < 1500 cmm and ANC >= 1000 cmm.

## **Request for Override of Pharmacy Lockout Form**

Whenever a National Override is required for clozapine, the Request for Override of Pharmacy Lockout form must be completed, and the hard copy sent to NCCC before the NCCC can approve the National Override. This form gives the pertinent information to the NCCC for them to determine if the National Override should be approved. See the figure below: [Request for Override of Pharmacy Lockout Form](#).

Figure 6: Request for Override Form

<b>Department of Veterans Affairs</b> <b>National Clozapine Coordinating Center (NCCC)</b> FTS/COMM 214-857-0068 FAX 214-857-0339		<b>VHA Handbook 1160.02</b>		
<b>REQUEST FOR OVERRIDE OF PHARMACY LOCKOUT</b>				
<b>CLOZAPINE PATIENT IDENTIFICATION</b>				
LAST NAME	FIRST NAME	FULL SOCIAL SECURITY	DATE OF BIRTH	VA FACILITY CODE
<b>1. OVERRIDE FOR CLINICAL REASONS</b> For lockout due to FDA safety limits. Requires action by VA authorized clozapine provider <b>Pharmacy Lockout has prevented dispense of clozapine because:</b> <input type="checkbox"/> White Blood Cell Count and Absolute Neutrophil Count are greater than 7 days from blood draw and dispense. <input type="checkbox"/> White Blood Cell Count is less than 3000/mm <sup>3</sup> OR Absolute Neutrophil Count is less than 1500/mm <sup>3</sup> .				
DATE OF LAST THREE BLOOD TESTS	WHITE BLOOD CELL COUNT	ABSOLUTE NEUTROPHIL COUNTS		
Patient has been using clozapine for _____ (circle one) weeks months years Current blood monitor interval is (circle one) 7 14 28 Days Justification for clinical override of FDA safety limits (faxed to the NCCC at 214-857-0339) must include: Document justification in a signed Progress Note (with special monitoring procedures if appropriate) Patient signed informed consent for Unlabeled Use of Clozapine.				
FOR NCCC USE <input type="checkbox"/> Special Protocol / Signed Informed Consent <input type="checkbox"/> Review by Director NCCC <input type="checkbox"/> Special Protocol Authorization No.				
<b>2. OVERRIDE FOR ADMINISTRATIVE REASONS</b> For lockout due to clozapine program errors or non-medical administrative issues. Requires action by pharmacist, nurse, or clozapine administrator)				
<b>Pharmacy Lockout has prevented dispense of clozapine because:</b> <input type="checkbox"/> Dispense of the prescription was delayed more than 7 days from the blood test <input type="checkbox"/> Another blood test without Neutrophil result was performed after the clozapine qualifying blood test. <input type="checkbox"/> Blood test by contracted / remote lab not entered into the local laboratory computer system as required by VA protocol. <input type="checkbox"/> Manual differential was performed and "COMMENTS" was entered into the WBC or ANC field. <input type="checkbox"/> Time stamp on the WBC or ANC result in the computer is "00:00" (HH:MM). <input type="checkbox"/> New prescription was written for titration or transfer between outpatient/inpatient, inpatient/inpatient or discharge OTHER (specify or note "SPECIAL PROTOCOL") _____				
DATE OF BLOOD TEST	WHITE BLOOD CELL COUNT	ABSOLUTE NEUTROPHIL COUNT		
By signing I verify that the White Blood Cell count and Absolute Neutrophil count are within FDA safety limits OR are within the parameters of the SPECIAL PROTOCOL outlined on the patient signed informed consent AND are either scanned into the patient record on this form or shown in a progress note.				
REQUESTOR'S NAME	REQUESTOR'S SIGNATURE	REQUESTOR'S PHONE	DATE	NCCC APPROVAL

## Total Daily Dose

The Total Daily dose (mg/day) identifies the currently **prescribed** total daily dose for a patient across all active Outpatient prescriptions and Inpatient orders. It is not intended as a reflection of a patient's doses taken or administered.

Current Outpatient Pharmacy functionality prompts the pharmacist to manually calculate the total daily dose in mg/day across all active orders and enter the total when a clozapine prescription is entered.



## Outpatient Pharmacy – Single Prescription

When there is a *single* Outpatient prescription, the pharmacist will calculate the prescribed active prescription total.

Calculating the Total Daily Dose:

25 mg AM dose

50 mg PM dose

**75 mg Total Daily Dose**

## Outpatient Pharmacy – Multiple Prescriptions

When there are *multiple* Outpatient prescriptions for a patient – each representing a different dosage – the pharmacist will calculate the totals of all prescriptions for that patient.

Calculating the Total Daily Dose

**Prescription #1:**

25 mg twice daily (AM and PM)

**50 mg Total Daily Dose**

**Prescription #2:**

200 mg in the morning (AM)

**200 mg Total Daily Dose**

Both prescription dosages need to be added together so that the Total Daily Dose for both prescriptions =**250 mg**

## Outpatient admitted to inpatient

When an outpatient (with an active Rx) is admitted to Inpatient care at the hospital, the outpatient Rx is not necessarily canceled. It may remain Active, if that is the policy of the medical center. The patient will then receive the same dosage through Inpatient Pharmacy.

The patient will not be consuming the outpatient dose while in the hospital as an Inpatient. The pharmacist will not add the outpatient doses into this calculation for Total Daily Dose.

Calculating the Total Daily Dose:

25 mg AM dose – Active OP order – remains active during hospitalization; not taken

50 mg PM dose – Active OP order – remains active during hospitalization; not taken

50 mg AM dose – Active IP order – taken during hospitalization

75 mg PM dose – Active IP order – taken during hospitalization

**125 mg Total Daily Dose**

## VistA Daily Clozapine Transmission

The VistA Daily Clozapine Transmission [YSCL DAILY TRANSMISSION] option is designed to transmit the clozapine dispensing, lab data and demographics information for all Inpatient and Outpatient Clozapine dispenses from the previous day's dispenses to the RUCL server currently located at REDACTED and has been designed to send the data only once a day. In addition to the server-to-server messages, there are also notifications of the transmissions sent to local and remote mail groups. During normal operations dispensing information will be sent to

REDACTED and courtesy mail notifications are sent to the local mail group PSOCLOZ and the REDACTED mail group at REDACTED.

Similarly, demographics information will be sent to REDACTED and courtesy mail notifications are sent to the local mail group PSOCLOZ and the REDACTED mail group at REDACTED.

### VistA Daily Clozapine Transmission [YSCL DAILY TRANSMISSION]

The VistA Daily Clozapine Transmission [YSCL DAILY TRANSMISSION] option should be queued to run after midnight via Taskman but can be run manually via VistA if needed.

**Figure 7: Example of Daily Transmission**

```
                                Edit Option Schedule
Option Name: YSCL DAILY TRANSMISSION
Menu Text: Daily Clozapine Transmission                                TASK ID: 362874
-----
QUEUED TO RUN AT WHAT TIME: MAY 12,2017@03:00
DEVICE FOR QUEUED JOB OUTPUT:
QUEUED TO RUN ON VOLUME SET:
    RESCHEDULING FREQUENCY: 24H
        TASK PARAMETERS:
            SPECIAL QUEUEING:
```

When this option runs, it sends a Mailman message to mail group: Clozapine Discontinued Patient - REDACTED

The Mailman message to NCCC contains the Patients' SSN, Name, and reason for why the patient has been discontinued.

### **Example:** Discontinued Clozapine Patient Mailman message to NCC

```
SUBJ: FACILITY DISCONTINUED STATUS [#228489] 02/03/17@10:16 7 LINES
FROM: CLOZAPINE MONITOR IN 'IN' BASKET. PAGE 1 *NEW*
-----
GHAAHU,JLUASXY W CU (2501)
THE PATIENT STATUS HAS CHANGED TO 'DISCONTINUED' BECAUSE THE NEW CLOZAPINE
PATIENT HAS NOT FILLED THE PRESCRIPTION/ORDER WITHIN 28 DAYS OF BEING MARKED
'ACTIVE'.

KHLSH,INALY U (2700)
THE PATIENT STATUS HAS CHANGED TO 'DISCONTINUED' BECAUSE THE TEMPORARY LOCAL
AUTHORIZATION NUMBER ASSIGNED HAS EXPIRED AND NCCC HAS NOT ISSUED A NEW
AUTHORIZATION NUMBER.

MHIERT,LIXAGX U (5537)
THE PATIENT STATUS HAS CHANGED TO 'DISCONTINUED' BECAUSE THE ACTIVE CLOZAPINE
PATIENT HAS NOT FILLED THE PRESCRIPTION/ORDER WITHIN 56 DAYS OF BEING
PRESCRIBED/ORDERED.
```

Mailman message to mail group: Clozapine demographics - REDACTED

This message contains the Patients' SSN and Name

**Example:** Clozapine demographics - Mailman message to NCC

```
SUBJ: CLOZAPINE DEMOGRAPHICS [#228491] 02/03/17@10:28 14 LINES
FROM: CLOZAPINE MONITOR IN 'IN' BASKET. PAGE 1 *NEW*
-----
CLOZAPINE DEMOGRAPHIC DATA WAS TRANSMITTED, 4 RECORDS WERE SENT.
FOR THE FOLLOWING PATIENTS, ONE OR MORE OF THE REQUIRED DATA
ELEMENTS (RACE, SEX, ZIP CODE) WERE MISSING.
PLEASE HAVE THIS INFORMATION ENTERED.
THE AVAILABLE DATA WAS TRANSMITTED.

101086586 LDAN,AHPDT H (RACE, NEW FORMAT) (ETHNICITY)
NOTE: RACE AND ETHNICITY MAY BE ENTERED IF PERMISSION IS OBTAINED IN THE INFORMED
CONSENT DOCUMENT. SEE VHA DIRECTIVE 99-035.
101039337 AAA,AXRDH Z (RACE, NEW FORMAT) (ETHNICITY)
NOTE: RACE AND ETHNICITY MAY BE ENTERED IF PERMISSION IS OBTAINED IN THE INFORMED
CONSENT DOCUMENT. SEE VHA DIRECTIVE 99-035.
```

Mailman message to mail group: Clozapine lab data – REDACTED

This message contains the number of records transmitted to the NCCC Server.  
SSN, Name, Lab result date, WBC date and the Neutrophil date.

**Example:** Clozapine lab data - Mailman message to NCC

```
SUBJ: CLOZAPINE LAB DATA @ CHEYENNE VAMC ON 3170111 AT 02 [#216721]
01/11/17@02:00 12 LINES
FROM: CLOZAPINE MONITOR IN 'IN' BASKET. PAGE 1 *NEW*
-----
CLOZAPINE LAB DATA WAS TRANSMITTED, 11 RECORDS WERE SENT
IN MESSAGE # 216720
101074507 AAADTSXY,QLYJH U (R) JAN 10, 2017 (W) JAN 10, 2017 (N) JAN 10, 2017
101028121 ZXUY,QLYJH K (R) JAN 10, 2017 (W) JAN 09, 2017 (N) JAN 09, 2017
101039337 AAA,AXRDH Z (R) JAN 10, 2017 (W) JAN 10, 2017 (N) NO NEUT
101039337 AAA,AXRDH Z (R) JAN 10, 2017 (W) JAN 10, 2017 (N) NO NEUT
101040657 AJXJB,TLRA HIPLUI (R) JAN 04, 2017 (W) JAN 10, 2017 (N) JAN 10, 2017
101040657 AJXJB,TLRA HIPLUI (R) JAN 10, 2017 (W) JAN 10, 2017 (N) JAN 10, 2017
101049185 GALI,LKHA A (R) JAN 10, 2017 (W) JAN 05, 2017 (N) JAN 05, 2017
101077432 BXADLY,TXY A (R) JAN 10, 2017 (W) JAN 10, 2017 (N) NO NEUT
101077432 BXADLY,TXY A (R) JAN 10, 2017 (W) JAN 10, 2017 (N) NO NEUT
```

#### VistA Retransmit Clozapine Roll-up Data [YSCL RETRANSMIT DATA]

The VistA Retransmit Clozapine Roll-up Data [YSCL RETRANSMIT DATA] option has been added in the event the NCCC needs the Clozapine Data sent to the NCCC Server. Access to this option will be granted by the Clozapine Team coordinator at each site.

This option has the ability to send single days transactions, or multiples consecutive days of data. This option must be run manually via VistA.

Once the user run the option, the user will need to provide the Start Date and the Ending date. The system will then create and send the Clozapine lab data - Mailman message to NCC.

**Example:** Retransmit Clozapine Roll-up Data

In the example below the user has the Retransmit Clozapine Roll-up Data [YSCL RETRANSMIT DATA] option on their secondary menu; it has the synonym RET.

**Figure 8: Retransmit Clozapine Roll-up Data**

```
Select MailMan Menu <CLOZA> Option: ??

NML    New Messages and Responses [XMNEW]
RML    Read/Manage Messages [XMREAD]
SML    Send a Message [XMSEND]
      Query/Search for Messages [XMSEARCH]
AML    Become a Surrogate (SHARED,MAIL or Other) [XMASSUME]
      Personal Preferences ... [XM PERSONAL MENU]
      Other MailMan Functions ... [XMOTHER]
      Help (User/Group Info., etc.) ... [XMHELP]

You can also select a secondary option:

RET    Retransmit Clozapine Roll-up Data [YSCL RETRANSMIT DATA]

Or a Common Option:

      Halt [XUHALT]
      Continue [XUCONTINUE]
      Restart Session [XURELOG]
VA     View Alerts [XQALERT]
      MailMan Menu ... [XMUSER]
      Time [XUTIME]
      User's Toolbox ... [XUSERTOOLS]
      Where am I? [XUSERWHERE]

Select MailMan Menu <CLOZA> Option: ret  Retransmit Clozapine Roll-up Data
Are you sure you wish to retransmit lab data? y  YES
Enter the starting date: T-2
Enter the ending date: T-1
```

The VistA Weekly Clozapine Report [YSCL WEEKLY TRANSMISSION] and the Transmit Clozapine Demographics [YSCL TRANSMIT DEMOGRAPHICS] options have been marked Out Of Service and displays “Replaced by the Daily Clozapine Transmission” message.

## Normal ANC – Overview

The FDA defines Normal – sometimes referred to as “safe” or “passing” ANC results – as equal to or greater than 1500 cmm. When the system identifies that the ANC results are Normal, and a matching WBC is present, the provider completes the prescription which is sent as a Pending Order to pharmacy.



If a matching WBC result is not present, the system will alert the provider with a message that requires a National Override.

## Normal ANC – Pharmacy

When ANC results are normal, the pharmacist will activate the prescription and dispense the clozapine.

\*This flow assumes the patient is actively registered and the provider is authorized.

**Table 21: ANC Results**

Result	Pharmacist View
Normal ANC – Results display	When the pharmacist receives a Pending or written prescription and the ANC results are normal with a matching WBC, the system displays the following: *** Most recent WBC and NEUTROPHILS ABSOLUTE (ANC) results *** performed on MonthXX,XXXX are: WBC: XXXX ANC: XXXX
Pharmacist does not require PSOLOCKCLOZ key	The pharmacist is not required to have the PSOLOCKCLOZ key to process a clozapine prescription when the ANC results are normal.

## Mild Neutropenia – Overview

The FDA defines Mild neutropenia as an ANC result from 1000 to 1499 cmm. New ANC lab test monitoring guidelines for Mild neutropenia are:  
**Test ANC labs 3x weekly until levels stabilize to greater than or equal to 1500 cmm.**

With this condition, a Local Override is required. In the event a matching WBC result is not present with the ANC, the system will alert the provider with a message that will require a National Override. See [No Matching WBC \(ANC present\) – Overview](#).

## Mild Neutropenia – Pharmacy

When ANC results indicate Mild neutropenia (ANC is from 1000-1499 cmm), either a Pending or written prescription is received. Mild Neutropenia requires a Local Override.



New guidelines are to test ANC labs 3x weekly until levels stabilize to greater than or equal to 1500 cmm. Both the provider and pharmacist are alerted.

\*This flow assumes the patient is actively registered and the provider is authorized.

**Table 22: ANC Results**

Status	Pharmacist View
Pharmacist not authorized – Pending or written prescription	<p>If the pharmacist is not authorized with the PSOLOCKCLOZ key, this message displays:</p> <p style="padding-left: 40px;">You Are Not Authorized to Override! See Clozapine Manager with PSOLOCKCLOZ key.</p> <p>For a Pending Order, a hard stop is issued, and the order is sent back to Pending status. For a written order, the system issues a hard stop and the order is deleted and not processed.</p>
Lab results returned	<p>Lab results are returned to the pharmacist in the following message:</p> <p style="padding-left: 40px;">Now doing clozapine Order checks. Please wait...</p> <p style="padding-left: 40px;">*** Last xx WBC (EFF. mm-dd-yyyy) and ANC results were: ***</p> <p style="padding-left: 40px;">WBC ANC</p> <p style="padding-left: 40px;">mm/dd/yyyy@hh:mm Results: xxxx</p> <p style="padding-left: 40px;">mm/dd/yyyy@hh:mm Results: xxxx</p> <p style="padding-left: 40px;">&lt;Displays up to last four results in the last 30 days&gt;</p>
Mild neutropenia override prompt	<p>After the labs are displayed, the pharmacist is prompted to override the abnormal ANC results with this message:</p> <p style="padding-left: 40px;">Override reason: MILD NEUTROPENIA PRESCRIBER APPROVED</p> <p style="padding-left: 40px;">Test ANC labs 3x weekly until levels stabilize to greater than or equal to 1500.</p> <p style="padding-left: 40px;">Do you want to override and issue this order? Y/N.</p>
Pharmacist does not want to override	<p>In the event the pharmacist selects 'No' and does not want to override the prescription:</p> <p>For a Pending Order, a hard stop is issued, and the order is sent back to Pending status. For a written order, the system issues a hard stop and the order is deleted and not processed.</p>
Pharmacist prompted to enter Approving Member	<p>When 'Yes' is entered, the pharmacist is prompted to enter the name of an Approving Member of the clozapine team. The list of authorized users with the PSOLOCKCLOZ key is retrieved by entering a partial name or entering '??'</p> <p style="padding-left: 40px;">Approving member</p>

Status	Pharmacist View
Pharmacist enters Remarks/Special Instructions	The pharmacist is required to enter free text in the Remarks/Special Instructions field with a limit of 200 characters. Remarks/Special Instructions
Dispense clozapine	The pharmacist is prompted to activate the override prescription and dispense the clozapine.
Auto-notification to Provider and Approving Member	When the clozapine override prescription is complete, the system sends an auto notification to the provider and Approving Member via VistA Alerts. See Auto-Notify Provider and Approving Member.
Store and transmit patient data	Patient data is stored in the long-term temporary global and transmitted to the National Clozapine data files nightly, including the override reason code: (10) MILD NEUTROPENIA PRESCRIBER APPROVED

## Moderate to Severe Neutropenia – Overview

FDA defines Moderate neutropenia as ANC 500-999 cmm and severe neutropenia as ANC less than 500 cmm. Both Moderate and Severe neutropenia require the same lab test monitoring guidelines as they are both less than 1000 cmm:

**Test ANC labs daily until levels stabilize to equal to or greater than 1000 cmm, then Test ANC labs 3x weekly until levels stabilize to greater than or equal to 1500 cmm.**

When there is Moderate to Severe neutropenia with a matching WBC result present, a **National Override** is required. If a matching WBC result is not present, the system will alert the provider that the system will address the ‘No Matching WBC’ issue first. See No Matching WBC (ANC present) – Overview.

## Moderate to Severe Neutropenia – Pharmacy (National Override expired)

When a National Override is approved by the NCCC and expires before the pharmacist processes the Pending or written prescription, the order is no longer valid.



Once a National Override is in effect for any order, the pharmacist must complete the order before midnight of the day it was approved by NCCC, or the approval expires.

\*This flow assumes the patient is actively registered and the provider is authorized.

**Table 23: Expired Override**

Status	Pharmacist View
National Override approval expired at midnight of day it was approved	If the NCCC approval expires before the clozapine prescription is processed, the following message displays to the pharmacist: National Override expired at midnight on <Jun 29, 2016> *** Last xx WBC and ANC results were: ***

Status	Pharmacist View
	<p>WBC ANC  mm/dd/yyyy@hh:mm Results: xxxx  mm/dd/yyyy@hh:mm Results: xxxx  &lt;Displays up to last four results in the last 30 days&gt;  Permission to dispense clozapine has been denied. If the results of the latest Lab Test drawn in the past 7 days show ANC below 1000/mm<sup>3</sup> and you wish to dispense outside the FDA and VA protocol ANC limits, document your request to Request for Override of Pharmacy Lockout (from VHA Handbook 1160.02) Director of the VA National Clozapine Coordinating Center (Phone: 214-857-0068 Fax: 214-857-0339) for a one-time override permission.  A CBC/Differential including ANC Must Be Ordered and Monitored daily until the ANC above 1000/mm<sup>3</sup> with no signs of infection. If ANC is between 1000-1499, therapy can be continued but physician must order lab test three times weekly.  Also make sure that the LAB test, ANC is set up correctly in the Mental Health package using the CLOZAPINE MULTI TEST LINK option.</p>
Hard stop	<p>If a National Override is not in effect, the system issues a hard stop.  When the NCCC issues a National Override approval, the date is recorded in the local VistA system indicating approval until midnight of that date.</p>

**Moderate to Severe – Pharmacy (National Override in Effect)**

With a National Override is in effect and the local VistA system date updated in File #603.01, the pharmacist can proceed with processing the Pending or written prescription.



Both Moderate and Severe neutropenia have the same REMS treatment protocol since both have ANC results less than 1000 cmm.

\*This flow assumes the patient is actively registered and the provider is authorized.

**Table 24: National Override**

Status	Pharmacist View
National Override in effect	<p>When the National Override has been authorized by NCCC, the Pending or written prescription is available to process.</p>
Pharmacist not authorized	<p>If the pharmacist is not authorized with the PSOLOCKCLOZ key, this message is displayed:  You Are Not Authorized to Override! See Clozapine Manager with PSOLOCKCLOZ key.  For a Pending Order, a hard stop is issued, and the order is sent back to Pending status. For a written order, the system issues a hard stop and the order is deleted and not processed.</p>



Status	Pharmacist View
Moderate to Severe override prompt	The pharmacist is prompted to override the Moderate to Severe condition. This message displays to the pharmacist: Now doing clozapine Order checks. Please wait... Permission to dispense clozapine has been authorized by NCCC Test ANC labs Daily until levels stabilize to ANC greater than or equal to 1000 Override reason: NCCC AUTHORIZED Do you want to override and issue this order? Y/N

Once the ANC levels stabilize to greater than or equal to 1000 cmm, the testing continues at 3x weekly until the ANC stabilizes to equal to or greater than 1500 cmm.

**Table 25: ANC Levels**

Option	Pharmacist View
Pharmacist does not want to override	If the pharmacist selects 'No' and does not want to override the Moderate to Severe condition, a hard stop is issued, and it is returned to Pending status or in the case of a written order, the order is deleted and not processed.
Pharmacist prompted to enter Approving Member	The pharmacist is prompted to enter the name of an Approving Member of the clozapine team. The list of authorized users with the PSOLOCKCLOZ key is retrieved with entering a partial name or entering ?? Approving member
Pharmacist enters Remarks/Special Instructions	The pharmacist is required to enter free text in the Remarks/Special Instructions field with a limit of 200 characters. Remarks/Special Instructions
Dispense clozapine	The pharmacist is prompted to activate the prescription and dispense the clozapine.
Auto-notification to Provider and Approving Member	The system sends an auto notification to the provider and Approving Member via VistA Alerts that the prescription has been dispensed. See Auto-Notify Provider and Approving Member.
Store and transmit patient data	Patient data is stored in the long-term temporary global and transmitted to the National Clozapine data files nightly, including the override reason code: (7) NCCC AUTHORIZED

**No ANC Results – Overview**

The system relies on the presence of an ANC result to treat patients receiving clozapine, with exceptions as noted to override in certain conditions. The system requires an ANC within the last 7 days. See [Hierarchy for Addressing Clozapine Patient Override Conditions](#) for treating clozapine patients based on lab results.

For registered patients with a **history of normal ANC results**, the requirement for a normal ANC result in the last 7 days may be bypassed to meet an urgent need under special conditions.

In CPRS, when the provider is notified that there are no ANC results in the last seven days, they will decide based on the following:

### 1. **Non-emergency**

If this is **not an emergency**, the provider will request a National Override to dispense the clozapine at the **patient's normal frequency**. When the National Override is authorized and recorded in the local VistA system, the provider reenters the order and a Pending prescription to dispense clozapine at the patient's normal frequency is sent.

For example, this may be used when:

- a. The patient's last blood test was done at another facility and isn't in the local VistA system, but the provider has seen the results
- b. The provider feels it is unnecessary – perhaps the patient is at end of life or some other medical condition – and there is no need to keep drawing blood

### 2. **Emergency 4-day supply**

In an **emergency where a 4-day supply is needed**, the provider may choose to use a Special Conditions Local Override which optionally allows a **one-time 4-day emergency supply** to be dispensed for specific prescriber-approved reasons.

If the patient is an **Outpatient**, the prescriber-approved reason must be one of the following:

- a. Weather-related conditions
- b. Mail order delay
- c. Inpatient going on leave



The second part of the message is to instruct the provider to write a prescription and include an **approved reason from the list**.

## **No ANC – Non-emergency Pending Order**

**Scenario 1** – When there is a Pending Order from CPRS, it indicates the provider has requested a National Override to dispense clozapine at the patient's normal frequency. This is for a non-emergency condition only. A National Override must be in effect.

\*This flow assumes the patient is actively registered and the provider is authorized.

**Table 26: Non-emergency Pending Order**

Status	Pharmacist View
Pending Order – National Override in effect	When there is a National Override in effect for No ANC results in the last 7 days, the pharmacist receives a pending prescription to dispense at the patient’s normal frequency.
Pharmacist not authorized	If the pharmacist is not authorized with the PSOLOCKCLOZ key, this message is displayed: <p style="text-align: center;">You Are Not Authorized to Override! See Clozapine Manager with PSOLOCKCLOZ key.</p> A Pending Order is returned to pending status, while a written order issues a hard stop and the order is deleted and not processed.
Prompt to override for No ANC results	After the labs are displayed, the pharmacist is prompted to override the No ANC condition with this message: <p style="text-align: center;">Now doing clozapine Order checks. Please wait...                      Permission to dispense clozapine has been authorized by NCCC                      Override reason: NCCC AUTHORIZED                      Do you want to override and issue this order? Y/N.</p>
Pharmacist elects not to override	If the pharmacist selects ‘No’ and does not want to override, a hard stop is issued, and the Pending Order is returned to pending status.
Pharmacist prompted to enter Approving Member	The pharmacist is prompted to enter the name of an Approving Member of the clozapine team. The list of authorized users with the PSOLOCKCLOZ key is retrieved by entering a partial name or entering ‘??’ <p style="text-align: center;">Approving member</p>
Pharmacist enters Remarks/Special Instructions	The pharmacist is required to enter free text in the Remarks field with a limit of 200 characters. <p style="text-align: center;">Remarks/Special Instructions</p>
Dispense clozapine at patient’s normal frequency	The pharmacist is prompted to activate the prescription and dispense the patient’s normal frequency of clozapine.
Auto-notification to Provider and Approving Member	The system sends an auto notification to the provider and Approving Member via VistA Alerts that the prescription/ has been dispensed. See Auto-Notify Provider and Approving Member.
Store and transmit patient data	Patient data is stored in the long-term temporary global and transmitted to the National Clozapine data files nightly, including the override reason code: <p style="text-align: center;">(7) NCCC APPROVED</p> For NCC data transmission, please see MH NCC Project User Guide/Training Plan - Section 3.10 Data Store and Transmission to National Clozapine data files.

## No ANC – Non-emergency Written Order

**Scenario 2** – When there is a written prescription from the provider to dispense clozapine at the patient’s normal frequency for a non-emergency condition, a National Override must be requested and approved before dispensing clozapine. VistA Backdoor Pharmacy is used to process a written prescription for No ANC – non-emergency.

\*This flow assumes the patient is actively registered and the provider is authorized.

**Table 27: Non-emergency Written Order**

Status	Pharmacist View
Written Order – National Override in effect	In the event the patient does not have an ANC result in the last 7 days and the pharmacist receives a written prescription to dispense at the patient's normal frequency (not an emergency), the processing takes place in the VistA Backdoor Pharmacy. A National Override must be in effect.
Pharmacist not authorized	If the pharmacist is not authorized with the PSOLOCKCLOZ key, this message is displayed: You Are Not Authorized to Override! See Clozapine Manager with PSOLOCKCLOZ key. A written order issues a hard stop and the order is deleted and not processed.
Prompt to override for No ANC results	After the labs are displayed, the pharmacist is prompted to override the No ANC condition with this message (National Override in Effect): Now doing clozapine Order checks. Please wait... Permission to dispense clozapine has been authorized by NCCC Override reason: NCCC AUTHORIZED Do you want to override and issue this order? Y/N.
Pharmacist prompted to enter Approving Member	The pharmacist is prompted to enter the name of an Approving Member of the clozapine team. The list of authorized users with the PSOLOCKCLOZ key is retrieved by entering a partial name or entering '??' Approving member
Pharmacist enters Remarks/Special Instructions	The pharmacist is required to enter free text in the Remarks/Special Instructions field with a limit of 200 characters. Remarks/Special Instructions
Dispense clozapine at patient's normal frequency	The pharmacist is prompted to activate the prescription and dispense at the patient's normal frequency of clozapine.
Auto-notification to Provider and Approving Member	The system sends an auto notification to the provider and Approving Member via VistA Alerts that the prescription has been dispensed. See Auto-Notify Provider and Approving Member.

Status	Pharmacist View
Store and transmit patient data	Patient data is stored in the long-term temporary global and transmitted to the National Clozapine data files nightly, including the override reason code: (7) NCCC APPROVED For NCC data transmission, please see MH NCC Project User Guide/Training Plan - Section 3.10 Data Store and Transmission to National Clozapine data files.

## No ANC Special Conditions for Emergency – Overview

The Special Conditions Local Override is for **emergency conditions** when there are No ANC results in the last 7 days and a one-time 4-day emergency supply is needed. A **history of normal ANC** values is required. A **written prescription** from the provider is the only way to use the Special Conditions Local Override in the VistA Backdoor Pharmacy.



When a one-time 4-day supply is dispensed, the system will not block the provider or pharmacist from using the Special Conditions override more than once; however, notification to NCCC is provided when an emergency supply is dispensed to discourage abuse of using this option except in cases of emergency.

A Special Conditions Local Override may be used for Outpatients to maintain continuity of care and to avoid disruption in a patient’s clozapine treatment:

### 1. Outpatient Special Conditions

When the patient is an outpatient and the clozapine must be dispensed during off hours or in anticipation of an emergency, the provider who wishes to dispense an emergency supply must document one of the following reasons in the written prescription:

- (1) Weather related condition
- (2) Mail order delay
- (3) Inpatient going on leave

The pharmacist entering the written prescription will also be required to document the provider-approved reason during the ordering process.

## Provider Decision

The FDA REMS supports the clinical medical decisions of the provider to determine when to prescribe clozapine – even if the ANC is null. Providers often feel that subjecting a clozapine patient to blood testing more than what is required by the FDA regulation is usually due to administrative barriers and is considered unnecessary. The option to have a Special Conditions Local Override allows the provider to make that decision and meet documentation requirements.

If the Special Conditions event should happen during the week, the NCCC requires written documentation of the ANC and Date of Testing before they will input codes for a National Override. VACO has mandated that NCCC have a written record of all override requests submitted by the facility and that the ANC is recorded on that request. See [Request for Override of Pharmacy Lockout Form](#).

## No ANC – Emergency OP Special Conditions (Pharmacy View)

\*This flow assumes the outpatient is actively registered and the provider is authorized.



In this scenario, a National Override is NOT in effect because this situation requires a written prescription from the provider to the Outpatient Pharmacist, as well as a Local Override.

**Table 28: Emergency OP Special Conditions**

Status	Pharmacist View
Written prescription – Outpatient Special Conditions Local Override	<p>When the OP pharmacist receives a written prescription for an Outpatient Special Conditions Local Override, it is entered into VistA Backdoor Pharmacy system. This is the message displayed to the pharmacist:</p> <p>&lt;Displays up to the last 4 results within the past 30 days, if applicable&gt;</p> <p>*** Permission to dispense clozapine has been denied based on the available lab tests related to the clozapine treatment program. ***</p> <p>For a National Override to dispense at the patient’s normal frequency, please contact the VA National Clozapine Coordinating Center to request an Override of Pharmacy Lockout (from VHA Handbook 1160.02) (Phone: 214-857-0068 Fax: 214-857-0339).</p> <p>A Special Conditions Local Override for Outpatients can be approved for (1) weather-related conditions, (2) mail order delays of clozapine, or (3) inpatient going on leave. With provider’s documentation of approval, you may dispense a one-time supply not to exceed 4 days.</p>
Pharmacist not authorized	<p>If the pharmacist is not authorized with the PSOLOCKCLOZ key, this message displays:</p> <p>You Are Not Authorized to Override! See Clozapine Manager with PSOLOCKCLOZ key.</p> <p>The system issues a hard stop and the written order is deleted and not processed.</p>
Prompted to override for Outpatient Special Conditions	<p>The authorized pharmacist receives additional information and is prompted to override with a Special Conditions Local Override. This message displays to the pharmacist:</p> <p>Override reason: PRESCRIBER APPROVED 4 DAY SUPPLY</p> <p>Do you want to override and issue this order? Y/N</p>

Status	Pharmacist View
Pharmacist does not want to override	If the pharmacist selects 'No' and does not want to override for Outpatient Special Conditions, a hard stop is issued, and the written prescription is deleted and not processed.
Pharmacist prompted to enter Provider approved reason	The pharmacist is prompted to enter one of the following required provider-approved reasons for the Outpatient Special Conditions: Select one of the following: Weather Related Condition Mail Order Delay Inpatient Going On Leave Prescriber's reason for Outpatient Special Conditions Local Override
Pharmacist prompted to enter Approving Member	The pharmacist is prompted to enter the name of an Approving Member of the clozapine team. The list of authorized users with the PSOLOCKCLOZ key is retrieved with entering a partial name or entering ?? Approving member
Outpatient Remarks pre-populated	The Remarks field is pre-populated with the following: Prescriber approved reason description: <1-3>, e.g., Weather Related Condition (1) plus The pharmacist may enter additional free text up to a total of 200 characters.
Dispense one-time 4-day emergency supply	The Outpatient pharmacist is prompted to activate the prescription and dispense a one-time supply not to exceed 4 days total. While the system will not enforce a one-time supply, it is incumbent on the provider and pharmacist to use the Special Conditions Local Override only in emergencies during off hours. The override is reported to the NCCC.
Auto-notification to Provider and Approving Member	The system sends an auto notification to the provider and Approving Member via VistA Alerts that the prescription has been dispensed. See Auto-Notify Provider and Approving Member.
Store and transmit Outpatient data	The Outpatient data is stored in the long-term temporary global and in VistA File #52.52 and transmitted to the National Clozapine data files nightly, including the override reason code: (9) PRESCRIBER APPROVED 4 DAY SUPPLY + Provider approved reason. Figure below shows Retransmit Clozapine Roll-up Data #52.

**Figure 9: Retransmit Clozapine Roll-up Data #52**

```

NUMBER: 462                                DATE TIME: AUG 31, 2016@09:18
PRESCRIPTION NUMBER: 2297874              USER ENTERING: DOCTOR,ALPHAMAN P
APPROVING TEAM MEMBER: FRIEDMAN,MARVIN H
REASON FOR OVERRIDE: PRESCRIBER APPROVED 4 DAY SUPPLY
COMMENTS: Weather Related Conditions: HURRICANE WARNING
SECOND APPROVING TEAM MEMBER: DOCTOR,CLOZMD

```

## No Matching WBC (ANC present) – Overview

When there is an ANC result in the last 7 days but no matching WBC, regardless of whether it is a normal result or indicates mild or moderate to severe neutropenia, the system will address the ‘No Matching WBC’ condition first. A warning message to the provider will require a National Override to dispense clozapine. Remember that the system can only address one condition at a time following this hierarchy. See [Hierarchy for Addressing Clozapine Patient Override Conditions](#) Hierarchy for Addressing Clozapine Patient Override Conditions to determine which condition is addressed first.



A Matching WBC result is collected at the same draw date/time as the ANC.

## No Matching WBC – Pharmacy (National Override in Effect)

Table 29: No Matching WBC ANC Result

Status	Pharmacist View
Pharmacist not authorized	If the pharmacist is not authorized with the PSOLOCKCLOZ key, this message is displayed: You Are Not Authorized to Override! See Clozapine Manager with PSOLOCKCLOZ key. A Pending Order is returned to pending status, while a written order issues a hard stop and the order is deleted and not processed.
Prompt to override	After the labs are displayed, the pharmacist is prompted to override the ‘No Matching WBC’ condition with this message: Now doing clozapine Order checks. Please wait... Permission to dispense clozapine has been authorized by NCCC Override reason: NCCC AUTHORIZED Do you want to override and issue this order? Y/N.
Pharmacist does not want to override	In the event the pharmacist selects ‘No’ and does not want to override the prescription, a hard stop is issued. A Pending Order is returned to pending status, while a written order issues a hard stop and the order is deleted and not processed.
Pharmacist prompted to enter Approving Member	The pharmacist is prompted to enter the name of an Approving Member of the clozapine team. The list of authorized users with the PSOLOCKCLOZ key is retrieved by entering a partial name or entering ‘??’ Approving member
Pharmacist enters Remarks/Special Instructions	The pharmacist is required to enter free text in the Remarks/Special Instructions field with a limit of 200 characters. Remarks/Special Instructions
Dispense clozapine	The pharmacist is prompted to activate the override prescription and dispense the clozapine.



Status	Pharmacist View
Auto-notification to Provider and Approving Member	When the clozapine override prescription is complete, the system sends an auto notification to the provider and Approving Member via VistA Alerts. See Auto-Notify Provider and Approving Member.
Store and transmit patient data	Patient data is stored in the long-term temporary global and transmitted to the National Clozapine data files nightly, including the override reason code: #7 – NCCC AUTHORIZED For NCC data transmission, please see MH NCC Project User Guide/Training Plan - Section 3.10 Data Store and Transmission to National Clozapine data files.

### No Matching WBC – Pharmacy (No National Override)

The pharmacist will be able to complete a prescription when there is No Matching WBC with the ANC *only* when a National Override is in effect.

\*This flow assumes the patient is actively registered and the provider is authorized.

**Table 30: No Matching WBC ANC Result National Override in Effect**

Status	Pharmacist View
No Matching WBC – No National Override in Effect	In the event there is No National Override in effect with No Matching WBC, this is the message that displays before the hard stop: Now doing clozapine Order checks. Please wait... <Displays up to the last 4 results within the last 30 days, if available> Permission to dispense clozapine has been denied. The result of the latest Lab Test drawn in the past 7 days shows ANC results but No Matching WBC. If you wish to dispense outside the FDA and VA protocol ANC limits, document your request to Request for Override of Pharmacy Lockout (from VHA Handbook 1160.02) Director of the VA National Clozapine Coordinating Center (Phone: 214-857-0068 Fax: 214-857-0339) for a one-time override permission.
No Matching WBC – Must request a National Override to proceed	To proceed when a National Override is not in effect and there is No Matching WBC, an approval from NCCC must be requested. See <a href="#">Request for Override of Pharmacy Lockout Form</a> . Once NCCC gives approval, the pharmacist can continue processing the prescription/order.

### Emergency Registration Override – Overview

When an authorized provider enters a prescription in CPRS and the patient is not actively registered, the provider is notified to either request a permanent number be assigned by the NCCC (non-emergency) or a temporary local authorization number be assigned through the VistA Backdoor Pharmacy (emergency).

When there is an urgent need to dispense clozapine before the NCCC can assign a permanent number, to not interrupt therapy, the provider can authorize a limited supply to be dispensed – not to exceed 4 days – with a temporary local authorization number.



To use the Emergency Registration Override, the patient must have a Normal ANC result (equal to or greater than 1500 cmm) with a matching WBC in the last 7 days.

## Valid reasons for an Emergency Registration Override:

An Emergency Registration Override is typically warranted for the following reasons:

1. The patient has a current NCCC registration at another VistA facility
  - a. Inpatient transferred from another facility
  - b. Outpatient from another facility becomes an inpatient
2. The patient has never been registered at the local facility
3. The patient status has changed from Active to Discontinued
4. An Outpatient with a prescription that had previously been filled outside of the VA or at another VA facility arrives during NCCC non-duty hours



A Clozapine Authorization Number is only valid for a patient at the facility where they were registered. When a Clozapine patient arrives at a new facility, they need to be re-registered with a new Clozapine Authorization Number before the facility's CPRS and Pharmacy applications will allow a Clozapine order to be processed.

## Emergency Registration Override – VistA Backdoor Pharmacy

Using VistA Backdoor Pharmacy, the Outpatient pharmacist must receive a written prescription from the provider to assign a **temporary local authorization number** when the patient is not actively registered and there is an urgent need to dispense up to a 4 day supply.



CPRS currently does not support a Pending Order for an Emergency Registration Override. It must be processed as a written prescription.

## Obsolete messages in Outpatient Pharmacy

Current functionality in Outpatient Pharmacy includes two messages that are now obsolete after the implementation of PSO\*7\*457 regarding denial to dispense clozapine when the patient is not registered or is discontinued. They have been replaced with a single new message that supports the Emergency Registration Override option. The following two messages are no longer available to the Outpatient:

### Message #1

Permission to dispense clozapine has been denied. Please contact the Director of the VA National Clozapine Coordinating Center (Phone: 214-857-0068 Fax: 214-857-0339).

### Message #2

\*\*\* This patient has been discontinued from the clozapine treatment program \*\*\*

Permission to dispense clozapine has been denied. Please contact the Director of the VA National Clozapine Coordinating Center (Phone: 214-857-0068 Fax: 214-857-0339).

### New message for patient not actively registered

The two obsolete messages mentioned above have been replaced with this single message that displays to the pharmacist when the patient is not actively registered or is discontinued:

\*\*\* This patient has no clozapine registration number \*\*\*



Two conditions will trigger the new message: (1) the patient has never been registered in the local VistA facility, or (2) the patient has been registered but is now on discontinued status.

During the Emergency Registration Override process, the pharmacist is prompted to assign a temporary local authorization number. The NCCC is automatically notified that the patient has received a temporary number and will take the necessary steps to assign a permanent number before the temporary number expires at midnight of the 4<sup>th</sup> day.

### Temporary number

A unique sequential seven character temporary tag is assigned, for example: 'Z442001', where:

Temporary tag = Z + 3 digit facility code = XXX (for example, 442) + 3 digit unique number = 001-999


In the event all the 999 numbers linked to the temporary tag 'Z' are used, the system will move up the alphabet to 'Y' and assign the next set of numbers 001-999 with a 'Y' temporary tag, and so on. Only upper case letters are supported.

### Pharmacist Flow

The pharmacist has received a written clozapine prescription from the provider to assign a temporary local authorization number:

**Table 31: Pharmacist Flow**

Status	Pharmacist View
Patient not actively registered	When the patient is not actively registered, the system displays this message: *** This patient has no clozapine registration number ***
Pharmacist not authorized	If the pharmacist is not authorized with the PSOLOCKCLOZ key, the system displays this message: You Are Not Authorized to Override! See Clozapine Manager with PSOLOCKCLOZ key. The system issues a hard stop and the written prescription/ order is deleted and not processed
Prompt to register patient	The authorized pharmacist is prompted to register the patient with a temporary local authorization number: Do you want to register this patient with a temporary local authorization number in the Clozapine registry? Y/N
Pharmacist does not want to override	In the event the pharmacist selects 'No' and does not want to register the patient, the prescription is deleted and not processed.
Prompt to enter Provider	The system prompts the pharmacist to enter the name of the provider. Provider Responsible The pharmacist will continue to be prompted until an authorized provider name is entered, or the pharmacist enters ^ to stop the order.
Provider not authorized	If the selected provider is not authorized to prescribe clozapine, this message displays to the pharmacist: Provider must have a DEA# or VA# to write prescription for clozapine. --OR-- Provider must hold YSCL AUTHORIZED key to write prescriptions for clozapine. Remember to check the license expiration date if the provider is not authorized.
Assign temporary local authorization number	The authorized pharmacist is prompted to register the patient with a temporary local authorization number in the Clozapine registry. This message displays to the pharmacist: Would you like to override the registration requirement and assign a temporary local authorization number for <LASTNAME,FIRSTNAME> <last 4 digits of SSN> <Z224001>? Y/N
Pharmacist does not want to override	In the event the pharmacist selects 'No' and does not want to override the registration requirement, the prescription is deleted and not processed.

Status	Pharmacist View
Error message if conditions not met	<p>In the event any of the following are true:            (1) the ANC result in the last 7 days is less than 1500 cmm, (2) there is no ANC result, or (3) the ANC does not have a matching WBC, the system displays this message and the order is deleted and not processed:</p> <p style="padding-left: 40px;">Emergency Registration Local Override for non-registered clozapine patients requires ANC levels greater than or equal to 1500.</p>
Pharmacist does not want to override	<p>In the event the pharmacist selects 'No' and does not want to override the prescription, it is deleted and not processed.</p>
Pharmacist prompted to enter Approving Member	<p>The pharmacist is prompted to enter the name of an Approving Member of the clozapine team. The list of authorized users with the PSOLOCKCLOZ key is retrieved by entering a partial name or entering '??'</p> <p style="padding-left: 40px;">Approving member</p>
Pharmacist enters Remarks/Special Instructions	<p>The pharmacist is required to enter free text in the Remarks/Special Instructions field with a limit of 200 characters.</p> <p style="padding-left: 40px;">Remarks/Special Instructions</p>
Real-time notification of temporary local authorization number to NCCC MailMan Group	<p>Once the prescription is complete and dispensed, the system sends a <b>real-time</b> message to the NCCC MailMan Group which contains this information:</p> <p style="padding-left: 40px;">Current date/time            Add            From            Temporary local authorization number (e.g., Z442001)            Station #.            Social Security Number            Dispense frequency (W)</p> <p> The only valid response for dispense frequency is W (Weekly)</p>
Auto-notification to Provider and Approving Member	<p>When the clozapine prescription is complete, the system sends an auto notification to the provider and Approving Member via VistA Alerts that the prescription has been dispensed. See Auto-Notify Provider and Approving Member.</p>
Store and transmit patient data	<p>Patient data is stored in the long-term temporary global and transmitted to the National Clozapine data files nightly, including the override reason code:</p> <p style="padding-left: 40px;">(8) REGISTER NON-DUTY HR/WEEKEND (MAX4DAY)</p> <p>For NCC data transmission, please see MH NCC Project User Guide/Training Plan - Section 3.10 Data Store and Transmission to National Clozapine data files.</p>



The temporary local authorization number is valid for 4 days. If the pharmacist chooses to create a number but does not finish the order process, either because of choosing not to complete the order or lack of an ANC of 1500 cmm or greater, the pharmacist may restart the order with the already-created temporary local authorization number until that number expires at midnight of the 4th day.

## Other Scenarios


Additional potential scenarios may exist. The following can be adapted for other potential lab conditions besides Mild neutropenia.

### National Override in Effect – Takes Precedence

**Scenario 1** – The Provider sends a Pending Order for mild neutropenia based on lab results at the time of the order. However, sometime during the day, a National Override was authorized for this patient, which is still in effect until midnight of the day it was authorized. In this scenario, if the system sees that a National Override is in effect, even though the labs indicate Mild neutropenia, the reason code returned to the pharmacist will be NCCC AUTHORIZED.

\*This flow assumes the patient is actively registered and the provider is authorized.

**Table 32: Potential Scenarios**

Status	Pharmacist View
Pending Order – Mild Neutropenia	<p>The authorized pharmacist reviews the Pending Order. If the system detects a National Override is in effect, even though the lab results indicate Mild neutropenia, which does not require a National Override, the system will return the reason code to the pharmacist: <b>NCCC AUTHORIZED</b> rather than <b>MILD NEUTROPENIA PRESCRIBER APPROVED</b>.</p>  <p>When a National Override is in effect, it takes precedence over any other condition.</p>
Pharmacist not authorized	<p>If the pharmacist is not authorized with the PSOLOCKCLOZ key, this message is displayed:</p> <p style="padding-left: 40px;">You Are Not Authorized to Override! See Clozapine Manager with PSOLOCKCLOZ key.</p> <p>A Pending Order is returned to pending status, while a written order issues a hard stop and the order is deleted and not processed.</p>
Lab results returned	<p>Lab results are returned to the pharmacist in the following message:</p> <p style="padding-left: 40px;">Now doing clozapine Order checks. Please wait... &lt;Displays up to last four results in the last 30 days&gt;</p>
Override prompt	<p>After the labs are displayed, the pharmacist is prompted to override the abnormal ANC results with this message:</p> <p style="padding-left: 40px;">Override reason: NCCC AUTHORIZED Do you want to override and issue this order? Y/N.</p>


Status	Pharmacist View
Pharmacist does not want to override	In the event the pharmacist selects 'No' and does not want to override the prescription: For a Pending Order, a hard stop is issued, and the order is sent back to Pending status. For a written order, the system issues a hard stop and the order is deleted and not processed.
Pharmacist prompted to enter Approving Member	When 'Yes' is entered, the pharmacist is prompted to enter the name of an Approving Member of the clozapine team. The list of authorized users with the PSOLOCKCLOZ key is retrieved by entering a partial name or entering '??' Approving member
Pharmacist enters Remarks/Special Instructions	The pharmacist is required to enter free text in the Remarks/Special Instructions field with a limit of 200 characters. Remarks/Special Instructions
Dispense clozapine	The pharmacist is prompted to activate the override prescription/ and dispense the clozapine.
Auto-notification to Provider and Approving Member	When the clozapine override prescription is complete, the system sends an auto notification to the provider and Approving Member via VistA Alerts. See Auto-Notify Provider and Approving Member.
Store and transmit patient data	Patient data is stored in the long-term temporary global and transmitted to the National Clozapine data files nightly, including the override reason code: (7) NCCC AUTHORIZED For NCC data transmission, please see MH NCC Project User Guide/Training Plan - Section 3.10 Data Store and Transmission to National Clozapine data files.

### Lab Changes after Pending Order Sent

**Scenario 3** – The Provider sends a Pending Order for mild neutropenia (or other condition) based on lab results at the time of the order. Before the pharmacist processes the Pending Order, the lab results change, and a new lab is added. For this scenario, a standalone WBC result is recorded. When the safety check is performed at the time the pharmacist processes the order, the system safety check will indicate that a National Override is required for a missing ANC result and the reason code will be **NCCC AUTHORIZED** rather than **MILD NEUTROPENIA PRESCRIBER APPROVED**.

\*This flow assumes the patient is actively registered and the provider is authorized.

**Table 33: Pending Order Change**

Status	Pharmacist View															
Pending Order	<p>The authorized pharmacist reviews the Pending Order. If the system finds that the most recent lab results require a National Override – for instance, the latest lab results are a standalone WBC – the system will require a National Override to be authorized because there is a WBC result with no matching ANC.</p>															
Pharmacist requests National Override for Administrative Reasons	<p>The pharmacist can request the National Override for Administrative Reasons by completing the Override Lockout Form and submitting to NCCC.</p>  <p>The NCCC will review the standalone WBC and previous results and the circumstances prior to approval.</p> <p>Once the National Override is authorized, the pharmacist will continue processing the pending order.</p>															
Pharmacist not authorized	<p>If the pharmacist is not authorized with the PSOLOCKCLOZ key, this message is displayed:</p> <p style="padding-left: 40px;">You Are Not Authorized to Override! See Clozapine Manager with PSOLOCKCLOZ key.</p> <p>A Pending Order is returned to pending status, while a written order issues a hard stop and the order is deleted and not processed.</p>															
Lab results returned	<p>Lab results are returned to the pharmacist in the following message:</p> <p style="padding-left: 40px;">Now doing clozapine Order checks. Please wait... &lt;Displays up to last four results in the last 30 days&gt;</p> <p style="text-align: center;"><b>Table 34: Example</b></p> <table border="1" data-bbox="745 1226 1338 1377" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th></th> <th style="text-align: center;">WBC</th> <th style="text-align: center;">ANC</th> </tr> </thead> <tbody> <tr> <td>06/22/2016@08:00</td> <td style="text-align: center;">Results: 2100</td> <td style="text-align: center;">1000</td> </tr> <tr> <td>07/07/2016@11:41</td> <td style="text-align: center;">Results: 3000</td> <td style="text-align: center;">10</td> </tr> <tr> <td>07/13/2016@15:56</td> <td style="text-align: center;">Results: 3000</td> <td style="text-align: center;">1499</td> </tr> <tr> <td>07/14/2016@09:31</td> <td style="text-align: center;">Results: 2500</td> <td></td> </tr> </tbody> </table>		WBC	ANC	06/22/2016@08:00	Results: 2100	1000	07/07/2016@11:41	Results: 3000	10	07/13/2016@15:56	Results: 3000	1499	07/14/2016@09:31	Results: 2500	
	WBC	ANC														
06/22/2016@08:00	Results: 2100	1000														
07/07/2016@11:41	Results: 3000	10														
07/13/2016@15:56	Results: 3000	1499														
07/14/2016@09:31	Results: 2500															
National Override prompt	<p>With a National Override in effect, the pharmacist is prompted to override the results with this message:</p> <p style="padding-left: 40px;">Override reason: NCCC AUTHORIZED Do you want to override and issue this order? Y/N.</p>															
Pharmacist does not want to override	<p>In the event the pharmacist selects 'No' and does not want to override the prescription:</p> <p>For a Pending Order, a hard stop is issued, and the order is sent back to Pending status. For a written order, the system issues a hard stop and the order is deleted and not processed.</p>															
Pharmacist prompted to enter Approving Member	<p>When 'Yes' is entered, the pharmacist is prompted to enter the name of an Approving Member of the clozapine team. The list of authorized users with the PSOLOCKCLOZ key is retrieved by entering a partial name or entering '??'</p> <p style="padding-left: 40px;">Approving member</p>															



<b>Status</b>	<b>Pharmacist View</b>
Pharmacist enters Remarks/Special Instructions	The pharmacist is required to enter free text in the Remarks/Special Instructions field with a limit of 200 characters. Remarks/Special Instructions
Dispense clozapine	The pharmacist is prompted to activate the override prescription and dispense the clozapine.
Auto-notification to Provider and Approving Member	When the clozapine override prescription is complete, the system sends an auto notification to the provider and Approving Member via VistA Alerts. See Auto-Notify Provider and Approving Member.
Store and transmit patient data	Patient data is stored in the long-term temporary global and transmitted to the National Clozapine data files nightly, including the override reason code: (7) NCCC AUTHORIZED For NCC data transmission, please see MH NCC Project User Guide/Training Plan - Section 3.10 Data Store and Transmission to National Clozapine data files.

## Chapter 10: Handling Copay Charges

---

The copay status of a prescription is determined at the time of entry and re-evaluated every time a fill for that prescription is released. A prescription will be designated as exempt from copay under the following conditions:

- ✓ The drug is marked as a supply item, nutritional supplement or for investigational use.
- ✓ The Rx Patient Status assigned to the prescription is exempt from copayment.
- ✓ The Veteran is copay exempt based on income.
- ✓ The medication prescribed is used in the treatment of:
  - A Service Connected (SC) condition
  - Combat Veteran (CV)
  - Vietnam-era herbicide/Agent Orange (AO) exposure
  - Ionizing Radiation (IR) exposure
  - Southwest Asia Conditions
  - Shipboard Hazard and Defense (SHAD)
  - Military Sexual Trauma (MST)
  - Cancer of the Head and/or Neck (HNC)

The copay status of a prescription is re-evaluated whenever a fill is released. Various actions can occur based on changes to the criteria that determine the copay status of a prescription, including no action, automatic copay status reset, or a MailMan message generated detailing missing information required for user follow up.

Once a Veteran meets the designated annual copayment cap, subsequent fills for any prescriptions dispensed will not be charged a copay. Any fills for copay-eligible prescriptions entered after the cap is reached are not billed and are identified as potential charges. If editing the Days Supply of an Rx or returning an Rx fill to stock results in the total copayment of the Veteran to fall below the annual cap, Integrated Billing (IB) software shall initiate a copay charge for any fill that was identified as a potential charge until the annual cap is once again reached.

A user will be prompted to respond to any medication copay exemption questions that apply to the patient when entering a new prescription. Responses entered for the medication copay exemption questions are stored with the prescription and display as default values when an order is renewed, copied, or edited in such a way that a new order is created.

If none of the copay exemptions listed apply, the order is released as a copay prescription with no questions asked. (See “Patient Prescription Processing-New Order Entry”, for a complete order entry example.)

### Example: Entering an Rx for a patient with no applicable medication copay exemptions

```
Do you want to enter a Progress Note? No// <Enter> NO
Rx # 559157          10/23/06
OPPATIENT24, ONE   #30
TAKE ONE TABLET BY MOUTH EVERY DAY
```

```

NIACIN (NIASPAN-KOS) 500MG SA TAB
OPPROVIDER,ONE                OPPHARMACIST,ONE
# of Refills: 11
Is this correct? YES//

```

If any medication copay exemptions apply to a patient when entering a new prescription, the applicable questions are displayed for the user to respond “Yes” or “No.” The responses will be used to determine the copay status of the prescription. The prescription fill will not generate a copay charge when released if at least one of the responses is “Yes”. Responses are required.

**Example: An order with medication copay exemptions, but no responses entered**

```

Rx # 3754648                10/24/06
OPPATIENT24,ONE            #30
APPLY SMALL AMOUNT TO AFFECTED AREA TWICE A DAY

HYDROCORTISONE 1% CREAM
OPPROVIDER,ONE            OPPHARMACIST,ONE
# of Refills: 11
SC Percent: 30%
Disabilities: NONE STATED

Was treatment for Service Connected condition? NO <Enter>
Was treatment related to Combat? NO <Enter>
Was treatment related to Agent Orange exposure? NO <Enter>
Was treatment related to service in SW Asia? NO <Enter>
Was treatment related to PROJ 112/SHAD? NO <Enter>
Was treatment related to Military Sexual Trauma? NO <Enter>
Was treatment related to Head and/or Neck Cancer? NO <Enter>
Is this correct? YES// <Enter>

All Service Connected and Environmental Indicators that apply will be asked regardless of
a previously entered “Yes” response. SC will be asked for SC 0-100%, but copay charges
will continue to be formulated in the same manner.)

Was treatment for a Service Connected condition? NO <Enter>
Was treatment related to Combat? NO <Enter>
Was treatment related to Agent Orange exposure? N// Y
Is this correct? YES//

```

A dollar sign is displayed next to the copay prescription number if the copay status is billable.

**Example: Billable Copay Status**

```

Medication Profile                Oct 24, 2006@15:14:58                Page: 1 of 1
OPPATIENT24,ONE
  PID: 000-34-5678P                Ht (cm) : _____ (_____)
  DOB: DEC 2,1921 (85)            Wt (kg) : _____ (_____)
  CrCL: <Not Found> (CREAT: Not Found)  BSA (m2) : _____

-----ACTIVE-----
No Copay      1 559163    FOSINOPRIL NA 20MG TAB          30 A> 10-24 10-24 11 30
Copay        2 559157$  NIACIN (NIASPAN-KOS) 500MG SA TAB 30 A> 10-23 10-23 11 30

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

```

## Copay Menu [PSOCP MENU]

Users with access to this menu option can exempt an Rx Patient Status from copayment or CHAMPUS billing, reset a prescription's copay status, cancel some or all charges for a prescription, and enter/edit responses to medication exemption questions prompted at order entry.

The following options are available on the *Copay Menu*:

- *CHAMPUS Billing Exemption*
- *Exempt Rx Patient Status from Copayment*
- *Reset Copay Status List Manager*
- *Reset Copay Status/Cancel Charges*

Prepayments (credit balances) will no longer be automatically created when resetting or cancelling charges. Users will receive a VistA message that alerts the user to a possible manual refund situation. This is a change but is standard VistA functionality. The elimination of prepays is associated with both the standing Copay Reset option and the new List Manager option.

## CHAMPUS Billing Exemption [PSOCP CHAMPUS EXEMPTION]

Use this option to select a patient category (Rx Patient Status) to exempt from any CHAMPUS billing.

### Example: CHAMPUS Billing Exemption

```
Select Copay Menu Option:  CHAMPUS Billing Exemption
Select RX PATIENT STATUS NAME:  ZZPOW
EXEMPT FROM CHAMPUS BILLING:  ?
  Answer YES if this Rx Patient status is to be exempt from Champus billing.
  Choose from:
    0          NO
    1          YES
EXEMPT FROM CHAMPUS BILLING:
```

## Exempt Rx Patient Status from Copayment [PSOCP EXEMPTION]

This option allows users to exempt an Rx Patient Status from copayment. A prescription assigned an Rx Patient Status that has been set as exempt from copay will not be charged a copay. A warning is displayed describing the consequences of taking this action and then the user is asked to confirm the change.

### Example: Exempt Rx Patient Status from Copayment

```
Select RX PATIENT STATUS NAME:  Inpatient
EXEMPT FROM COPAYMENT: NO//  Y  YES
                      **** WARNING ****
```

```

By setting the Exempt from Copayment for the Rx Patient Status of
INPATIENT to 'YES', every prescription entered
with this Rx Patient Status will NOT be charged a Copayment.

A mail message will be sent to PSORPH and PSO COPAY Key holders informing
them of your change.

Are you sure you want to do this? Y// <Enter> ES

Setting INPATIENT Rx Patient Status to Exempt from Copayment.

The warning displayed when removing the copay exemption from an Rx Patient Status differs
slightly.

```

### Example: Warning Message

```

By setting the EXEMPT FROM COPAYMENT for the Rx Patient Status of
OPT NSC to 'NO', prescriptions entered with this Rx
Patient Status from this point on will NOT be exempt from Copayment.

A MailMan message is sent to the holders of the PSO COPAY and PSORPH keys whenever the
copay exemption status of an Rx Patient Status is changed.

Example: MailMan Message

Subj: Exempt from Copayment [#4072] 18 Oct 06 16:29 3 lines
From: OUTPATIENT PHARMACY In 'IN' basket. Page 1 *New*
-----
The INPATIENT Rx Patient Status has been marked as
Exempt from Copayment by OPPHARMACIST3,THREE.
Every prescription with this Rx Patient Status will not be charged a Copayment.

Enter message action (in IN basket): Ignore//

```

The text differs slightly when the copay exemption is removed.

### Example: Copay Exemption Removed

```

The Exempt from Copayment status has been removed from the
OPT NSC Rx Patient Status by OPPHARMACIST3,THREE.
Prescriptions entered with this Rx Patient Status will not be exempt from
Copayment.

```

## Reset Copay Status/Cancel Charges [PSOCP RESET COPAY STATUS]

This option combines and enhances the functionality of the previous *Remove Copay Charge* and *Reset Copay Status* options. Three basic functions can be performed with this option:

- The prescription's copay status can be reset.
- Responses to the medication exemption questions can be entered or changed.
- All or selected copay charges can be cancelled.

Prepayments (credit balances) will no longer be automatically created when resetting or cancelling charges. Users will receive a VistA message that alerts the user to a possible manual refund situation. This is a change but is standard VistA functionality. The elimination of prepaids is associated with both the standing Copay Reset option and the new List Manager option.

The actions allowed depend on the copay status of the patient and that of the selected prescription. The user needs to know the prescription number to be changed when accessing this option.

Other actions listed at the bottom of the screen are provided to allow the user to look up additional information about the patient. These actions are: Account Profile, Bill Profile, Bill Inquiry, Third Party Inquiry, and Patient Inquiry.

Patient Medications		Mar 14, 2017@13:53:17		Page: 1 of 2	
	Patient Name	ID	Medication	Fill DT	Status
1	XXXX,XXXXXXXX XXXX	X0000	SILDENAFIL CITRA	06/16/12	COLLECTED/CLOSED
	SC:YES SC%:10		Rx#:2345682-5		BIL#:442-K2027X3
	MT:NO LONGER REQUIRE		DT:		RX:Previously NON-
2	XXXX,XXXXXXXX XXXX	X0000	SILDENAFIL CITRA	09/27/12	COLLECTED/CLOSED
	SC:YES SC%:10		Rx#:2345682-6		BIL#:442-K302AIU
	MT:NO LONGER REQUIRE		DT:		RX:Previously NON-
3	XXXX,XXXXXXXX XXXX	X0000	SILDENAFIL CITRA	10/12/12	COLLECTED/CLOSED
	SC:YES SC%:10		Rx#:2345682A-0		BIL#:442-K302AIU
	MT:NO LONGER REQUIRE		DT:		RX:Previously NON-
4	XXXX,XXXXXXXX XXXX	X0000	SILDENAFIL CITRA	11/04/12	COLLECTED/CLOSED
	SC:YES SC%:10		Rx#:2345682A-1		BIL#:442-K302MXR
	MT:NO LONGER REQUIRE		DT:		RX:Previously NON-
+ Enter ?? for more actions					
RC	Reset/Cancel	AP	Account Profile	BP	Bill Profile
CA	Cancel Charge	PB	Bill Inquiry	TP	Third Party Inq.
EC	Excel Report	PI	Patient Inquiry	CP	Change Patient
Select Action: Next Screen//					

## Reset Copay Status

Two methods can be used to change the copay status of a prescription directly. The first method is illustrated below. By entering “Yes” at the “Do you want to reset the status to NO COPAYMENT?” prompt and entering a reason for the reset, the prescription’s copay status is changed from COPAY to NO COPAYMENT.

### Example: Change the Copay Status

```
Select PRESCRIPTION RX #: 559157          NIACIN (NIASPAN-KOS) 500MG SA TAB
Rx # 559157 is a Copay prescription
```

The reset prompt displays only if there are no exemption flags set to ‘Yes.’

```
Do you want to reset the status to NO COPAYMENT? N// YES
Select Reason for Reset : ??

Choose from:
1          RX REFUSED
2          RX NEVER RECEIVED
3          RX RETURNED/DAMAGED (MAIL)
4          ENTERED IN ERROR
5          RX CANCELLED
6          INPATIENT/PASS
7          INVESTIGATIONAL DRUG
8          RX DELETED
9          EMPLOYEE
```

10	CNH - 3 DAY
11	PATIENT DECEASED
12	SUPPLY ITEM
13	BEDSIDE MEDICATIONS
14	ELIGIBILITY INCORRECT
15	CHANGE IN ELIGIBILITY
16	RX EDITED
21	RX COPAY INCOME EXEMPTION
33	AGENT ORANGE RELATED
34	IONIZING RAD RELATED
35	SOUTHWEST ASIA RELATED
37	MILITARY SEXUAL TRAUMA
38	COPAY CAP REACHED
39	CANCER OF HEAD/NECK
40	PHARMACY AUTO CANCELLED

**Example: Change the Copay Status (continued)**

44	COMBAT VETERAN
45	RX FOR FORMER POW
46	RX FOR UNEMPLOYABLE VETERAN
47	KATRINA AFFECTED VETERAN
48	PROJECT 112/SHAD

Select Reason for Reset : **15** CHANGE IN ELIGIBILITY

The change is recorded in the Copay Activity Log for this prescription.

**Example: Copay Activity Log**

Copay Activity Log:				
#	Date	Reason	Rx Ref	Initiator Of Activity
1	10/24/06	COPAY RESET	ORIGINAL	OPPROVIDER9,TWO
Comment: CHANGE IN ELIGIBILITY Old value=Copay New value=No Copay				

Resetting the copay status does not involve canceling any incurred copay charges. The new copay status applies to future fills only. Any past charges billed will not be cancelled automatically. The canceling of copay charges is independent of the reset function.

**Enter/Edit Medication Exemption Question Responses**

The second way a user can directly reset the copay status of a prescription is to use the *Reset Copay Status/Cancel Charges* option to enter or edit any existing responses to the medication exemption questions displayed during order entry. Only those medication exemptions that apply to the patient for which the prescription is written can be modified. Any existing response to an exemption question displays to the user after entering the prescription number and the user is asked about entering or editing any copay exemption flags.

In the following screen example, *Reset Copay Status*, the <50% SC, Agent Orange (AO) exposure, PROJ 112/SHAD, and Military Sexual Trauma (MST) medication exemptions apply to the Veteran for which Rx# 3754533 has been entered. SC, AO, and SHAD exemption defaults of “No” display because values already exist. The MST exemption does not display because a response has never been entered.

Prompts display for Service Connected and all Environmental Indicators that are flagged for the Veteran in Enrollment.

The user is prompted to respond to “Do you want to enter/edit any copay exemption flags?” If the user responds “Yes”, each medication exemption that applies to the Veteran will be presented for editing. All three medication copay exemptions are presented for editing, including the MST exemption for which a response did not exist. “Yes” is entered for the MST exemption question and a system message indicates that the copay status of the Rx is reset to No Copay by this action.

**Example: Reset Copay Status**

```
Select Copay Menu Option: RESET Copay Status/Cancel Charges
Select PRESCRIPTION RX #: 3754533 HYDROCORTISONE 1.0% CREAM
Rx # 3754533 is a Copay prescription <Current copay status of Rx> appears.
The following exemption flags have been set:
SC: No <If any exemption flags have values they will be displayed after the copay status
AO: No

Do you want to enter/edit any copay exemption flags? Y// <Enter> ES
Was treatment for a Service Connected condition? N// <Enter> O
Was treatment related to Agent Orange exposure? N// <Enter> O
Was treatment related to PROJ 112/SHAD? N// <Enter> O
Was treatment related to Military Sexual Trauma?// YES

Editing of exemption flag(s) has resulted in a copay status change.
The status for this Rx will be reset to NO COPAY.

Do you want to cancel any charges(Y/N)? N <This prompt appears only if this Rx has incurred any charges.
```

The Copay Activity Log for this order shows the record of the change.

**Example: Copay Activity Log**

Copay Activity Log:				
#	Date	Reason	Rx Ref	Initiator Of Activity
1	10/24/06	COPAY RESET	Refill 2	OPPROVIDER9,TWO
Comment: MILITARY SEXUAL TRAUMA RELATED Old value=Copay New value=No copay				



**Note:** The copay status of an Rx will not be reset from a “No” Copay-to-Copay status based strictly on a response to a medication exemption question.

**Cancel Charges**

A user can select to remove all or specific charges for a prescription fill. If the user chooses to cancel a specific charge, a list of fills/refills is displayed showing the fill reference and release date. Any charge that has already been cancelled or any fill that has not been billed due to the Veteran meeting the annual copay cap will be identified.



### Example: Cancel Copay Charges

```
Do you want to cancel any charges(Y/N)? Y <This prompt appears only if this Rx has
incurred any charges.

(A)ll or (S)elect Charges? (A/S): S
1. Original fill (05/01/06)
2. Refill #1 (6/10/06)
3. Refill #2 (7/12/06) (Charge Cancelled)
4. Refill #3 (8/15/06)
5. Refill #4 (9/23/06) (Potential Charge *)

* Potential charge indicates fill was not billed due to the annual cap.
If cancelled, this fill will not be considered for future copay billing.

Select 1:-5: 5

Do you wish to continue (Y/N)? Y
```

Typing a “??” at the “Select Reason for Reset or Charge Cancellation” prompt lists the same reasons displayed previously in the “Reset Copay Status” section. Once the reason for the change is entered, a summary of all the actions taken on the prescription is displayed.

### Example: Summary of Actions

```
Editing of exemption flag(s) has resulted in a copay status change.
The status for this Rx will be reset to NO COPAY.

Select Reason for Reset or Charge Cancellation : 1 RX REFUSED
Copay status reset due to exemption flag(s)

The following exemption flags have been changed:
EC: Yes
MST: Yes
Rx # 3754533 - Refill 3 copay charge cancelled

Select PRESCRIPTION RX #:
```

The Copay Activity Log shows the canceled charge as REMOVE COPAY CHARGE.

### Example: Copay Activity Log

```
Copay Activity Log:
# Date Reason Rx Ref Initiator Of Activity
=====
1 11/02/06 REMOVE COPAY CHARGE Refill 3 OPPROVIDER9,TWO
Comment: RX REFUSED
```

## Potential Charges and Partial Charges

In this example, the prescription is for a 90-day supply. When Refill #2 was released, the Veteran met his annual copay cap and the fill was not billed. An entry is made in the Copay Activity Log to document when a prescription fill is not billed due to the annual copay cap. A fill is identified as a potential charge when NO BILLING was performed.

### Example: Copay Activity Log for No Bill

```
Rx Activity Log Oct 23, 2006 @13:53:02 Page: 1 of 1
OPPATIENT9,ONE
PID: 000-76-5432P Ht (cm): 169.55 (03/06/2006)
```

DOB: NOV 18,1950 (55) Wt (kg): 125.45 (03/06/2006)

Rx #: 459166 Original Fill Released: 03/12/06  
 Routing: Mail Finished by: OPHPHARMACIST27,THREE

Copay Activity Log:

#	Date	Reason	Rx Ref	Initiator Of Activity
1	10/23/06	ANNUAL CAP REACHED	REFILL 2	OPHPHARMACIST15,THREE

Comment: NO BILLING FOR THIS FILL

The list of fills associated with this order, as seen in the *Reset Copay Status/Cancel Charges* option, would show Refill #2 as a Potential Charge.

**Example: Reset Copay Status/Cancel Charges for Potential Charge**

1. Original fill	(03/06/06)	
2. Refill #1	(05/24/06)	
3. Refill #2	(10/23/06)	(Potential Charge *)

\* Potential charge indicates fill was not billed due to the annual cap.  
 If cancelled, this fill will not be considered for future copay billing.

If the same Refill #2 is released and the Veteran reaches the annual copay cap after the first 30 days of the 90-day supply is billed, the Copay Activity Log will indicate that the Veteran was partially billed due to the annual cap.

**Example: Copay Activity Log**

Copay Activity Log:

#	Date	Reason	Rx Ref	Initiator Of Activity
1	10/26/06	ANNUAL CAP REACHED	REFILL 2	OPHPHARMACIST15,THREE

Comment: PARTIAL BILLING FOR THIS FILL

Refill #2 will not be identified as having a potential charge because partial billing was done.

Example: Reset Copay Status/Cancel Charges for Partial Charge

1. Original fill	(03/06/06)	
2. Refill #1	(05/24/06)	
3. Refill #2	(10/23/06)	

If Refill #2 is cancelled, the partial charge (for 30-day supply) is cancelled and the remaining 60-day supply that was not charged is removed from consideration for future copay billing. Only one entry is entered in the Copay Activity Log.

**Example: Copay Activity Log**

Copay Activity Log:

#	Date	Reason	Rx Ref	Initiator Of Activity
1	10/26/06	ANNUAL CAP REACHED	REFILL 2	OPHPHARMACIST15,THREE
2	10/29/06	REMOVE COPAY CHARGE	REFILL 2	OPHPHARMACIST15,THREE

Comment: PARTIAL BILLING FOR THIS FILL  
 Comment: RX REFUSED

Once a potential charge has been cancelled, it will be dropped from the list of incurred charges that are displayed.

## IB-initiated Medication Copay Charge

There are times when the medication copay status of a prescription can be changed by a background process. In this example, another prescription for the same Veteran was returned to stock, dropping copayments below the annual cap. Integrated Billing (IB) goes through all the prescriptions looking for any that were not billed a copay because the annual cap was reached. IB initiates a copay charge against any such prescriptions that are found until the copay cap is again reached.

### Example: An IB-initiated Medication Copay Charge

```
Rx Activity Log          Nov 05, 2006@17:18          Page: 1 of 1
OPPATIENT9,ONE
  PID: 000-76-5432P          Ht (cm): 169.55 (03/06/2006)
  DOB: NOV 18,1950 (55)      Wt (kg): 125.45 (03/06/2006)

Rx #: 3754328   Original Fill Released: 10/09/06
Routing: Window   Finished by: OPPHARMACIST1,THREE

Copay Activity Log:
#   Date       Reason                Rx Ref      Initiator Of Activity
=====
1   10/09/06    ANNUAL CAP REACHED   ORIGINAL    OPPHARMACIST1,THREE
Comment: NO BILLING FOR THIS FILL
2   10/09/06    IB-INITIATED COPAY   ORIGINAL    OPPHARMACIST1,THREE
Comment: FULL CHARGE
```

## Fixed Medication Copayment Tiers (FMCT)

Patch PSO\*7\*460 introduces copay tiers for drugs. The Chief Business Office (CBO) requests updating IT systems to conform with changes to qualified prescription medications within VistA and VA National and Local Drug Files, to establish fixed copayment amounts depending on the class of medication (Tier 1, Tier 2, or Tier 3) while still maintaining the utility of the \$700 copayment cap per calendar year for PG 2-8, as applicable, on an individual Veteran basis. The PBM is requesting the addition of Tier 0 for excluded and exempt products with no copayment. Changes to Outpatient Pharmacy will be seen in the copay activity log.

```
Rx #: 100002266   Original Fill Released: 08/23/16
Routing: Window   Finished by: REDACTED

Copay Activity Log:
#   Date       Reason                Rx Ref      Initiator Of Activity
=====
1   08/23/16    COPAY RESET          ORIGINAL    REDACTED
Comment: Copay Tier 1 Old value=No Copay New value=Copay
```

## Reset Copay Status List Manager [PSOCP RESET COPAY STATUS LM]

Users with access to this Reset Copay Status List Manager menu option can perform the following actions:

- Change the copayment status of an individual medication fill from copayment required to copayment exempt, or from copayment exempt to copayment required.

- This action is known as a prescription medication RESET.
- The RESET action changes the copayment status of a VA pharmacy prescription. Any future refills of that medication will carry the same copayment designation, yes or no, regardless of the VA Patient's copayment status.
- A RESET status change action can occur multiple times on a single prescription.
- Perform an Integrated Billing (IB) Cancel action, on a distinct medication fill that resulted in a VA copayment charge, for any medication copayment with an associated PSO IB copayment charge record.
  - This CANCEL action changes the IB status from ON HOLD or BILLED to CANCELLED.
  - Once a copayment charge receives an IB cancellation, any further corrective billing reconciliation actions can occur through other processes (such as a refund of paid charges).
  - A CANCEL IB action can only occur one time.

# Chapter 11: Evaluating Drug Usage

---

This chapter describes the options on the *DUE Supervisor* menu.

## **DUE Supervisor** [PSOD SUPERVISOR]

This menu provides options to create a questionnaire based on the criteria of a Drug Usage Evaluation and print an answer sheet for the provider's use in answering the questionnaire. The answer sheet can be printed and distributed to the clinic so that the provider may complete it when ordering a medication being evaluated. An answer sheet can also be generated (optional) when a patient's Action Profile prints, if the profile contains a medication being evaluated. The provider's responses can be entered into the DUE ANSWER SHEET file.

The following options are available on the *DUE Supervisor* menu:

- 1 *Enter a New Answer Sheet*
- 2 *Edit an Existing Answer Sheet*
- 3 *Create/Edit a Questionnaire*
- 4 *Batch Print Questionnaires*
- 5 *DUE Report*

## **Enter a New Answer Sheet** [PSOD CREATE ANSWER SHEET]

In this option, the user enters answers to a DUE Questionnaire. This creates an answer sheet entry in the DUE ANSWER SHEET file. These answer sheets can be kept online for statistical and/or compliance studies. Answer sheets are stored in the file using a sequence number. This number is generated by the computer automatically and should be written on the hard copy of the answer sheet immediately so that it can be used later in editing or deleting the entry.

## **Edit an Existing Answer Sheet** [PSOD EDIT ANSWER SHEET]

Edit a DUE Answer Sheet entry using this option. Ordinarily, the sequence number is available when editing the Answer Sheet; however, the user can search the file if the provider, drug, or questionnaire is known by typing ^S at the "SEQUENCE NUMBER" prompt. The search displays all the entries containing the combination of provider, drug, or questionnaire used in the search.

## **Create/Edit a Questionnaire** [PSOD DUE BUILD QUESTIONNAIRE]

To create a questionnaire, first select one or more drugs being evaluated. After selecting the drugs, create a set of questions to be used on the questionnaire. These questions do not have to be added to the DUE QUESTION file since they are being added through this option. The

questionnaire must be marked as “Active” and “Active for Profiles” for the Answer Sheet to print automatically with the Action Profiles. A summary can be printed for the questionnaire using the *DUE Report* option. For this reason, when creating a questionnaire, the user should strive to make each question a yes, no, or unknown type question. Questions having a free text or numeric type answer are ignored in the summary.



The PRINT DUE QUESTIONNAIRE site parameter needs to be set to “YES” for the questionnaire to print with the Action Profile.

## **Batch Print Questionnaires**

### **[PSOD BATCH PRINT QUESTIONNAIRE]**

To print a blank form of a selected questionnaire, enter the number of copies and a printer device. These questionnaire answer sheets can be distributed to providers to complete when ordering medications being evaluated.

## **DUE Report**

### **[PSOD DUE SORT AND PRINT]**

This report displays entries from the DUE ANSWER SHEET file. A summary of this report is available, showing the number of answer sheets, number of questionnaires, and a breakdown of all yes/no/unknown type questions. This breakdown shows each question number and the number of times it was answered yes/no/unknown, or unanswered. For this reason, when creating a questionnaire, the user should strive to make each question a yes, no, or unknown type question. Questions having a free text or numeric type answer are ignored in the summary.

## Chapter 12: Enter/Edit Clinic Sort Groups

---

This chapter describes the *Enter/Edit Clinic Sort Groups* option.

### Enter/Edit Clinic Sort Groups [PSO SETUP CLINIC GROUPS]

This option enables the user to identify a group of clinics that will print together for the action/informational profiles.

#### Example: Enter/Edit Clinic Sort Groups

```
Select Pharmacist Menu Option: ENTER/Edit Clinic Sort Groups

Select Clinic Sort Group: ?
  Answer with OUTPATIENT CLINIC SORT GROUP NAME
Choose from:
  CLINIC 1
  CLINIC 2

  You may enter a new OUTPATIENT CLINIC SORT GROUP, if you wish
  Answer must be 3-30 characters in length.
Select Clinic Sort Group: CLINIC 3
  Are you adding 'CLINIC 3' as
  a new OUTPATIENT CLINIC SORT GROUP (the 6TH)? Y <Enter> (Yes)
NAME: CLINIC 3// <Enter>
Select SORT GROUPS: ?
  Answer with SORT GROUP SORT GROUPS
  You may enter a new SORT GROUP, if you wish
  Enter name of clinic to be included in the sort group.
  Answer with HOSPITAL LOCATION NAME, or ABBREVIATION
  Do you want the entire 122-Entry HOSPITAL LOCATION List? N (No)
Select SORT GROUPS: 2 EAST
  Are you adding '2 EAST' as a new SORT GROUP (the 1ST for this OUTPATIENT CLINIC SORT
  GROUP)? Y (Yes)
Select SORT GROUPS: <Enter>
```

# Chapter 13: External Interface Menu

---

This chapter describes the options on the *External Interface Menu*.



This menu is locked with the PSOINTERFACE lock. The PSOINTERFACE key should be assigned to all persons responsible for performing these functions.

## External Interface Menu [PSO EXTERNAL INTERFACE]

This menu contains the following options for using an external interface device.

- *Purge External Batches*
- *Reprint External Batches*
- *View External Batches*

## Purge External Batches [PSO INTERFACE PURGE]

This option purges entries from the PHARMACY EXTERNAL INTERFACE file.

### Example: Purge External Batches

```
Select External Interface Menu Option: Purge External Batches
Enter cutoff date for purge of External Interface file: 022807 (FEB 28, 2007)

Purge entries that were not successfully processed? NO// <Enter>

Purge queued to run in background.

Select External Interface Menu Option:
```

## Reprint External Batches [PSO INTERFACE REPRINT]

This option enables the reprinting of labels for batches of prescriptions that have been sent to the external interface.

### Example: Reprint External Batches

```
Select External Interface Menu Option: Reprint External Batches
Enter a date/time range to see all batches sent to the External Interface.
Start date/time: 022807 (FEB 28, 2007)
End date/time: 030707 (MAR 07, 2007)
Gathering batches, please wait...

  BATCH      QUEUED TO PRINT ON:      PATIENT:      ANYTOWN
-----
  1          FEB 28,2007@08:06:14  OPPATIENT12,ONE
```



```

2      FEB 28,2007@08:10:56      OPPATIENT12,ONE
3      FEB 28,2007@08:19:20      OPPATIENT22,ONE
4      FEB 28,2007@08:38:17      OPPATIENT28,ONE
5      FEB 28,2007@08:50:32      OPPATIENT9,ONE
6      FEB 28,2007@09:15:35      OPPATIENT9,ONE
7      FEB 28,2007@09:33:48      OPPATIENT18,ONE
8      FEB 28,2007@09:39:31      OPPATIENT1,ONE
9      FEB 28,2007@10:36:51      OPPATIENT10,ONE
10     FEB 28,2007@13:37:24      OPPATIENT4,ONE
11     FEB 28,2007@13:46:07      OPPATIENT8,ONE

Select Batch(s) to reprint: (1-11): 5,6

Batches selected for Reprint are:

Batch 5 Queued for FEB 28,2007@08:50:32 by OPPHARMACIST4,THREE
Batch 6 Queued for FEB 28,2007@09:15:35 by OPPHARMACIST4,THREE

Before Reprinting, would you like a list of these prescriptions? N// <Enter> O

Are you sure you want to Reprint labels? Y// <Enter> YES..

Select LABEL DEVICE: [Select Print Device]

LABEL(S) QUEUED TO PRINT!

Select External Interface Menu Option:

```

## View External Batches [PSOINTERFACE VIEW]

With this option the user can view batches of prescriptions that have printed from the external interface.

### Example: View External Batches

```

Select External Interface Menu Option: View External Batches

Enter a date/time range to see all batches sent to the External Interface.

Start date/time: 022807 (FEB 28, 2007)

End date/time: 030707 (MAR 07, 2007)

Gathering batches, please wait...

  BATCH      QUEUED TO PRINT ON:      PATIENT:      BROWNS PLACE
-----
  1      FEB 28,2007@08:06:14      OPPATIENT12,ONE
  2      FEB 28,2007@08:10:56      OPPATIENT12,ONE
  3      FEB 28,2007@08:19:20      OPPATIENT22,ONE
  4      FEB 28,2007@08:38:17      OPPATIENT28,ONE
  5      FEB 28,2007@08:50:32      OPPATIENT9,ONE
  6      FEB 28,2007@09:15:35      OPPATIENT9,ONE
  7      FEB 28,2007@09:33:48      OPPATIENT18,ONE
  8      FEB 28,2007@09:39:31      OPPATIENT1,ONE
  9      FEB 28,2007@10:36:51      OPPATIENT10,ONE
 10     FEB 28,2007@13:37:24      OPPATIENT4,ONE
 11     FEB 28,2007@13:46:07      OPPATIENT8,ONE

Select Batch(s) to reprint: (1-11): 5,6

Batches selected for Viewing are:

Batch 5 Queued for FEB 28,2007@08:50:32 by OPPHARMACIST4,THREE

```

Batch 6 Queued for FEB 28,2007@09:15:35 by OPPHARMACIST4,THREE

Print list to the screen or to a printer: (S/P): Screen// <Enter>

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

RX #	NAME -> OPPATIENT9,ONE	BATCH 5
2820	NADOLOL 40MG TAB	ACTIVE

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

RX #	NAME -> OPPATIENT9,ONE	BATCH 6
2821	MICONAZOLE NITRATE 2% LOT 60ML	ACTIVE

END OF LIST

## **Chapter 14: Label/Profile Monitor Reprint**

---

This mini-chapter defines the option for handling printer malfunctions.

### **Label Profile Monitor Reprint** **[PSO B]**

When a printer malfunction occurs, up to 1000 (or more depending on the Label Profile Monitor Max site parameter) damaged labels or profiles can be reprinted. Enter the failed output device name and the last usable label or profile.

# Chapter 15: Implementing and Maintaining Outpatient Pharmacy

---

## Maintenance (Outpatient Pharmacy)

### [PSO MAINTENANCE]

The *Maintenance (Outpatient Pharmacy)* menu contains the options that are used for implementing and maintaining the Outpatient Pharmacy software. These options are:

- *Site Parameter Enter/Edit*
- *Edit Provider*
- *Add New Providers*
- *Queue Background Jobs*
- *Autocancel Rx's on Admission*
- *Bingo Board Manager*
- *Edit Data for a Patient in the Clozapine Program*
- *Enter/Edit Clinic Sort Groups*
- *Initialize Rx Cost Statistics*
- *Edit Pharmacy Intervention*
- *Delete Intervention*
- *Auto-delete from Suspense*
- *Delete a Prescription*
- *Enter/Edit Automated Dispensing Devices*
- *Expire Prescriptions*
- *Manual Auto Expire Rxs*
- *Non-VA Provider Import*
- *Prescription Cost Update*
- *Purge Drug Cost Data*
- *Purge External Batches*
- *Recompile AMIS Data*

## Site Parameter Enter/Edit

### [PSO SITE PARAMETERS]

This option is used to establish and edit parameters for the Outpatient Pharmacy software application. The following table lists each parameter and its corresponding description. These fields are contained in either the OUTPATIENT SITE file or the PHARMACY SYSTEM file.

**Table 35: Outpatient Site Parameter**

Site Parameter	Description
NAME	This field contains the name of the site.
MAILING FRANK STREET ADDRESS	This field is used for the address of the outpatient site.
AREA CODE	This field is used for the area code of the outpatient site.

<b>Site Parameter</b>	<b>Description</b>
PHONE NUMBER	This field is used for the telephone number of the outpatient site.
MAILING FRANK ZIP+4 CODE	This field is used for the zip code of the outpatient site. This field will allow zip+4 format (excluding the "-")
SITE NUMBER	This field is used to show the site/station number.
NCPDP NUMBER	This field is the site-specific National Council for Prescription Drug Programs number (NCPDP), formerly referred to as the National Association of Boards of Pharmacy Number (NABP).
MAILING FRANK CITY	This field is used for the city in which the outpatient site is located.
MAILING FRANK STATE	This field is used to show the state in which the outpatient site resides.
MAILING COMMENTS	This field will be printed on the laser labels mailing address label. It can contain anything the site deems appropriate (i.e., whether mailing is "Forwarding service requested" or "Address service requested", etc.)
INACTIVE DATE	This date will indicate that the Outpatient Site is no longer active and cannot be selected through the Outpatient Pharmacy options.
HOLD FUNCTION?	This site parameter is used to determine if the 'Hold' function will be used at the medical facility.
SUSPENSE FUNCTION?	This site parameter will be used to determine if the 'Suspense' feature will be used at the medical facility.
CANCEL DRUG IN SAME CLASS	Prescriptions with duplicate classes can only be discontinued if this site parameter is set to 'Yes' and if the Rx has not been put on hold through CPRS.
REFILL INACTIVE DRUG RXS	This will be used to determine if inactive drugs will be used to refill active prescriptions.
ASK METHOD OF PICKUP	This field will be used to determine if method of pickup will be asked for window prescriptions.
PASS MEDS ON PROFILE	This field is used to determine if pass medication within specified date range will be listed on profiles.
PROFILE 'SORT BY' DEFAULT	This field will be used to determine the sort order of medications on profiles.
COPIES ON NEW	This field will be used to determine the number of copies for labels to print.
DRUG CHECK FOR CLERK	This field is used to determine if the duplicate drug warnings should be shown for non-pharmacist.
FEE BASIS SUPPORT	This field is used to determine if fee basis prescriptions are processed.
MULTI RX REQUEST FORM	This field is used to determine if the multiple prescription request forms are printed with medication labels.
BARCODES ON REQUEST FORMS	This field is used to determine if barcodes are printed on profiles, labels, and multi request forms.
BARCODES ON ACTION PROFILES	This field is used to indicate if barcodes are to print with the action profiles. The printer used must be setup or have barcode capabilities for the barcodes to print. Contact IRM to help determine which printers have barcode capabilities.
VERIFICATION	This field is used to determine if prescriptions entered by a non-pharmacist are placed in a non-verified status.

Site Parameter	Description
DISPLAY GROUP	This field is used to determine which bingo board display screen will be shown on the waiting room monitor.
SCREEN PROFILES	This field is used to determine if profiles are displayed when refilling and renewing medications.
EDIT PATIENT DATA	This field is used to determine if editing of patient data will be allowed.
EDIT DRUG	This field will be used to determine if drugs can be changed during prescription edit.
RENEWING RX'S ALLOWED	This field will be used to determine if renewing of medications will be allowed.
PASS MEDS CANCEL	This field is used to determine if pass medications are to be cancelled.
AUTO SUSPEND	This field is used to determine if medication that is refilled or renewed before the next possible fill date is to be placed in suspense automatically.
SHALL COMPUTER ASSIGN RX #S	This field is used to determine if the computer will auto generate prescription numbers.
PROFILE WITH NEW PRESCRIPTIONS	This field is used to determine if medication profiles are printed when new medication is ordered.
SLAVED LABEL PRINTING	This field will be used to allow printing of RX labels without being able to queue to a printer. This parameter is primarily for slaved printing of RX labels. If 'yes' is the answer the prompt or action to be taken on the label will include the '/PRINT' action.
METHADONE PROGRAM	This field will be used to determine if the site has a methadone program and if a drug should be prompted for.
METHADONE DRUG	This field will be used to show what drug is being used if the site has a methadone program.
DAYS TO PULL FROM SUSPENSE	This field defines the number of days to pull ahead (bundle) in addition to the NON-CS DAYS TO TRANSMIT field (#11) in the CMOP SYSTEM FILE (#550). It is used for both Non-CS CMOP transmissions and local suspense print. The range is 0 to 15 days.
DAYS TO PULL SUSPENSE CMOP CS	This field is used in the tasked SCHEDULED CS TRANSMISSION [PSXR SCHEDULED CS TRANS] option to pull ahead (bundle) a patient's controlled substance prescriptions from suspense for CMOP transmission for the specified number of days in addition to the CS DAYS TO TRANSMIT field (#12) in the CMOP SYSTEM FILE (#550). The range is from 0 to 15 days.
RECENTLY DC'D/EXPIRED DAYS	Allow local facilities to set a timeframe (7-45 days) for which a discontinued or expired outpatient medication order will be identified as 'recently discontinued/expired'. Default value is 7 days.
NEW LABEL STOCK	This field will be used to determine which medication label stock will be used.

Site Parameter	Description
EXTERNAL INTERFACE	This field allows sites to alter the characteristics of the external interface. The Set of Codes field have the following values: 0 – the external interface is off 1 – send all drugs to the external interface; print labels locally 2 – send all drugs to the external interface; don't print labels locally 3 – send only marked drugs to the external interface; don't print labels locally 4 – send only marked drugs to external interface and print labels through VistA.
DISPENSING SYSTEM PRINTER	This field identifies the name of the printer(s) that, when selected, and the interface is in use, an HL7 message is generated to the dispensing system.
BLANK LABEL BETWEEN PATIENTS	This field will determine if a blank label should print between patients on the label printers.
VERIFYING PHARMACIST ON LABELS	This site parameter will determine if the name of the verifying pharmacist or the name of the person who made the order request will print on the Rx label. If the parameter is set to Yes the verifying pharmacist name will print.
AUTOMATED DISPENSE	This field will determine what version of the automated dispense machine this site is running. If the machine is older than HL7 V.2.4, enter letter O, if HL7 V.2.4 has been installed, enter 2.4.
FILE RELEASE DATE/TIME	This field is used to indicate if the release date/time is to be filed for the prescription dispensed by an external interface.
ENABLE MASTER FILE UPDATE	This field will determine if the automated dispense macxxxxx are ready to receive HL7 V.2.4 messages.
DISPENSE DNS NAME	This is the DNS computer name of the automated dispensing machine that is used for this outpatient site division.
DISPENSE DNS PORT	Enter the DNS port number associated with the automated dispense machine for this outpatient pharmacy site division.
OPAI	This multiple field will allow any one division to have more than one Automated Dispensing Device (ADD) communicating with VistA through the Outpatient Pharmacy Automated Interface (OPAI). It is linked to the DISPENSING SYSTEM PRINTER (#59.0200801) field. When a label printer is selected during Patient Prescription Processing, HL7 messages for orders will be routed based on the automated dispensing devices defined in this multiple.

The CPRS ORDERING INSTITUTION field in the OUTPATIENT SITE file allows multiple Institutions to be entered for the local site. If more than one Institution is entered for a site, the user can select the appropriate Institution when using the *Complete Orders from OERR* option and complete Pending Orders from clinics that are associated with the specific Institution selected.


**Table 36: CPRS Ordering Institution**

Site Parameter	Description
CPRS ORDERING INSTITUTION	This field is used when completing orders from CPRS. If there is only one Institution entry, then when completing orders from CPRS under this Outpatient site, only those orders from that Institution will be shown. If there is more than one entry, then the Institution will be prompted for when completing orders from CPRS, and only those orders associated with that Institution selected will be shown.
RELATED INSTITUTION	Institution associated with the site.
LOGICAL LINK	This is a pointer to the Logical Link file (#870). This link is used to transmit messages to an external (client) application. This field is not filled in when messages are exchanged between DHCP applications on the same system. This field will be used as the Logical Link for the prescription if there is a Clinic associated with the prescription, and the Institution derived from that Clinic has an entry in this CPRS ORDERING INSTITUTION multiple with an associated Logical Link.
NPI INSTITUTION	This is the institution or division that has the National Provider Identifier (NPI) value for this Outpatient Site. No two Outpatient Site entries in this file should point to the same INSTITUTION file entry. (Note that the RELATED INSTITUTION field differs from this field and is the parent institution , which may be the same for any or all the Outpatient Site entries.)
LABEL/PROFILE MONITOR MAX	Maximum number of label/profiles to be stored in the Label/Profile Monitor list for each printer device. The default and minimum value for this number is 1000. Each time the printer is used an entry is made in the Label/Profile monitor and if the monitor holds more entries than specified by this parameter, the oldest entry is deleted.
NARCOTICS NUMBERED DIFFERENTLY	This field is used to determine if narcotics will be numbered differently from other medications/supplies.
NARCOTIC LOWER BOUND	This field is used to determine what prescription numbers narcotics are to start with if narcotics are numbered differently from other prescriptions/supplies.
NARCOTIC UPPER BOUND	This field is used to determine the highest prescription number used for narcotics if this type of medication is numbered differently from other medications/supplies.
LAST NARCOTIC NUMBER ISSUED	This field is used to indicate last number issued for narcotic medications.
PRESCRIPTION # LOWER BOUND	This field is used to enter the lowest prescription number for this site.
PRESCRIPTION # UPPER BOUND	This field is used to enter the highest prescription number for this site.
LAST PRESCRIPTION # ISSUED	This field is used to store the last RX number used.
IB SERVICE/SECTION	Select the appropriate entry in the Service/Section file (#49) that is to be used for the Pharmacy Copayment/Integrated Billing procedures.



Site Parameter	Description
NARRATIVE FOR COPAY DOCUMENT	This field contains information from the site regarding the copayment procedures for the patient to follow upon receipt of the copay document. For example, information may include a telephone number to call regarding billing inquiries, a payment mailing address, etc.
NARRATIVE REFILLABLE RX	This field contains information from the site regarding procedures for the patient to obtain a refill of his refillable medication. May include the address, phone number, etc. that will assist the patient.
NARRATIVE NON-REFILLABLE RX	This field contains information from the site regarding procedures for the patient to obtain a new prescription for his non-refillable medication. This field may contain address, phone number, etc., that will assist the patient.
CHARGE LOCATION	This field is a pointer to the Hospital Location File (#44). Multi-division sites should populate this field for each division. This data could be obtained from the Business Office of the Medical Center.

The CHARGE LOCATION field is used to group charges in the COTS billing system according to the type of service.

	<b>***Important***</b>
<p>Entering and defining the Charge Locations is crucial to the success of this function. Initially, however, a unique Outpatient Pharmacy Location must be entered in the HOSPITAL LOCATION file by Registration or Scheduling. It is recommended that the Location be coordinated with the Medical Center's business office. A Charge Location should be defined for every division currently in the OUTPATIENT SITE file, which means that there could be multiple hospital locations or one location for all divisions.</p>	

If a Charge Location is not defined for a division, Outpatient Pharmacy will search all active divisions in the OUTPATIENT SITE file for a Charge Location entry and use the first one it finds. If the PFSS switch is ON and no Charge Locations are defined in any divisions, the information will not be passed on to IB or the COTS billing system and no charge takes place.

Information in the CHARGE LOCATION field cannot be deleted, but it can be replaced with entry of another Charge Location.

**Table 37: Charge Location**

Site Parameter	Description
SCRIPTALK DEVICE	This field contains a pointer to the ScripTalk printer device in the device file.
SCRIPTALK AUTO-PRINT SETTINGS	Set this to 'A' to have a ScripTalk label automatically print for ScripTalk-enrolled patients whenever their regular medication label prints. Set to 'M' if ScripTalk labels will be printed manually.
DEFAULT OUTPATIENT SITE	The outpatient site (and parameters) which will be used for ward order entry. An entry in this field will bypass the site selection prompt when entering outpatient from OE/RR.
ADMISSION CANCEL OF RXS	This field is used to determine if outpatient medication will be cancelled after 72 hours of an admission to the medical center.

Site Parameter	Description
EXEMPT WARD FROM AUTOCANCEL	For all the WARD LOCATIONS entered, prescriptions for patients on these wards will not be canceled by the Autocancel RX's on Admission Outpatient Pharmacy system job.
DAYS PRINTED RX STAYS IN 52.5: 7	This field contains the number of days printed prescriptions are to remain in the RX SUSPENSE file when running the Delete From Suspense File option. The number of days to remain may be from 7 to 90.
POLYPHARMACY W/ACTION PROFILE	This field is used to determine if a polypharmacy report prints with action profile across all divisions.
INTERDIVISIONAL PROCESSING	This field is used to indicate if interdivisional processing is to occur.
DIVISION PROMPT ASKED	This field is used to indicate if the 'Division' prompt is to be asked.
REFILL/RENEW DIVISION	This field is used to indicate the refill/renew division for multi divisional sites.
PROCESS AUTO REFILLS FOR INPAT	This flag should be set to Yes, only if the site wants the scheduled AUTO REFILL [PSO AUTO REFILL] option to process refills for patients who are currently an inpatient. The AUTO REFILL job defaults to NO unless the site has this flagged as YES.
PROCESS AUTO REFILLS FOR CNH	This flag should be set to Yes, only if the site wants the scheduled AUTO REFILL [PSO AUTO REFILL] option to process refills for CNH patients. The AUTO REFILL job defaults to NO unless the site has this flagged as YES.

The following example displays all the prompts that are possible with the *Site Parameter Enter/Edit* option. The prompts displayed at each site will depend upon that site's settings.

#### Example: Site Parameter Enter/Edit – all fields

```
Select Maintenance (Outpatient Pharmacy) Option: SITE Parameter Enter/Edit

Select SITE NAME:ANYTOWN      500
Would you like to see all site parameters for this division? Y// NO

NAME:ANYTOWN// <Enter>
MAILING FRANK STREET ADDRESS: 114 ANYSTREET AVE// <Enter>
AREA CODE: 555// <Enter>
PHONE NUMBER: 555-1234// <Enter>
MAILING FRANK ZIP+4 CODE: 55555// <Enter>
SITE NUMBER: 123// <Enter>
NCPDP NUMBER: <Enter>
MAILING FRANK CITY: ANY CITY// <Enter>
MAILING FRANK STATE: ANY STATE// <Enter>
MAILING COMMENTS: <Enter>
INACTIVE DATE: <Enter>
HOLD FUNCTION?: NO// <Enter>
SUSPENSE FUNCTION?: YES// <Enter>
CANCEL DRUG IN SAME CLASS: YES// <Enter>
REFILL INACTIVE DRUG RXS: YES// <Enter>
ASK METHOD OF PICKUP: YES// <Enter>
PASS MEDS ON PROFILE: YES// <Enter>
PROFILE `SORT BY' DEFAULT: DATE// <Enter>
COPIES ON NEW: YES// <Enter>
DRUG CHECK FOR CLERK: YES// <Enter>
FEE BASIS SUPPORT: YES// <Enter>
MULTI RX REQUEST FORM: YES// <Enter>
BARCODES ON REQUEST FORMS: BOTH// <Enter>
BARCODES ON ACTION PROFILES: YES// <Enter>
```

```

VERIFICATION: YES// <Enter>
DISPLAY GROUP: OUTPATIENT// <Enter>
SCREEN PROFILES: YES// <Enter>
EDIT PATIENT DATA: YES// <Enter>
EDIT DRUG: YES// <Enter>
RENEWING RX'S ALLOWED: YES// <Enter>
PASS MEDS CANCEL: NO// <Enter>
AUTO SUSPEND: YES// <Enter>
SHALL COMPUTER ASSIGN RX #S: YES// <Enter>
PROFILE WITH NEW PRESCRIPTIONS: NO// <Enter>
SLAVED LABEL PRINTING: YES// <Enter>
METHADONE PROGRAM: NO// <Enter>
METHADONE DRUG: METHADONE SOLUTION (METHADOSE)// <Enter>
DAYS TO PULL FROM SUSPENSE: 2// <Enter>
DAYS TO PULL SUSPENDED CS CMOP: <Enter>
RECENTLY DC'D/EXPIRED DAYS: <Enter>
NEW LABEL STOCK: YES// <Enter>
EXTERNAL INTERFACE: SEND ALL ORDERS AND PRINT LABEL
// <Enter>
Select DISPENSING SYSTEM PRINTER: <Enter>
BLANK LABEL BETWEEN PATIENTS: <Enter>
VERIFYING PHARMACIST ON LABELS: YES// <Enter>
AUTOMATED DISPENSE: HL7 V.2.4// <Enter>
FILE RELEASE DATE/TIME: YES// <Enter>
ENABLE MASTER FILE UPDATE: <Enter>
DISPENSE DNS NAME: <Enter>
DISPENSE DNS PORT: <Enter>
Select CPRS ORDERING INSTITUTION: TROY// <Enter>
  CPRS ORDERING INSTITUTION: TROY// <Enter>
  LOGICAL LINK: <Enter>
Select CPRS ORDERING INSTITUTION: <Enter>
RELATED INSTITUTION:ANYTOWN// <Enter>
NPI INSTITUTION: <Enter>
LABEL/PROFILE MONITOR MAX: 1000// <Enter>
NARCOTICS NUMBERED DIFFERENTLY: YES// <Enter>
NARCOTIC LOWER BOUND: 10000// <Enter>
NARCOTIC UPPER BOUND: 99999// <Enter>
PRESCRIPTION # LOWER BOUND: 100000999// <Enter>
PRESCRIPTION # UPPER BOUND: 500000000// <Enter>
IB SERVICE/SECTION: PHARMACY// <Enter>

NARRATIVE FOR COPAY DOCUMENT: <Enter>

The copay narrative displays here.

  Edit? NO//
NARRATIVE REFILLABLE RX:
*****
The narrative for refillable RXs displays here.

*****

  Edit? NO// <Enter>
NARRATIVE NON-REFILLABLE RX:. . .
. . .

The narrative for non-refillable RXs displays here.

=====

  Edit? NO// <Enter>
LOGICAL LINK: <Enter>
PROCESS AUTO REFILLS FOR INPAT: NO// <Enter>
PROCESS AUTO REFILLS FOR CNH: NO// <Enter>

Outpatient System Parameters

DEFAULT OUTPATIENT SITE: JAN// <Enter>
ADMISSION CANCEL OF RXS: YES// <Enter>
Select EXEMPT WARD FROM AUTOCANCEL: NHC// <Enter>
DAYS PRINTED RX STAYS IN 52.5: 7// <Enter>

```

```

POLYPHARMACY W/ACTION PROFILE: <Enter>

Currently 'INTERDIVISIONAL' processing 'is' allowed.
Do you want to change this? : N// <Enter> O

This question involves the following prompt:

'RX is from another division. Continue? (Y/N) '

Do you want this prompt to appear
whenever an action is attempted on the prescription: Y// <Enter> ES

Do you want all refill request forms to be processed
at a particular division?: Y// <Enter> ES

Choose REFILL division: Cindy// <Enter> 043

Initialization of 'INTERDIVISIONAL PROCESSING' is complete.

Select SITE NAME:

```

## PSO RX Numbering Warning

### [PSO RX NUMBERING WARNING]

The PSO RX Numbering Warning [PSO RX NUMBERING WARNING] option searches the prescription number ranges for all active sites in the OUTPATIENT SITE file (#59) and generates a MailMan message to the PHARMACY SUPERVISORS mail group when one or more Outpatient Pharmacy sites in a multi-divisional facility are approaching the upper limit of the defined prescription numbering series. This option is scheduled to run as a nightly job at 03:01. This warning is intended to prevent an unintentional shutdown of prescription processing that will occur if the pharmacy reaches the upper limit of the numbering series.

Most VA facilities use separate numbering systems for Narcotic and non-Narcotic medications. If Narcotics are numbered separately, then the warning will include information about the upper limit for Narcotics. If Narcotics are not numbered separately, then they are grouped with non-Narcotic medications. Information specific to Narcotics numbering is only tracked and displayed if Narcotics are numbered separately.

The PHARMACY SUPERVISORS mail group must be populated with those individuals responsible for modifying the prescription numbering range at each active Outpatient Pharmacy site.

The warning message contains information about each site in a multi-divisional facility where the upper-limit of the prescription numbering series is approaching. Information for all sites approaching the upper limit of a defined numbering series is included in the warning message.

#### Example: MailMan message sent to PHARMACY SUPERVISORS

```

LIMIT: 1000

SITE: CHEYENNE VAM&ROC
NARCOTIC LOWER BOUND      : 800000
NARCOTIC UPPER BOUND     : 892661
LAST NARCOTIC ISSUED     : 891662
There are 999 Numbers left, a new series needs to be defined.

```

```

SITE: CHEYENNE VAM&ROC
PRESCRIPTION # LOWER BOUND      : 2000001
PRESCRIPTION # UPPER BOUND      : 2299118
LAST PRESCRIPTION # ISSUED      : 2298119
There are 999 Numbers left, a new series needs to be defined.

SITE: GREELEY CLINIC
NARCOTIC LOWER BOUND           : 960000
NARCOTIC UPPER BOUND           : 964794
LAST NARCOTIC ISSUED           : 964294
There are 500 Numbers left, a new series needs to be defined.

SITE: FORT COLLINS CLINIC
NARCOTIC LOWER BOUND           : 980000
NARCOTIC UPPER BOUND           : 990028
LAST NARCOTIC ISSUED           : 989228
There are 800 Numbers left, a new series needs to be defined.

SITE: SIDNEY CLINIC
PRESCRIPTION # LOWER BOUND      : 1400000
PRESCRIPTION # UPPER BOUND      : 1404532
LAST PRESCRIPTION # ISSUED      : 1404500
There are 32 Numbers left, a new series needs to be defined.
*** EXTREMELY LOW ***

```

## RX Upper Bound Warning Limit

The number of prescriptions remaining when the warning message is sent is controlled by the RX Upper Bound Warning Limit field (#48) in the Pharmacy System file (#59.7). Edit this field using the Site Parameter Enter/Edit [PSO SITE PARAMETERS] option.

The value stored in this field determines when the system first sends an early warning message for a site and numbering series. If no custom value is entered, then the default value is used. By default, the warning message is sent to the PHARMACY SUPERVISORS mail group when there are 1000 prescription numbers left in a series and again each time the nightly job runs, and less than 1000 numbers remain in the defined prescription numbering series. If a custom value is entered, the warning will be sent when the number of prescriptions left in the series equals the site-specific value entered in this field.

## Edit Provider

### [PSO PROVIDER EDIT]

Edit existing provider entries in the NEW PERSON file with this option.

With patch PSO\*7\*630, prompts for some fields are conditional. If the NON-VA PRESCRIBER field contains 'YES', or if the PROVIDER TYPE field contains 'FEE BASIS' or 'C&A', or if the PHARMACY OPERATING MODE field (#102) in the PHARMACY SYSTEM file (#59.7) contains 'MBM' (Meds By Mail), the user will be prompted for the fields listed below. If none of these conditions exist, the user will not receive these prompts:

- SCHEDULE II NARCOTIC:
- SCHEDULE II NON-NARCOTIC:
- SCHEDULE III NARCOTIC:
- SCHEDULE III NON-NARCOTIC:

- SCHEDULE IV:
- SCHEDULE V:
- DEA EXPIRATION DATE:
- SERVICE/SECTION:
- Person Class:

**Example: [PSO PROVIDER EDIT], when NON-VA PRESCRIBER does not contain 'YES', and PROVIDER TYPE does not contain 'FEE BASIS' or 'C&A', and PHARMACY OPERATING MODE parameter does not contain 'MBM', user is not prompted for the conditional fields:**

```
Select Provider: PSIXTHIRTY,PROV      AUSTIN      TEXAS      PP
                                     NAME: PSIXTHIRTY,PROV

INITIALS: PP                          INACTIVE DATE: APR 29, 2022
NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES   DEA NUMBER: PP1966007
VA#: VA1966007                       PROVIDER CLASS: RESIDENT
PROVIDER TYPE: FULL TIME              NPI: 1245319599
REQUIRES COSIGNER: YES               USUAL COSIGNER: PROVIDER,ADD
DEA EXPIRATION DATE: JUN 19, 2022    DETOX NUMBER: XX1966007
SCHEDULE II NARCOTIC: No             SCHEDULE II NON-NARCOTIC: No
SCHEDULE III NARCOTIC: Yes          SCHEDULE III NON-NARCOTIC: Yes
SCHEDULE IV: Yes                    SCHEDULE V: Yes
REMARKS: TEST PROVIDER ADD EDIT
SYNONYM(S): PP
SERVICE/SECTION: MEDICINE

STREET ADDRESS 1: 1 MAIN              STREET ADDRESS 2: SUITE A
STATE: TEXAS                          CITY: AUSTIN
PHONE (HOME): 555-555-1212           ZIP CODE: 78749
                                      OFFICE PHONE: 800-555-1212
                                      ROOM: 186

NON-VA PRESCRIBER: NO//
PROVIDER TYPE: FULL TIME//
TAX ID:
EXCLUSIONARY CHECK PERFORMED:
DATE EXCLUSIONARY LIST CHECKED:
ON EXCLUSIONARY LIST:
AUTHORIZED TO WRITE MED ORDERS: YES//
DEA NUMBER: PP1966007//
DETOX NUMBER: XX1966007//
VA#: VA1966007//
INACTIVE DATE: APR 29,2022//
PROVIDER CLASS: RESIDENT//
REQUIRES COSIGNER: YES//
USUAL COSIGNER: PROVIDER,ADD//
REMARKS: TEST PROVIDER ADD EDIT   Replace
STREET ADDRESS 1: 1 MAIN//
STREET ADDRESS 2: SUITE A//
STREET ADDRESS 3:
CITY: AUSTIN//
STATE: TEXAS//
ZIP CODE: 78749//
PHONE (HOME): 555-555-1212//
OFFICE PHONE: 800-555-1212//
PHONE #3:
PHONE #4:
FAX NUMBER:
VOICE PAGER:
DIGITAL PAGER:
ROOM: 186//
```

**Example: [PSO PROVIDER EDIT], when NON-VA PRESCRIBER contains 'YES', or PROVIDER TYPE contains 'FEE BASIS' or 'C&A', or PHARMACY OPERATING MODE parameter contains 'MBM', user is prompted for the conditional fields:**

```

Select Provider: PROVIDER,TEST      Cheyenne      WYOMING      TP

                                NAME: PROVIDER,TEST

INITIALS: TP                      INACTIVE DATE: APR 29, 2022
NON-VA PRESCRIBER: YES            TAX ID: 99-9999999
EXCLUSIONARY CHECK PERFORMED: YES ON EXCLUSIONARY LIST: NO
DATE EXCLUSIONARY LIST CHECKED: APR 28, 2021
EXCLUSIONARY CHECKED BY: HARRIS,JAMES CALVIN JR

AUTHORIZED TO WRITE MED ORDERS: YES  DEA NUMBER: TP4578893
VA#: 1122                          PROVIDER CLASS: RESIDENT
PROVIDER TYPE: FEE BASIS
REQUIRES COSIGNER: YES            USUAL COSIGNER: PROVIDER,ADD
DEA EXPIRATION DATE: APR 29, 2022  DETOX NUMBER: AX1234567
SCHEDULE II NARCOTIC: Yes         SCHEDULE II NON-NARCOTIC: No
SCHEDULE III NARCOTIC: No         SCHEDULE III NON-NARCOTIC: No
SCHEDULE IV: No                   SCHEDULE V: Yes
REMARKS: TESTING PSO PROVIDER ADD EDIT
SYNONYM(S): TP
SERVICE/SECTION: MEDICAL

STREET ADDRESS 1: 13th St          STREET ADDRESS 2: SUITE B
CITY: Cheyenne
STATE: WYOMING                    ZIP CODE: 82009
PHONE (HOME): 555-800-1212        OFFICE PHONE: 800-555-1212
ROOM: 123A

NON-VA PRESCRIBER: YES//
PROVIDER TYPE: FEE BASIS//
TAX ID: 99-9999999//
EXCLUSIONARY CHECK PERFORMED: YES//
DATE EXCLUSIONARY LIST CHECKED: APR 28,2021//
ON EXCLUSIONARY LIST: NO//
AUTHORIZED TO WRITE MED ORDERS: YES//
DEA NUMBER: TP4578893//
DETOX NUMBER: AX1234567//
VA#: 1122//
INACTIVE DATE: APR 29,2022//
PROVIDER CLASS: RESIDENT//
SCHEDULE II NARCOTIC: Yes//
SCHEDULE II NON-NARCOTIC: No//
SCHEDULE III NARCOTIC: No//
SCHEDULE III NON-NARCOTIC: No//
SCHEDULE IV: No//
SCHEDULE V: Yes//
DEA EXPIRATION DATE: APR 29,2022//
SERVICE/SECTION: MEDICAL//
Select Person Class: Allopathic and Osteopathic Physicians
//
Effective Date: JUN 19,2021//
Expiration Date:
REQUIRES COSIGNER: YES//
USUAL COSIGNER: PROVIDER,ADD//
REMARKS: TESTING PSO PROVIDER ADD EDIT Replace
STREET ADDRESS 1: 13th St//
STREET ADDRESS 2: SUITE B//
STREET ADDRESS 3:
CITY: Cheyenne//
STATE: WYOMING//
ZIP CODE: 82009//
PHONE (HOME): 555-800-1212//
OFFICE PHONE: 800-555-1212//
PHONE #3:
PHONE #4:

```

FAX NUMBER:  
VOICE PAGER:  
DIGITAL PAGER:  
ROOM: 123A//

## Add New Providers [PSO PROVIDER ADD]

This option allows new providers to be added. The provider's name is already in the file if the name entered at the "Enter NEW PERSON's name" prompt is repeated, and the screen returns to the menu. The *Edit Provider* option must be used in this case to change existing provider entries.

PSO\*7\*391 modified these three options, *Edit Provider* [PSO PROVIDER EDIT], *Add New Providers* [PSO PROVIDER ADD], and *View Provider* [PSO PROVIDER INQUIRE] to include the DETOX/MAINTENANCE ID NUMBER field (#53.11) and the DEA EXPIRATION DATE field (#747.44) of the NEW PERSON file (#200) as part of the screen along with the DEA# field (53.2).

With patch PSO\*7\*630, prompts for some fields are conditional. If the NON-VA PRESCRIBER field contains 'YES', or if the PROVIDER TYPE field contains 'FEE BASIS' or 'C&A', or if the PHARMACY OPERATING MODE field (#102) in the PHARMACY SYSTEM file (#59.7) contains 'MBM' (Meds By Mail), the user will be prompted for the fields listed below. If none of these conditions exist, the user will not receive these prompts:

- SCHEDULE II NARCOTIC:
- SCHEDULE II NON-NARCOTIC:
- SCHEDULE III NARCOTIC:
- SCHEDULE III NON-NARCOTIC:
- SCHEDULE IV:
- SCHEDULE V:
- DEA EXPIRATION DATE:
- SERVICE/SECTION:
- Person Class:

**Example: [PSO PROVIDER ADD], when NON-VA PRESCRIBER does not contain 'YES', and PROVIDER TYPE does not contain 'FEE BASIS' or 'C&A', and PHARMACY OPERATING MODE parameter does not contain 'MBM', user is not prompted for conditional fields:**

```
Select OPTION NAME: PSO PROVIDER ADD          Add New Providers
Add New Providers

Enter NEW PERSON's name (Family,Given Middle Suffix): PROVSIX,ADDTWO
Name components.
FAMILY (LAST) NAME: PROVSIX//
GIVEN (FIRST) NAME: ADDTWO//
MIDDLE NAME:
SUFFIX:
Now for the Identifiers.
INITIAL: AP
SSN: 000000667
SEX: M MALE
NPI: 1346336807
```



```

NON-VA PRESCRIBER: N NO
PROVIDER TYPE: FULL FULL TIME
AUTHORIZED TO WRITE MED ORDERS: Y YES
DEA NUMBER: SP1966007
DETOX NUMBER: XX1966007
VA#: ZZ1966007
INACTIVE DATE: T+365 (JUN 19, 2022)
PROVIDER CLASS: RESIDENT
REQUIRES COSIGNER: Y YES
USUAL COSIGNER: PROVIDER,ADD
REMARKS: TESTING PROVIDER AD
STREET ADDRESS 1: 1 MAIN ST
STREET ADDRESS 2: SUITE C
STREET ADDRESS 3:
CITY: CHEYENNE
STATE: WYOMING
ZIP CODE: 82009
PHONE (HOME): 800-555-1212
OFFICE PHONE: 555-800-1212
PHONE #3: 888-888-8888
PHONE #4: 555-555-5555
FAX NUMBER:
ROOM:

Enter NEW PERSON's name (Family,Given Middle Suffix): PROVSIX,ADDTWO ANYTOWN WYOMING
AP

NAME: PROVSIX,ADDTWO

INITIALS: AP INACTIVE DATE: JUN 19, 2022
NON-VA PRESCRIBER: NO

AUTHORIZED TO WRITE MED ORDERS: YES DEA NUMBER: SP1966007
VA#: ZZ1966007 PROVIDER CLASS: RESIDENT
PROVIDER TYPE: FULL TIME NPI: 1346336807
REQUIRES COSIGNER: YES USUAL COSIGNER: PROVIDER,ADD
DETOX NUMBER: XX1966007

REMARKS: TESTING PROVIDER AD
SYNONYM(S): AP
SERVICE/SECTION:

STREET ADDRESS 1: 1 MAIN ST STREET ADDRESS 2: SUITE C
CITY: CHEYENNE
STATE: WYOMING ZIP CODE: 82009
PHONE (HOME): 800-555-1212 OFFICE PHONE: 555-800-1212
PHONE #3: 888-888-8888 PHONE #4: 555-555-5555

NON-VA PRESCRIBER: NO//

```

**Example: [PSO PROVIDER ADD], when NON-VA PRESCRIBER contains 'YES', or PROVIDER TYPE contains 'FEE BASIS' or 'C&A', or PHARMACY OPERATING MODE parameter contains 'MBM', user is prompted for conditional fields:**

```

Enter NEW PERSON's name (Family,Given Middle Suffix): PROVSIX,ADDFIVE
Are you adding 'PROVSIX,ADDFIVE' as a new NEW PERSON (the 995TH)? No// Y (Yes)
Name components.
FAMILY (LAST) NAME: PROVSIX//
GIVEN (FIRST) NAME: ADDFIVE//
MIDDLE NAME:
SUFFIX:
Now for the Identifiers.
INITIAL: AP
SSN: 660060660
SEX: M MALE
NPI: 1639122625
NON-VA PRESCRIBER: YES YES
PROVIDER TYPE: FEE FEE BASIS
TAX ID: 33-3333333
EXCLUSIONARY CHECK PERFORMED: Y YES

```

DATE EXCLUSIONARY LIST CHECKED: T (JUN 19, 2021)  
 ON EXCLUSIONARY LIST: N NO  
 AUTHORIZED TO WRITE MED ORDERS: Y YES  
 DEA NUMBER: TP1966007  
 DETOX NUMBER: XX1966007  
 SCHEDULE II NARCOTIC: N No  
 SCHEDULE II NON-NARCOTIC: N No  
 SCHEDULE III NARCOTIC: Y Yes  
 SCHEDULE III NON-NARCOTIC: Y Yes  
 SCHEDULE IV: Y Yes  
 SCHEDULE V: Y Yes  
 DEA EXPIRATION DATE: T+368 (JUN 22, 2022)  
 SERVICE/SECTION: MEDICINE  
 Select Person Class: 390200000X  
     1 390200000X Allopathic and Osteopathic Physicians 390200000X  
         Resident, Allopathic (includes Interns, Residents, Fellows)  
     2 390200000X Allopathic and Osteopathic Physicians 390200000X  
         Resident, Osteopathic (includes Interns, Residents, Fellows)

Press <Enter> to see more, '^' to exit this list, OR  
 CHOOSE 1-2: 1 Allopathic and Osteopathic Physicians 390200000X  
         Resident, Allopathic (includes Interns, Residents, Fellows)  
 Are you adding 'Allopathic and Osteopathic Physicians' as  
     a new PERSON CLASS (the 1ST for this NEW PERSON)? No// Y (Yes)  
 Effective Date: JUN 19,2021//  
 Expiration Date: T+99 (SEP 26, 2021)  
 VA#: ZX1966007  
 INACTIVE DATE: T+367 (JUN 21, 2022)  
 PROVIDER CLASS: FELLOW  
 REQUIRES COSIGNER: Y YES  
 USUAL COSIGNER: PROVIDER,ADD  
 REMARKS: TESTING PROVIDER ADD  
 STREET ADDRESS 1: 1 MAIN  
 STREET ADDRESS 2: SUITE F  
 STREET ADDRESS 3:  
 CITY: BIRMINGHAM  
 STATE: ALABAMA  
 ZIP CODE: 35005  
 PHONE (HOME): 555-555-5555  
 OFFICE PHONE: 800-800-80000  
 PHONE #3: 888-888-8888  
 PHONE #4: 800-555-1212  
 FAX NUMBER:  
 ROOM: 777F

Enter NEW PERSON's name (Family,Given Middle Suffix): PROVSIX,ADDFIVE BIRM  
 INGHAM ALABAMA AP

NAME: PROVSIX,ADDFIVE

INITIALS: AP INACTIVE DATE: JUN 21, 2022  
 NON-VA PRESCRIBER: YES TAX ID: 33-3333333  
 EXCLUSIONARY CHECK PERFORMED: YES ON EXCLUSIONARY LIST: NO  
 DATE EXCLUSIONARY LIST CHECKED: JUN 19, 2021  
 EXCLUSIONARY CHECKED BY: PROVIDER,ADDA C

AUTHORIZED TO WRITE MED ORDERS: YES DEA NUMBER: TP1966007  
 VA#: ZX1966007 PROVIDER CLASS: FELLOW  
 PROVIDER TYPE: FEE BASIS NPI: 1639122625  
 REQUIRES COSIGNER: YES USUAL COSIGNER: PROVIDER,ADDA C  
 DEA EXPIRATION DATE: JUN 22, 2022 DETOX NUMBER: XX1966007  
 SCHEDULE II NARCOTIC: No SCHEDULE II NON-NARCOTIC: No  
 SCHEDULE III NARCOTIC: Yes SCHEDULE III NON-NARCOTIC: Yes  
 SCHEDULE IV: Yes SCHEDULE V: Yes  
 REMARKS: TESTING PROVIDER ADD  
 SYNONYM(S): AP  
 SERVICE/SECTION: MEDICINE

STREET ADDRESS 1: 1 MAIN STREET ADDRESS 2: SUITE F  
 CITY: BIRMINGHAM  
 STATE: ALABAMA ZIP CODE: 35005

PHONE (HOME): 555-555-5555  
PHONE #3: 888-888-8888

OFFICE PHONE: 800-800-80000  
PHONE #4: 800-555-1212  
ROOM: 777F

NON-VA PRESCRIBER: YES//

## Queue Background Jobs [PSO AUTOQUEUE JOBS]

This option is used to queue all background jobs. Once the *Queue the Background Jobs* option is selected, the option automatically pre-selects the jobs. Entering “E” for exit cannot exit the option. To exit a specific job and go on to the next one, an up arrow (^) must be entered. The background jobs are as follows:

- Autocancel Rx’s on Admission
- Nightly Rx Cost Compile
- Nightly Management Data Compile
- Compile AMIS Data (NIGHT JOB)
- Expire Prescriptions
- Auto-delete from Suspense
- Scheduled SPMP Data Export

A date and time at least two minutes in the future must be entered. The jobs should be set to run at a time convenient for the site.

Respond only to the following prompts. All others will be left blank.

QUEUED TO RUN AT WHAT TIME: This is the date/time desired for this option to be started by TaskMan.

RESCHEDULING FREQUENCY: If this field is blank then the job will run only once.

The *Scheduled SPMP Data Export* [PSO SPMP SCHEDULED EXPORT] nightly background job option can also be scheduled via the *Schedule/Unschedule* [XUTM SCHEDULE] option.



**Note:** When the background job fails to transmit the data to the state, a MailMan message is generated and sent to the subscribers of the PSO SPMP NOTIFICATIONS mail group.

### Example: View of Queue Background Jobs Screen

```
Select Maintenance (Outpatient Pharmacy) Option: Queue Background Jobs
If time to run option is current do not edit.
      Edit Option Schedule
Option Name: PSO AUTOCANCEL
Menu Text: Autocancel on Admission                                TASK ID: 1090241
```

```
QUEUED TO RUN AT WHAT TIME: JUN 27,2007@12:02
DEVICE FOR QUEUED JOB OUTPUT:
QUEUED TO RUN ON VOLUME SET:
    RESCHEDULING FREQUENCY: 1D
        TASK PARAMETERS:
            SPECIAL QUEUEING:
COMMAND:                                     Press <PF1>H for help   Insert
```

## **Autocancel Rx's on Admission** **[PSO AUTOCANCEL1]**

Use the *Autocancel Rx's on Admission* option to task a job every night to cancel the outpatient prescriptions of patients who were admitted 3 days ago. Enter the time desired to queue the job to run. Using this same option the user can also edit the time set for the job to run. The job should be set to run at a time between 5:30 p.m. and 11:30 p.m. (or when convenient for the site).

## **Bingo Board Manager (BM)** **[PSO BINGO MANAGER]**

Through the *Bingo Board Manager* menu, the user can access the necessary options to set up the bingo board. Before data entry can begin, the division must be defined when entering the software package. Divisions are manager defined but should be consistent with local policies to keep the statistical data relevant. At least one division must be defined.

After defining the division, define the display parameters through the *Enter/Edit Display* option. The display group is a uniquely defined location where the patient data will be displayed. As with the division parameter, at least one display group must be defined.

The following options are available on the *Bingo Board Manager* menu:

- *Enter/Edit Display*
- *Auto-Start Enter/Edit*
- *Print Bingo Board Statistics*
- *Print Bingo Board Wait Time*
- *Purge Bingo Board Data*
- *Start Bingo Board Display*
- *Stop Bingo Board Display*

## **Enter/Edit Display** **[PSO BINGO ENTER/EDIT DISPLAY]**

Unique locations where the patient data will be displayed can be defined with this option. Enter a new display group name or the name of an existing group to edit or delete.

If the name is chosen at the “NAME/TICKET” prompt, the “TICKET #” prompt will not appear when a new patient is entered in the *Enter a New Patient* option.

The display cannot be changed from name to ticket when patients are already in the Group Display. All patients must be purged using the *Purge Bingo Board* option for that Group Display. After the data is purged, the user must edit the NAME/TICKET field using this option. Then the patient can be re-entered and assigned ticket numbers.



Only devices with the sub-type C-VT can be entered at the “DISPLAY DEVICE” prompt. A DEC VT-220 with a coaxial output connected to a cable ready TV monitor is all that is needed on the hardware side.

### Example: Enter/Edit Display

```
Select Bingo Board Manager Option: Enter/Edit Display

Select GROUP DISPLAY NAME: MAIN
  Are you adding 'MAIN' as a new GROUP DISPLAY (the 3RD)? Y (Yes)

NAME: MAIN// <Enter> [The name of the Display Group.]
NAME/TICKET: NAME NAME [Select either Name or Ticket # to display.]
MESSAGE:
  1>WEST CLINIC VAMC
  2>[This is a free text field. The message will appear on the screen for the users to
view.]
EDIT Option: <Enter>
TWO COLUMN DISPLAY: Y YES [Display names/ticket #'s in one or two column.]
DISPLAY WAIT TIME: Y YES [Average display waiting time.]
NORMAL WAIT TIME: 10 [Normal wait time (in minutes) is entered by the site.]
DISPLAY SETUP HELP TEXT: Y YES

In order to automatically start and stop the bingo board monitor,
a dedicated device must be setup by your IRM Service.

Once a dedicated device is setup, the bingo board can be scheduled
to automatically start and/or stop at user-defined times.

Enter 'NO' at the DISPLAY SETUP HELP TEXT prompt not to display this help text.

DISPLAY DEVICE: ? [Device dedicated by IRMS for bingo board setup.]
  Only devices with Sub-type starting with "C-VT" is allowed.
  Answer with DEVICE NAME, or LOCAL SYNONYM, or $I, or VOLUME SET(CPU), or
  SIGN-ON/SYSTEM DEVICE, or FORM CURRENTLY MOUNTED
DISPLAY DEVICE: [Select print device.]
AUTO-START DISPLAY DEVICE: Y YES [Sets the display group to start automatically.]
Do you want to initialize auto-start now? NO// Y YES
Enter Start Time: ?

Enter time as HH:MM in 12 hour format (For example, '8:00' or '8:00AM').

Enter Start Time: 9:30am [Start time for the display group.]
Enter Stop Time: 4:00pm [Stop time for the display group.]
```

At the "QUEUED TO RUN AT WHAT TIME" prompt a time must be entered that is at least two minutes in the future. The software will convert it to today's date with the time entered. For example, if the time is 8:00 a.m., to queue it for later today, enter 9:30 a.m. It will default to today's date. To enter a time for it to queue tomorrow, “T+1@00:00am/pm” must be entered. For

example, if the time is 3:00 p.m., to queue it for 8:30 a.m., enter “T+1 (or tomorrow's date)@8:30am”.

## Auto-Start Enter/Edit [PSO BINGO INITIALIZE]

This option is used to change the start and stop times of the display groups that have been set up to automatically start and/or stop each day. The scheduling time and frequency can also be changed using this option.

### Example: Auto-Start Enter/Edit

```
Select Bingo Board Manager Option: AUTO-Start Enter/Edit
You want to edit Display Group(s) Start/Stop times? NO// Y YES
Select GROUP DISPLAY NAME: MAIN
Enter Start Time: 3:00AM// <Enter>
Enter Stop Time: 4:00PM// <Enter>
Select GROUP DISPLAY NAME: <Enter>
```

See the *Enter/Edit Display* option for an example of the auto-start screen.]

## Print Bingo Board Statistics [PSO BINGO REPORT PRINT]

A report is generated covering a date range that can be sorted by single division or all divisions. Date ranges in the future are not allowed. The start date must be a date that precedes the end date.

The Bingo Board Report includes totals on number of patients, waiting time, and average waiting time.

## Print Bingo Board Wait Time [PSO BINGO REPORT WAIT TIME]

This option allows printing of a report that sorts the entries in the PATIENT NOTIFICATION (Rx READY) file by Display Group, then Wait Time. This report can be used to keep track of the bingo board activity for a given day. To keep a permanent record of this activity, this report can be printed each day, preferably at the end of the day. The following are definitions of the items found on this report.

**Table 38: Print Patient Wait Time**

Field	Description
Name	The name of the patient. For a patient with multiple entries, his/her name is printed only once.
Time In	The time that the patient's name was entered in the computer.
Time Out	The time that the patient's name was entered on the bingo board monitor.

Field	Description
Rx#	The prescription number.
Wait Time	The amount of time it took to fill the prescription. It is the difference between Time In and Time Out. For orders with more than one prescription, the wait time is the same for each.
Display	The Display Group that the entries were entered under. Multiple site hospitals may have multiple display groups set up to coincide with each site.
Total	A summation of all the Wait Times in the PATIENT NOTIFICATION (Rx READY) file. It includes the wait time of the patients with multiple entries. For example, if it took 3 minutes to fill each of the three prescriptions for OPPATIENT23,ONE, the Total function sums up the Wait Time as though it took 9 minutes.
Count	The number of Wait Time entries. It counts the number of wait time entries for each prescription, not each patient.
Mean	The average or middle value of the Wait Time range of values.
Minimum	The least Wait Time value in the range.
Maximum	The greatest Wait Time value in the range.
Dev. (Deviation)	A relative number that signifies the overall departure from the average.

Data may be lost if this report is not printed each day, because many sites purge the PATIENT NOTIFICATION (Rx READY) file each morning.

#### Example: Print Bingo Board Wait Time

```

Select Bingo Board Option: BM Bingo Board Manager

          BINGO BOARD CONTROL PANEL

Select Bingo Board Manager Option: PRINT
  1 Print Bingo Board Statistics
  2 Print Bingo Board Wait Time
CHOOSE 1-2: 2 Print Bingo Board Wait Time
DEVICE: [Select Print Device]
report follows
BINGO BOARD WAIT TIME PRINTOUT          MAY 21,1997  15:34    PAGE 1
NAME                TIME          TIME          Rx#          WAIT
                   IN            OUT
-----
          DISPLAY: WAITING ROOM
OPPATIENT30,ONE    1503        1504        2004342        1
                   1503        1504        2004343        1
                   1503        1504        2004345        1
                   1509        1512        2004346        3
OPPATIENT14,ONE   1509        1512        2004350        3
                   1509        1512        2004354        3
OPPATIENT5,ONE    1509        1512        2002744        3
                   1509        1512        2006376        3
                   1509        1512        2006377        3
OPPATIENT19,ONE   1524        1527        2002403        3
                   1524        1527        2006034        3
OPPATIENT26,ONE   1524        1527        2002365        3
                   1524        1527        2002573        3
-----
TOTAL                                33
COUNT                               13
MEAN                                  3
MINIMUM                               1
MAXIMUM                               3
DEV.                                  1

```

## Purge Bingo Board Data

### [PSO BINGO PURGE]

With this option, the user can delete all entries from the PATIENT NOTIFICATION (Rx READY) file.



It is recommended that data be purged each day. However, if data is not purged, it will not affect the accuracy of the bingo board statistics.

A red triangle with a white exclamation mark inside, indicating a warning.	<p><b>***Important***</b></p> <p>If this option is used before the end of the workday, all data will be lost except the statistical data on those prescriptions already picked up.</p>
--	--

## Start Bingo Board Display

### [PSO BINGO START]

Use this option to start the bingo board display. If there are no prescription entries yet, the message typed in the GROUP DISPLAY will cycle. When the entries begin, the message will be displayed and held for a short period, then pages of numbers or names will be displayed until all the names have been shown. Then the cycle starts over.

The terminal that executes the option may or may not be the display terminal.

## Stop Bingo Board Display

### [PSO BINGO STOP]

Use this option to stop the bingo board display. The bingo board can be stopped and started as often as desired. It must be stopped if any changes are made to the display group currently being used. This option can be accessed from any terminal.

When the display is stopped and “Yes” answered to the purge prompt, a second prompt appears and allows all the display groups or a specific display group to be selected for purging.

## Edit Data for a Patient in the Clozapine Program

### [PSOL EDIT]

Use this option to edit data for a patient who has already been enrolled in the Clozapine treatment program. It is typically used to re-register a patient whose treatment has been discontinued and who has rejoined the program.



There are two statuses, Pre-Treatment and Active Treatment, which can be selected. Two other statuses, Treatment on Hold and Discontinued, are set by the background job and require the patient to be re-registered.

The Pre-Treatment status is for a patient registered but never receiving a prescription. If after four weeks (28 days prior to the start date listed for the data collection) the patient does not receive a prescription, the patient status is changed to Discontinued by the background job and the patient must be re-registered.

The Active status is for a patient that has had a prescription within the last 7 or 14 days. If the most recent prescription is over 14 days old, the patient status is changed to Treatment on Hold by the background job and the patient must be re-registered.



Sex, race, and ZIP Code should be registered for each patient through Medical Administration Service (MAS) or the Business Management Office.

## Enter/Edit Clinic Sort Groups [PSO SETUP CLINIC GROUPS]

This option enables a group of clinics to be identified that will print together for the action/informational profiles.

### Example: Enter Clinic Sort Group

```
Select Maintenance (Outpatient Pharmacy) Option: ENT
  1   Enter/Edit Clinic Sort Groups
  2   Enter/Edit Local Drug Interaction
CHOOSE 1-2: 1 Enter/Edit Clinic Sort Groups

Select Clinic Sort Group: ?
  Answer with OUTPATIENT CLINIC SORT GROUP NAME
Choose from:
  CLINIC 1
  Clinic 2
  You may enter a new OUTPATIENT CLINIC SORT GROUP, if you wish
  Answer must be 3-30 characters in length.
Select Clinic Sort Group: CLINIC 3
  Are you adding 'CLINIC 3' as
  a new OUTPATIENT CLINIC SORT GROUP (the 6TH)? Y (Yes)
NAME: Clinic 1// <Enter>
Select SORT GROUPS: ?
  Answer with SORT GROUP SORT GROUPS
  You may enter a new SORT GROUP, if you wish
  Enter name of clinic to be included in the sort group.
  Answer with HOSPITAL LOCATION NAME, or ABBREVIATION
  Do you want the entire 122-Entry HOSPITAL LOCATION List? N (No)
Select SORT GROUPS: 2 EAST
  Are you adding '2 EAST' as a new SORT GROUP (the 1ST for this OUTPATIENT CLINIC SORT
  GROUP)? Y (Yes)
Select SORT GROUPS: <Enter>
```

## **Initialize Rx Cost Statistics** [PSO COSTINIT]

This option allows the manager to initialize the system to compile cost data for one day or a range of days automatically.



**Note:** The default date is today plus 1 at 1:00 a.m. (T+1@01:00). The date on the screen represents either a default date/time if the option has never been queued, or the current date/time this option is queued to run.

## **Edit Pharmacy Intervention** [PSO INTERVENTION EDIT]

Use this option to edit an already existing entry in the APSP INTERVENTION file.

## **Delete Intervention** [PSO INTERVENTION DELETE]

This option can be used to delete an intervention from the APSP INTERVENTION file. An intervention can be deleted only on the same day that it was entered.

## **Auto-delete from Suspense** [PSO PNDEL]

The *Auto-delete from Suspense* option is the same option as the V. 6.0 *Delete from Suspense File* option. This option allows the user to delete from the file the records of all the prescriptions that have already been printed prior to the user specified number of days. This specified number of days must be set from 7 to 90 days at the “DAYS PRINTED RX STAYS IN 52.5” prompt in the *Site Parameter Enter/Edit* option. The task is set to run every 7 days at the user specified time. The user may also re-queue or de-queue this task using this option. Once a prescription is deleted from suspense, it cannot be reset for reprinting. This option will delete based on the date the prescription was printed from suspense, not the original suspense date. The reason for using the print date is that one batch may print on a certain day with prescriptions with different original suspense dates. This job will therefore never delete only part of a printed batch.

## **Automate Internet Refill** [PSO AUTO REFILL INITIALIZE]

This option initializes a job that will automatically process the refill requests placed via the Internet.



This option requires the PSOAUTRF key.

The following warning is displayed if the user does not hold the key.

### Example: Automate Internet Refills – no security key held

```
Select Maintenance (Outpatient Pharmacy) Option: AUTOMATE Internet Refill
You must hold the PSOAUTRF key to run this option!
```

Internet refills are processed for all active divisions defined in the OUTPATIENT SITE file that have pending refill entries in the PRESCRIPTION REFILL REQUEST file. The *Automate Internet Refill* option uses the same criteria (prompting) that is used for the *Process Internet Refill* option. However, instead of the user responding to the prompts, the criteria is automatically set up by the software as follows:

**Table 39: Internet Refill Options**

Prompt/Criteria	Pre-set Value
FILL DATE:	TODAY
MAIL/WINDOW:	MAIL
Will these refills be Queued or Suspended?	SUSPENDED
PROCESS AUTO REFILLS FOR INPAT?	NO (but site parameter overrides)
PROCESS AUTO REFILLS FOR CNH?	NO (but site parameter overrides)

Scheduling the background job includes setting a time and the job's rescheduling frequency.



These fields should be left blank: DEVICE FOR QUEUED JOB OUTPUT, QUEUED TO RUN ON VOLUME SET, TASK PARAMETERS, and SPECIAL QUEUEING.

### Example: Automate Internet Refills – Setting up the background job

```
Select Maintenance (Outpatient Pharmacy) Option: AUTOMATE Internet Refill

                                Edit Option Schedule
Option Name: PSO AUTO REFILL
Menu Text: Automate Internet Refill                                TASK ID: 173872

-----

QUEUED TO RUN AT WHAT TIME: AUG 7,2007@16:40

DEVICE FOR QUEUED JOB OUTPUT:

QUEUED TO RUN ON VOLUME SET:

    RESCHEDULING FREQUENCY: 24H
    TASK PARAMETERS:

    SPECIAL QUEUEING:

-----

COMMAND:
```

External refill requests, such as from AudioFax and Internet, will not be processed for Titration/Maintenance marked prescriptions.

### Example: Automate Internet Refills – Titration/Maintenance marked prescriptions

```
Subj: ANYTOWN External Application Refills: Not processed List [#101509]
01/28/09@13:52 11 lines
From: POSTMASTER In 'IN' basket. Page 1
-----
Refills Not Processed Report for the ANYTOWN Division.

The following refill requests were not processed:

Patient: OPPATIENT,TWO (9999)

Rx #: 100005122 (REF #1) Qty: 55
Drug: ZINC SULFATE 66MG TAB
Reason: 'Titration/Maintenance Rx' cannot be refilled.
```

CPRS refill requests will not be automatically processed (new functionality delivered by PSO\*7\*313) for Titration/Maintenance marked prescriptions. The refill request will remain in the patient's Medication Profile as PENDING, and a mailman message (as shown in the above example) will also be sent to PSOAUTRF security key holders.

### Delete a Prescription [PSORXDL]

Using this option, a prescription status can be changed to deleted. This is only a change in status, not a removal of data. Deleted prescriptions do not appear on any profiles.



A released prescription can only be deleted after it has been returned to stock.

### Expire Prescriptions [PSO EXPIRE INITIALIZE]

This option initializes a daily job that will mark any prescription as expired that has yesterday as an expiration date. This option currently runs as a nightly job. PSO\*7\*391 modified the option to check for the Institutional DEA 'expiration date'. If the expiration date is within 30 calendar days or past expiration, then a mail message will be generated and sent to PSDMGR key holders.

### Example: Institutional DEA Certification Expiration Date within 30 Days

```
Subj: 500:Institutional DEA Expiration Date is about to expire [#140331]
03/20/12@11:57 3 lines
From: POSTMASTER In 'IN' basket. Page 1 *New*
-----
Please update Institutional DEA Certification Date. Will expire on
3/24/12.

*****
```

### Example: Institutional DEA Certification Past Expiration Date

```
Subj: 500:Institutional DEA Expiration Date has expired [#140333]
03/20/12@12:08 3 lines
From: POSTMASTER In 'IN' basket. Page 1 *New*
-----
```

## **Manual Auto Expire Rxs** **[PSO MANUAL AUTO EXPIRE]**

This job needs to be run only if expired prescriptions are showing up as active orders on the Orders tab in CPRS. This could happen if the *Expire Prescriptions* option was not queued as a daily task *AND* those prescription(s) were never accessed/viewed in *Patient Prescription Processing* option.

Sites that have not queued the Expire Prescriptions job on the daily task schedule should do so by selecting the *Queue Background Jobs* option from the Maintenance (Outpatient Pharmacy) menu option, making an entry in the Edit Option Schedule template for the *Expire Prescriptions* option and scheduling it to run daily.

## **Non-VA Provider Import** **[PSO NON-VA PROVIDER IMPORT]**

This option will allow the upload of "new" non-VA providers for a site into the New Person (#200) file. A "new" provider is defined as a provider whose National Provider Identifier (NPI) is not on file yet at a site.

The providers loaded by this option are eligible to be selected as encounter providers in CPRS but not as ordering providers. They may be used as ordering providers in the option Patient Prescription Processing [PSO LM BACKDOOR ORDERS] option.

This option is located within the Outpatient Pharmacy Manager [PSO MANAGER] menu under the Maintenance (Outpatient Pharmacy) [PSO MAINTENANCE] menu. Please see Non-VA Provider Updates (PSO\*7.0\*481) Deployment, Installation, Back-out and Rollback Guide to determine the steps for the user importing these Non-VA providers. Data is imported from Excel files and filed into the NEW PERSON (#200) file. MailMan messages are sent to the holders of the PSDMGR key containing information about:

1. Providers which were filed successfully
2. Providers which were not filed due to duplication of NPI's, etc.



### Notes:

- The file import does not file non-VA provider information into the IB NON/OTHER VA BILLING PROVIDER (#355.93) file.
- Subsequent copies of spreadsheets may contain updated information for providers such as DEA Expiration Date, address, etc. The file import does not update existing entries in the NEW PERSON (#200) file.

Select Maintenance (Outpatient Pharmacy) Option: **NON-VA Provider Import**

Considerations before invoking this option:

TITLE (#3.1) file:

Have the titles "HN NON-VA PROVIDER" and "TW NON-VA PROVIDER" been defined in the TITLE (#3.1) file in this system? It is optional to have the titles defined. However, the providers loaded by this patch will have no titles listed in CPRS if these titles are not pre-defined prior to importing the non-VA provider information included in this update.

SERVICE/SECTION (#49) file:

Determine whether an entry for the SERVICE/SECTION (#29) field should be populated during the import. It is optional to populate the SERVICE/SECTION (#29) field. Your site may wish to define a new SERVICE/SECTION (#49) file entry such as "NON-VA COMMUNITY CARE".

Do you wish to proceed? NO// **YES**

Your site VISN is: 1.

Only providers for your VISN may be imported.

Directory name // **<directory name where csv file is located containing non-VA providers to be imported>**

File Name // **<the file name should be in format "PSO\_481\_##\_XX.csv", where ## is the VISN number and XX is the state.>**

Press ENTER if the SERVICE/SECTION (#29) field should not be populated.

Which SERVICE/SECTION (#29) field entry should be used? **<Enter a valid entry from the "SERVICE/SECTION (#49) file or "enter" if the field should not be populated.>**

Requested Start Time: NOW// (MAY 16, 2018@16:49:21)

PSO NON-VA PROVIDER IMPORT TASKED:1238567

**Example of non-VA provider filed by this option:**

-----  
NAME: xxxx,xxxx TITLE: HN NON-VA PROVIDER  
STREET ADDRESS 1: 123 STREET STREET ADDRESS 2: SUITE 100  
CITY:ANYTOWN STATE: ANYSTATE  
ZIP CODE: 12345 SEX: MALE  
DATE ENTERED: JUL 31, 2018 CREATOR: TASKMAN,PROXY USER  
NAME COMPONENTS: 200 DEGREE: MD  
SERVICE/SECTION: OPTIONAL  
SIGNATURE BLOCK PRINTED NAME: xxxx xxxx  
KEY: XUORES GIVEN BY: TASKMAN,PROXY USER  
DATE GIVEN: JUL 31, 2018  
SUBJECT ORGANIZATION: Veteran Care In The Community  
SUBJECT ORGANIZATION ID: n/a UNIQUE USER ID: 111111111  
NPI: 111111111 NPI ENTRY STATUS: DONE  
AUTHORIZE RELEASE OF NPI: Yes  
EFFECTIVE DATE/TIME: JUL 31, 2018@17:09:08  
STATUS: ACTIVE NPI: 111111111  
AUTHORIZED TO WRITE MED ORDERS: YES DEA#: AX111111111  
PROVIDER CLASS: PHYSICIAN PROVIDER TYPE: FEE BASIS  
REMARKS: HN NON-VA PROVIDER SCHEDULE II NARCOTIC: Yes  
SCHEDULE II NON-NARCOTIC: Yes SCHEDULE III NARCOTIC: Yes  
SCHEDULE III NON-NARCOTIC: Yes SCHEDULE IV: Yes  
SCHEDULE V: Yes DEA EXPIRATION DATE: OCT 31, 2020  
NON-VA PRESCRIBER: YES TAX ID: 11-1111111  
PSIM UPDATE USER: TASKMAN,PROXY USER PSIM UPDATE DT: JUL 31, 2018@17:09



**Note:** The Non-VA Provider Inactivate [PSO NON-VA PROVIDER INACTIVATE] option, will allow for the inactivation of providers which were previously filed by this option if it is decided later that the providers should not remain active due to workflow or other issues. The Non-VA Provider Inactivate.

[PSO NON-VA PROVIDER INACTIVATE] option is only accessible by users with programmer level access and is not attached to a menu. Refer to the patch description for PSO\*7.0\*481 for further information.

## Prescription Cost Update [PSO RXCOST UPDATE]

This option updates prescription costs in the DRUG COST file by generic drug name. Costs can be updated on refills and partials as well. Updates can be made only as far back as one year plus 120 days.

## Purge Drug Cost Data [PSO PURGE DRUG COST]

To purge drug cost data from the DRUG COST file, enter a starting and ending date. Then choose to run this job immediately or queue it.

### Example: Purge Drug Cost Data

```
Select Maintenance (Outpatient Pharmacy) Option: PURGE Drug Cost Data

Purge Cost Data Starting: FEB 2007// <Enter> (FEB 2007)
Purge Cost Data Ending: 3/97 (MAR 2007)

Are you sure you want to purge cost data
from 02/00/07 to 03/00/07? NO// Y YES

Do you want this option to run IMMEDIATELY or QUEUED? Q// <Enter> UEUED
Requested Start Time: NOW// <Enter> (MAY 06, 2007@10:31:23)
Task #223079 QUEUED.
```

## Purge External Batches [PSO INTERFACE PURGE]

This option purges entries from the PHARMACY EXTERNAL INTERFACE file.

### Example: Purge External Batches

```
Select External Interface Menu Option: Purge External Batches
Enter cutoff date for purge of External Interface file: 022807 (FEB 28, 2007)

Purge entries that were not successfully processed? NO// <Enter>

Purge queued to run in background.

Select External Interface Menu Option: <Enter>
```

## **Recompile AMIS Data**

**[PSO AMIS RECOMPILE]**

To gather Automated Management Information System (AMIS) data from various sources, use this option. It is recommended that this job should be queued to run during off-peak hours (or at a time that is convenient for the site).



The month/day/year may be specified for a current month report, but only month and year can be specified for reports of past months.



# Chapter 16: Using the Medication Profile

---

This chapter describes the Medication Profile, its different formats, and how it can be used in patient care.

## Medication Profile [PSO P]

The Medication Profile displays a profile of all prescriptions on file for a patient. The prescription display includes all Non-VA Med orders also. Effective with the OneVA Pharmacy (patch PSO\*7\*454 – December 2016), the Medication Profile displays all active medications from other facilities. The medications are retrieved from the Health Data Repository/Clinical Data Service (HDR/CDS) Repository and are displayed below the ‘local’ or ‘Non-VA Med’ orders and are sorted/grouped by facility. The prescriptions originating from other VA Pharmacy locations display under a divider header line showing the site name, site number, and status. The user may view this information directly on the screen or request it to be printed. The medication profile is available in two formats: short or long.

Patient demographics and clinical alerts display in the header area of the Medication Profile. Refer to [Patient Demographics and Clinical Alerts](#) for more information.

### Medication Profile: Short Format

The short format displays the following information:

- patient name
- eligibility
- reactions
- pregnancy/lactation status
- prescription number
- Sig
- quantity
- last fill date
- address
- DOB
- narrative
- prescriptions
- drug name
- Status
- issue date
- refills remaining

The short report format of the fields for Non-VA Med orders include the drug name or orderable item name, dosage, schedule, and date documented.

The short format displays the status in an abbreviated form. The following is an explanation of the codes:

Code	Status/Description
A	Active
B	Bad Address Indicated
DF	Discontinued due to edit by a provider through CPRS
DE	Discontinued due to edit via backdoor Pharmacy

DP Discontinued by provider through CPRS  
 DC Discontinued via backdoor Pharmacy  
 DD Discontinued due to death  
 DA Auto discontinued due to admission  
 E Expired  
 HP Placed on hold by provider through CPRS  
 H Placed on hold via backdoor Pharmacy  
 N Non Verified  
 P Pending due to drug interactions  
 S Suspended  
 \$ Copay eligible  
 E Third party electronically billable  
 R Returned to stock prescription (next to last fill date)

**Example: Medication Short Profile**

```

Medication Profile Jun 12, 2006@22:33:13 Page: 1 of 1
OPPATIENT16, ONE
  PID: 000-55-3421 Ht (cm) : _____ (_____)
  DOB: DEC 2, 1923 (82) Wt (kg): 100.00 (06/24/2003)
  SEX: MALE Non-VA Meds on File
  CrCL: <Not Found> (CREAT: Not Found BSA (m2): _____
  Last entry on 1-20-05
  
```

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----REFILL TOO SOON/DUR REJECTS (Third Party)-----								
1	2390\$e	DIGOXIN (LANOXIN) 0.05MG CAP	90	A>	02-16	02-16	3	90
2	2391e	OXYBUTYNYNIN CHLORIDE 15MG SA TAB	180	S>	02-15	05-06	0	90
-----ACTIVE-----								
3	2396	AMPICILLIN 250MG CAP	40	A>	06-12	06-12	0	10
<b>4</b>	<b>2395</b>	<b>AZATHIOPRINE 50MG TAB</b>	<b>90</b>	<b>E</b>	<b>06-10</b>	<b>05-03</b>	<b>3</b>	<b>90</b>
-----DISCONTINUED-----								
<b>5</b>	<b>2398</b>	<b>FOLIC ACID 1MG TAB</b>	<b>90</b>	<b>DD&gt;</b>	<b>05-03</b>	<b>05-03R</b>	<b>3</b>	<b>90</b>
6	2400	HYDROCORTISONE 1%CR	1	DE>	05-03	05-03R	11	30
<b>7</b>	<b>2394</b>	<b>IBUPROFEN 400MG TAB 500'S</b>	<b>270</b>	<b>DC</b>	<b>05-03</b>	<b>05-03</b>	<b>3</b>	<b>90</b>
8	2399	MVI CAP/TAB	90	DP>	05-03	05-03R	3	90
9	2402	TEMPAZEPAM 15MG CAP	30	DF	06-01	06-01	5	30
<b>10</b>	<b>2392</b>	<b>THIAMINE HCL 100MG TAB</b>	<b>90</b>	<b>DA&gt;</b>	<b>05-03</b>	<b>05-03R</b>	<b>3</b>	<b>90</b>
-----HOLD-----								
11	2393	WARFARIN 5MG TAB	90	H	05-03	-	3	90
12	2401	FUROSEMIDE 40MG TAB	90	HP	05-03	-	2	90
-----NON-VERIFIED-----								
13	2397	BACLOFEN 10MG TABS	30	N	03-14	03-14	5	30
-----PENDING-----								
14	CAPTOPRIL 25MG TAB		QTY: 180		ISDT: 06-12	REF: 3		
15	MULTIVITAMIN CAP/TAB		QTY: 30		ISDT: 06-12>	REF: 3		
-----NON-VA MEDS (Not dispensed by VA) -----								
GINKGO EXT 1 TAB ONCE A DAY BY MOUTH					Date Documented: 01/13/01			
Enter ?? for more actions								
PU	Patient Record Update				NO	New Order		
PI	Patient Information				SO	Select Order		
Select Action: Quit//								



**Notes:** Order #4 is highlighted (reverse video) to indicate that it has recently expired. Orders #5,7,10 are highlighted (reverse video) to indicate that they were recently discontinued.

Hold Type display codes are shown in **blue**.  
 Discontinue Type display codes are shown in **blue**.

## OneVA Pharmacy and the Medication Profile

Effective with the OneVA Pharmacy patch PSO\*7\*454 – December 2016, the Medication Profile displays all active medications from other facilities. The medications are retrieved from the Health Data Repository/Clinical Data Service (HDR/CDS) Repository and are displayed below the ‘local’ or ‘Non-VA Med’ orders and are sorted/grouped by facility. The prescriptions originating from other VA Pharmacy locations display under a divider header line showing the site name, site number, and status.



**Note:** For additional information regarding OneVA Pharmacy processing go to the VA Software Document Library (VDL), select the Clinical section then choose the “Pharm: Outpatient Pharmacy” page. Locate the “User Manual – OneVA Pharmacy” document.

The example shown below displays three pages of a test patient’s Medication Profile, displaying the ‘local’ prescription orders followed by prescription orders that originated at other facilities.

Medication Profile		Jul 28, 2016@05:20:23		Page: 1 of 3				
PSOPATIENT,SIX		<NO ALLERGY ASSESSMENT>						
PID: 666-01-2136		Ht (cm) : _____ (_____)						
DOB: FEB 13,1961 (55)		Wt (kg) : _____ (_____)						
SEX: FEMALE		BSA (m2) : _____						
CrCL: <Not Found> (CREAT: Not Found)		ISSUE		LAST REF DAY				
#	RX #	DRUG	QTY	ST	DATE	FILL	REM	SUP
-----ACTIVE-----								
1	10000126	FLUTICAS 100/SALMETEROL 50 INHL DISK	60	E>	06-01	02-02	11	45
			Qty: 2					
2	10000128	NIACIN 250MG TAB	270	S>	06-08	08-27	2	90
3	10000122	RAMIPRIL 5MG CAP	30	A>	05-31	05-31	8	30
-----DISCONTINUED-----								
4	10000125	HYDROCHLOROTHIAZIDE 25MG TAB	60	DC>	02-01	02-02	5	60
-----HOLD-----								
5	10000127	LISINOPRIL 2.5MG TAB	90	H>	03-10	-	3	90
-----ANYTOWN (552) ACTIVE-----								
+ Enter ?? for more actions								
PU Patient Record Update		NO New Order						
PI Patient Information		SO Select Order						
Select Action: Next Screen//								
Medication Profile		Jul 28, 2016@05:20:46		Page: 2 of 3				
PSOPATIENT,SIX		<NO ALLERGY ASSESSMENT>						
PID: 666-01-2136		Ht (cm) : _____ (_____)						
DOB: FEB 13,1961 (55)		Wt (kg) : _____ (_____)						
SEX: FEMALE		BSA (m2) : _____						
CrCL: <Not Found> (CREAT: Not Found)		ISSUE		LAST REF DAY				
#	RX #	DRUG	QTY	ST	DATE	FILL	REM	SUP
+-----ANYTOWN (552) DISCONTINUED-----								
6	2718399	IBUPROFEN 800MG TAB	30	A	06-09	07-19	0	10
7	2718383	OMEPRAZOLE 10MG SA CAP	30	A	02-02	06-10	11	30
8	2718397	VERAPAMIL HCL 120MG TAB	60	A	06-15	06-15	5	60
+-----ANYTOWN (552) DISCONTINUED-----								
9	2718398	ASPIRIN 325MG BUFFERED TAB	300	DC	03-15	03-15	2	90
+-----ANYTOWN (552) HOLD-----								
10	2718400	ALBUTEROL 0.5% INHL SOLN	2	H	06-09	-	1	14
+-----ANYTOWN (552) SUSPENDED-----								

```

11 2718401          CALCIUM GLUCONATE 500MG TAB          30 S 05-25 07-14 3 30
-----DAYTSHR TEST LAB (984) ACTIVE-----
+          Enter ?? for more actions
PU Patient Record Update          NO New Order
PI Patient Information              SO Select Order
Select Action: Next Screen//

Medication Profile          Jul 28, 2016@05:16:31          Page: 3 of 3
PSOPATIENT,SIX          <NO ALLERGY ASSESSMENT>
  PID: 666-01-2136          Ht (cm) : _____ (_____)
  DOB: FEB 13,1961 (55)          Wt (kg) : _____ (_____)
  SEX: FEMALE
  CrCL: <Not Found> (CREAT: Not Found)          BSA (m2) : _____

#  RX #          DRUG          QTY ST  DATE  FILL  REM  SUP
+
12 2718902          BANDAGE, GAUZE, ROLLER 2 IN X 6 YD          3 A 04-19 04-19 9 29
13 2718744          OMEPRAZOLE 10MG SA CAP          60 A 05-03 05-03 5 60
-----DAYTSHR TEST LAB (984) DISCONTINUED-----
14 2718745          QUINAPRIL 20MG TAB          30 DC 03-04 03-04 11 30
-----DAYTSHR TEST LAB (984) EXPIRED-----
15 2718746          AMOXICILLIN 250MG CAP          30 E 06-01 05-04 0 10
-----DAYTSHR TEST LAB (984) HOLD-----
16 2718747          CETIRIZINE HCL 10MG TAB          45 H 04-23 - 4 45
-----DAYTSHR TEST LAB (984) SUSPENDED-----
17 2718748          TRAZODONE HCL 50MG TAB          90 S 04-05 06-24 2 90
+          Enter ?? for more actions
PU Patient Record Update          NO New Order
PI Patient Information              SO Select Order
Select Action: Quit//

```

The OneVA Pharmacy OneVA Pharmacy patch PSO\*7\*454 – December 2016 introduces the new view, ‘REMOTE OP Medications’, which displays the details of the remote prescription order. When selecting a OneVA Pharmacy prescription order from the Medication Profile screen, the new ‘REMOTE OP Medications’ page display as shown in the example below.

```

REMOTE OP Medications (ACTIVE) Jul 27, 2016@10:12:37          Page: 1 of 1
PSOPATIENT,SIX          <NO ALLERGY ASSESSMENT>
  PID: 666-01-2136          Ht (cm) : _____ (_____)
  DOB: FEB 13,1961 (55)          Wt (kg) : _____ (_____)
  SEX: FEFEMALE
  CrCL: <Not Found>          BSA (m2) : _____

  Site #: 984(DAYTSHR TEST LAB)
  Rx #: 2718862
  Drug Name: IBUPROFEN 800MG TAB
  Days Supply: 30
  Quantity: 60
  Refills: 11
  Expiration Date: 06/01/17
  Issue Date: 05/31/16
  Stop Date: 06/01/17
  Last Fill Date: 05/31/16
  Sig: TAKE ONE TABLET BY MOUTH TWICE A DAY AS NEEDED --TAKE WITH
      FOOD IF GI UPSET OCCURS/DO NOT CRUSH OR CHEW--

  Enter ?? for more actions
RF Refill Rx from Another VA Pharmacy PR Partial
Select Action: Quit//

```



**Note:** For additional information regarding OneVA Pharmacy processing go to the VA Software Document Library (VDL), select the Clinical section then choose the “Pharm: Outpatient Pharmacy” page. Locate the “User Manual – OneVA Pharmacy” document.

## Medication Profile: Long Format

The long format displays all information contained on the short format as well as the following additional fields:

- physician's name
- fill date
- dates of refills/partial fills
- whether the prescription was filled at the pharmacy window or by mail
- clerk code
- total allowable refills
- which division filled it

The long report format of the fields for Non-VA Med orders include the start date, CPRS order #, status, documented by, order check(s), override reason, override provider, and statement of explanation.

### Example: Medication Profile – Long Format

```
Select PATIENT NAME:  OPPATIENT,ONE      8-5-19      666000777      NO      NSC
VETERAN      OPPATIENT,ONE
WARNING : ** This patient has been flagged with a Bad Address Indicator.
LONG or SHORT: SHORT// LONG
Sort by DATE, CLASS or MEDICATION: DATE// <Enter>

All Medications or Selection (A/S): All// <Enter>
DEVICE: HOME// [Select Print Device] GENERIC INCOMING TELNET

OPPATIENT,ONE
      (TEMP ADDRESS from AUG 28,2006 till (no end date))
LINE1      DOB: AUG 5,1919
ANYTOWN      PHONE: 555-1212
TEXAS 77379      ELIG: NSC
CANNOT USE SAFETY CAPS.

WEIGHT (Kg) :      HEIGHT (cm) :
CrCL: <Not Found> (CREAT: Not Found      BSA (m2) :

DISABILITIES:

ALLERGIES:

ADVERSE REACTIONS: _

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

Outpatient prescriptions are discontinued 72 hours after admission

      Medication Profile Sorted by ISSUE DATE

Rx #: 100001968Ae      Drug: LOPERAMIDE 2MG CAP
SIG: TAKE TWO CAPSULES BY MOUTH EVERY DAY
QTY: 60      # of Refills: 5      Issue/Expr: 12-15-05/06-16-06
Prov: OP PROVIDER16,TWO      Entry By: 10000000013 Filled: 01-14-06 (M)

Last Released:      Original Release:
Refilled: 02-19-04 (M)      Released:
Remarks:
Division: ANYTOWN (500)      Active      4 Refills Left
```

```

-----
Non-VA MEDS (Not Dispensed by VA)
GINKGO BILOBA TAB
  Dosage: 1 TABLET
  Schedule: ONCE A DAY
  Route: MOUTH
  Status: Discontinued (10/08/03)
  Start Date: 09/03/03      CPRS Order #: 12232
  Documented By: OPCLERK21,FOUR on 09/03/03
  Statement of Explanation: Non-VA medication not recommended by VA provider.

ACETAMINOPHEN 325MG CT
  Dosage: 325MG
  Schedule:
  Route:
  Status: Active
  Start Date: 09/03/03      CPRS Order #: 12234
  Documented By: OPCLERK21,FOUR on 09/03/03
  Statement of Explanation: Non-VA medication recommended by VA provider
                          Patient wants to buy from Non-VA pharmacy

```

For patients whose birth sex is female, a line with the label Women’s Health indicates if the patient is pregnant and/or lactating. If the patient is neither pregnant nor lactating, the label will appear with nothing after it. For patients whose birth sex is male, this line does not appear. For example:

```

WOMEN'S HEALTH: Pregnant (Expected Due Date: Sep 19, 2021)

```

The Intervention menu hidden action has been included in the Patient Information, the Medication Profile and Detailed Order ListMan screens when utilizing the following options:

- Patient Prescription Processing [PSO LM BACKDOOR ORDERS]
- Complete Orders from OERR [PSO LMOE FINISH]
- Edit Prescriptions [PSO RXEDIT]

See Chapter 18, “Using the Pharmacy Intervention Menu” for more details.

## Medication Reconciliation

The Medication Reconciliation product (patch PSO\*7\*294) introduces the components necessary to build four tools useful for medication reconciliation. The product utilizes Health Summary components and Text Integrated Utility (TIU) data objects to create a list of current medications. Medication Reconciliation also leverages the Remote Data Interoperability (RDI) software to include medication data from other sites.

For a complete list of functionality, please refer to the Medication Reconciliation Implementation Guide.

## Medication Profile and Refill [PSO HRC PROFILE/REFILL]

This option was originally requested by the Health Resource Center (HRC) to provide a new standalone option like that of the ePharmacy Medication Profile (View Only) [PSO PMP] option

for the Compensation and Pension Record Interchange (CAPRI) system. It allows users to view a medication profile as well as refill prescriptions for a specific patient.

**Example 1: Medication Profile with default view**

```

Patient Medication Profile      Jun 04, 2007@19:22:16      Page:      1 of      1
OPPATIENT,ONE                  <A>
  PID: 000-12-5678              HEIGHT (cm): 175.26 (11/21/2006)
  DOB: NOV 28,1900 (111)        WEIGHT (kg): 108.18 (08/09/2007)
  SEX: MALE                      EXP/CANCEL CUTOFF: 120 DAY
  CrCL: 78.1(est.) (CREAT:1.0mg/dL 2/19/99)      BSA (m2): 2.23

```

#	Rx#	DRUG [^]	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
1	100004112	ALBUTEROL INHALER	1	A	04-21-07	04-21-07	11	7
2	300483e	ALPRAZOLAM 0.25MG TABS	30	DC	06-14-07	06-14-07	11	30
3	100004113	AMITRIPTYLINE 10MG TAB	60	A	04-21-07	04-21-07	11	30
4	100004075e	CABERGOLINE 0.5MG TAB	7	E	05-18-05	05-18-05	6	7
5	100004155	DESIPRAMINE 25MG	90	S	02-23-07	02-11-07	11	90
6	100004022\$e	DIGOXIN 0.05MG/ML ELIX (60CC)	30	A	02-01-07	02-20-07	10	90
7	100004081	METAPROTERENOL 5% SOLUTION 10ML	15	DC	06-02-07	06-03-07	11	15
8	100004082	METAPROTERENOL 5% SOLUTION 10ML	10	DC	06-02-07	06-03-07	11	10
9	100004083	METAPROTERENOL 5% SOLUTION 10ML	15	A>	06-02-07	06-23-07	11	15
10	100004079	NICOTINE 10MG/ML SOLN NASAL SPRAY	1	A>	06-02-07	06-23-07	11	15
11	100003298	SIMVASTATIN 20MG TAB	5	DC	05-28-05	04-27-07	3	30
12	100003298A	SODIUM CHLORIDE 0.9% NASAL SOLN(O	1	A	05-10-07	05-10-07	11	30
13	100004070e	VALSARTAN 80MG TAB	5	S	06-28-07	05-31-07	11	30
<b>PENDING (2 order)</b>								
14	ALBUTEROL INHALER			RF	06-03-07		2	30
15	AMITRIPTYLINE 10MG TAB			RN	06-02-07		3	10
<b>Non-VA MEDS (Not dispensed by VA) (1 order)</b>								
16	TAMOXIFEN CITRATE 10MG TABS				Date Documented: 06/04/07			

```

Enter ?? for more actions
CV Change View      PI Patient Information  SIG Show/Hide SIG
GS Group by Status  RF Refill
Select: Quit//

```

The following options are available as Hidden Menu actions on this screen:

- DR - Sort by Drug
- LF - Sort by Last Fill
- RX - Sort by Prescription
- ID - Sort by Issue Date

The CV (Change View) action allows the user to change some characteristics of the screen above. The user can also save and/or delete preferences, which will be used every time the user runs this option. The users can have one set of preferences for each Division defined.

**Example 2: Change View action**

Enter CV at the “Select” prompt to change the view preferences.

```

OPPROVIDER,ONE's current default view (ANYTOWN):
-----
EXP/CANCEL CUTOFF : 120 DAYS
SORT BY           : DRUG NAME
SORT ORDER        : ASCENDING
DISPLAY SIG        : NO
GROUP BY STATUS   : YES
DISPLAY ORDER COUNT: YES

Delete this default view? NO// <Enter>

EXP/CANCEL CUTOFF: 120// 120 DAYS
SORT BY: DR// DRUG NAME

```

```

SORT ORDER: ASCENDING// ASCENDING
DISPLAY SIG: OFF// OFF
GROUP BY STATUS: OFF// ON
DISPLAY ORDER COUNT: ON// OFF

Save as your default View? NO// YES

Saving...OK!

```

### Example 3: Patient Information action

Enter PI at the “Select” prompt to view patient information.

```

Patient Information      Jul 12, 2011@13:28:53      Page: 1 of 2
OPPATIENT,ONE          <A>
  PID: 000-12-5678      Ht (cm): _____ (_____)
  DOB: NOV 28,1900 (111)  Wt (kg): _____ (_____)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)  BSA (m2): _____

Eligibility: NSC, VA PENSION
RX PATIENT STATUS: OPT NSC

Disabilities: POST-TRAUMATIC STRESS DISORDER-100% (SC),
2222 CENTRAL AVE
ANYTOWN                HOME PHONE:
NEW YORK 01280-7654    CELL PHONE:
Prescription Mail Delivery: Regular Mail  WORK PHONE:
Cannot use safety caps.

Allergies
  Verified: PENICILLIN,

Adverse Reactions

+ Enter ?? for more actions
DD Detailed Allergy/ADR List      EX Exit Patient List
Select Action: Next Screen//

```

### Example 4: Medication Profile with SIG expanded

Enter SIG at the “Select” prompt to show/hide the Rx SIG.

```

Patient Medication Profile  Jun 04, 2007@19:22:16      Page: 1 of 1
OPPATIENT,ONE          <A>
  PID: 000-12-5678      HEIGHT (cm): 175.26 (11/21/2006)
  DOB: NOV 28,1900 (111)  WEIGHT (kg): 108.18 (08/09/2007)
  SEX: MALE              EXP/CANCEL CUTOFF: 120 DAY
  CrCL: <Not Found> (CREAT: Not Found)  BSA (m2): 2.23

#  Rx#      DRUG [^]      QTY  ST  ISSUE  LAST  REF  DAY
#  #          #          #    #    DATE   FILL  REM  SUP
1  100004112  ALBUTEROL INHALER      1  A    04-21-07  04-21-07  11  7
   SIG: TAKE 1 PUFF BY MOUTH EVERY DAY FOR 10 DAYS
2  300483e    ALPRAZOLAM 0.25MG TABS  30  DC   06-14-07  06-14-07  11  30
   SIG: TAKE ONE CAPSULE BY MOUTH EVERY MORNING
3  100004113  AMITRIPTYLINE 10MG TAB  60  A    04-21-07  04-21-07  11  30
   SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
4  100004075e  CABERGOLINE 0.5MG TAB   7  E    05-18-05  05-18-05  6  7
   SIG: TAKE 2 TABLET(S) BY MOUTH EVERY 12 HOURS
5  100004155  DESIPRAMINE 25MG        90  S    02-23-07  02-11-07  11  90
   SIG: TAKE 2 TABLET(S) BY MOUTH EVERY 12 HOURS
6  100004022$e  DIGOXIN 0.05MG/ML ELIX (60CC)  30  A    02-01-07  02-20-07  10  90
   SIG: INJECT 1000IM EVERY DAY
7  100004081  METAPROTERENOL 5% SOLUTION 10ML  15  DC   06-02-07  06-03-07  11  15
   SIG: INJECT 1000 IM EVERY DAY
8  100004082  METAPROTERENOL 5% SOLUTION 10ML  10  DC   06-02-07  06-03-07  11  10

```



SIG: INJECT 1000 IM EVERY DAY									
9	100004083	METAPROTERENOL 5% SOLUTION 10ML	15	A>	06-02-07	06-23-07	11	15	
SIG: INJECT 1000 IM EVERY DAY									
10	100004079	NICOTINE 10MG/ML SOLN NASAL SPRAY	1	A>	06-02-07	06-23-07	11	15	
SIG: APPLY 1 PATCH ON SHOULDER DAILY									
11	100003298	SIMVASTATIN 20MG TAB	5	DC	05-28-05	04-27-07	3	30	
SIG: TAKE 2 TABLET(S) PO FOUR TIMES A DAY									
12	100003298A	SODIUM CHLORIDE 0.9% NASAL SOLN(O	1	A	05-10-07	05-10-07	11	30	
SIG: TAKE 2 PUFFS EACH NOSTRIL EVERY 8 HOURS									
13	100004070e	VALSARTAN 80MG TAB	5	S	06-28-07	05-31-07	11	30	
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING									
<b>PENDING (2 order)</b>									
14	ALBUTEROL INHALER			RF	06-03-07		2	30	
SIG: 1 PUFF BY MOUTH EVERY DAY FOR 5 DAYS									
15	AMITRIPTYLINE 10MG TAB			RN	06-02-07		3	10	
SIG: TAKE 2 TABLET(S) PO FOUR TIMES A DAY									
<b>Non-VA MEDS (Not dispensed by VA) (1 order)</b>									
16	TAMOXIFEN CITRATE 10MG TABS				Date Documented: 06/04/07				
SIG: TAKE 2 TABLET(S) PO FOUR TIMES A DAY									
<b>Enter ?? for more actions</b>									
CV	Change View	PI	Patient Information	SIG	Show/Hide	SIG			
GS	Group by Status	RF	Refill						
Select: Quit//									

#### Example 5: Medication Profile list item with Bad Address Indicator:

The Outpatient Pharmacy Medication Profile has a display problem for a prescription with the following characteristics:

1. 2-letter status (e.g., DC)
2. Drug marked for Consolidated Mailout Outpatient Pharmacy (CMOP)
3. Bad Address Indicator

When a prescription with all three features is displayed the DAY SUP column value is being truncated as illustrated below where the Day Supply value is 90 and it displays as 9.

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----DISCONTINUED-----								
1	100005604\$	TOBRAMYCIN 80MG/2ML INJ	100	DC>B01-21	01-21	0	9<<	<b>Truncated</b>

To resolve this issue, the BAD ADDRESS INDICATOR is now displayed on a separate line.

Medication Profile		Sep 22, 2015@09:16:37		Page: 1 of 2				
OUTPATIENT, DELBERT		<NO ALLERGY ASSESSMENT>						
PID: 666-06-1944		Ht (cm): _____ (_____)						
DOB: JUN 15, 1944 (71)		Wt (kg): _____ (_____)						
SEX: MALE								
CrCL: <Not Found> (CREAT: Not Found)		BSA (m2): _____						
#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----ACTIVE-----								
1	301278A	ALBUTEROL INHALER	66	A	09-02	09-02	1	40
*** Bad Address ***								
2	301276	INSULIN NPH U-100 INJ (PORK)	59	S	08-28	12-14	3	59
*** Bad Address ***								
3	301282\$	LOMUSTINE 10MG CAP	30	A	09-09	09-09	5	60
*** Bad Address ***								
4	100003059A	PARALDEHYDE ORAL LIQUID (OZ)	1	A	08-28	09-09	0	90
*** Bad Address ***								
5	301277	PIMOZIDE 2MG	91	A	08-28	08-28	3	91
Enter ?? for more actions								

PU Patient Record Update	NO New Order
PI Patient Information	SO Select Order
Select Action: Next Screen//	

### Example 6: Group By Status action

Enter GS at the “Select” prompt to group/ungroup list by Rx status.

```

Patient Medication Profile      Jun 04, 2007@19:22:16      Page: 1 of 1
OPPATIENT,ONE                  <A>
  PID: 000-12-5678              HEIGHT(cm): 175.26 (11/21/2006)
  DOB: NOV 28,1900 (111)        WEIGHT(kg): 108.18 (08/09/2007)
  SEX: MALE                     EXP/CANCEL CUTOFF: 120 DAY
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 2.23

```

ISSUE #	Rx#	LAST	REF DRUG [^]	DAY	QTY	ST	DATE	FILL	REM	SUP
<b>ACTIVE (6 orders)</b>										
1	100004112		ALBUTEROL INHALER		1	A	04-21-07	04-21-07	11	7
2	100004113		AMITRIPTYLINE 10MG TAB		60	A	04-21-07	04-21-07	11	30
3	100004022	e	DIGOXIN 0.05MG/ML ELIX (60CC)		30	A	02-01-07	02-20-07	10	90
4	100004083		METAPROTERENOL 5% SOLUTION 10ML		15	A>	06-02-07	06-23-07	11	15
5	100004079		NICOTINE 10MG/ML SOLN NASAL SPRAY		1	A>	06-02-07	06-23-07	11	15
6	100003298A		SODIUM CHLORIDE 0.9% NASAL SOLN(O		1	A	05-10-07	05-10-07	11	30
<b>DISCONTINUED (4 orders)</b>										
7	300483e		ALPRAZOLAM 0.25MG TABS		30	DC	06-14-07	06-14-07	11	30
8	100004081		METAPROTERENOL 5% SOLUTION 10ML		15	DC	06-02-07	06-03-07	11	15
9	100004082		METAPROTERENOL 5% SOLUTION 10ML		10	DC	06-02-07	06-03-07	11	10
10	100003298		SIMVASTATIN 20MG TAB		5	DC	05-28-05	04-27-07	3	30
<b>SUSPENDED (2 orders)</b>										
11	100004155		DESIPRAMINE 25MG		90	S	02-23-07	02-11-07	11	90
12	100004070e		VALSARTAN 80MG TAB		5	S	06-28-07	05-31-07	11	30
<b>EXPIRED (1 order)</b>										
13	100004075e		CABERGOLINE 0.5MG TAB		7	E	05-18-05	05-18-05	6	7
<b>PENDING (2 order)</b>										
14			ALBUTEROL INHALER			RF	06-03-07		2	30
15			AMITRIPTYLINE 10MG TAB			RN	06-02-07		3	10
<b>Non-VA MEDS (Not dispensed by VA) (1 order)</b>										
16			TAMOXIFEN CITRATE 10MG TABS							
Date Documented: 06/04/07										

```

Enter ?? for more actions
CV Change View      PI Patient Information  SIG Show/Hide SIG
GS Group by Status  RF Refill
Select: Quit//

```

### Example 7: Refill action

Enter RF at the “Select” prompt to request a refill for one or more prescriptions as shown below. This action is also available after selecting a specific prescription.

```

Enter ?? for more actions
CV Change View      PI Patient Information  SIG Show/Hide SIG
GS Group by Status  RF Refill
Select: Quit// RF Refill
Barcode Refill? NO//
Select Orders by number: (1-16): ?

This response must be a list or range, e.g., 1,3,5 or 2-4,8.

Select Orders by number: (1-16): 2
FILL DATE: (5/2/2011 - 11/2/2011): TODAY// (JUL 12, 2011)
MAIL/WINDOW: MAIL// MAIL
Now refilling Rx# 100004113 Drug: AMITRIPTYLINE 10MG TAB

Qty: 120          Sig: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY

```

RX# 100004113 has been suspended until 07-12-11.



**Note:** The system has the flexibility to sort the Medication Profile by different columns (RX, drug name, date, etc.). When selecting a range of prescriptions from the Medication Profile to be refilled, selection is not limited to active prescriptions. If discontinued or expired prescriptions are included in a range, the system will display a message stating the status of each prescription as they are processed within the range. For example:

Cannot refill Rx # 100002897, Rx is in DISCONTINUED status.

## Chapter 17: About the Output Reports Menu

---

This chapter describes the options on the *Output Reports* menu.

### Output Reports [PSO OUTPUTS]

The *Output Reports* menu generates a variety of management reports. These reports contain current medication profiles, utilization, cost, and workload information that help management maintain the highest level of patient care.

The following reports and menus are available on the *Output Reports* menu:

- *Action Profile (132 COLUMN PRINTOUT)*
- *Alpha Drug List and Synonyms*
- *AMIS Report*
- *Bad Address Reporting Main Menu ...*
- *CMOP Controlled Substance Rx Dispense Report*
- *Commonly Dispensed Drugs*
- *Cost Analysis Reports ...*
- *Daily AMIS Report*
- *Drug List By Synonym*
- *Free Text Dosage Report*
- *Inactive Drug List*
- *Internet Refill Report*
- *List of Patients/Prescriptions for Recall Notice*
- *List Prescriptions on Hold*
- *Management Reports Menu ...*
- *Medication Profile*
- *Monthly Drug Cost*
- *Narcotic Prescription List*
- *Non-Formulary List*
- *Non-VA Meds Usage Report*
- *Poly Pharmacy Report*
- *Prescription List for Drug Warnings*
- *Released and Unreleased Prescription Report*

### Action Profile (132 COLUMN PRINTOUT) [PSO ACTION PROFILE]

This option provides a list of a patient's active prescriptions, the expired and canceled prescriptions that may be renewed, and any Non-VA Med orders documented via the CPRS GUI application, and any remote prescriptions the patient may have are added to the end of the list as shown in the following report. Each prescription is followed by a place for the provider to

indicate the action, renew or discontinue. This profile can be printed for an individual patient, for all patients with appointments in a clinic, all patients in all clinics, or for a clinic group.

In addition, a polypharmacy report can be printed with the action/informational profile. To get this report, answer **Yes** to the “POLYPHARMACY W/ACTION PROFILE” prompt in the *Site Parameter Enter/Edit* option to turn on this site parameter. This profile can be printed in an 80- or 132-column format. The Action Profile must be sent to a printer.

Barcodes may not show up on the action profile if the site parameters have not been set up for them.

If a prescription is for a drug marked for lab monitoring, the most recent lab result will be printed.

Copay affects the output report for this option. The letters SC (service connected) and NSC (non-service connected) will print on the same line as the RENEW/MD line only if the Veteran is rated service connected less than 50% and the prescription is not a supply item. This allows the physician to indicate (circle) the correct Veteran eligibility so that the Veteran may be charged a copay for the prescription, if applicable.

This report now displays **\*\*BAD ADDRESS INDICATED\*\*** if the patient has a bad address indicator. Also, if a temporary address has no end date, the following text is now displayed: “(Temp address from XXX 99,9999 till (no end date))”.



If the prescription has been returned to stock, the letter (R ) will appear next to the last fill date.

### Example: Action Profile Report

```
Select Output Reports Option: action Profile (132 COLUMN PRINTOUT)
Action or Informational (A or I): A// I Informational
By Patient, Clinic or Clinic Group (P/C/G): P// <Enter> patient
Do you want this Profile to print in 80 column or 132 column: 132// <Enter>
Select PATIENT NAME: OPPATIENT,TEN  OPPATIENT,TEN          SC VETERAN

Profile Expiration/Discontinued Cutoff: (0-9999): 120// <Enter>
DEVICE: [Select Print Device]  GENERIC INCOMING TELNET

Informational Rx Profile                               Run Date: DEC 19,2012   Page: 1
Sorted by drug classification for Rx's currently active and for those Rx's that have been
inactive less than 120 days.                           Site: VAMC ZZANYTOWN (500)
-----
Outpatient prescriptions are discontinued 72 hours after admission.

Name   : AMATO,CHARLES
DOB    : 1942                Address  : SLDK SLDK SLDK
                                           LSDK LSDK LSDK
                                           SALT LAKE CITY, UTAH  84108
Phone  :

WEIGHT(Kg): 68.18 (12/12/2002)    HEIGHT(cm): 139.70 (12/12/2002)
CrCL: 55.2(est.) (CREAT:1.2mg/dL 11/17/99)    BSA: 1.55
DISABILITIES:

ALLERGIES: PENICILLIN, SOYBEANS, WHEAT,
```

ADVERSE REACTIONS:

Enter RETURN to continue or '^' to exit:

-----  
Medication/Supply Status Rx#  
Expiration Provider  
Date  
Classification: RE400 - MUCOLYTICS  
ACETYL CYSTEINE 20% 30ML Qty: 30 for 90 Days 501217  
Active  
12-19-2013 RXXXXXXXX, RXXXXXXXX  
Sig: 1 MOUTH TWICE A DAY  
Filled: 12-18-2012  
Remaining Refills: 3 Clinic: 10TH FLOOR  
Price: \$76.59

Press Return to Continue or '^' to Exit:

Informational Rx Profile Run Date: DEC 19, 2012 Page: 2  
Sorted by drug classification for Rx's currently active and for those Rx's that have been  
inactive less than 120 days. Site: VAMC ZZANYTOWN (500)

-----  
Outpatient prescriptions are discontinued 72 hours after admission.

Name : AMATO, CHARLES  
DOB : 1942 Address : SLDK SLDK SLDK  
LSDK LSDK LSDK  
SALT LAKE CITY, UTAH 84108  
Phone :

WEIGHT (Kg): (12/12/2002) HEIGHT (cm): (12/12/2002)

-----  
-----PENDING ORDERS-----  
-----

Drug: ACETAMINOPHEN 325MG TABLET  
Eff. Date: 03-20-2009 Qty: 180 Refills: 2 Prov: FOX, KIRK  
Sig: TAKE ONE TABLET BY MOUTH TWICE A DAY THESE ARE THE PATIENT  
INSTRUCTIONS FOR ACETAMINOPHEN FOR THE MARTINSBURG NOIS CALL WITH THE  
HELP OF JEANIE & SHIRLEY

Press Return to Continue or '^' to Exit:

Informational Rx Profile Run Date: DEC 19, 2012 Page: 3  
Sorted by drug classification for Rx's currently active and for those Rx's that have been  
inactive less than 120 days. Site: VAMC ZZANYTOWN (500)

-----  
Outpatient prescriptions are discontinued 72 hours after admission.

Name : AMATO, CHARLES  
DOB : 1942 Address : SLDK SLDK SLDK  
LSDK LSDK LSDK  
SALT LAKE CITY, UTAH 84108  
Phone :

WEIGHT (Kg): (12/12/2002) HEIGHT (cm): (12/12/2002)

-----  
-----PENDING ORDERS-----  
-----

Drug: DAPSONE 25MG TAB  
Eff. Date: 03-20-2009 Qty: 360 Refills: 0 Prov: FOX, KIRK  
Sig: TAKE TWO TABLETS BY MOUTH TWICE A DAY  
Press Return to Continue or '^' to Exit:

```

Informational Rx Profile                               Run Date: DEC 19,2012   Page: 4
Sorted by drug classification for Rx's currently active
and for those Rx's that have been inactive less than 120 days.   Site: VAMC
ZZANYTOWN (500)

```

-----  
Outpatient prescriptions are discontinued 72 hours after admission.

```

Name   : AMATO,CHARLES
DOB    : 1942
Address : SLDK SLDK SLDK
        LSDK LSDK LSDK
        SALT LAKE CITY, UTAH  84108
Phone  :

```

```

WEIGHT(Kg): (12/12/2002)      HEIGHT(cm): (12/12/2002)

```

-----PENDING ORDERS-----

```

Drug: ERYTHROMYCIN 250MG TAB
Eff. Date: 03-20-2009Qty: 180      Refills: 3   Prov: FOX,KIRK
Sig: TAKE ONE TABLET BY MOUTH TWICE A DAY
Press Return to Continue or "^" to Exit:

```

```

Informational Rx Profile                               Run Date: DEC 19,2012   Page: 5
Sorted by drug classification for Rx's currently active
and for those Rx's that have been inactive less than 120 days.   Site: VAMC
ZZANYTOWN (500)

```

-----  
Outpatient prescriptions are discontinued 72 hours after admission.

```

Name   : AMATO,CHARLES
DOB    : 1942
Address : SLDK SLDK SLDK
        LSDK LSDK LSDK
        SALT LAKE CITY, UTAH  84108
Phone  :

```

```

WEIGHT(Kg): (12/12/2002)      HEIGHT(cm): (12/12/2002)

```

-----PENDING ORDERS-----

### Example: Action Profile with the Polypharmacy Report

```

Select Outpatient Pharmacy Manager Option: Output Reports

Select Output Reports Option: Action Profile (132 COLUMN PRINTOUT)
Action or Informational (A or I): A// <Enter>   Action
Do you want generate a Polypharmacy report?: NO// YES
Minimum Number of Active Prescriptions: (1-100): 7// <Enter>
By Patient, Clinic or Clinic Group (P/C/G): P// ?

Enter 'P' to print by patient
'C' for printing by clinic
'G' for printing by clinic group
'E' to exit process

Select one of the following:

      P      Patient
      C      Clinic
      G      Clinic Group
      E      Exit

By Patient, Clinic or Clinic Group (P/C/G): P// G Clinic Group
Select Clinic Sort Group: WEST CLINIC
FOR DATE: 021007 (FEB 10, 2007)
Profile Expiration/Discontinued Cutoff: (0-9999): 120// <Enter>

```

```
Select a Printer: [Select Print Device]
DO YOU WANT YOUR OUTPUT QUEUED? NO// <Enter> (NO)

Select Clinic Sort Group: <Enter>
```

## Alpha Drug List and Synonyms [PSO ALPHA]

This report lists all drugs in alphabetical order by generic name. Any existing synonyms for each drug are listed in lowercase letters under the generic name.

## AMIS Report [PSO AMIS]

This report lists prescription statistics that are required by the VA Central Office. For a multidivisional site, the print device will report each division's statistics on a separate page with the grand totals on the last page. This report must be printed on a 132-column printer.



Month/day/year may be specified for a current month report, but only month and year can be specified for reports of past months.

## Bad Address Reporting Main Menu [PSO BAI REPORT]

The Bad Address Reporting Main Menu provides the following options:

- *Bad Address Suspended List*
- *List Prescriptions Not Mailed*

## Bad Address Suspended List [PSO BAI SUSPENDED]

This option identifies prescriptions for Veterans with either Bad Address Indicated, Do Not Mail, for Foreign Address, as well as no active temporary address, giving the user the opportunity to be proactive regarding prescriptions that when Printed or Pulled Early from Suspense, would be unable to be mailed.

### Example: Bad Address Suspended List Report

```
Select Output Reports Option: Bad Address Reporting Main Menu

Select Bad Address Reporting Main Menu Option: Bad Address Suspended List

This option shows unprinted suspended prescriptions for the following:

- BAD ADDRESS INDICATOR set in the PATIENT file (#2) and no active temporary address
- DO NOT MAIL set in the PHARMACY PATIENT file (#55)
- FOREIGN ADDRESS set in the PATIENT file (#2) and no active US temporary address
```



```

Select one of the following:

      B      Bad Address Indicator
      D      Do Not Mail
      F      Foreign
      A      All

Print for Bad Address Indicator/Do Not Mail/Foreign/All (B/D/F/A): A// <Enter> All

Ending suspense date: 08.15.07 (AUG 15, 2007)

      You are logged in under the ANYTOWN division.

Print only those Rx's suspended for this division? Yes// <Enter> YES
DEVICE: HOME// [Select Print Device]

```

**Example: Bad Address Suspended List Report (continued)**

```

Suspense BAI/DO NOT MAIL/FOREIGN ADDRESS report - division =ANYTOWN PAGE: 1
for suspense dates through AUG 15, 2007                                     B/D/F
-----
OPPATIENT,NINETYFIVE (00-6666)
AUG 13, 2007      Rx#: 100002466  AMOXICILLIN 250MG CAP                D

OPPATIENT,SEVEN (00-0175)
JUL 02, 2007      Rx#: 100002097  PLACEBO TAB                    B

NOTE: B=BAD ADDRESS INDICATOR  D=NO NOT MAIL  F=FOREIGN ADDRESS

End of Report.
Press Return to continue:

```

**List Prescriptions Not Mailed**  
**[PSO BAI NOT MAILED]**

This option provides a report of prescriptions with a routing of Mail that were not mailed due to a bad address.

**CMOP Controlled Substance Rx Dispense Report**  
**[PSO CMOP CS RX DISPENSE REPORT]**

This report provides a log of controlled substance prescriptions dispensed by a CMOP. This report can be sorted by release date or alphabetically by drug name. It displays the Release Date, Patient Name, Prescription Number, CMOP Status, and CMOP facility at which the prescription was filled. This report is designed to print on a 132-column printer and it is recommended that the printing be queued.

**Commonly Dispensed Drugs**  
**[PSO COMMON]**

This report lists the drugs with the greatest number of fills during a selected period of time. For multidivisional sites, the print device will report each division's statistics on a separate page.

## **Cost Analysis Reports**

### **[PSO COMMON]**

This menu contains twelve different reports of cost analysis using existing data. Data for these reports are already compiled, so they print relatively quickly.

### **Clinic Costs**

#### **[PSO CLINIC COSTS]**

This report contains data on all the prescriptions filled during the user specified period for a specific clinic or for clinics.

### **Division Costs by Drug**

#### **[PSO DIV COSTS BY DRUG]**

This report contains data on all prescriptions filled during a user specified period of time for one or more pharmacy divisions at a single site.

### **Drug Costs**

#### **[PSO DRUG COSTS]**

This report contains data on all prescriptions filled during a user specified time period for a specific drug or all drugs on file.

### **Drug Costs by Division**

#### **[PSO COST BY DIVISION]**

This report contains data on all prescriptions filled during a user specified period of time at a specific pharmacy division or for all pharmacy divisions.

### **Drug Costs by Division by Provider**

#### **[PSO COST DIVISION BY PROVIDER]**

This report contains drug costs during a user specified period of time sorted by division or divisions and within the division by provider.

### **Drug Costs by Provider**

#### **[PSO COST BY PROVIDER]**

This report contains data on all prescriptions filled during a specified period of time sorted by a drug or all drugs for each provider.

## **High Cost Rx Report**

### **[PSO HI COST]**

This report lists all prescriptions filled during the specified time period that cost more than the user specified dollar limit.

This option enables users to select any combination of available Outpatient pharmacy sites so that only information from those sites is included in the report. After specifying a Date Range and Dollar Limit, the new prompt “For RXs written at OUTPATIENT SITES(s): (Example 1,3 or 1-5)” displays. A list of active sites is retrieved from the OUTPATIENT SITE file and displays as a numbered list. The user can select one, some, or all sites to be included in the report. For example, a multi-divisional facility with five active outpatient sites could create the report for one site by typing the assigned site number (e.g., “3”), for multiple sites by typing the corresponding site numbers separated by a comma (e.g., “1,3,5”), or for all sites by typing the range “1-5.”

A new header, “Outpatient Site(s) Included in this Report,” is added to the top of the report. The header displays a list of the site(s) included in the report. This modification allows printing of the report for various divisions. However, the report does not show the division associated with individual prescriptions.

## **Patient Status Costs**

### **[PSO COST BY PATIENT STATUS]**

This report displays data on all prescriptions filled during a user specified period of time for a specific patient status.

## **Pharmacy Cost Statistics Menu**

### **[PSO COST STAT MENU]**

This menu contains options for pharmacy cost statistics data.

### **Pharmacy Statistics**

#### **[PSO COST STATISTICS]**

This report contains cost information and other statistics for all prescriptions filled during a user specified period of time.

### **Sort Statistics By Division**

#### **[PSO COST STATS BY DIVISION]**

This report sorted by division contains cost information and other statistics for all prescriptions filled during a user specified period of time.

## Provider by Drug Costs

### [PSO COST PROVIDER BY DRUG]

This report sorted by provider displays data on all prescriptions filled for each drug during a user specified period of time.

## Provider Costs

### [PSO COST PER PROVIDER]

This report displays the total prescription and cost data for prescriptions sorted by provider for a user specified period of time.

## Request Statistics

### [PSO REQ STATS]

This report displays the total number of requests for service, average cost for each request, and average number of fills per request for a user specified period of time.

## Daily AMIS Report

### [PSO DAILY AMIS]

This report contains Automated Management Information System (AMIS) data for a selected day, month, and quarter. Output includes daily, monthly, and quarter AMIS totals.

## Drug List By Synonym

### [PSO SYNONYM]

This report lists all active drugs in alphabetical order by synonym. The drug is listed once for each synonym.

## Free Text Dosage Report

### [PSO DOSAGE REPORT]

This report provides a list of drugs for prescriptions having a Dosage Ordered entry that is free text or a dosage that results in the calculation of the number of tablets. This report is designed to help identify all such entries so that sites can determine if these dosages should be added to the Local Possible Dosages in the DRUG file, which would make them selectable during the medication order entry process.

### Example: Free Text Dosage Report

Run Date: NOV 13,2006	Page 1	
Free Text Dosage Entry Report		
for the Period: APR 27,2006 to NOV 13,2006		
Drug	Free Text Entry	Count
Provider:Count		
-----		

ACETAMINOPHEN AND CODEINE 30MG (342) OPPROVIDER24,TWO:3	3 TABLETS	3
ALCOHOL PREP PADS (3718) OPPROVIDER13,TWO:2	1 PAD	2
OPPROVIDER13,TWO:1	PAD	1
AMINOPHYLLINE 500MG SUPP (3422) OPPROVIDER13,TWO:1	1 SUPPOSITORY (IES) 500MG	1
ASPIRIN BUFFERED 325MG TAB (280) OPPROVIDER24,TWO:2	1625MG	2
OPPROVIDER24,TWO:2	975MG	3
OPPROVIDER13,TWO:1		

## Inactive Drug List [PSO INACTIVE]

This report lists those drugs on file that have been inactivated.

VA FileMan sorts this report. If the user does not have VA FileMan experience, it is strongly recommended that the local IRMS staff be contacted before running this report.

## Internet Refill Report [PSO INTERNET REFILL REPORT]

This option generates a list of all Internet Refill prescriptions sorted by Patient, Date, or Result for one division or for all. This report can be printed in detail or summary format.

### Example: Internet Refill Report – Detailed report, sorted by patient

```
Select Output Reports Option: Internet Refill Report

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION:  ANYTOWN  500  ANYTOWN

ANOTHER ONE:  <Enter>

Beginning Date:  06.27.07 (JUN 27, 2007)

Ending Date:  08.16.07 (AUG 16, 2007)

Select one of the following:

      P      Patient
      D      Date
      R      Result

Sort by Patient/Date/Result (P/D/R):  R// Patient

Select one of the following:

      D      Detail
      S      Summary

Print Detail/Summary report (D/S):  S// Detail

Do you want this report to print in 80 or 132 column format:  80// <Enter>
```

DEVICE: HOME// **[Select Print Device]**

INTERNET REFILL REPORT BY PATIENT - Detail AUG 16,2007 15:29:56 PAGE: 1  
Not Filled - For date range JUN 27, 2007 through AUG 16, 2007 for ANYTOWN

Patient	Reason	Rx #	Date
OPPATIENT,ELEVEN (0359)		100002461	08/10/07
	Patient Died on AUG 10, 2007		
		100002461	08/21/07
	Total transactions for patient = 1		
OPPATIENT,NINETEEN (0000)		10064	07/26/07
	Cannot refill Rx # 10064 Rx is in DISCONTINUED status		
		100002419	07/20/07
	Cannot refill Rx # 100002419		
		100002421	08/02/07
	Cannot refill Rx # 100002421		
		100002422	08/03/07
	Cannot refill Rx # 100002422		
	Total transactions for patient = 4		
OPPATIENT,FOUR (0358)		10065	07/26/07
	Cannot refill Rx # 10065 Narcotic Drug		
	Total transactions for patient = 1		
OPPATIENT,ONE (0285)		100002435	07/30/07
	Cannot refill Rx # 100002435		
	Total transactions for patient = 1		
OPPATIENT,SEVEN (0117)		100002432	07/30/07
	Cannot refill Rx # 100002432		
	Total transactions for patient = 1		
OPPATIENT,TWO (0270)		100002424	07/26/07
	Cannot refill Rx # 100002424		
	Total transactions for patient = 1		

Total transactions for date range JUN 27, 2007 through AUG 16, 2007 = 9

Press Return to continue: **<Enter>**

\*\* END OF REPORT \*\*

### Example: Internet Refill Report – Summary report, sorted by patient

Select Output Reports Option: **Internet** Refill Report

You may select a single or multiple DIVISIONS,  
or enter ^ALL to select all DIVISIONS.

DIVISION: ANYTOWN 500 ANYTOWN

ANOTHER ONE: **<Enter>**

Beginning Date: **06.27.07** (JUN 27, 2007)

Ending Date: **08.16.07** (AUG 16, 2007)

Select one of the following:

P	Patient
D	Date
R	Result

Sort by Patient/Date/Result (P/D/R): R// **Patient**

```

Select one of the following:

      D      Detail
      S      Summary

Print Detail/Summary report (D/S): S// Summary
DEVICE: HOME// [Select Print Device]

INTERNET REFILL REPORT BY PATIENT - Summary  AUG 16,2007 15:30:26  PAGE: 1
For date range JUN 27, 2007 through AUG 16, 2007 for ANYTOWN

Patient                Filled      Not Filled      Total
-----
OPPATIENT,ELEVEN (0359)      0           1           1
OPPATIENT,NINETEEN (0000)    2           4           6
OPPATIENT,FOUR (0358)       0           1           1
OPPATIENT,ONE (0285)        1           1           2
SURPATIENT,EIGHTYFIVE (0356) 1           0           1
OPPATIENT,SEVEN (0117)      0           1           1
OPPATIENT,TWO (0270)       0           1           1

COUNT:                    4           9           13

Press Return to continue: <Enter>

** END OF REPORT **

```

**Example: Internet Refill Report – Detailed report, sorted by date**

```

Select Output Reports Option: Internet Refill Report

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION:  ANYTOWN 500  ANYTOWN

ANOTHER ONE: <Enter>

Beginning Date: 06.27.07 (JUN 27, 2007)

Ending Date: 08.16.07 (AUG 16, 2007)

Select one of the following:

      P      Patient
      D      Date
      R      Result

Sort by Patient/Date/Result (P/D/R): R// Date

Select one of the following:

      D      Detail
      S      Summary

Print Detail/Summary report (D/S): S// Detail

Do you want this report to print in 80 or 132 column format: 80// <Enter>

DEVICE: HOME// [Select Print Device]

INTERNET REFILL BY DATE - Detail      AUG 16,2007@15:30      PAGE: 1
Not Filled - For date range JUN 27, 2007 through AUG 16, 2007 for ANYTOWN

Patient                Rx #      Date
          Reason
-----
JUL 20, 2007
OPPATIENT,NINETEEN (0000)    100002419
          Cannot refill Rx # 100002419

```

```

Count: 1

JUL 26, 2007
OPPATIENT,TWO (0270)          100002424
                                Cannot refill Rx # 100002424
OPPATIENT,FOUR (0358)        10065
                                Cannot refill Rx # 10065 Narcotic Drug
OPPATIENT,NINETEEN (0000)    10064
                                Cannot refill Rx # 10064 Rx is in DISCONTINUED status
Count: 3

JUL 30, 2007
OPPATIENT,SEVEN (0117)       100002432
                                Cannot refill Rx # 100002432
OPPATIENT,ONE (0285)         100002435
                                Cannot refill Rx # 100002435
Count: 2

AUG 02, 2007

Press Return to continue, '^' to exit: <Enter>

INTERNET REFILL BY DATE - Detail      AUG 16,2007@15:30      PAGE: 2
Not Filled - For date range JUN 27, 2007 through AUG 16, 2007 for ANYTOWN

Patient              RX #          RESULT/REASON
-----
OPPATIENT,NINETEEN (0000)  100002421  Cannot refill Rx # 100002421
                                Cannot refill Rx # 100002421
Count: 1

AUG 03, 2007
OPPATIENT,NINETEEN (0000)  100002422  Cannot refill Rx # 100002422
                                Cannot refill Rx # 100002422
Count: 1

AUG 10, 2007
OPPATIENT,ELEVEN (0359)    100002461  Patient Died on AUG 10, 2007
Count: 1

Total transactions for date range JUN 27, 2007 through AUG 16, 2007 = 9

Press Return to continue: <Enter>

** END OF REPORT **

```

### Example: Internet Refill Report – Summary report, sorted by date

```

Select Output Reports Option: Internet Refill Report

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION:  ANYTOWN  500  ANYTOWN

ANOTHER ONE:

Beginning Date: 06.27.07 (JUN 27, 2007)
Ending Date: 08.16.07 (AUG 16, 2007)

Select one of the following:

P          Patient
D          Date
R          Result

Sort by Patient/Date/Result (P/D/R): R// Date

```



```

Select one of the following:

      D      Detail
      S      Summary

Print Detail/Summary report (D/S): S// Summary
DEVICE: HOME// [Select Print Device]

INTERNET REFILL BY DATE - Summary      AUG 16,2007@15:31      PAGE: 1
For date range JUN 27, 2007 through AUG 16, 2007 for ANYTOWN

Date Processed      Filled      Not Filled      Total
-----
JUN 28, 2007      1      0      1
JUL 17, 2007      1      0      1
JUL 20, 2007      0      1      1
JUL 23, 2007      1      0      1
JUL 26, 2007      0      3      3
JUL 30, 2007      0      2      2
AUG 02, 2007      0      1      1
AUG 03, 2007      0      1      1
AUG 10, 2007      0      1      1
AUG 15, 2007      1      0      1

COUNT:      4      9      13

Press Return to continue: <Enter>

** END OF REPORT **

```

**Example: Internet Refill Report – Detailed report, sorted by result**

```

Select Output Reports Option: Internet Refill Report

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION: ANYTOWN 500 ANYTOWN

ANOTHER ONE: <Enter>

Beginning Date: 06.27.07 (JUN 27, 2007)
Ending Date: 08.16.07 (AUG 16, 2007)

Select one of the following:

      P      Patient
      D      Date
      R      Result

Sort by Patient/Date/Result (P/D/R): R// Result

Select one of the following:

      D      Detail
      S      Summary

Print Detail/Summary report (D/S): S// Detail

Do you want this report to print in 80 or 132 column format: 80// <Enter>

DEVICE: HOME// [Select Print Device]

INTERNET REFILL REPORT BY RESULT - Detail      AUG 16,2007@15:31      PAGE: 1
Not Filled - For date range JUN 27, 2007 through AUG 16, 2007 for ANYTOWN

```

Patient	Reason	Rx #	Date
OPPATIENT,SEVEN (0117)	Cannot refill Rx # 100002432	100002432	07/30/07
OPPATIENT,TWO (0270)	Cannot refill Rx # 100002424	100002424	07/26/07
OPPATIENT,ONE (0285)	Cannot refill Rx # 100002435	100002435	07/30/07
OPPATIENT,FOUR (0358)	Cannot refill Rx # 10065 Narcotic Drug	10065	07/26/07
OPPATIENT,ELEVEN (0359)	Patient Died on AUG 10	100002461	08/10/07
OPPATIENT,NINETEEN (0000)	Cannot refill Rx # 10064 Rx is in DISCONTINUED status	10064	07/26/07
	Cannot refill Rx # 100002419	100002419	07/20/07
	Cannot refill Rx # 100002419	100002421	08/02/07
	Cannot refill Rx # 100002421	100002422	08/03/07
	Cannot refill Rx # 100002422		

Total transactions for date range JUN 27, 2007 through AUG 16, 2007 = 9

Press Return to continue: <Enter>

\*\* END OF REPORT \*\*

### Example: Internet Refill Report – Summary report, sorted by result

Select Output Reports Option: **Internet** Refill Report

You may select a single or multiple DIVISIONS,  
or enter ^ALL to select all DIVISIONS.

DIVISION: ANYTOWN 500 ANYTOWN

ANOTHER ONE: <Enter>

Beginning Date: **06.27.07** (JUN 27, 2007)

Ending Date: **08.16.07** (AUG 16, 2007)

Select one of the following:

P	Patient
D	Date
R	Result

Sort by Patient/Date/Result (P/D/R): R// **Result**

Select one of the following:

D	Detail
S	Summary

Print Detail/Summary report (D/S): S// **Summary**

DEVICE: HOME// **[Select Print Device]**

INTERNET REFILL REPORT BY RESULT - Summary AUG 16,2007@15:31 PAGE: 1  
For date range JUN 27, 2007 through AUG 16, 2007 for ANYTOWN

Result	Count
Filled	3
Not Filled	9
Total:	12

Press Return to continue: <Enter>

\*\* END OF REPORT \*\*

## List of Patients/Prescriptions for Recall Notice [PSO RECALL LIST]

This report lists prescriptions containing medications associated with specific recall criteria, such as lot numbers and/or National Drug Code (NDC) numbers.

This new option has been placed under the Output Reports [PSO OUTPUTS] menu and prompts the user for the following criteria:

- *Division*
- *Prescription Release Date Range*
- *Inclusion/Exclusion of Deceased Patients*
- *Medication Identifier*

One of the following four medication identifiers may be selected:

- 1-NDC code
- 2-Dispense Drug and Lot Number
- 3-Dispense Drug only
- 4-Drug Name (VA Generic or Orderable Item)

### Example: List of Patients/Prescriptions for Recall Notice – Input

```

Division: ^ALL
From Release Date: T-90// (OCT 30, 2009)
To Release Date: T// (JAN 28, 2010)

Exclude Deceased Patients? YES//
  Select one of the following:

      1          NDC
      2          DISPENSE DRUG AND LOT NUMBER
      3          DISPENSE DRUG
      4          DRUG NAME (VA GENERIC OR ORDERABLE ITEM)

Select 1-4 : 4  DRUG NAME (VA GENERIC OR ORDERABLE ITEM)

VA GENERIC DRUG: PREDNISONE

Dispense Drugs
-----
1 - PREDNISONE 1MG TAB
2 - PREDNISONE 5MG TAB
3 - PREDNISONE 20MG S.T.

Enter a list or range of numbers (1-3): 1-3

VA GENERIC DRUG:

```

```
** To avoid undesired wrapping of the output data, **
** please enter '0;256;999' at the 'DEVICE:' prompt. **
```

```
DEVICE: HOME// 0;256;999 GENERIC INCOMING TELNET
```

### Example: List of Patients/Prescriptions for Recall Notice – Input (continued)

```
Before continuing, please set up your terminal to capture the
detailed report data. On some terminals, this can be done by
clicking on the 'Tools' menu above, then click on 'Capture
Incoming Data' to save to Desktop. This report may take a
while to run.
```

The output of this report is in a delimited output format suitable for export to MS Excel and includes data from original prescription fills, refills, partial fills, and Consolidated Mail Outpatient Pharmacy (CMOP) fills. The report output is sorted primarily by patient name and secondarily by prescription number.

Each fill of the prescription is printed on a separate line preceded by a "HEADER" line containing patient demographic information. Each prescription detail line starts with a double backslash followed by an identifier to denote the type of fill (ORIGINAL, REFILL, PARTIAL, or CMOP).

### Example: List of Patients/Prescriptions for Recall Notice – Output

```
\\FILL TYPE\\RX #^DRUG NAME^PATIENT NAME^SSN^ADDRESS 1^ADDRESS 2^ADDRESS 3^CITY^
STATE^ZIP^PHONE (HOME)^PHONE (WORK)^PHONE (CELL)^DECEASED?^FILL #^ISSUE DATE^FIL
L DATE^RELEASED DATE/TIME^EXPIRATION DATE^LOT #^NDC^DIVISION^PHARMACIST^PROVIDER
^PATIENT STATUS^QTY^DAYS SUPPLY^# OF REFILLS^MAIL/WINDOW^CMOP?^PARTIAL REMARKS^T
RANSMISSION NUMBER^SEQUENCE #^CMOP NDC^DATE SHIPPED^CARRIER^PACKAGE ID^CMOP LOT
#^/*EOR*/
\\ORIGINAL^2059157^ASPIRIN 325MG EC TAB^PATIENT,NAME^123-45-6789^11 STREET
NAME^^^CITY^ARKANSAS^12345^(555) 555-5555^(999) 999-9999^^N^0^5/1/17^5/1/1
7^5/16/17 07:30:54^5/31/17^^00904-2013-80^ANYTOWN VAM&ROC (442)^NAME,REMOVED
^NAME,REMOVED^SC LESS THAN 50%^10^10^0^WINDOW^N^^^^^^/*EOR*/
\\ORIGINAL^2059230^ASPIRIN 325MG EC TAB^PATIENT,NAME^123-45-6789^123 STREET^^^SOME
CITY^CALIFORNIA^12345^(555) 555-5555^800-600-4567^^N^0^8/3/17
^8/3/17^8/3/17 14:01:07^8/4/18^123456789^00904-2013-80^ANYTOWN VAM&ROC (442)^NAME
REMOVED^SC LESS THAN 50%^30^30^5^MAIL^Y^^16567^1^00904201380^8/3/17 14:01
:07^USPS^PKGID999^A87904^/*EOR*/
```

### Example: Internet Refill Report – Summary report, sorted by patient

```
Select Output Reports Option: Internet Refill Report
```

```
You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.
```

```
DIVISION: ANYTOWN 500 ANYTOWN
```

```
ANOTHER ONE: <Enter>
```

```
Beginning Date: 06.27.07 (JUN 27, 2007)
```

```
Ending Date: 08.16.07 (AUG 16, 2007)
```

```
Select one of the following:
```

```

P      Patient
D      Date
R      Result

Sort by Patient/Date/Result (P/D/R): R// Patient

Select one of the following:

D      Detail
S      Summary

Print Detail/Summary report (D/S): S// Summary
DEVICE: HOME// [Select Print Device]

INTERNET REFILL REPORT BY PATIENT - Summary  AUG 16,2007 15:30:26  PAGE: 1
For date range JUN 27, 2007 through AUG 16, 2007 for ANYTOWN

Patient                               Filled      Not Filled      Total
-----
OPPATIENT,ELEVEN (0359)                0             1             1
OPPATIENT,NINETEEN (0000)              2             4             6
OPPATIENT,FOUR (0358)                  0             1             1
OPPATIENT,ONE (0285)                   1             1             2
SURPATIENT,EIGHTYFIVE (0356)           1             0             1
OPPATIENT,SEVEN (0117)                 0             1             1
OPPATIENT,TWO (0270)                  0             1             1
COUNT:                                4             9             13

Press Return to continue: <Enter>

** END OF REPORT **

```

**Example: Internet Refill Report – Detailed report, sorted by date**

```

Select Output Reports Option: Internet Refill Report

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION:  ANYTOWN 500  ANYTOWN

ANOTHER ONE: <Enter>

Beginning Date: 06.27.07 (JUN 27, 2007)
Ending Date: 08.16.07 (AUG 16, 2007)

Select one of the following:

P      Patient
D      Date
R      Result

Sort by Patient/Date/Result (P/D/R): R// Date

Select one of the following:

D      Detail
S      Summary

Print Detail/Summary report (D/S): S// Detail

Do you want this report to print in 80 or 132 column format: 80// <Enter>

DEVICE: HOME// [Select Print Device]

INTERNET REFILL BY DATE - Detail          AUG 16,2007@15:30          PAGE: 1
Not Filled - For date range JUN 27, 2007 through AUG 16, 2007 for ANYTOWN

```

```

Patient              Reason      Rx #      Date
-----
JUL 20, 2007
OPPATIENT,NINETEEN (0000)      100002419
                          Cannot refill Rx # 100002419
Count: 1

JUL 26, 2007
OPPATIENT,TWO (0270)      100002424
                          Cannot refill Rx # 100002424
OPPATIENT,FOUR (0358)      10065
                          Cannot refill Rx # 10065 Narcotic Drug
OPPATIENT,NINETEEN (0000)      10064
                          Cannot refill Rx # 10064 Rx is in DISCONTINUED status
Count: 3

JUL 30, 2007
OPPATIENT,SEVEN (0117)      100002432
                          Cannot refill Rx # 100002432
OPPATIENT,ONE (0285)      100002435
                          Cannot refill Rx # 100002435
Count: 2

AUG 02, 2007

Press Return to continue, '^' to exit: <Enter>

INTERNET REFILL BY DATE - Detail      AUG 16,2007@15:30      PAGE: 2
Not Filled - For date range JUN 27, 2007 through AUG 16, 2007 for ANYTOWN

Patient              RX #      RESULT/REASON
-----
OPPATIENT,NINETEEN (0000)      100002421  Cannot refill Rx # 100002421
                          Cannot refill Rx # 100002421
Count: 1

AUG 03, 2007
OPPATIENT,NINETEEN (0000)      100002422  Cannot refill Rx # 100002422
                          Cannot refill Rx # 100002422
Count: 1

AUG 10, 2007
OPPATIENT,ELEVEN (0359)      100002461  Patient Died on AUG 10, 2007
Count: 1

Total transactions for date range JUN 27, 2007 through AUG 16, 2007 = 9

Press Return to continue: <Enter>

** END OF REPORT **

```

**Example: Internet Refill Report – Summary report, sorted by date**

```

Select Output Reports Option: Internet Refill Report

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION:  ANYTOWN  500  ANYTOWN

ANOTHER ONE:

Beginning Date: 06.27.07 (JUN 27, 2007)

Ending Date: 08.16.07 (AUG 16, 2007)

```

```

Select one of the following:

      P      Patient
      D      Date
      R      Result

Sort by Patient/Date/Result (P/D/R): R// Date

Select one of the following:

      D      Detail
      S      Summary

Print Detail/Summary report (D/S): S// Summary
DEVICE: HOME// [Select Print Device]

INTERNET REFILL BY DATE - Summary      AUG 16,2007@15:31      PAGE: 1
For date range JUN 27, 2007 through AUG 16, 2007 for ANYTOWN

Date Processed      Filled      Not Filled      Total
-----
JUN 28, 2007      1      0      1
JUL 17, 2007      1      0      1
JUL 20, 2007      0      1      1
JUL 23, 2007      1      0      1
JUL 26, 2007      0      3      3
JUL 30, 2007      0      2      2
AUG 02, 2007      0      1      1
AUG 03, 2007      0      1      1
AUG 10, 2007      0      1      1
AUG 15, 2007      1      0      1

COUNT:      4      9      13

Press Return to continue: <Enter>

** END OF REPORT **

```

**Example: Internet Refill Report – Detailed report, sorted by result**

```

Select Output Reports Option: Internet Refill Report

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION: ANYTOWN 500 ANYTOWN

ANOTHER ONE: <Enter>

Beginning Date: 06.27.07 (JUN 27, 2007)
Ending Date: 08.16.07 (AUG 16, 2007)

Select one of the following:

      P      Patient
      D      Date
      R      Result

Sort by Patient/Date/Result (P/D/R): R// Result

Select one of the following:

      D      Detail
      S      Summary

Print Detail/Summary report (D/S): S// Detail

```

```

Do you want this report to print in 80 or 132 column format: 80// <Enter>
DEVICE: HOME// [Select Print Device]
INTERNET REFILL REPORT BY RESULT - Detail    AUG 16,2007@15:31    PAGE: 1
Not Filled - For date range JUN 27, 2007 through AUG 16, 2007 for ANYTOWN

Patient          Reason          Rx #          Date
-----
OPPATIENT,SEVEN (0117)      100002432    07/30/07
      Cannot refill Rx # 100002432
OPPATIENT,TWO (0270)       100002424    07/26/07
      Cannot refill Rx # 100002424
OPPATIENT,ONE (0285)       100002435    07/30/07
      Cannot refill Rx # 100002435
OPPATIENT,FOUR (0358)      10065        07/26/07
      Cannot refill Rx # 10065 Narcotic Drug
OPPATIENT,ELEVEN (0359)    100002461    08/10/07
      Patient Died on AUG 10
OPPATIENT,NINETEEN (0000)  10064        07/26/07
      Cannot refill Rx # 10064 Rx is in DISCONTINUED status
      100002419    07/20/07
      Cannot refill Rx # 100002419
      100002421    08/02/07
      Cannot refill Rx # 100002421
      100002422    08/03/07
      Cannot refill Rx # 100002422

Total transactions for date range JUN 27, 2007 through AUG 16, 2007 = 9
Press Return to continue: <Enter>
** END OF REPORT **

```

**Example: Internet Refill Report – Summary report, sorted by result**

```

Select Output Reports Option: Internet Refill Report

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION: ANYTOWN 500 ANYTOWN

ANOTHER ONE: <Enter>

Beginning Date: 06.27.07 (JUN 27, 2007)
Ending Date: 08.16.07 (AUG 16, 2007)

Select one of the following:

P          Patient
D          Date
R          Result

Sort by Patient/Date/Result (P/D/R): R// Result

Select one of the following:

D          Detail
S          Summary

```



```

Print Detail/Summary report (D/S): S// Summary
DEVICE: HOME// [Select Print Device]

INTERNET REFILL REPORT BY RESULT - Summary   AUG 16,2007@15:31   PAGE: 1
For date range JUN 27, 2007 through AUG 16, 2007 for ANYTOWN

Result                                     Count
-----
Filled                                     3
Not Filled                                 9

Total:                                     12

Press Return to continue: <Enter>

** END OF REPORT **


```

## List Prescriptions on Hold [PSO HOLDRPT]

This report lists prescriptions that have a hold status.

## Management Reports Menu [PSO MGMT REPORT MENU]

With this menu the user can compile data for daily or monthly management reports. When the data has been compiled, the reports can be viewed on screen (132 columns) or printed on a 132-column printer.

	<p><b>***Important***</b></p> <p>Before printing the first management report, the <i>Initialize Daily Compile</i> option must be run. This option compiles past management data for a user specified date range and then queues a job to run every morning at 1:00 a.m. to compile the previous day's data.</p>
---	---

This menu contains the following options:

- *Daily Management Report Menu*
- *Date Range Recompile Data*
- *Initialize Daily Compile*
- *Monthly Management Report Menu*
- *One Day Recompile Data*
- *Purge Data*

## Daily Management Report Menu [PSO MGMT REPORT DAILY MENU]

This menu contains the following options for printing the daily management reports:

- *All Reports*
- *Cost of Prescriptions*
- *Count of Prescriptions*
- *Intravenous Admixture*
- *Type of Prescriptions Filled*

### **All Reports**

#### **[PSO MGMT REPORTS ALL DAILY]**

This option prints all of the daily management reports for Outpatient Pharmacy that includes the Intravenous Admixture, Cost of Prescriptions, Prescription Count, and Type of Prescriptions Filled reports. They can be printed for a specific division or for all divisions if the site is multidivisional.

### **Cost of Prescriptions**

#### **[PSO MGMT REPORT RX COSTS]**

This report contains the average cost and total cost for staff prescriptions, fee prescriptions, all prescriptions, equivalent fills, methadone prescriptions (if a methadone program exists), and participating pharmacies prescriptions.

### **Count of Prescriptions**

#### **[PSO MGMT REPORT RX COUNTS]**

This report contains the total number of prescriptions filled during the specified month(s). It contains the patient category, number of equivalent fills, total prescriptions, total methadone prescriptions (if a methadone program exists), and patient requests.

### **Intravenous Admixture**

#### **[PSO MGMT REPORT IV]**

This report contains the total, average cost for piggybacks and syringes, L.V.P., T.P.N., and Chemotherapy used for outpatients only. A grand total for each month is also provided.

### **Type of Prescriptions Filled**

#### **[PSO MGMT REPORT TYPE OF RX]**

This report contains the total number of prescriptions filled by fee and staff physicians, new and refill prescriptions, prescriptions sent by mail or dispensed at the window, prescriptions filled by participating pharmacies, and investigation drug prescriptions.

## **Date Range Recompile Data** **[PSO MGMT RPT RANGE COMPILE]**

The management data for a user specified date range could be compiled/recompiled with this option. The data must be recompiled if prescription data has changed for prescriptions filled or refilled before today.

## **Initialize Daily Compile** **[PSO MGMT RPT DAILY COMPILE]**

This option queues a job to run every day at 1:00 a.m. to compile the previous day's management reports data. It also compiles the management data for a specific date range. When initializing the compiling of data prior to yesterday's date, the default date will be either today plus 1 at 1:00 a.m. (T+1@01:00) if the option has never been queued or the date and time this option has already been queued to run.

This option must be run to initialize the compiling of management report data before the management reports are printed.

## **Monthly Management Report Menu** **[PSO MGMT REPORT MONTHLY MENU]**

This menu contains options for printing the monthly management reports. The monthly management reports can be printed for previous months, but not the current month. The options are:

- *All Reports*
- *Cost of Prescriptions*
- *Count of Prescriptions*
- *Intravenous Admixture*
- *Type of Prescriptions Filled*

### **All Reports** **[PSO MGMT MONTHLY ALL REPORTS]**

Print all of the monthly management reports with this option. These reports include the Intravenous Admixture, Cost of Prescriptions, Count of Prescriptions, and Type of Prescriptions Filled reports.

### **Cost of Prescriptions** **[PSO MGMT MONTHLY RX COSTS]**

This report contains the average and total cost for staff prescriptions, fee prescriptions, all prescriptions, equivalent fills, methadone prescriptions (if a methadone program exists), and participating pharmacies prescriptions.

### **Count of Prescriptions**

#### **[PSO MGMT MONTHLY RX COUNTS]**

This report contains the total number of prescriptions filled during the specified month(s). It includes the patient category, number of equivalent fills, total prescriptions, total methadone (if methadone program exists), and patient requests.

### **Intravenous Admixture**

#### **[PSO MGMT MONTHLY IV]**

This report contains the total and average cost for piggybacks and syringes, L.V.P., T.P.N., and Chemotherapy, plus the grand total for each month.

### **Type of Prescriptions Filled**

#### **[PSO MGMT MONTHLY TYPE OF RX]**

This report contains the number of prescriptions filled by fee and staff physicians, new and refill prescriptions, prescriptions sent by mail or dispensed at the window, prescriptions filled by participating pharmacies, and investigational drug prescriptions.

### **One Day Recompile Data**

#### **[PSO MGMT REPORT MONTHLY MENU]**

The management data for a user specified day can be compiled/recompiled with this option.

### **Purge Data**

#### **[PSO MGMT DATA PURGE]**

Delete data from the OUTPATIENT PHARMACY MANAGEMENT DATA file with this option. The default starting date will always be the first date in the file.

### **Medication Profile**

#### **[PSO P]**

This report is the same as the “Medication Profile” described in “Chapter 15: Using the Medication Profile”.

### **Monthly Drug Cost**

#### **[PSO MONTHLYCOST]**

This report lists the monthly drug costs and can be printed for a selected drug or all drugs. This report must be printed on a 132-column printer.

## Narcotic Prescription List

### [PSO NARC]

This report lists the quantity, provider, fill date, patient, and patient ID for each prescription for narcotic drugs filled during the specified time period. This report must be printed on a 132-column printer.

## Non-Formulary List

### [PSO NONFORM]

This report lists all active drugs that have been designated as non-formulary. Non-formulary drugs are those that have not been approved for routine use by the Pharmacy and Therapeutics Committee of the medical center. These items can be dispensed under special circumstances when approved by the designated authority.

## Non-VA Meds Usage Report

### [PSO NON-VA MEDS USAGE REPORT]

This report lists the patient's Non-VA medical orders that are documented via the CPRS GUI package. The Patient Name, Order Status, Orderable Item, Date Documented, or Order Checks are the available sorting criteria for this report. (When sorting by Order Checks, the Non-VA Med orders with Order Checks will print before any Non-VA Med orders without Order Checks. When sorting by Status, the Active Non-VA Med orders will be displayed before the Inactive Non-VA Med orders.) It is an 80-column report available for printing to the screen or to a print device.

### Example: Non-VA Meds Usage Report

```
Select Outpatient Pharmacy Manager Option: OUTPut Reports

Select Output Reports Option: NON-VA Non-VA Meds Usage Report
FROM DATE DOCUMENTED: 11.08.03 (NOV 08, 2003)

TO DATE DOCUMENTED: 02.06.04 (FEB 06, 2004)

Enter the SORT field(s) for this Report:

    1 - PATIENT NAME
    2 - ORDERABLE ITEM
    3 - DATE DOCUMENTED
    4 - STATUS
    5 - ORDER CHECKS

Or any combination of the above, separated by comma,
as in these examples:
    2,1 - BY ORDERABLE ITEM, THEN BY PATIENT NAME
    5,1,4 - BY ORDER CHECKS, THEN BY PATIENT NAME, THEN BY STATUS

SORT BY: PATIENT NAME// 1

SORT BY PATIENT NAME

You may select a single or multiple PATIENTS,
or enter ^ALL to select all PATIENTS.
```

```

PATIENT: OPPATIENT3,ONE  OPPATIENT3,ONE      2-23-54
PATIENT: OPPATIENT18,ONE OPPATIENT18,ONE    1-11-70
PATIENT:

DEVICE: HOME// <Enter>

Non-VA Meds Usage Report                               Page: 1
Sorted by PATIENT NAME
Date Range: 10/29/2003 - 02/06/2004                   Run Date: Feb 06, 2004@13:51:08
-----
OPPATIENT3,ONE (ID:6789)                               Patient Phone #: 555-555-5555
  Non-VA Med: ACIVICIN
  Dispense Drug:                                       Dosage: 2 ML
  Schedule: 3-4 TIMES A DAY                           Med Route: INTRAMUSCULAR
  Status: ACTIVE                                       CPRS Order #: 12510
  Documented By: OPCLERK10,FOUR                       Documented Date: 11/06/2003
  Clinic: 161 - LAB                                   Start Date: 01/01/2003

Statement/Explanation: Medication prescribed by Non-VA provider. PATIENT WANTED
TO BUY FROM WALGREENS BECAUSE OF COPAY.

  Non-VA Med: IMIPRAMINE
  Dispense Drug: IMIPRAMINE 50MG TAB                   Dosage: 50MG
  Schedule: FOUR TIMES A DAY AFTER MEALS              Med Route: MOUTH
  & AT BEDTIME
  Status: DISCONTINUED on 12/20/2003                 CPRS Order #: 12514
  Documented By: OPCLERK16,FOUR                     Documented Date: 11/20/2003
  Clinic: 161 - LAB                                   Start Date: 11/01/2003

OPPATIENT18,ONE (ID: 6789)                             Patient Phone #:
  Non-VA Med: RANITIDINE
  Dispense Drug: RANITIDINE 150MG TAB                 Dosage: 300MG
  Schedule: EVERY OTHER DAY                           Med Route: MOUTH
  Status: ACTIVE                                       CPRS Order #: 12593
  Documented By: OPCLERK1,FOUR                       Documented Date: 12/18/2003
  Clinic: 285 - DIABETIC                             Start Date: 12/18/2003

Order Check #1: Duplicate drug class order: HISTAMINE ANTAGONISTS (NIZATIDINE
CAP,ORAL 150MG TAKE TWO CAPSULES EVERY MORNING AND TAKE TWO
CAPSULES EVERY EVENING WITH FOOD [ACTIVE])
  Override Reason: Doctor's Therapy
  Override Provider: OP PROVIDER21,TWO

Statement/Explanation: Non-VA medication not recommended by VA provider
=====
Total: 2 patients and 3 orders.

```



Non-VA Meds are automatically discontinued when a Date of Death has been entered for a patient. In the event a Date of Death is entered in-error and subsequently deleted, the Non-VA Meds will be automatically reinstated to an active status if they were active before they were discontinued.

## Poly Pharmacy Report [PSO POLY]

This report lists a patient or patients with a selected minimum amount of prescriptions within a selected number of days. The Non-VA Med orders are included in the amount of prescriptions and are displayed, after all of the medications distributed by the VA, on this report. Only active prescriptions show on this report. The class column of this report is the drug classification from the DRUG file.

## Released and Unreleased Prescription Report [PSO RELEASE REPORT]

This report lists released and unreleased prescriptions by date range. The start date default is the date the package is installed, and the end date default will be the current date.

PSO\*7\*391 modified [PSO RELEASE REPORT] to add CS as a selection to the input. The drug name and CS schedule was added to the output.

### Example: [PSO RELEASE REPORT] CS Selection and CS Schedule

```
Do you want ONLY Unreleased Prescriptions? NO//
Include (C)S Rx only, (N)on CS Rx only, or (B)oth (C/N/B): B// Controlled
Substances Rxs Only

Select controlled substance schedules

Select one of the following:

1          SCHEDULES I - II
2          SCHEDULES III - V
3          SCHEDULES I - V
Select Schedule(s): 3//
```

## Prescription List for Drug Warnings [PSO RX LIST]

This report lists all prescriptions that have been finished with a particular medication(s) within a given date range.

This new option has been placed under the Output Reports [PSO OUTPUTS] menu and uses a sort template PSO DRUG WARNINGS.

### Example: Prescription List for Drug Warnings – Input

```
** To avoid undesired wrapping of the output data, **
** please enter '0;256;999' at the 'DEVICE:' prompt. **

EXCLUDE DECEASED PATIENTS (Y/N) Y// ES
START WITH DIVISION: FIRST//
START WITH DRUG: FIRST//
* Previous selection: FINISH DATE/TIME from Oct 25,2009 to Oct
27,2009@24:00
START WITH FINISH DATE/TIME: Oct 25,2009// (OCT 25, 2009)
GO TO FINISH DATE/TIME: Oct 27,2009// (OCT 27, 2009)
DEVICE: GENERIC INCOMING TELNET

Before continuing, please set up your terminal to capture the
detailed report data. On some terminals, this can be done by
clicking on the 'Tools' menu above, then click on 'Capture
Incoming Data' to save to Desktop. This report may take a
while to run.

Press Return to Continue:
```

The output of this report is in a delimited output format suitable for export to MS Excel and includes data from original prescription fills, refills, partial fills, and Consolidated Mail Outpatient Pharmacy (CMOP) fills. The report output is sorted primarily by patient name and secondarily by prescription number.

Each fill of the prescription is printed on a separate line preceded by a "HEADER" line containing patient demographic information. Each prescription detail line starts with a double backslash followed by an identifier to denote the type of fill (ORIGINAL, REFILL, PARTIAL, or CMOP).

**Example: Prescription List for Drug Warnings – Output**

```

\\HEADER\^RX #^DRUG NAME^PATIENT^SSN^ADDRESS 1^ADDRESS 2^ADDRESS
3^CITY^STATE^ZIP^PHONE (HOME)^PHONE (WORK)^PHONE (CELL)^DECEASED?
\\ORIGINAL\^RX #^ISSUE DATE^FILL DATE^RELEASED DATE/TIME^EXPIRATION
DATE^LOT #^NDC^DIVISION^PHARMACIST^PROVIDER^RETURNED TO STOCK^PATIENT
STATUS^QTY PER DAY^# OF REFILLS^MAIL/WINDOW
\\REFILL\^RX #^REFILL DATE^RELEASED DATE/TIME^QTY PER DAY^LOT#^NDC^
DIVISION^RETURNED TO STOCK^PROVIDER^PHARMACIST NAME^MAIL/WINDOW
\\PARTIAL\^RX #^PARTIAL DATE^RELEASED DATE/TIME^NDC^LOT #^QTY PER DAY
^DIVISION^ RETURNED TO STOCK^PROVIDER^PHARMACIST NAME^FILLING PERSON^
REMARKS^MAIL/WINDOW
\\CMOP\^RX #^TRANSMISSION NUMBER^SEQUENCE #^NDC SENT^NDC RECEIVED^RX
INDICATOR^STATUS^CANCELLED DATE/TIME^CANCELLED REASON^RESUBMIT STATUS^
DATE SHIPPED^CARRIER^PACKAGE ID

\\HEADER\^301188^PREDNISONE 20MG S.T.^SURPAT,RODNEY^666000148^123
^^^TROY^NEW YORK^12180^^^N
\\ORIGINAL\^301188^9/25/07^9/25/07^9/25/07 15:10:33^9/25/08^^^TROY^
PHARNAM,DAVID^DOCNAM,SUZY^^SC LESS THAN 50%^2^11^W
\\REFILL\^301188^11/14/07^11/14/07 11:09:40^2^^^TROY^^PHARNAM,DAVID^
DOCNAM,SUZY^W
\\CMOP\^301188^179^1^11/18/07 10:22^11/18/07 11:17^2^TRANSMITTED^^^
11/19/07^^
\\HEADER\^100002832^PREDNISONE 20MG S.T.^TRPATNM,STEVE^ 666000187^12345
^^^TROY^NEW YORK^12180^518-555-4307^^^N
\\ORIGINAL\^100002832^2/8/10^2/8/10^2/8/10 15:16:51^2/9/11^^00009-0165-02
^EXT^TESTMAN,PHARM^TESTMAN,PROV^^SC LESS THAN 50%^1^11^W
\\PARTIAL\^100002832^2/8/10^2/8/10 15:16:51^^^1^EXT^TESTMAN,PHARM
^TESTMAN,PROV^^W

```



## Chapter 18: Using the Pharmacy Intervention Menu

---

This chapter describes the options in the *Pharmacy Intervention Menu*.

 This menu is locked with the PSORPH key.

### **Pharmacy Intervention Menu** [PSO INTERVENTION MENU]

The *Pharmacy Intervention Menu* option enables the user to enter, edit, print, delete, or view interventions in the APSP INTERVENTION file.

The following options are available on this menu:

- *Enter Pharmacy Intervention*
- *Edit Pharmacy Intervention*
- *Print Pharmacy Intervention*
- *Delete Intervention*
- *View Intervention*

### **Enter Pharmacy Intervention** [PSO INTERVENTION NEW ENTRY]

When it is necessary to interrupt the filling of a prescription to contact the provider in order to change, clarify, or cancel the prescription, use this option to add a new intervention entry into the APSP INTERVENTION file.

### **Edit Pharmacy Intervention** [PSO INTERVENTION EDIT]

Use this option to edit an already existing entry in the APSP INTERVENTION file.

### **Print Pharmacy Intervention** [PSO INTERVENTION PRINTOUT]

A captioned report of pharmacy interventions for a certain date range can be printed with this option. The report prints out on normal width paper and it can be queued to print at a later time.

The “subtotal” on this report represents the number of interventions for a specific type of intervention where the recommendation for the intervention was accepted. The “total” is the sum of all interventions in which the recommendation was accepted.

The “sub count” on this report is the number of interventions for a specific type of intervention over the specific date range. The “count” is the total number of all interventions over the specific date range.

## **Delete Intervention**

**[PSO INTERVENTION DELETE]**

This option can be used to delete an intervention from the APSP INTERVENTION file. An intervention can be deleted only on the same day that it was entered.

## **View Intervention**

**[PSO INTERVENTION VIEW]**

This option displays pharmacy interventions in a captioned format. More than one intervention can be viewed at a time.

# Chapter 19: Hazardous Medication Order Checks

Pharmacy Safety Updates patch PSO\*7\*524 enhances Outpatient Pharmacy by reporting Hazardous to Handle and Hazardous to Dispose medications as identified in the National Drug Files (NDF) system. This chapter describes the display of Hazardous Medication warning messages that appear prior to Allergy Order Checks, Clinical Reminder Order Checks (CROCs) and Enhanced Order Checks.

The following events will check if a medication is Hazardous per the National Drug files.

- New Order (NO)
- Finish (FN) a Pending Order
- Edit (ED) Order that creates a New order
- Verify (VF) a Non-Verified Order
- Renew (RN) an Order

## Example Hazardous Medication Warning - New Order (NO) Entry:

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

Eligibility:          SC%:
RX PATIENT STATUS: SC//
DRUG: NIZATIDINE
  Lookup: VA PRODUCT NAME
NIZATIDINE 150MG CAP TEST DRUG IV          GA301          TESTING CURRENT INVENTO
RY
          ...OK? Yes// (Yes)

-----
          ***** WARNING *****
          NIZATIDINE is hazardous to dispose. Please notify pharmacy staff
          and counsel patient to take the appropriate disposal precautions.
          -----

Press Return to continue:

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...
```

## Example Hazardous Medication Warning - Finishing (FN) Pending Order:

```
Pending OP Orders (ROUTINE) Apr 29, 2021@12:59:35          Page: 1 of 3
OUTPATIENT, ONE
PID: 000-22-1234          Ht (cm) : _____ (_____)
DOB: MAY 5, 1988 (32)    Wt (kg) : _____ (_____)
SEX: MALE
```

```

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

CPRS Order Checks:
  Patient has no allergy assessment.
  Overriding Provider: PROVIDER,OUTPATIENT

*(1) Orderable Item: WARFARIN TAB <DIN>
(2)      Drug: WARFARIN 2MG TABS <DIN>
(3)      *Dosage: 2 (MG)
          Verb: TAKE
          Dispense Units: 1
          Noun: TABLET
          *Route: ORAL (BY MOUTH)
          *Schedule: HS
+      Enter ?? for more actions
BY Bypass          DC Discontinue          FL Flag/Unflag
ED Edit           FN Finish
Select Item(s): Next Screen// FN Finish

-----
          ***** WARNING *****
          WARFARIN is hazardous to handle and dispose. Please notify
          pharmacy staff and counsel patient to take the appropriate handling and
          disposal precautions.
          -----

Press Return to continue:

Now doing allergy checks.  Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

```

**Example Hazardous Medication Warning - Edit (ED) that creates a New Order:**

```

OP Medications (ACTIVE)          Apr 29, 2021@14:24:02          Page: 1 of 3
OUTPATIENT,THREE
PID: 111-00-2222          Ht (cm) : _____ (_____)
DOB: DEC 11,1948 (72)          Wt (kg) : _____ (_____)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)          BSA (m2) : _____

          Rx #: 300450C
(1) *Orderable Item: FAMOTIDINE TAB *** (N/F) *** <DIN>
(2)      Drug: FAMOTIDINE 20MG TAB *** (N/F) *** <DIN>
          NDC:
(3)      *Dosage: 20 (MG)
          Verb: TAKE
          Dispense Units: 1
          Noun: TABLET
          *Route: ORAL (BY MOUTH)
          *Schedule: Q12H
          *Duration: 7D (DAYS)
(4) Pat Instructions:
+      Enter ?? for more actions
DC Discontinue          PR Partial          RL Release
ED Edit           RF Refill          RN Renew
Select Action: Next Screen// Select Action: Next Screen// ED Edit
Select fields by number: (1-19): 3

There are 2 Available Dosage(s) :
  1. 20MG
  2. 40MG

```

Select from list of Available Dosages (1-2), Enter Free Text Dose  
or Enter a Question Mark (?) to view list: 20MG// 2 40MG

You entered 40MG is this correct? Yes// YES  
VERB: TAKE// TAKE  
DISPENSE UNITS PER DOSE(TABLETS): 2// 2  
Dosage Ordered: 40MG

NOUN: TABLETS// TABLETS  
ROUTE: ORAL (BY MOUTH)// ORAL (BY MOUTH) BY MOUTH  
Schedule: Q12H//  
Now searching ADMINISTRATION SCHEDULE (#51.1) file...

1 Q12H Q12H EVERY 12 HOURS  
2 Q12H Q12H EVERY 12 HOURS  
CHOOSE 1-2: 1 Q12H Q12H EVERY 12 HOURS (EVERY 12 HOURS)  
LIMITED DURATION (IN MONTHS, WEEKS, DAYS, HOURS OR MINUTES): 7D// 7D (DAYS)  
CONJUNCTION:

Quantity has been changed from 14 to 28

Press Return to Continue:

-----  
**\*\*\*\*\* WARNING \*\*\*\*\***  
**FAMOTIDINE is hazardous to dispose. Please notify pharmacy staff  
and counsel patient to take the appropriate disposal precautions.**  
-----

Press Return to continue:

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

**New OP Order (ROUTINE)** Apr 29, 2021@14:26:46 Page: 1 of 2

OUTPATIENT,THREE  
PID: 111-00-2222 Ht (cm) : \_\_\_\_\_ (\_\_\_\_\_)  
DOB: DEC 11,1948 (72) Wt (kg) : \_\_\_\_\_ (\_\_\_\_\_)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2) : \_\_\_\_\_

Orderable Item: FAMOTIDINE TAB \*\*\* (N/F) \*\*\* <DIN>  
(1) Drug: FAMOTIDINE 20MG TAB \*\*\* (N/F) \*\*\* <DIN>  
(2) Patient Status: SC  
(3) Issue Date: APR 29,2021 (4) Fill Date: APR 29,2021  
(5) Dosage Ordered: 40 (MG)  
Verb: TAKE  
Dispense Units: 2  
Noun: TABLETS  
Route: ORAL (BY MOUTH)  
Schedule: Q12H  
\*Duration: 7D (DAYS)  
(6) Pat Instruction:  
+ This change will create a new prescription!  
AC Accept ED Edit  
Select Action: Next Screen// AC Accept

**Example Hazardous Medication Warning - Verify (VF) of a Non-Verified Order:**

```

OP Medications (NON-VERIFIED) Apr 29, 2021@14:58:32          Page: 1 of 3
OUTPATIENT,FOUR
PID: 100-22-1234                      Ht (cm) : _____ (_____)
DOB: MAY 5,1988 (32)                  Wt (kg) : _____ (_____)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)   BSA (m2) : _____

Rx #: 300514
(1) *Orderable Item: HYDROXYUREA CAP,ORAL
(2) Drug: HYDROXYUREA 500MG CAP
    NDC: 00003-0830-50
(3) *Dosage: 500 (MG)
    Verb: TAKE
    Dispense Units: 1
    Noun: CAPSULE
    *Route: ORAL (BY MOUTH)
    *Schedule: Q24H
    *Duration: 3D (DAYS)
(4)Pat Instructions:
+ Enter ?? for more actions
DC Discontinue      PR (Partial)          RL (Release)
ED Edit            RF (Refill)           RN (Renew)
Select Action: Next Screen// VF VF

RX: 300514          PATIENT: OUTPATIENT,FOUR (100-22-1234)

STATUS: Non-Verified
DRUG: HYDROXYUREA 500MG CAP
QTY: 3 3 DAY SUPPLY
SIG: TAKE ONE CAPSULE BY MOUTH EVERY 24 HOURS FOR 3 DAYS
LATEST: 04/29/2021 # OF REFILLS: 5 REMAINING: 5
ISSUED: 04/29/21 PROVIDER:
LOGGED: 04/29/21 CLINIC: NOT ON FILE
EXPIRES: 04/30/22 DIVISION: DIVISION (000)
CAP: SAFETY ROUTING: WINDOW
ENTRY BY: TECHNICIAN,PHARM VERIFIED BY:

EDIT: (Y/N/P): N//

Press return to continue:

OUTPATIENT,FOUR ID#:100-22-1234 RX#: 300514

RX # DRUG QTY ST DATE FILL REM SUP
-----NON-VERIFIED-----
300514 HYDROXYUREA 500MG CAP 3 N 04-29 04-29 5 3

Press Return to continue:

***** WARNING *****
HYDROXYUREA is hazardous to handle and dispose. Please notify
pharmacy staff and counsel patient to take the appropriate handling and
disposal precautions.

Press Return to continue:

```

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

**Example Hazardous Medication Warning - Renewing (RN) an Order:**

```

OP Medications (SUSPENDED)   Apr 29, 2021@13:07:19   Page: 1 of 3
OUTPATIENT, TWO
  PID: 111-22-1234                Ht (cm) : _____ (_____)
  DOB: MAY 1, 1989 (31)          Wt (kg) : _____ (_____)
  SEX: FEMALE
  CrCL: <Not Found> (CREAT: Not Found)   BSA (m2) : _____

      Rx #: 300503
(1) *Orderable Item: SPIRONOLACTONE TAB
(2)      Drug: SPIRONOLACTONE 25MG S.T. <DIN>
      NDC: 00005-3782-31
(3)      *Dosage: 25 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: TABLET
      *Route: ORAL (BY MOUTH)
      *Schedule: BID
      *Duration: 3D (DAYS)
(4) Pat Instructions:
+      Enter ?? for more actions
DC  Discontinue      PR  Partial      RL  Release
ED  Edit             RF  (Refill)    RN  Renew
Select Action: Next Screen// RN  Renew
FILL DATE: (APR 29, 2021-APR 30, 2022): TODAY// (APR 29, 2021)
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
Nature of Order: WRITTEN// W
WAS THE PATIENT COUNSELED: NO// NO

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

Now Renewing Rx # 300503   Drug: SPIRONOLACTONE 25MG S.T.

-----
          ***** WARNING *****
          SPIRONOLACTONE is hazardous to handle. Please notify pharmacy
          staff and counsel patient to take the appropriate handling
          precautions.
-----

Press Return to continue:

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

```

# Chapter 20: Allergy Order Checks

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This chapter describes the display of Allergy Order Checks functionality that appear prior to Clinical Reminder Order Checks (CROCs) and Enhanced Order Checks.

The following changes have been made to the existing allergy order checks:

1. In Backdoor Pharmacy, the system will require the pharmacist to complete an Intervention and enter their electronic signature code if the severity value equals 'Severe' before allowing the pharmacist to continue with the order. The intervention functionality will be similar to the Critical Drug-Drug Interactions in backdoor pharmacy today.



**Note:** Severity for an allergy can ONLY be entered for (O)bserved and NOT (H)istorical Allergy/Adverse Reactions. The user MUST HOLD the GMRA-ALLERGY VERIFY key and complete an observed reaction report to enter MECHANISM and SEVERITY for Observed Allergies/Adverse Reactions.

2. For allergies/adverse reactions with Severity of Mild, Moderate, or Not Entered, the system will continue the same as it does today with the option that allows the pharmacist to enter an intervention at their discretion.
3. All Allergies/adverse reactions are captured and stored with the order number in the ORDER CHECK INSTANCES file (#100.05), regardless of whether or not an intervention was entered. The information can be viewed from the prescription screen using the hidden action – DA DISPLAY DRUG ALLERGIES.
4. Remote/HDR allergy Signs/Symptoms are now displayed when doing Allergy/ADR Order Checks.
5. Modified Allergy/ADR Order Check to display actual Station Name in lieu of Local or Remote terminology.

## Examples of Allergy/Adverse Reaction Order Checks:

### Mild:

```
Now doing allergy checks. Please wait...
A Drug-Allergy Reaction exists for this medication and/or class!
Prospective Drug: ASPIRIN 81MG EC TAB
  Causative Agent: ASPIRIN (ANYTOWN - 01/14/16)
  Historical/Observed: OBSERVED
    Severity: MILD
    Ingredients: ASPIRIN
    Signs/Symptoms: DRY MOUTH, HIVES
    Drug Class: CN103 NON-OPIOID ANALGESICS

Provider Override Reason: N/A - Order Check Not Evaluated by Provider

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



**Moderate:**

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

Prospective Drug: MINOXIDIL 2.5MG TAB
Causative Agent: MINOXIDIL (ANYTOWN - 09/22/15)
Historical/Observed: OBSERVED
Severity: MODERATE
Ingredients: MINOXIDIL
Signs/Symptoms: HYPOTENSION
Drug Class: CV490 ANTIHYPERTENSIVES,OTHER

Provider Override Reason: N/A - Order Check Not Evaluated by Provider

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

**Historical-Severity Not Entered:**

```
Now doing allergy checks. Please wait...
A Drug-Allergy Reaction exists for this medication and/or class!
Prospective Drug: AMPICILLIN 250MG
Causative Agent: AMPICILLIN (ANYTOWN - 01/14/16)
Historical/Observed: HISTORICAL
Severity: Not Entered
Ingredients: AMPICILLIN
Signs/Symptoms: DRY MOUTH, HIVES
Drug Class: AM111 PENICILLINS,AMINO DERIVATIVES
Provider Override Reason: N/A - Order Check Not Evaluated by Provider
Do you want to Intervene? YES// NO
```

**Severe without Intervention:**

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

Prospective Drug: ACETAMINOPHEN 325MG TAB
Causative Agent: ACETAMINOPHEN/ ASPIRIN/ CAFFEINE (CHEYENNE VAMC -
02/09/15)
Historical/Observed: OBSERVED
Severity: SEVERE
Ingredients: ACETAMINOPHEN
Signs/Symptoms: DIARRHEA, NAUSEA AND VOMITING, RASH
Drug Class: CN103 NON-OPIOID ANALGESICS

Provider Override Reason: N/A - Order Check Not Evaluated by Provider

Do you want to Intervene? YES// n NO

With a SEVERE reaction, an intervention is required!
```



**Note:** “With a severe reaction, an intervention is required”

**Severe with Intervention:**

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

Prospective Drug: ACETAMINOPHEN 325MG TAB
Causative Agent: ACETAMINOPHEN/ ASPIRIN/ CAFFEINE (CHEYENNE VAMC -
02/09/15)
Historical/Observed: OBSERVED
Severity: SEVERE
Ingredients: ACETAMINOPHEN
Signs/Symptoms: DIARRHEA, NAUSEA AND VOMITING, RASH
```

```

Provider Override Reason: N/A - Order Check Not Evaluated by Provider

Do you want to Intervene? YES//

Enter your Current Signature Code:      SIGNATURE VERIFIED

Now creating Pharmacy Intervention
For ACETAMINOPHEN 325MG TAB

PROVIDER: pears  PEARSON,HOLLY      HP      192      SYSTEMS ANALYST
RECOMMENDATION: 8  NO CHANGE

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

```

### CPRS Allergy/Adverse Reaction Entry Process

From the Order tab, enter a new allergy using the Allergies Dialog:

Figure 10: Causative Agent Lookup

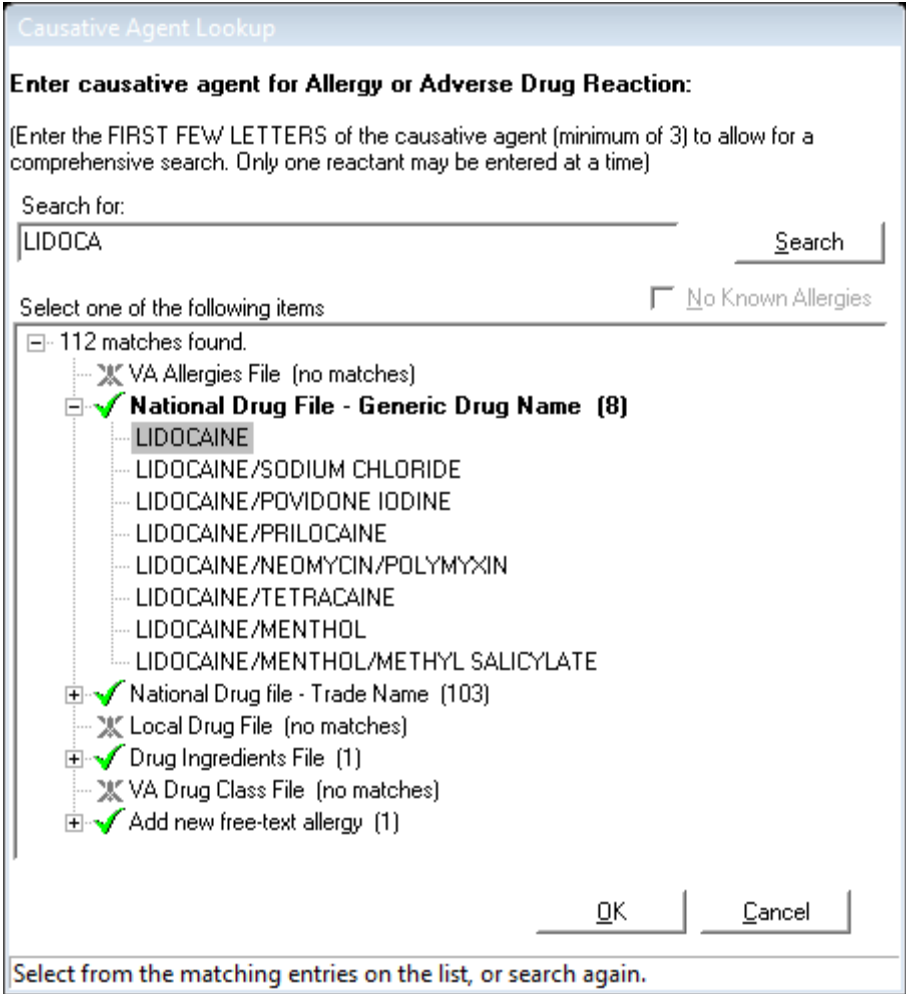


Figure 11: Example of Historical Allergy

Enter Allergy or Adverse Reaction

No Known Allergies

Active Allergies

Originator: Vo,Mai - SYSTEMS ANA

Observed  Historical

Causative agent: LIDOCAINE

Origination Date: Jan 15,2016@09:27

Nature of Reaction:

Signs/Symptoms:

Selected Symptoms:

Comments:

ANXIETY

ANXIETY

ITCHING, WATERING E

ANOREXIA

DROWSINESS

NAUSEA, VOMITING

DIARRHEA

HIVES

DRY MOUTH

DRY NOSE

RASH

NOW

Remove

ID Band Marked

OK Cancel

Figure 12: Example of Observed Allergy

## Vista Outpatient Allergy/Adverse Reaction Entry Process

### Observed Allergy example:

```

Patient Information      Jan 20, 2016@16:50:39      Page: 2 of 2
ROWPATNM,BOAT          <A>
  PID: 666-00-0363      Ht (cm) : _____ (_____)
  DOB: MAR 4,1950 (65)  Wt (kg) : _____ (_____)
  SEX: FEMALE
+
Non-Verified: PENICILLIN,
Remote:

Adverse Reactions
Verified: ASPIRIN,

Enter ?? for more actions
EA Enter/Edit Allergy/ADR Data      PU Patient Record Update
DD Detailed Allergy/ADR List        EX Exit Patient List
Select Action: Quit// EA Enter/Edit Allergy/ADR Data

REACTANT                VER.   MECH.   OBS/   TYPE
-----                -
PENICILLIN              NO     UNKNOWN OBS     DRUG
  
```

```

Reactions: RASH
ASPIRIN                                YES  PHARM  OBS  DRUG
Reactions: ANXIETY                      FOOD
CHOCOLATE                               AUTO  UNKNOWN HIST  DRUG
  (FLAVOR)                              FOOD
Reactions: ANXIETY

Enter Causative Agent: GENTAMICIN

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

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

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

  1  GENTAMICIN
  2  GENTAMICIN/PREDNISOLONE
  3  GENTAMICIN/SODIUM CHLORIDE
CHOOSE 1-3: 1  GENTAMICIN
GENTAMICIN  OK? Yes//  (Yes)

(O)bserved or (H)istorical Allergy/Adverse Reaction: O  OBSERVED
Select date reaction was OBSERVED (Time Optional): T-15  (JAN 05, 2016)  JAN 0
5, 2016  (JAN 05, 2016)
Are you adding 'JAN 05, 2016' as
a new ADVERSE REACTION REPORTING? No// Y  (Yes)

No signs/symptoms have been specified.  Please add some now.

The following are the top ten most common signs/symptoms:
  1. ANXIETY                                7. HIVES
  2. ITCHING,WATERING EYES                  8. DRY MOUTH
  3. ANOREXIA                               9. DRY NOSE
  4. DROWSINESS                             10. RASH
  5. NAUSEA,VOMITING                       11. OTHER SIGN/SYMPATOM
  6. DIARRHEA

Enter from the list above : 7,10
Date(Time Optional) of appearance of Sign/Symptom(s): Jan 05, 2016//  (JAN 05, 2
016)

The following is the list of reported signs/symptoms for this reaction:

Signs/Symptoms                                Date Observed
-----
  1  HIVES                                    Jan 05, 2016
  2  RASH                                    Jan 05, 2016

Select Action (A)DD, (D)ELETE OR <RET>:

Choose one of the following:

      A - ALLERGY
      P - PHARMACOLOGICAL
      U - UNKNOWN

MECHANISM: UNKNOWN// A  ALLERGY

COMMENTS:
  No existing text
  Edit? NO//

COMMENTS ARE REQUIRED.
Press RETURN to continue

Complete the observed reaction report? Yes//  (Yes)
DATE/TIME OF EVENT: MAR 7,2016// 1/5/2016  (JAN 05, 2016)  (JAN 05, 2016)
OBSERVER: SEBURN,CINDY// PEARSON,HOLLY  HP  192  BAY PINES TES
T LAB

```

```

SEVERITY: ?

MILD - Requires minimal therapeutic intervention such as
discontinuation of drug(s).
MODERATE - Requires active treatment of adverse reaction, or
further testing or evaluation to assess
extent of non-serious outcome (see SEVERE for
definition of serious).
SEVERE - Includes any serious outcome, resulting in life or organ
threatening situation or death, significant or permanent
disability, requiring intervention to prevent permanent
impairment or damage, or requiring/prolonging
hospitalization.

Choose from:
1 MILD
2 MODERATE
3 SEVERE
SEVERITY: 3 SEVERE
DATE MD NOTIFIED: Mar 7,2016// (MAR 07, 2016)

Complete the FDA data? Yes// N (No)

Enter another Causative Agent? YES// NO

Causative Agent Data edited this Session:
ADVERSE REACTION
-----
GENTAMICIN

Obs/Hist: OBSERVED
Obs d/t: Jan 05, 2016
Signs/Symptoms: HIVES (1/5/16)
RASH (1/5/16)

Causative Agent Data edited this Session:
ADVERSE REACTION
-----
GENTAMICIN

Obs/Hist: OBSERVED
Obs d/t: Jan 05, 2016
Signs/Symptoms: RASH (1/5/16)
URTICARIA (1/5/16)

ORIGINATOR
COMMENTS:
Date: Feb 26, 2016@10:52 User: PEARSON,HOLLY
Title: SYSTEMS ANALYST

This is a required comment

Is this correct? NO//

Is this correct? NO// YES
This session you have CHOSEN:
GENTAMICIN

```

**Historical Allergy example:**

```

Patient Information Jan 20, 2016@17:02:40 Page: 1 of 2
OPHEPPAT,ONE <A>
PID: 666-03-1990 Ht (cm) : _____ ( _____ )
DOB: MAR 19,1990 (25) Wt (kg) : _____ ( _____ )
SEX: MALE Non-VA Meds on File - Last entry on 08/04/15

Eligibility:
RX PATIENT STATUS: OTHER FEDERAL

```

Disabilities:

HOME PHONE:  
CELL PHONE:  
WORK PHONE:

Prescription Mail Delivery: Regular Mail

Allergies

Verified: METFORMIN, PENICILLIN, ASPIRIN,  
+ Enter ?? for more actions  
EA Enter/Edit Allergy/ADR Data PU Patient Record Update  
DD Detailed Allergy/ADR List EX Exit Patient List  
Select Action: Next Screen// ea Enter/Edit Allergy/ADR Data

REACTANT	VER.	MECH.	OBS/ HIST	TYPE
METFORMIN (METFORMIN HYDROCHLORIDE) Reactions: ANXIETY, HIVES, ITCHING, WATERING EYES	AUTO	ALLERGY	OBS	DRUG
OXYCODONE Reactions: COMA, SHORTNESS OF BREATH	NO	ALLERGY	OBS	DRUG
PENICILLIN Reactions: ANAPHYLAXIS, RASH, NAUSEA, VOMITING, BELCHING	AUTO	ALLERGY	OBS	DRUG
ASPIRIN Reactions: DIARRHEA, NAUSEA, VOMITING, HIVES	AUTO	ALLERGY	OBS	DRUG FOOD

Enter Causative Agent: Gentamicin

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

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

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

1 GENTAMICIN  
2 GENTAMICIN/PREDNISOLONE  
3 GENTAMICIN/SODIUM CHLORIDE  
CHOOSE 1-3: 1 GENTAMICIN  
GENTAMICIN OK? Yes// (Yes)

(O)bserved or (H)istorical Allergy/Adverse Reaction: h HISTORICAL

No signs/symptoms have been specified. Please add some now.

The following are the top ten most common signs/symptoms:

- |                           |                        |
|---------------------------|------------------------|
| 1. ANXIETY                | 7. HIVES               |
| 2. ITCHING, WATERING EYES | 8. DRY MOUTH           |
| 3. ANOREXIA               | 9. DRY NOSE            |
| 4. DROWSINESS             | 10. RASH               |
| 5. NAUSEA, VOMITING       | 11. OTHER SIGN/SYMPTOM |
| 6. DIARRHEA               |                        |

Enter from the list above : 7,10

Date(Time Optional) of appearance of Sign/Symptom(s): t (JAN 20, 2016)

The following is the list of reported signs/symptoms for this reaction:

Signs/Symptoms	Date Observed
1 HIVES	Jan 20, 2016
2 RASH	Jan 20, 2016

Select Action (A) DD, (D) ELETE OR <RET>:

COMMENTS:  
No existing text  
Edit? NO//  
Enter another Causative Agent? YES// n NO

Causative Agent Data edited this Session:  
ADVERSE REACTION

-----  
GENTAMICIN

Obs/Hist: HISTORICAL  
Signs/Symptoms: HIVES (1/20/16)  
RASH (1/20/16)

Is this correct? NO// y YES  
This session you have CHOSEN:  
GENTAMICIN



# Chapter 21: Clinical Reminder Order Checks

This chapter describes the display of Clinical Reminder Order Checks (CROCs) that appear prior to Enhanced Order Checks.

Order Checks now include the ability to view Clinical Reminders (prior to the display of Enhanced Drug-Drug interactions). Reminders are used to aid physicians in performing tasks to fulfill Clinical Practice Guidelines and periodic procedures or education as needed for veteran patients.

Clinical Reminder Order Checks will have a severity of low, medium, or high. CROCs with a severity of high require an intervention to be entered. An intervention is optional for a severity of low and medium.

Only the CPRS orderable item and drug level CROCs are displayed through the Pharmacy Backdoor.

```
Now processing Clinical Reminder Order Checks. Please wait ...
=====
*** Clinical Reminder Order Check | Severity: MEDIUM ***

Known or Potential Teratogen (FDA Cat. D or Cat. C w/other data)

Use during pregnancy increases or may increase the risk for birth
defects or other adverse pregnancy outcomes (see REPROTOX).

1) Pregnancy status should be determined.

2) Discuss the risks and benefits of medication treatment for a mother
and fetus and the risks of untreated disease. Potential treatment
benefits may warrant use during pregnancy despite risks.
3) Provide contraceptive counseling and encourage effective
contraception for patients who are not trying to conceive.
4) Such counseling must be documented in the medical record by the
prescriber.

*****
The 'Teratogenic Medications' Order Check will display for
female patients between the ages of 10 and 52, except those
with a known exclusion criterion (e.g., hysterectomy),
or those with a documented tubal ligation that
is more recent than a documented tubal reanastomosis.

-----
Do you want to Intervene? N// O
```



**Note:** You will be automatically prompted for SIGNATURE if a Clinical reminder is HIGH.

## Chapter 22: Processing Order Checks

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This chapter describes the option used for processing drug interactions.

### Process Order Checks

#### [PSO ORDER CHECKS VERIFY]

This option can be used for processing order checks. This allows prescriptions with drug/drug interactions or a Dosing order check warning to be processed, deleted, or bypassed. An assigned signature code, which will not appear on the screen, must be entered to complete any of these actions. The pharmacist will then be given the option to Verify, Delete, Quit the process, or leave the prescription in a Non-Verified status. The *Electronic Signature Code Edit* option can be found under the *User's Toolbox* menu in Kernel V. 8.0.



When processing a drug/drug interaction or Dosing order check warning, the profile will list the status of the interacting drug orders to be processed as non-verified (N).

This section describes the Drug-Drug Interaction enhancements made to the Outpatient Pharmacy application included in PSO\*7\*251 and the Maximum Single Dose Check enhancement made in PSO\*7\*372.

The Duplicate Drug order check will continue to be performed against active, pending, non-verified, orders on hold (initiated through pharmacy or CPRS), expired, and discontinued orders. The timeframe for inclusion of expired and discontinued orders is determined by the display rules on the medication profile. This check will be performed on active Non-VA Medication orders.

Legacy VistA drug-drug interactions have been enhanced to utilize FDB's DIF business rules, APIs, and database to provide more clinically relevant drug interaction information. No changes have been made to the existing user actions for critical or significant drug interactions. The pharmacist will have to log an intervention for local, pending, and remote critical interactions and have the option of logging an intervention for local and remote significant interactions. No action is required for Non-VA medications orders.

Any remote Outpatient order (from another VAMC or Department of Defense (DoD) facility) using data from Health Data Repository Historical (HDR-Hx) or Health Data Repository-Interim Messaging Solution (HDR-IMS) that has been expired for 30 days or less will be included in the list of medications to be checked.

FDB custom drug interaction tables will be used to store custom changes to FDB standard reference drug interaction tables. FDB drug interactions that have a severity level of '1' will be displayed as critical in VistA. All FDB drug interactions that have a severity level of '2' will be displayed as significant in VistA.

The following Outpatient Pharmacy order entry processes have been enhanced:

- Entering a new order via backdoor pharmacy options
- Finishing a pending order
- Renewing an order
- Editing an order that results in a new order being created.
- Verifying an order
- Copying an order
- Reinstating a discontinued order

If a dispense drug is associated with an active Non-VA med order, that dispense drug will be used for the drug interaction order check.

If no dispense drug is associated with an active Non-VA med order, the first active dispense drug marked for Non-VA med use associated with the orderable item will be used for the Drug Interaction order check.

If there are no active dispense drugs marked for Non-VA med use that are associated with the orderable item, then the first active dispense drug marked for Outpatient use associated with the Orderable Item will be used.

If there are no active dispense drugs marked for Outpatient use associated with the orderable item, the first active dispense drugs associated with the orderable item will be used.

If there are no active dispense drugs associated with the orderable item for the Non-VA med order, no Drug Interaction order check will be performed.

Drug interaction order checks will be performed against pending orders.

The software will display to a non-pharmacist (does not hold PSORPH key) when entering a new order via pharmacy backdoor options or when finishing an order entered through CPRS the same drug interaction warning information as shown to a pharmacist.

See examples below:

#### **Critical Drug Interaction with Local Rx**

```
***CRITICAL*** Drug Interaction with Prospective Drug:
                    INDINAVIR 400MG CAP and

Local Rx#: 2443
Drug: AMIODARONE 200MG TAB (ACTIVE)
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY
Processing Status: Released locally on 11/08/06@08:55:32 (Window)
Last Filled On: 11/08/06

The concurrent administration of amiodarone with indinavir, (1) nelfinavir, (2)
ritonavir, (3) or tipranavir coadministered with ritonavir(4) may result in increased
levels, clinical effects, and toxicity of amiodarone.
```

### Significant Drug Interaction with Local Rx

```
***SIGNIFICANT*** Drug Interaction with Prospective Drug:
                    WARFARIN 5MG TAB and

Local RX#: 2443
Drug: ASPIRIN 325MG TAB (ACTIVE)
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY
Processing Status: Released locally on 1/08/06@08:55:32 (Window)
Last Filled On: 11/08/06

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

### Significant Drug Interaction with Remote Rx

```
*** Significant*** Drug Interaction with Prospective Drug:
                    WARFARIN 5MG TAB and

LOCATION: <VA or DOD facility> Remote RX#: 10950021
Drug: ASPIRIN 325MG EC TAB (ACTIVE)
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
Last Filled On: 11/08/06

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

### Critical Drug Interaction with Remote Rx

```
***CRITICAL*** Drug Interaction with Prospective Drug:
                    INDINAVIR 400MG CAP and

LOCATION: <VA or DOD Facility> Remote Rx#: 2443
Drug: AMIODARONE 200MG TAB (ACTIVE)
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY
Last Filled On: 11/08/06

The concurrent administration of amiodarone with indinavir, (1) nelfinavir, (2)
ritonavir, (3) or tipranavir coadministered with ritonavir(4) may result in increased
levels, clinical effects, and toxicity of amiodarone.
```

### Critical Drug Interaction with Non-VA Med Order

```
***Critical*** Drug Interaction with Prospective Drug:
                    WARFARIN 5MG TAB and

Non-VA Med: CIMETIDINE 200MG TAB
Dosage: ONE TABLET Schedule: AT BEDTIME

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

### Significant Drug Interaction with Non-VA Med Order

```
***Significant*** Drug Interaction with Prospective Drug:
                    WARFARIN 5MG TAB and

Non-VA Med: ASPIRIN 325MG TAB
Dosage: ONE TABLET Schedule: <NOT ENTERED>

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

### Critical Drug Interaction with Pending Order

```
***CRITICAL*** Drug Interaction with Prospective Drug:
                    INDINAVIR 400MG CAP and

Pending Drug: AMIODARONE 200MG TAB
SIG: TAKE ONE TABLET EVERY 8 HOURS
```

The concurrent administration of amiodarone with indinavir, (1) nelfinavir, (2) ritonavir, (3) or tipranavir coadministered with ritonavir (4) may result in increased levels, clinical effects, and toxicity of amiodarone.

### Significant Drug Interaction with Pending Order

```
***SIGNIFICANT*** Drug Interaction with Prospective Drug:
                    WARFARIN 5MG TAB and

Pending Drug: ASPIRIN 325MG TAB

                    SIG: TAKE ONE TABLET EVERY 8 HOURS

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

## Clinic Orders

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

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

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

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

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

### Unit Dose Clinic Order Check Example:

```
Now Processing Enhanced Order Checks! Please wait...

***CRITICAL*** Drug Interaction with Prospective Drug:
                    CIMETIDINE 300 MG and

Clinic Order: PHENYTOIN 100MG CAP (DISCONTINUED)
```

Schedule: Q8H  
Dosage: 100MG  
Start Date: FEB 27, 2012@13:00  
Stop Date: FEB 28, 2012@15:22:27

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

#### IV Clinic Order Check Example:

```
***CRITICAL*** Drug Interaction with Prospective Drug:
WARFARIN 2MG TAB and

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

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

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

#### Unit Dose Clinic Order Check Example:

```
*** THERAPEUTIC DUPLICATION(S) *** POTASSIUM CHLORIDE 30 MEQ with

Clinic Order: POTASSIUM CHLORIDE 10MEQ TAB (PENDING)
Schedule: BID
Dosage: 20MEQ
Requested Start Date: NOV 20, 2012@17:00
Stop Date: *****

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

#### IV Order Check Example:

```
*** THERAPEUTIC DUPLICATION(S) *** CEFAZOLIN 1 GM with

Clinic Order: CEFAZOLIN 2 GM (PENDING)
Solution(s): 5% DEXTROSE 50 ML
Order Date: NOV 20, 2012@11:01
Start Date: *****
Stop Date: *****

Clinic Order: CEFAZOLIN SOD 1GM INJ (EXPIRED)
Solution(s): 5% DEXTROSE 50 ML
Start Date: OCT 24, 2012@16:44
Stop Date: OCT 25, 2012@24:00

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

The FDB standard professional drug interaction monograph is shown below:

This information is generalized and not intended as specific medical advice. Consult your healthcare professional before taking or discontinuing any drug or commencing any course of treatment.

**MONOGRAPH TITLE:** Anticoagulants/Salicylates

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

**MECHANISM OF ACTION:** Multiple processes are involved: 1) Salicylate doses greater than 3 gm daily decrease plasma prothrombin levels. 2) Salicylates may also displace anticoagulants from plasma protein binding sites. 3) Salicylates impair platelet function, resulting in prolonged bleeding time. 4) Salicylates may cause gastrointestinal bleeding due to irritation.

**CLINICAL EFFECTS:** The concurrent use of anticoagulants and salicylates may result in increased INR values and increase the risk of bleeding.

**PREDISPOSING FACTORS:** None determined.

**PATIENT MANAGEMENT:** Avoid concomitant administration of these drugs. If salicylate use is necessary, monitor prothrombin time, bleeding time, or INR values closely. When possible, the administration of a non-aspirin salicylate would be preferable.

**DISCUSSION:** This interaction has been reported between aspirin and warfarin and between aspirin and dicumarol. Diflunisal, sodium salicylate, and topical methyl salicylate have been shown to interact with anticoagulants as well. Based on the proposed mechanisms, other salicylates would be expected to interact with anticoagulants as well. The time of highest risk for a coumarin-type drug interaction is when the precipitant drug is initiated, altered, or discontinued.

**REFERENCES:**

- 1.Quick AJ, Clesceri L. Influence of acetylsalicylic acid and salicylamide on the coagulation of blood. J Pharmacol Exp Ther 1960;128:95-8.
  - 2.Watson RM, Pierson RN, Jr. Effect of anticoagulant therapy upon aspirin-induced gastrointestinal bleeding. Circulation 1961 Sep;24:613-6.
  - 3.Barrow MV, Quick DT, Cunningham RW. Salicylate hypoprothrombinemia in rheumatoid arthritis with liver disease. Report of two cases. Arch Intern Med 1967 Nov;120(5):620-4.
  - 4.Weiss HJ, Aledort LM, Kochwa S. The effect of salicylates on the hemostatic properties of platelets in man. J Clin Invest 1968 Sep; 47(9):2169-80.
  - 5.Udall JA. Drug interference with warfarin therapy. Clin Med 1970 Aug; 77:20-5.
  - 6.Fausa O. Salicylate-induced hypoprothrombinemia. A report of four cases. Acta Med Scand 1970 Nov;188(5):403-8.
  - 7.Zucker MB, Peterson J. Effect of acetylsalicylic acid, other nonsteroidal anti-inflammatory agents, and dipyridamole on human blood platelets. J Lab Clin Med 1970 Jul;76(1):66-75.
  - 8.O'Reilly RA, Sahud MA, Aggeler PM. Impact of aspirin and chlorthalidone on the pharmacodynamics of oral anticoagulant drugs in man. Ann N Y Acad Sci 1971 Jul 6;179:173-86.
  - 9.Dale J, Myhre E, Loew D. Bleeding during acetylsalicylic acid and anticoagulant therapy in patients with reduced platelet reactivity after aortic valve replacement. Am Heart J 1980 Jun;99(6):746-52.
  - 10.Donaldson DR, Sreeharan N, Crow MJ, Rajah SM. Assessment of the interaction of warfarin with aspirin and dipyridamole. Thromb Haemost 1982 Feb 26;47(1):77.
  - 11.Chesebro JH, Fuster V, Elveback LR, McGoan DC, Pluth JR, Puga FJ, Wallace RB, Danielson GK, Orszulak TA, Piehler JM, Schaff HV. Trial of combined warfarin plus dipyridamole or aspirin therapy in prosthetic heart valve replacement: danger of aspirin compared with dipyridamole. Am J Cardiol 1983 May 15;51(9):1537-41.
  - 12.Chow WH, Cheung KL, Ling HM, See T. Potentiation of warfarin anticoagulation by topical methylsalicylate ointment. J R Soc Med 1989 Aug;82(8):501-2.
  - 13.Meade TW, Roderick PJ, Brennan PJ, Wilkes HC, Kelleher CC. Extra-cranial bleeding and other symptoms due to low dose aspirin and low intensity oral anticoagulation. Thromb Haemost 1992 Jul 6;68(1):1-6.
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Following the drug interaction monograph prompts, when a critical or significant drug interaction is generated with a local, pending, or remote medication order, users not holding a PSORPH key shall be presented with the next prompt in the current order entry dialog. They will not be shown any intervention prompts or dialog.

Following the drug interaction monograph prompts, when a significant drug interaction is generated with a local, pending, or remote medication order, the user will be presented with ‘Do you want to intervene?’ prompt for the following processes:

- New order entry via backdoor pharmacy options
- Finishing a pending order
- Renewing an order
- Copying an order
- Editing an order which results in creation of a new order
- Verifying an order
- Reinstating an order

### Critical Drug Interaction with Local Rx – No Monograph –Backdoor New Order Entry

```
***CRITICAL*** Drug Interaction with Prospective Drug:
                    INDINAVIR 400MG CAP and

Local RX#: 2443
Drug: AMIODARONE 200MG TAB (ACTIVE)
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY
Processing Status: Released locally on 11/08/06@08:55:32 (Window)
Last Filled On: 11/08/06

The concurrent administration of amiodarone with indinavir, (1) nelfinavir, (2)
ritonavir, (3) or tipranavir coadministered with ritonavir(4) may result in increased
levels, clinical effects, and toxicity of amiodarone.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// n NO
RX DELETED

Or

Do you want to Continue? Y// ES

Do you want to Process medication
INDINAVIR 400MG CAP: P// ROCESS

Enter your Current Signature Code: SIGNATURE VERIFIED
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention
for INDINAVIR 400MG CAP

PROVIDER: OPPROVIDER, ONE
RECOMMENDATION: NO CHANGE

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

Would you like to edit this intervention ? N// O
VERB: TAKE
There are 2 Available Dosage(s) :
    1. 400MG
    2. 800MG

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 400MG
```



You entered 400MG is this correct? Yes// YES  
VERB: TAKE  
DISPENSE UNITS PER DOSE(CAPSULE): 1// 1  
Dosage Ordered: 400MG  
  
NOUN: CAPSULE  
ROUTE: ORAL// ORAL

### Significant Drug Interaction with Local Rx – With Monograph – Backdoor New Order Entry

\*\*\* Significant \*\*\* Drug Interaction with Prospective Drug:  
WARFARIN 5MG TAB and

Local RX#: 2411  
Drug: ASPIRIN 325MG EC TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
Processing Status: Released locally on 11/08/06@08:55:32 (Window)  
Last Filled On: 11/08/06

\*\*\* REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// Yes

Device: Home// <Home would print to screen, or a specific device could be specified>

Professional Monograph  
Drug Interaction with WARFARIN and ASPIRIN

This information is generalized and not intended as specific medical advice. Consult your healthcare professional before taking or discontinuing any drug or commencing any course of treatment.

MONOGRAPH TITLE: Anticoagulants/Salicylates

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

MECHANISM OF ACTION: Multiple processes are involved: 1) Salicylate doses greater than 3 gm daily decrease plasma prothrombin levels. 2) Salicylates may also displace anticoagulants from plasma protein binding sites. 3) Salicylates impair platelet function, resulting in prolonged bleeding time. 4) Salicylates may cause gastrointestinal bleeding due to irritation.

CLINICAL EFFECTS: The concurrent use of anticoagulants and salicylates may result in increased INR values and increase the risk of bleeding.

PREDISPOSING FACTORS: None determined.

PATIENT MANAGEMENT: Avoid concomitant administration of these drugs. If salicylate use is necessary, monitor prothrombin time, bleeding time, or INR values closely. When possible, the administration of a non-aspirin salicylate would be preferable.

DISCUSSION: This interaction has been reported between aspirin and warfarin and between aspirin and dicumarol. Diflunisal, sodium salicylate, and topical methyl salicylate have been shown to interact with anticoagulants as well. Based on the proposed mechanisms, other salicylates would be expected to interact with anticoagulants as well. The time of highest risk for a coumarin-type drug interaction is when the precipitant drug is initiated, altered, or discontinued.

REFERENCES:

- 1.Quick AJ, Clesceri L. Influence of acetylsalicylic acid and salicylamide on the coagulation of blood. J Pharmacol Exp Ther 1960;128:95-8.
- 2.Watson RM, Pierson RN, Jr. Effect of anticoagulant therapy upon aspirin-induced gastrointestinal bleeding. Circulation 1961 Sep;24:613-6.
- 3.Barrow MV, Quick DT, Cunningham RW. Salicylate hypoprothrombinemia in rheumatoid arthritis with liver disease. Report of two cases. Arch Intern Med 1967 Nov;120(5):620-4.
- 4.Weiss HJ, Aledort LM, Kochwa S. The effect of salicylates on the hemostatic properties of platelets in man. J Clin Invest 1968 Sep; 47(9):2169-80.
- 5.Udall JA. Drug interference with warfarin therapy. Clin Med 1970 Aug; 77:20-5.

6.Fausa O. Salicylate-induced hypoprothrombinemia. A report of four cases. Acta Med Scand 1970 Nov;188(5):403-8.

7.Zucker MB, Peterson J. Effect of acetylsalicylic acid, other nonsteroidal anti-inflammatory agents, and dipyridamole on human blood platelets. J Lab Clin Med 1970 Jul;76(1):66-75.

8.O'Reilly RA, Sahud MA, Aggeler PM. Impact of aspirin and chlorthalidone on the pharmacodynamics of oral anticoagulant drugs in man. Ann N Y Acad Sci 1971 Jul 6;179:173-86.

9.Dale J, Myhre E, Loew D. Bleeding during acetylsalicylic acid and anticoagulant therapy in patients with reduced platelet reactivity after aortic valve replacement. Am Heart J 1980 Jun;99(6):746-52.

10.Donaldson DR, Sreeharan N, Crow MJ, Rajah SM. Assessment of the interaction of warfarin with aspirin and dipyridamole. Thromb Haemost 1982 Feb 26;47(1):77.

11.Chesebro JH, Fuster V, Elveback LR, McGoon DC, Pluth JR, Puga FJ, Wallace RB, Danielson GK, Orszulak TA, Piehler JM, Schaff HV. Trial of combined warfarin plus dipyridamole or aspirin therapy in prosthetic heart valve replacement: danger of aspirin compared with dipyridamole. Am J Cardiol 1983 May 15;51(9):1537-41.

12.Chow WH, Cheung KL, Ling HM, See T. Potentiation of warfarin anticoagulation by topical methylsalicylate ointment. J R Soc Med 1989 Aug;82(8):501-2.

13.Meade TW, Roderick PJ, Brennan PJ, Wilkes HC, Kelleher CC. Extra-cranial bleeding and other symptoms due to low dose aspirin and low intensity oral anticoagulation. Thromb Haemost 1992 Jul 6;68(1):1-6.

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Do you want to Intervene? Y// NO  
Remote data not available - Only local order checks processed.

Press Return to Continue...

VERB: TAKE  
There are 2 Available Dosage(s):  
1. 2.5MG  
2. 5MG

.  
.  
OR

Do you want to Intervene? Y// ES  
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention  
for WARFARIN 5MG TAB

PROVIDER: OPProvider,ONE           OPP       119  
RECOMMENDATION: NO CHANGE

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

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

VERB: TAKE  
There are 2 Available Dosage(s):  
1. 5MG  
2. 10MG

Select from list of Available Dosages(1-2), Enter Free Text Dose  
or Enter a Question Mark (?) to view list: 1 5MG

You entered 5MG is this correct? Yes//    YES  
VERB: TAKE

DISPENSE UNITS PER DOSE(TABLET): 1// 1  
Dosage Ordered: 5MG  
  
NOUN: TABLET  
ROUTE: PO// ORAL PO MOUTH

### Significant Drug Interaction with Remote Rx – With Monograph – Backdoor New Order Entry

\*\*\* Significant\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN 5MG TAB and

LOCATION: <VA or DOD facility> Remote RX#: 10950021  
Drug: ASPIRIN 325MG EC TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING)  
Last Filled On: 11/08/06

\*\*\* REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// Yes

Device: Home// <Home would print to screen, or a specific device could be specified>

Professional Monograph  
Drug Interaction with WARFARIN and ASPIRIN

MONOGRAPH TITLE: Anticoagulants/Salicylates

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

MECHANISM OF ACTION: Multiple processes are involved: 1) Salicylate doses greater than 3 gm daily decrease plasma prothrombin levels. 2) Salicylates may also displace anticoagulants from plasma protein binding sites. 3) Salicylates impair platelet function, resulting in prolonged bleeding time. 4) Salicylates may cause gastrointestinal bleeding due to irritation.

CLINICAL EFFECTS: The concurrent use of anticoagulants and salicylates may result in increased INR values and increase the risk of bleeding.

PREDISPOSING FACTORS: None determined.

PATIENT MANAGEMENT: Avoid concomitant administration of these drugs. If salicylate use is necessary, monitor prothrombin time, bleeding time, or INR values closely. When possible, the administration of a non-aspirin salicylate would be preferable.

DISCUSSION: This interaction has been reported between aspirin and warfarin and between aspirin and dicumarol. Diflunisal, sodium salicylate, and topical methyl salicylate have been shown to interact with anticoagulants as well. Based on the proposed mechanisms, other salicylates would be expected to interact with anticoagulants as well. The time of highest risk for a coumarin-type drug interaction is when the precipitant drug is initiated, altered, or discontinued.

REFERENCES:

- 1.Quick AJ, Clesceri L. Influence of acetylsalicylic acid and salicylamide on the coagulation of blood. J Pharmacol Exp Ther 1960;128:95-8.
- 2.Watson RM, Pierson RN, Jr. Effect of anticoagulant therapy upon aspirin-induced gastrointestinal bleeding. Circulation 1961 Sep;24:613-6.
- 3.Barrow MV, Quick DT, Cunningham RW. Salicylate hypoprothrombinemia in rheumatoid arthritis with liver disease. Report of two cases. Arch Intern Med 1967 Nov;120(5):620-4.
- 4.Weiss HJ, Aledort LM, Kochwa S. The effect of salicylates on the hemostatic properties of platelets in man. J Clin Invest 1968 Sep; 47(9):2169-80.
- 5.Udall JA. Drug interference with warfarin therapy. Clin Med 1970 Aug; 77:20-5.
- 6.Fausa O. Salicylate-induced hypoprothrombinemia. A report of four cases. Acta Med Scand 1970 Nov;188(5):403-8.
- 7.Zucker MB, Peterson J. Effect of acetylsalicylic acid, other nonsteroidal anti-inflammatory agents, and dipyridamole on human blood platelets. J Lab Clin Med 1970 Jul;76(1):66-75.
- 8.O'Reilly RA, Sahud MA, Aggeler PM. Impact of aspirin and chlorthalidone on the pharmacodynamics of oral anticoagulant drugs in man. Ann N Y Acad Sci 1971 Jul 6;179:173-86.

9.Dale J, Myhre E, Loew D. Bleeding during acetylsalicylic acid and anticoagulant therapy in patients with reduced platelet reactivity after aortic valve replacement. Am Heart J 1980 Jun;99(6):746-52.

10.Donaldson DR, Sreeharan N, Crow MJ, Rajah SM. Assessment of the interaction of warfarin with aspirin and dipyridamole. Thromb Haemost 1982 Feb 26;47(1):77.

11.Chesebro JH, Fuster V, Elveback LR, McGoon DC, Pluth JR, Puga FJ, Wallace RB, Danielson GK, Orszulak TA, Piehler JM, Schaff HV. Trial of combined warfarin plus dipyridamole or aspirin therapy in prosthetic heart valve replacement: danger of aspirin compared with dipyridamole. Am J Cardiol 1983 May 15;51(9):1537-41.

12.Chow WH, Cheung KL, Ling HM, See T. Potentiation of warfarin anticoagulation by topical methylsalicylate ointment. J R Soc Med 1989 Aug;82(8):501-2.

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Do you want to Intervene? Y// NO

Press Return to Continue...

VERB: TAKE

There are 2 Available Dosage(s):

- 1. 5MG
- 2. 10MG

.  
.  
OR

Do you want to Intervene? Y// ES

Press Return to Continue...

Now creating Pharmacy Intervention  
for WARFARIN 5MG TAB

PROVIDER: OP/PROVIDER,ONE            OPP            119  
RECOMMENDATION: NO CHANGE

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

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

VERB: TAKE

There are 2 Available Dosage(s):

- 1. 5MG
- 2. 10MG

Select from list of Available Dosages (1-2), Enter Free Text Dose  
or Enter a Question Mark (?) to view list: 1 5MG

You entered 5MG is this correct? Yes//    YES

VERB: TAKE

DISPENSE UNITS PER DOSE(TABLET): 1// 1

Dosage Ordered: 5MG

NOUN: TABLET

ROUTE: PO//    ORAL            PO    MOUTH

### Critical Drug Interaction with Remote Rx – No Monograph – Backdoor New Order Entry

```

***CRITICAL*** Drug Interaction with Prospective Drug:
                   INDINAVIR 400MG CAP and

                   LOCATION: <VA or DOD facility>    Remote RX#: 2543789
                   Drug: AMIODARONE 200MG TAB (ACTIVE)
                   SIG: TAKE ONE TABLET BY MOUTH EVERY 8 HOURS
                   Last Filled On: 11/08/06

```

The concurrent administration of amiodarone with indinavir, (1) nelfinavir, (2) ritonavir, (3) or tipranavir coadministered with ritonavir (4) may result in increased levels, clinical effects, and toxicity of amiodarone.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// n NO  
RX DELETED

### Critical Drug Interaction with Non-VA Medication Order – Backdoor New Order Entry – No Monograph

Select Action: Quit// NO New Order

Eligibility: SC LESS THAN 50% SC%: 40  
RX PATIENT STATUS: SC LESS THAN 50%//  
DRUG: WARFARIN

Lookup: GENERIC NAME  
1 WARFARIN 2.5MG TAB BL110  
2 WARFARIN 5MG TAB BL110  
CHOOSE 1-2: 2 WARFARIN 5MG TAB BL110

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

-----  
\*\*\*Critical\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN 5MG TAB and

Non-VA Med: CIMETIDINE 200MG TAB  
Dosage: ONE TABLET Schedule: AT BEDTIME

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

Display Professional Interaction Monograph? No// No

VERB: TAKE  
There are 2 Available Dosage(s):  
1. 5MG  
2. 10MG

Select from list of Available Dosages (1-2), Enter Free Text Dose  
or Enter a Question Mark (?) to view list: 1 5MG

You entered 5MG is this correct? Yes//

### Critical Drug Interaction with Pending Order – No Monograph – Backdoor New Order Entry

\*\*\*CRITICAL\*\*\* Drug Interaction with Prospective Drug  
INDINAVIR 400MG CAP and

Pending Drug: AMIODARONE 200MG TAB  
SIG: TAKE ONE TABLET EVERY 8 HOURS

The concurrent administration of amiodarone with indinavir, (1) nelfinavir, (2) ritonavir, (3) or tipranavir coadministered with ritonavir (4) may result in increased levels, clinical effects, and toxicity of amiodarone.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// n NO  
RX DELETED

Or

Do you want to Continue? Y// ES

```

Do you want to Process medication
INDINAVIR 400MG CAP: P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention
for INDINAVIR 400MG CAP

PROVIDER: OPPROVIDER, ONE
RECOMMENDATION: NO CHANGE

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

Would you like to edit this intervention ? N// O
VERB: TAKE
There are 2 Available Dosage(s):
    1. 400MG
    2. 800MG

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 400MG

You entered 400MG is this correct? Yes//    YES
VERB: TAKE
DISPENSE UNITS PER DOSE(CAPSULE): 1// 1
Dosage Ordered: 400MG

NOUN: CAPSULE
ROUTE: ORAL// ORAL

```

### Significant Drug Interaction with Pending Rx – With Monograph – Backdoor New Order Entry

```

*** Significant *** Drug Interaction with Prospective Drug
WARFARIN 5MG TAB and

    Pending Drug: ASPIRIN 325MG EC TAB
    SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// Yes

Device: Home// <Home would print to screen, or a specific device could be specified>

Professional Monograph
Drug Interaction with WARFARIN and ASPIRIN

This information is generalized and not intended as specific medical advice. Consult your
healthcare professional before taking or discontinuing any drug or commencing any course
of treatment.

MONOGRAPH TITLE: Anticoagulants/Salicylates

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

MECHANISM OF ACTION: Multiple processes are involved: 1) Salicylate doses greater than
3 gm daily decrease plasma prothrombin levels. 2) Salicylates may also displace
anticoagulants from plasma protein binding sites. 3) Salicylates impair platelet
function, resulting in prolonged bleeding time. 4) Salicylates may cause gastrointestinal
bleeding due to irritation.

CLINICAL EFFECTS: The concurrent use of anticoagulants and salicylates may result in
increased INR values and increase the risk of bleeding.

```

PREDISPOSING FACTORS: None determined.

PATIENT MANAGEMENT: Avoid concomitant administration of these drugs. If salicylate use is necessary, monitor prothrombin time, bleeding time, or INR values closely. When possible, the administration of a non-aspirin salicylate would be preferable.

DISCUSSION: This interaction has been reported between aspirin and warfarin and between aspirin and dicumarol. Diflunisal, sodium salicylate, and topical methyl salicylate have been shown to interact with anticoagulants as well. Based on the proposed mechanisms, other salicylates would be expected to interact with anticoagulants as well. The time of highest risk for a coumarin-type drug interaction is when the precipitant drug is initiated, altered, or discontinued.

REFERENCES:

- 1.Quick AJ, Clesceri L. Influence of acetylsalicylic acid and salicylamide on the coagulation of blood. J Pharmacol Exp Ther 1960;128:95-8.
- 2.Watson RM, Pierson RN, Jr. Effect of anticoagulant therapy upon aspirin-induced gastrointestinal bleeding. Circulation 1961 Sep;24:613-6.
- 3.Barrow MV, Quick DT, Cunningham RW. Salicylate hypoprothrombinemia in rheumatoid arthritis with liver disease. Report of two cases. Arch Intern Med 1967 Nov;120(5):620-4.
- 4.Weiss HJ, Aledort LM, Kochwa S. The effect of salicylates on the hemostatic properties of platelets in man. J Clin Invest 1968 Sep; 47(9):2169-80.
- 5.Udall JA. Drug interference with warfarin therapy. Clin Med 1970 Aug; 77:20-5.
- 6.Fausa O. Salicylate-induced hypoprothrombinemia. A report of four cases. Acta Med Scand 1970 Nov;188(5):403-8.
- 7.Zucker MB, Peterson J. Effect of acetylsalicylic acid, other nonsteroidal anti-inflammatory agents, and dipyridamole on human blood platelets. J Lab Clin Med 1970 Jul;76(1):66-75.
- 8.O'Reilly RA, Sahud MA, Aggeler PM. Impact of aspirin and chlorthalidone on the pharmacodynamics of oral anticoagulant drugs in man. Ann N Y Acad Sci 1971 Jul 6;179:173-86.
- 9.Dale J, Myhre E, Loew D. Bleeding during acetylsalicylic acid and anticoagulant therapy in patients with reduced platelet reactivity after aortic valve replacement. Am Heart J 1980 Jun;99(6):746-52.
- 10.Donaldson DR, Sreeharan N, Crow MJ, Rajah SM. Assessment of the interaction of warfarin with aspirin and dipyridamole. Thromb Haemost 1982 Feb 26;47(1):77.
- 11.Chesebro JH, Fuster V, Elveback LR, McGoon DC, Pluth JR, Puga FJ, Wallace RB, Danielson GK, Orszulak TA, Piehler JM, Schaff HV. Trial of combined warfarin plus dipyridamole or aspirin therapy in prosthetic heart valve replacement: danger of aspirin compared with dipyridamole. Am J Cardiol 1983 May 15;51(9):1537-41.
- 12.Chow WH, Cheung KL, Ling HM, See T. Potentiation of warfarin anticoagulation by topical methylsalicylate ointment. J R Soc Med 1989 Aug;82(8):501-2.
- 13.Meade TW, Roderick PJ, Brennan PJ, Wilkes HC, Kelleher CC. Extra-cranial bleeding and other symptoms due to low dose aspirin and low intensity oral anticoagulation. Thromb Haemost 1992 Jul 6;68(1):1-6.

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Do you want to Intervene? Y// NO  
Remote data not available - Only local order checks processed.

Press Return to Continue...

VERB: TAKE  
There are 2 Available Dosage(s):  
1. 5MG  
2. 10MG

OR

Do you want to Intervene? Y// ES  
Remote data not available - Only local order checks processed.

Press Return to Continue...

```

Now creating Pharmacy Intervention
for WARFARIN 5MG TAB

PROVIDER: OP/PROVIDER,ONE      OPP      119
RECOMMENDATION: NO CHANGE

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

Would you like to edit this intervention ? N// O
VERB: TAKE
There are 2 Available Dosage(s):
    1. 5MG
    2. 10MG

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 5MG

You entered 5MG is this correct? Yes//  YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 5MG

NOUN: TABLET
ROUTE: PO//  ORAL      PO  MOUTH

```

### Significant Drug Interaction with Local Rx – Finishing Pending Order – No Monograph

```

+          Enter ?? for more actions
BY Bypass          DC Discontinue
ED Edit           FN Finish
Select Item(s): Next Screen// FN  Finish

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

-----
***SIGNIFICANT*** Drug Interaction with Prospective Drug:
                    WARFARIN 5MG TAB and

                    Local RX#: 2498
                    Drug: ASPIRIN 325MG EC TAB (ACTIVE)
                    SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
                    Processing Status: Released locally on 11/08/06@08:55:32 (Window)
                    Last Filled On: 11/08/06

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// NO

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//
.
.
OR

Do you want to Intervene? Y// ES

```



Now creating Pharmacy Intervention  
for WARFARIN 5MG TAB

PROVIDER: OERRPROVIDER, ONE  
RECOMMENDATION: NO CHANGE

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

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

Rx # 2500 10/19/07  
OPPATIENT, ONE #30  
TAKE ONE TABLET BY MOUTH AT BEDTIME

WARFARIN 5MG TAB  
OERRPROVIDER, ONE OPPHARMACIST, ONE  
# of Refills: 11

SC Percent: 40%  
Disabilities: NONE STATED

This Rx has been flagged by the provider as: NO COPAY

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//

Critical Drug Interaction with Local Rx - Finishing Pending Order - No Monograph

+ Enter ?? for more actions  
BY Bypass DC Discontinue  
ED Edit FN Finish  
Select Item(s): Next Screen// FN Finish

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

\*\*\*CRITICAL\*\*\* Drug Interaction with Prospective Drug:  
INDINAVIR 400MG CAP and

Local Rx#: 2443  
Drug: AMIODARONE 200MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY  
Processing Status: Released locally on 11/08/06@08:55:32 (Window)  
Last Filled On: 11/08/06

The concurrent administration of amiodarone with indinavir, (1) nelfinavir, (2)  
ritonavir, (3) or tipranavir coadministered with ritonavir (4) may result in increased  
levels, clinical effects, and toxicity of amiodarone.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// NO

Pending OP Orders (ROUTINE) Oct 19, 2007@08:55:12 Page: 1 of 4  
OPPATIENT, ONE <A>  
PID: 666-45-6754 Ht (cm): 187.96 (07/05/1994)  
DOB: JAN 1,1945 (62) Wt (kg): 77.27 (07/05/1994)

CPRS Order Checks:

```

CRITICAL drug-drug interaction: INDINAVIR 400MG CAP & AMIODARONE 200MG TAB
TAKE ONE TABLET BY MOUTH EVERY MORNING [ACTIVE])
Overriding Provider: OERRPROVIDER, ONE
Overriding Reason: TESTING

SIGNIFICANT drug-drug interaction: IBUPROFEN & METHOTREXATE (METHOTREXATE
TAB 2.5MG TAKE ONE TABLET BY MOUTH TWICE A DAY [PENDING])
Overriding Provider: OERRPROVIDER,ONE

+          Enter ?? for more actions
AC Accept          ED Edit          DC Discontinue
Select Item(s): Next Screen//.
.
.
OR

Do you want to Continue? Y// YES

INDINAVIR 400MG CAP: P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for INDINAVIR 400MG CAP
PROVIDER:    OERRPROVIDER, ONE
RECOMMENDATION: NO CHANGE

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

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

Rx # 2501          10/19/07
OPPATIENT, ONE          #90
TAKE ONE TABLET BY MOUTH THREE TIMES A DAY

INDINAVIR 400MG CAP OERRPROVIDER,ONE  OPPHARMACIST,ONE
# of Refills: 11

SC Percent: 40%
Disabilities: NONE STATED

This Rx has been flagged by the provider as: NO COPAY

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//

```

### Significant Drug Interaction with Pending Order – Finishing Pending Order – No Monograph

```

+          Enter ?? for more actions
BY Bypass          DC Discontinue
ED Edit          FN Finish
Select Item(s): Next Screen// FN  Finish

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

-----
***SIGNIFICANT*** Drug Interaction with Prospective Drug:
WARFARIN 5MG TAB and

```

```

Pending Drug: ASPIRIN 325MG EC TAB
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// NO

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//
.
.
OR

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for WARFARIN 5MG TAB

PROVIDER: OERRPROVIDER, ONE
RECOMMENDATION: NO CHANGE

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

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

Rx # 2500          10/19/07
OPPATIENT, ONE          #30
TAKE ONE TABLET BY MOUTH AT BEDTIME

WARFARIN 5MG TAB
OERRPROVIDER,ONE  OPPHARMACIST,ONE
# of Refills: 11

SC Percent: 40%
Disabilities: NONE STATED

This Rx has been flagged by the provider as: NO COPAY

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//

```

**Critical Drug Interaction with Pending Order – Finishing Pending Order – No Monograph**

```

+ Enter ?? for more actions
BY Bypass          DC Discontinue
ED Edit           FN Finish
Select Item(s): Next Screen// FN Finish

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

***CRITICAL*** Drug Interaction with Prospective Drug:
INDINAVIR 400MG CAP and

Local RX#: 2443
Drug: AMIODARONE 200MG TAB (ACTIVE)
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY

```

Processing Status: Released locally on 11/08/06@08:55:32 (Window)  
Last Filled On: 11/08/06

The concurrent administration of amiodarone with indinavir, (1) nelfinavir, (2) ritonavir, (3) or tipranavir coadministered with ritonavir (4) may result in increased levels, clinical effects, and toxicity of amiodarone.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// n NO

Pending OP Orders (ROUTINE) Oct 19, 2007@08:55:12 Page: 1 of 4  
OPPATIENT, ONE <A>  
PID: 666-45-6754 Ht (cm): 187.96 (07/05/1994)  
DOB: JAN 1,1945 (62) Wt (kg): 77.27 (07/05/1994)

SIGNIFICANT drug-drug interaction: IBUPROFEN & WARFARIN (WARFARIN TAB 5MG  
TAKE ONE TABLET BY MOUTH AT BEDTIME [PENDING])  
Overriding Provider: OERRPROVIDER, ONE  
Overriding Reason:

SIGNIFICANT drug-drug interaction: IBUPROFEN & METHOTREXATE (METHOTREXATE  
TAB 2.5MG TAKE ONE TABLET BY MOUTH TWICE A DAY [PENDING])  
Overriding Provider: OERRPROVIDER, ONE

+ Enter ?? for more actions  
AC Accept ED Edit DC Discontinue  
Select Item(s): Next Screen//.  
. OR

Do you want to Continue? Y// YES

Do you want to Process medication  
INDINAVIR 400MG CAP : P// ROCESS

Enter your Current Signature Code: SIGNATURE VERIFIED

Now creating Pharmacy Intervention  
for INDINAVIR 400MG CAP

PROVIDER: OERRPROVIDER, ONE  
RECOMMENDATION: NO CHANGE

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

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

Rx # 2501 10/19/07  
OPPATIENT, ONE #90  
TAKE ONE TABLET BY MOUTH THREE TIMES A DAY WITH FOOD OR MILK  
INDINAVIR 400MG CAP OERRPROVIDER, ONE OPPhARMACIST, ONE  
# of Refills: 11

SC Percent: 40%  
Disabilities: NONE STATED

This Rx has been flagged by the provider as: NO COPAY

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//

## Critical Interaction –Renewing an Order

```
OP Medications (ACTIVE)      Feb 14, 2008@07:25:28      Page: 1 of 3
OPPATIENT,THREE <A>
  PID: 000-00-0000      Ht (cm): 167.64 (10/16/1993)
  DOB: JUL 1,1934 (73)      Wt (kg): 68.18 (10/16/1993)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 1.95

      Rx #: 2530$
(1) *Orderable Item: WARFARIN TAB
(2)      Drug: WARFARIN 2.5MG TAB
      NDC: 00056-0176-75
(3)      *Dosage: 2.5 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: TABLET
      *Route: ORAL
      *Schedule: QHS
(4) Pat Instructions:

      SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
(5) Patient Status: OPT NSC
(6)      Issue Date: 02/13/08      (7) Fill Date: 02/13/08
      Last Fill Date: 02/13/08 (Window)
+      Enter ?? for more actions
DC Discontinue      PR Partial      RL Release
ED Edit      RF Refill      RN Renew
Select Action: Next Screen// RN Renew
FILL DATE: (2/14/2008 - 2/14/2009): TODAY// (FEB 14, 2008)
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
Nature of Order: WRITTEN// W
WAS THE PATIENT COUNSELED: NO// NO

Do you want to enter a Progress Note? No// NO
Now Renewing Rx # 2530      Drug: WARFARIN 2.5MG TAB
Now doing remote order checks. Please wait...
Now doing allergy checks. Please wait...
Now processing Clinical Reminder Order Checks. Please wait ...
Now Processing Enhanced Order Checks! Please Wait...

-----
***CRITICAL*** Drug Interaction with Prospective Drug:
      WARFARIN 2.5MG TAB and

      Local RX#: #2527
      Drug: CIMETIDINE 300MG TAB (ACTIVE)
      SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
      Processing Status: Released locally on 09/08/07@08:55:32 (Window)
      Last Filled On: 09/08/07

The pharmacologic effects of warfarin may be increased resulting in severe bleeding.
Display Professional Interaction Monograph? No// No
Do you want to Continue? Y// NO
RENEWED RX DELETED

OR

Do you want to Continue? Y// ES
Do you want to Process medication
WARFARIN 2.5MG TAB: P// ROCESS
```

Enter your Current Signature Code: SIGNATURE VERIFIED

Now creating Pharmacy Intervention  
for WARFARIN 2.5MG TAB

PROVIDER: OPProvider, FOUR FPP 119  
RECOMMENDATION: NO CHANGE

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

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

2530A WARFARIN 2.5MG TAB QTY: 30  
# OF REFILLS: 11 ISSUED: 02-14-08  
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
FILLED: 03-04-08  
ROUTING: WINDOW PHYS: OPProvider, FOUR

Edit renewed Rx ? Y//

### Significant Interaction – Renewing an Order

```
OP Medications (ACTIVE) Feb 14, 2008@07:15:31 Page: 1 of 3
OPPATIENT,THREE <A>
  PID: 000-00-0000 Ht (cm): 167.64 (10/16/1993)
  DOB: JUL 1,1934 (73) Wt (kg): 68.18 (10/16/1993)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.77

      Rx #: 2531$
(1) *Orderable Item: INDOMETHACIN CAP,ORAL
(2) Drug: INDOMETHACIN 25MG CAP
      NDC: 00056-0176-75
(3) *Dosage: 25 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: CAPSULE
      *Route: ORAL
      *Schedule: TID
(4) Pat Instructions:
      SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
(5) Patient Status: OPT NSC
(6) Issue Date: 02/13/08 (7) Fill Date: 02/13/08
      Last Fill Date: 02/13/08 (Window)
+ Enter ?? for more actions
DC Discontinue PR Partial RL Release
ED Edit RF Refill RN Renew
Select Action: Next Screen// RN Renew
FILL DATE: (2/14/2008 - 2/14/2009): TODAY// (FEB 14, 2008)
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
Nature of Order: WRITTEN// W
WAS THE PATIENT COUNSELED: NO// NO

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

Now Renewing Rx # 2531 Drug: INDOMETHACIN 25MG CAP

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

-----
```

```

***SIGNIFICANT*** Drug Interaction with Prospective Drug:
                    INDOMETHACIN 25MG CAP and

Local RX#: 2530
DRUG: WARFARIN 2.5MG TAB
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
Processing Status: Released locally on 01/08/08@08:55:32 (Window)
Last Filled On: 01/08/08

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// ES
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention
for INDOMETHACIN 25MG CAP

PROVIDER:   OP PROVIDER,FOUR   FPP   119
RECOMMENDATION:   NO CHANGE

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

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

2531A      INDOMETHACIN 25MG CAP      QTY: 90
# OF REFILLS: 11  ISSUED: 02-14-08
SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
FILLED: 03-04-08
ROUTING: WINDOW      PHYS: OP PROVIDER,FOUR

Edit renewed Rx ? Y//
.
.
OR

Do you want to Intervene? Y// NO
Remote data not available - Only local order checks processed.

Press Return to Continue...

2531A      INDOMETHACIN 25MG CAP      QTY: 90
# OF REFILLS: 11  ISSUED: 02-14-08
SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
FILLED: 03-04-08
ROUTING: WINDOW      PHYS: OP PROVIDER,FOUR

Edit renewed Rx ? Y//

```

### Copying An Order – Critical Interaction

```

OP Medications (ACTIVE)      Feb 14, 2008@09:20:04      Page: 1 of 3
OPPATIENT,TWO                                     <A>
  PID: 666-33-3333                      Ht (cm): 167.64 (10/16/1993)
  DOB: JUL 1,1934 (73)                   Wt (kg): 68.18 (10/16/1993)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 1.77

Rx #: 2530$
(1) *Orderable Item: WARFARIN TAB
(2) Drug: WARFARIN 2.5MG TAB
    NDC: 00056-0176-75
(3) *Dosage: 2.5 (MG)
    Verb: TAKE

```

```

Dispense Units: 1
Noun: TABLET
*Route: ORAL
*Schedule: QHS
(4) Pat Instructions:
    SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
(5) Patient Status: OPT NSC
(6) Issue Date: 02/13/08 (7) Fill Date: 02/13/08
    Last Fill Date: 02/13/08 (Window)
+ Enter ?? for more actions

DC Discontinue PR Partial RL Release
ED Edit RF Refill RN Renew
Select Action: Next Screen// co

New OP Order (COPY) Feb 14, 2008@09:20:04 Page: 1 of 2
OPPATIENT,TWO <A>
PID: 666-33-3333 Ht(cm): 167.64 (10/16/1993)
DOB: JUL 1,1934 (73) Wt(kg): 68.18 (10/16/1993)

Orderable Item: WARFARIN TAB
(1) Drug: WARFARIN 2.5MG TAB
(2) Patient Status: OPT NSC
(3) Issue Date: FEB 14,2008 (4) Fill Date: FEB 14,2008
(5) Dosage Ordered: 2.5 (MG)
    Verb: TAKE
Dispense Units: 1
Noun: TABLET
Route: ORAL
Schedule: QHS
(6) Pat Instruction:
    SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
(7) Days Supply: 30 (8) QTY (TAB): 30
(9) # of Refills: 11 (10) Routing: WINDOW
+ Enter ?? for more actions

AC Accept ED Edit
Select Action: Next Screen// ac Accept
-----
Duplicate Drug in Local RX:

Rx #: 2530
Drug: WARFARIN 2.5MG TAB
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
QTY: 30 Refills remaining: 11
Provider: OP PROVIDER, ONE Issued: 02/13/08
Status: ACTIVE Last filled on: 02/13/08
Processing Status: Released locally on 02/13/08@08:55:32 (Window)
Days Supply: 30
-----
Discontinue Rx #2530 WARFARIN 2.5MG TAB? Y/N YES

Rx #2530 WARFARIN 2.5MG TAB will be discontinued after the acceptance of the new order.

Now doing remote order checks. Please wait...
Now doing allergy checks. Please wait...
Now processing Clinical Reminder Order Checks. Please wait ...
Now Processing Enhanced Order Checks! Please Wait...

***CRITICAL*** Drug Interaction with Prospective Drug:
INDINAVIR 400MG CAP and

Local RX#: 2443
Drug: AMIODARONE 200MG TAB (ACTIVE)
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY
Processing Status: Released locally on 11/08/06@08:55:32 (Window)
Last Filled On: 11/08/06

```



The concurrent administration of amiodarone with indinavir, (1) nelfinavir, (2) ritonavir, (3) or tipranavir coadministered with ritonavir (4) may result in increased levels, clinical effects, and toxicity of amiodarone.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// ES

Do you want to Process medication  
INDINAVIR 400MG CAP: P// ROCESS

Enter your Current Signature Code: SIGNATURE VERIFIED  
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention  
for INDINAVIR 400MG CAP

PROVIDER: OPProvider,ONE OPP 119  
RECOMMENDATION: NO CHANGE

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

Would you like to edit this intervention ? N// O  
Nature of Order: WRITTEN//

.  
.

### Copying an Order – Significant Interaction

Medication Profile Feb 14, 2008@08:56:40 Page: 1 of 1  
 OPPATIENT,TWO <A>  
 PID: 666-33-3333 Ht (cm): 167.64 (10/16/1993)  
 DOB: JUL 1,1934 (73) Wt (kg): 68.18 (10/16/1993)  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.77

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST REF	FILL	REM	DAY SUP
-----ACTIVE-----									
1	2528\$	AMINOPHYLLINE 200MG TAB	120	A	02-13	02-13	11	30	
2	2529\$	ASPIRIN 325MG EC TAB	30	A	02-13	02-13	11	30	
3	2527\$	CIMETIDINE 300MG TAB	30	A	02-13	02-13	11	30	
4	2531\$	INDOMETHACIN 25MG CAP	90	A	02-13	02-13	11	30	
5	2530\$	WARFARIN 2.5MG TAB	30	A	02-13	02-13	11	30	

DC Discontinue PR Partial RL Release  
 ED Edit RF Refill RN Renew  
 Select Action: Next Screen// co CO

New OP Order (COPY) Feb 14, 2008@08:56:43 Page: 1 of 2  
 OPPATIENT,TWO <A>  
 PID: 666-33-3333 Ht (cm): 167.64 (10/16/1993)  
 DOB: JUL 1,1934 (73) Wt (kg): 68.18 (10/16/1993)

Orderable Item: ASPIRIN TAB,EC  
 (1) Drug: ASPIRIN 325MG EC TAB <DIN>  
 (2) Patient Status: OPT NSC  
 (3) Issue Date: FEB 14,2008 (4) Fill Date: FEB 14,2008  
 (5) Dosage Ordered: 325 (MG)  
 Verb: TAKE  
 Dispense Units: 1  
 Noun: TABLET  
 Route: ORAL

```

Schedule: QAM
(6)Pat Instruction:
      SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
(7)  Days Supply: 30          (8)  QTY (TAB): 30
(9)  # of Refills: 11        (10) Routing: WINDOW
+      Enter ?? for more actions
AC  Accept          ED  Edit
Select Action: Next Screen// ac  Accept
-----
Duplicate Drug in Local RX:

      Rx #: 2529
      Drug: ASPIRIN 325MG EC TAB
      SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
      QTY: 30          Refills remaining: 11
      Provider: OPProvider, ONE          Issued: 02/13/08
      Status: ACTIVE          Last filled on: 02/13/08
      Processing Status: Released locally on 02/13/08@08:55:32 (Window)
      Days Supply: 30
-----
Discontinue Rx #2529 ASPIRIN 325MG EC TAB? Y/N YES

Rx #2529 ASPIRIN 325MG EC TAB will be discontinued after the acceptance of the new order.

Now doing remote order checks. Please wait...
Now doing allergy checks. Please wait...
Now processing Clinical Reminder Order Checks. Please wait ...
Now Processing Enhanced Order Checks! Please Wait...
-----
***SIGNIFICANT*** Drug Interaction with
      ASPIRIN 325MG EC TAB and
Local RX#: 2530
      DRUG: WARFARIN 2.5MG TAB (ACTIVE)
      SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
      Processing Status: Released locally on 01/08/08@08:55:32 (Window)
      Last Filled On: 01/08/08

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// n NO
Remote data not available - Only local order checks processed.

Press Return to Continue...

Nature of Order: WRITTEN//          W
WAS THE PATIENT COUNSELED: NO//
.
.
      OR

Do you want to Intervene? Y// ES
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention
for ASPIRIN 325MG EC TAB

PROVIDER:      OPProvider,ONE          OPP          119
RECOMMENDATION:      NO CHANGE

```

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

Would you like to edit this intervention ? N// O  
Nature of Order: WRITTEN//

### Verifying an Order using Process Order Checks option – Critical Drug Interaction

Select Outpatient Pharmacy Manager Option: PROCESs Order Checks  
Select RX with Order Checks: 3237A CIMENTIDINE 300MG TAB PSOPATIENT,TWO  
000-00-0000

PSOPATIENT,TWO ID#: 000-00-0000 RX: 3237A

RX: 3237A PATIENT: PSOPATIENT,TWO (000-00-0000)

STATUS: Non-Verified CO-PAY STATUS  
DRUG: CIMENTIDINE 300MG TAB  
QTY: 30 30 DAY SUPPLY  
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
LATEST: 01/09/2012 # OF REFILLS: 11 REMAINING: 11  
ISSUED: 12/20/11 PROVIDER:  
LOGGED: 12/20/11 CLINIC: NOT ON FILE  
EXPIRES: 12/20/12 DIVISION: XXXXX (499)  
CAP: SAFETY ROUTING: MAIL  
ENTRY BY: PSTECH,ONE VERIFIED BY:

FILLED: 01/09/12 PHARMACIST: LOT #:  
DISPENSED: 01/09/12 RELEASED:  
REMARKS: RENEWED FROM RX # 3237

#### LABEL LOG:

#	DATE	RX REF	PRINTED BY
---	------	--------	------------

=====

1	12/20/11	ORIGINAL	PSTECH,ONE
---	----------	----------	------------

COMMENTS: From RX number 3237A Drug-Drug interaction  
EDIT: (Y/N/P): N// O

PSOPATIENT,TWO ID#:000-00-0000 RX#: 3237A

RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----ACTIVE-----							
1	3197\$ AMLODIPINE 5MG/ATORVASTATIN 10MG TAB	30	A	06-16	06-16	11	30
2	3200\$ ASPIRIN TAB 81MG	4320	A	06-16	06-16	11	30
3	3203\$ LEUCOVOR CALCIUM 25MG TAB	30	A	06-16	06-16	11	30
4	3204\$ PREDNISONE 20MG TAB	1195	A	06-21	06-21	11	30
5	3187\$ PREDNISONE 5MG TAB	58	A	06-16	06-16	11	30
6	3190\$ WARFARIN 10MG	90	A	06-16	06-16	3	90
7	3189\$ WARFARIN 5MG TAB	90	A	06-16	06-16	3	90
-----DISCONTINUED-----							
8	3193\$ ASPIRIN 325MG EC TAB	4320	DE	06-16	06-16	11	30
9	3198\$ ASPIRIN 650MG	4320	DE	06-16	06-16	11	30
10	3207\$ CLOPIDOGREL 75MG TAB	30	DF	06-23	06-23	1	30
11	3206\$ CLOPIDOGREL BISULFATE 75MG TAB	30	DC	06-23	06-23	1	30
12	3192\$ LOVASTATIN 10MG TAB	30	DC	06-16	06-16	11	30
-----NON-VERIFIED-----							
13	3236A\$ AMINOPHYLLINE 200MG TAB	120	N	12-20	01-09	11	30
14	3237A\$ CIMENTIDINE 300MG TAB	30	N	12-20	01-09	11	30
15	3194\$ DIGOXIN 0.25MG TAB	97	N	06-16	06-16	11	30
16	3234\$ FOLIC ACID 1MG TAB	3000	N	11-22	11-22	11	30
17	3201A\$ HALOPERIDOL 5MG TAB	180	N	12-20	12-20	11	30
18	3202A\$ INDINAVIR 400MG CAP	90	N	12-20	12-20	11	30

Press return to continue:

PSOPATIENT,TWO

ID#:000-00-0000 RX#: 3237A

```
-----NON-VERIFIED-----
19 3195$          SIMVASTATIN 80MG TAB          600 N 06-16 06-16 11 30
20 3235$          THIAMINE HCL 100MG TAB          300 N> 11-22 11-22 11 30
-----PENDING-----
21 ACETAMINOPHEN 650MG TAB          QTY: 2160          ISDT: 06-16 REF: 11
22 AMOXAPINE TAB          QTY: 30           ISDT: 06-23 REF: 1
23 CHOLESTYRAMINE 9GM PACKETS       QTY:              ISDT: 06-16 REF: 11
24 CLOPIDOGREL 75MG TAB          QTY: 15           ISDT: 09-16 REF: 1
25 IBUPROFEN TAB          QTY: 100          ISDT: 06-16 REF: 11
26 NIFEDIPINE 90MG SA TAB         QTY: 120          ISDT: 06-16 REF: 11
```

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

Enhanced Order Checks cannot be performed for Local Drug: AMOXAPINE TAB  
Reason: Drug not matched to NDF

```
-----
***Critical*** Drug Interaction with Prospective Drug:
                CIMETIDINE 300MG TAB and
```

```
Local RX#: 3236A
Drug: AMINOPHYLLINE 200MG TAB (Non-Verified)
SIG: TAKE ONE TABLET BY MOUTH EVERY 6 HOURS
Processing Status: Not released locally (Mail)
Last Filled On: 01/09/12
```

Concurrent cimetidine and theophylline derivative therapy may result in elevated theophylline derivative concentration levels, prolonged elimination half-life, and decreased clearance.

Display Interaction Monograph? No// NO

```
-----
***Critical*** Drug Interaction with Prospective Drug:
                CIMETIDINE 300MG TAB and
```

```
Local RX#: 3190
Drug: WARFARIN 10MG (Active)
SIG: TAKE 50 TABLETS BY MOUTH MO-WE-FR@0900 EXCEPT
     TAKE 30 TABLETS TU-TH-SA-SU@0900
Processing Status: Not released locally (Window)
Last Filled On: 06/16/11
```

```
Local RX#: 3189
Drug: WARFARIN 5MG TAB (Active)
SIG: TAKE ONE-HALF TABLET BY MOUTH MO-FR@0900 EXCEPT
     TAKE ONE TABLET TU-WED@0900 EXCEPT TAKE TWO
     TABLETS TH-SA-SU@0900
Processing Status: Not released locally (Window)
Last Filled On: 06/16/11
```

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

Display Interaction Monograph? No// NO

```
-----
***Significant*** Drug Interaction with Prospective Drug:
                CIMETIDINE 300MG TAB and
```

```
Pending Order: CLOPIDOGREL 75MG TAB
SIG: TAKE 37.5MG BY MOUTH EVERY MORNING
```

```

*** Refer to MONOGRAPH for SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Interaction Monograph? No// NO

Do you want to Continue? Y// ES

Do you want to Process or Cancel medication?
Rx #3237A Drug: CIMETIDINE 300MG TAB: PROCESS//

Enter your Current Signature Code: SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for CIMETIDINE 300MG TAB

PROVIDER:
RECOMMENDATION: NO CHANGE

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

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

PSOPATIENT,TWO ID#:000-00-0000 RX#: 3237A
CIMETIDINE 300MG TAB

VERIFY FOR PSOPATIENT,TWO ? (Y/N/Delete/Quit): Y// ES

RX# 3237A has been suspended until 01-09-12.

```

### Verifying an Order using Patient Prescription Processing option – Significant Drug Interaction

```

OP Medications (NON-VERIFIED) Feb 13, 2008@08:51:40 Page: 1 of 2
PSOPATIENT,TWO <A>
PID: 000-00-0000 Ht(cm): 167.64 (10/16/1993)
DOB: JUL 1,1934 (73) Wt(kg): 68.18 (10/16/1993)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.77

Rx #: 2531$
(1) *Orderable Item: INDOMETHACIN CAP,ORAL
(2) Drug: INDOMETHACIN 25MG CAP
NDC: 00056-0176-75
(3) *Dosage: 25 (MG)
Verb: TAKE
Dispense Units: 1
Noun: CAPSULE
*Route: ORAL
*Schedule: TID
(4) Pat Instructions:
SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
(5) Patient Status: OPT NSC
(6) Issue Date: 02/13/08 (7) Fill Date: 02/13/08
Last Fill Date: 02/13/08 (Window)
+ Enter ?? for more actions
DC Discontinue PR (Partial) RL (Release)
ED Edit RF (Refill) RN (Renew)
Select Action: Next Screen// VF VF

RX: 2531 PATIENT: PSOPATIENT,TWO (000-00-0000)
STATUS: Non-Verified CO-PAY STATUS
DRUG: INDOMETHACIN 25MG CAP
QTY: 90 30 DAY SUPPLY
SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY
LATEST: 02/13/2008 # OF REFILLS: 11 REMAINING: 11
ISSUED: 02/13/08 PROVIDER:
LOGGED: 02/13/08 CLINIC: NOT ON FILE
EXPIRES: 02/13/09 DIVISION: XXXXX (499)

```

```

CAP: SAFETY          ROUTING: WINDOW
ENTRY BY: OPCLERK,ONE  VERIFIED BY:

PATIENT STATUS : OPT NSC          COPIES : 1
Now doing remote order checks. Please wait...
Remote data not available - Only local order checks processed.

Press Return to Continue...

EDIT: (Y/N/P): N// O

PSOPATIENT,TWO          ID#:000-00-0000  RX #2531

      RX #          DRUG          ISSUE  LAST REF DAY
      QTY ST  DATE  FILL REM SUP
-----
-----ACTIVE-----
1 2528$          AMINOPHYLLINE 200MG TAB          120 A  02-13 02-13  11  30
2 2529$          ASPIRIN 325MG EC TAB          30 A  02-13 02-13  11  30
-----NON-VERIFIED-----
3 2527$          CIMETIDINE 300MG TAB          30 N  02-13 02-13  11  30
4 2531$          INDOMETHACIN 25MG CAP          90 N  02-13 02-13  11  30
5 2530$          WARFARIN 2.5MG TAB          30 N  02-13 02-13  11  30

Press RETURN to Continue:

Now doing remote checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

-----
***SIGNIFICANT*** Drug Interaction with Prospective Drug:
                    INDOMETHACIN 25MG CAP and

Local RX#: #2530
          DRUG: WARFARIN 2.5MG TAB (ACTIVE)
          SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
Processing Status: Released locally on 02/13/08@08:55:32 (Window)
Last Filled On: 02/13/08

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// NO

VERIFY FOR PSOPATIENT,TWO ? (Y/N/Delete/Quit): Y// NO
.

OR

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for INDOMETHACIN 25MG CAP

PROVIDER: PSOPROVIDER,TWO      TPP      119
RECOMMENDATION: NO CHANGE

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

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

```

PSOPATIENT,TWO  
INDOMETHACIN 25MG CAP

ID#:000-00-0000 RX#: 2531

VERIFY FOR PSOPATIENT,TWO ? (Y/N/Delete/Quit): Y// ES

### Reinstating A Discontinued Order – Critical Interaction

```
Rx #: 2473
(1) *Orderable Item: AMINOPHYLLINE TAB
(2) Drug: AMINOPHYLLINE 200MG TAB
    NDC: 00056-0176-75
(3) *Dosage: 200 (MG)
    Verb: TAKE
    Dispense Units: 1
    Noun: TABLET
    *Route: ORAL
    *Schedule: Q6H
(4) Pat Instructions:
    SIG: TAKE ONE TABLET BY MOUTH EVERY 6 HOURS
(5) Patient Status: SC LESS THAN 50%
(6) Issue Date: 06/25/07 (7) Fill Date: 06/25/07
    Last Fill Date: 02/12/08 (Window)
+ Enter ?? for more actions
DC Discontinue PR (Partial) RL Release
ED (Edit) RF (Refill) RN Renew
Select Action: Next Screen// DC Discontinue
Are you sure you want to Reinstate? NO// YES

Comments: TESTING
Nature of Order: SERVICE CORRECTION// S
=====
2473 AMINOPHYLLINE 200MG TAB

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

-----
***CRITICAL*** Drug Interaction with Prospective Drug:
                AMINOPHYLLINE 200MG TAB and

    Local RX#: 2527
    Drug: CIMETIDINE 300MG (ACTIVE)
    SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
    Processing Status: Released locally on 02/13/08@08:55:32 (Window)
    Last Filled On: 02/13/08

Concurrent cimetidine and theophylline derivative therapy may result in elevated
theophylline derivative concentration levels, prolonged elimination half-life, and
decreased clearance.

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// NO

PI Patient Information SO Select Order
PU Patient Record Update NO New Order
PI Patient Information SO Select Order
Select Action: Quit// 5

Medication Profile Feb 14, 2008@11:43:17 Page: 1 of 1
PSOPATIENT, TEN <A>
PID: 000-00-0000 Ht (cm) : _____ (_____)
DOB: JAN 1,1922 (86) Wt (kg) : _____ (_____)
=====
```

```

SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)          BSA (m2):
#  RX #      DRUG                QTY ST  ISSUE  LAST REF DAY
-----ISSUE-----LAST REF DAY
-----ACTIVE-----
1  2472      CIMETIDINE 300MG TAB          60 A  06-25 02-12  11  30
2  2526      INDINAVIR 400MG CAP          90 A  02-12 02-12  11  30
3  2469      RIFAMPIN 300MG CAP          120 A  06-25 02-12  11  30
4  2525      WARFARIN 5MG TAB             30 A  02-12 02-12  11  30
-----DISCONTINUED-----
5  2473      AMINOPHYLLINE 200MG TAB      120 DC 06-25 02-12  11  30
6  2533      AMIODARONE 200MG TAB        180 DC 02-14 02-14  11  30
7  2465      ASPIRIN 325MG EC TAB         30 DC 06-25 02-12  11  30
8  2471      CARBAMAZEPINE 200MG TAB      90 DC 06-25 02-12  11  30
9  2524      WARFARIN 2.5MG TAB          90 DC 02-12 02-12  11  30
Enter ?? for more actions

ED  (Edit)          RF  (Refill)          RN  Renew
.
.
OR

Do you want to Continue? Y// ES

Do you want to Process medication
AMINOPHYLLINE 200MG TAB: P// ROCESS

Enter your Current Signature Code:    SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for AMINOPHYLLINE 200MG TAB

PROVIDER:    OPProvider, ELEVEN      EPP
RECOMMENDATION:    NO CHANGE

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

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

Prescription #2473 REINSTATED!
Prescription #2473 Filled: JUN 25, 2007Printed: JUN 25, 2007Released:
** Do you want to print the label now? N// O

ED  (Edit)          RF  (Refill)          RN  Renew

```

### Reinstating A Discontinued Order – Significant Interaction

```

Rx #: 2465
(1) *Orderable Item: ASPIRIN TAB,EC
(2) Drug: ASPIRIN 325MG EC TAB <DIN>
NDC: 00056-0176-75
(3) *Dosage: 325 (MG)
Verb: TAKE
Dispense Units: 1
Noun: TABLET
*Route: ORAL
*Schedule: QAM
(4) Pat Instructions:
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
(5) Patient Status: SC LESS THAN 50%
(6) Issue Date: 06/25/07 (7) Fill Date: 06/25/07
Last Fill Date: 02/12/08 (Window)
+ Enter ?? for more actions
DC Discontinue PR (Partial) RL Release
ED (Edit) RF (Refill) RN Renew
Select Action: Next Screen// DC Discontinue
Are you sure you want to Reinstate? NO// YES

```



```

Comments: TESTING
Nature of Order: SERVICE CORRECTION//          S
=====
2465  ASPIRIN 325MG EC TAB

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

-----
***SIGNIFICANT*** Drug Interaction with Prospective Drug:
                    ASPIRIN 325MG EC TAB and

                    Local RX#: 2524
                    Drug: WARFARIN 2.5MG TAB (ACTIVE)
                    SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
                    Processing Status: Released locally on 02/12/07@08:55:32 (Window)
                    Last Filled On: 02/12/07

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// NO

Prescription #2465 REINSTATED!
Prescription #2465 Filled: JUN 25, 2007Printed: JUN 25, 2007Released:
** Do you want to print the label now? N//
.
.
OR

Do you want to Intervene? Y// YES

Do you want to Process medication
CARBAMAZEPINE 200MG TAB: P// ROCESS

Enter your Current Signature Code:      SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for CARBAMAZEPINE 200MG TAB

PROVIDER:      OPPROVIDER, ELEVEN      EPP
RECOMMENDATION:      NO CHANGE

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

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

Prescription #2471 REINSTATED!
Prescription #2471 Filled: JUN 25, 2007Printed: JUN 25, 2007Released:
** Do you want to print the label now? N// O

```

### Editing An Order – Creating a New Order – Critical Interaction

```

Medication Profile      Feb 14, 2008@12:26:38      Page:      1 of      2
OPPATIENT, ONE                                     <A>
  PID: 000-00-0000      Ht (cm) : _____ (_____)
  DOB: JAN 1,1922 (86)      Wt (kg) : _____ (_____)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2) : _____
                                           ISSUE      LAST REF DAY
#  RX #      DRUG      QTY ST      DATE      FILL REM SUP

```

```

-----ACTIVE-----
1 2473    AMINOPHYLLINE 200MG TAB          120 A 06-25 02-12 11 30
2 2537    ASPIRIN 325MG EC TAB            30 A 02-14 02-14 11 30
3 2471    CARBAMAZEPINE 200MG TAB         90 A 06-25 02-12 11 30
4 2472    CIMETIDINE 300MG TAB            60 A 06-25 02-12 11 30
5 2526    INDINAVIR 400MG CAP             90 A 02-12 02-12 11 30
6 2469    RIFAMPIN 300MG CAP             120 A 06-25 02-12 11 30
-----DISCONTINUED-----
7 2533    AMIODARONE 200MG TAB           180 DC 02-14 02-14 11 30
8 2536    DIPYRIDAMOLE 25MG TAB           30 DE 02-14 02-14 11 30
9 2524    WARFARIN 2.5MG TAB             90 DC 02-12 02-12 11 30
+      Enter ?? for more actions

DC  Discontinue      PR  Partial      RL  Release
ED  Edit             RF  Refill       RN  Renew
Select Action: Next Screen// ED

      Rx #: 2537
(1) *Orderable Item: ASPIRIN TAB,EC
(2)      Drug: ASPIRIN 325MG EC TAB <DIN>
      NDC: 00056-0176-75
(3)      *Dosage: 325 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: TABLET
      *Route: ORAL
OP Medications (ACTIVE)      Feb 14, 2008@12:26:38      Page: 1 of 2
OPPATIENT, ONE              <A>
PID: 000-00-0000            Ht (cm) : _____ (_____)
DOB: JAN 1,1922 (86)       Wt (kg) : _____ (_____)

      *Schedule: QAM
(4) Pat Instructions:
      SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
(5) Patient Status: SC LESS THAN 50%
(6) Issue Date: 02/14/08      (7) Fill Date: 02/14/08
      Last Fill Date: 02/14/08 (Window)
+      Enter ?? for more actions
DC  Discontinue      PR  Partial      RL  Release
ED  Edit             RF  Refill       RN  Renew
Select Action: Next Screen// 1

Current Orderable Item: ASPIRIN TAB,EC
Select PHARMACY ORDERABLE ITEM NAME: ASPIRIN// AMIODARONE AMIODARONE TAB

New Orderable Item selected. This edit will create a new prescription!

Press Return to Continue...

-----
Duplicate Drug in Local Rx:

      Rx #: 2533
      Drug: AMIODARONE 200MG TAB
      SIG: TAKE TWO TABLETS BY MOUTH THREE TIMES A DAY
      QTY: 180 Refills remaining: 11
      Provider: OPPROVIDER,TEN Issued: 02/14/08
      Status: Discontinued Last filled on: 02/14/08
      Processing Status: Released locally on 02/14/08@08:55:32 (Window)
      Days Supply: 30
-----

Press Return to Continue:

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

```

```

-----
***CRITICAL*** Drug Interaction with Prospective Drug:
                    AMIODARONE 200MG TAB and

                Local RX#: 2526
                Drug: INDINAVIR 400MG CAP (ACTIVE)
                SIG: TAKE ONE CAPSULES EVERY 8 HOURS
                Processing Status: Released locally on 02/12/08@08:55:32 (Window)
                Last Filled On: 02/12/08

The concurrent administration of amiodarone with indinavir, (1) nelfinavir, (2)
ritonavir, (3) or tipranavir coadministered with ritonavir(4) may result in increased
levels, clinical effects, and toxicity of amiodarone.

Display Professional Interaction Monograph? N//No

Do you want to Continue? Y// NO

                Rx #: 2537
(1) *Orderable Item: ASPIRIN TAB,EC
(2)                Drug: ASPIRIN 325MG EC TAB <DIN>
                NDC: 00056-0176-75
(3)                *Dosage: 325 (MG)
                Verb: TAKE
                Dispense Units: 1
                Noun: TABLET
                *Route: ORAL
                *Schedule: QAM
OP Medications (ACTIVE)      Feb 14, 2008@12:27:09      Page: 1 of 2
OPPATIENT, ONE              <A>
PID: 000-00-0000            Ht (cm) : _____ (_____)
DOB: JAN 1,1922 (86)        Wt (kg) : _____ (_____)

(4)Pat Instructions:
                SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
(5) Patient Status: SC LESS THAN 50%
(6) Issue Date: 02/14/08      (7) Fill Date: 02/14/08
    Last Fill Date: 02/14/08 (Window)
+ Enter ?? for more actions
DC Discontinue      PR Partial      RL Release
ED Edit            RE Refill       RN Renew
Select Action: Next Screen//
.
.
OR

Do you want to Continue? Y// ES

Do you want to Process medication
AMIODARONE 200MG TAB: P// ROCESS

Enter your Current Signature Code:      SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for AMIODARONE 200MG TAB

PROVIDER:      PSOPROVIDER, THREE      TPP
RECOMMENDATION:      NO CHANGE

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

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

```

### Editing An Order – Creating a New Order – Significant Interaction

```

                Rx #: 2537
(1) *Orderable Item: ASPIRIN TAB,EC
(2)                Drug: ASPIRIN 325MG EC TAB <DIN>

```

```

NDC: 00056-0176-75
(3) *Dosage: 325 (MG)
    Verb: TAKE
    Dispense Units: 1
    Noun: TABLET
    *Route: ORAL
    *Schedule: QAM
OP Medications (ACTIVE) Feb 14, 2008@12:27:09 Page: 1 of 2
OPPATIENT,TWO <A>
PID: 000-00-0000 Ht (cm): _____ (_____)
DOB: JAN 1,1922 (86) Wt (kg): _____ (_____)

(4)Pat Instructions:
    SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
(5) Patient Status: SC LESS THAN 50%
(6) Issue Date: 02/14/08 (7) Fill Date: 02/14/08
    Last Fill Date: 02/14/08 (Window)
+ Enter ?? for more actions
DC Discontinue PR Partial RL Release
ED Edit RF Refill RN Renew
Select Action: Next Screen// EDIT Edit

Select fields by number: (1-19): 1

Current Orderable Item: ASPIRIN TAB,EC
Select PHARMACY ORDERABLE ITEM NAME: ASPIRIN// AMIODARONE AMIODARONE TAB

New Orderable Item selected. This edit will create a new prescription!

Press Return to Continue...

-----
Duplicate Drug in Local Rx:

Rx #: 2533
Drug: AMIODARONE 200MG TAB
SIG: TAKE TWO TABLETS BY MOUTH THREE TIMES A DAY
QTY: 180 Refills remaining: 11
Provider: OPPROVIDER,TEN Issued: 02/14/08
Status: Discontinued Last filled on: 02/14/08
Processing Status: Released locally on 02/14/08@08:55:32 (Window)
Days Supply: 30

-----

Press Return to Continue:

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

-----
***SIGNIFICANT*** Drug Interaction with Prospective Drug:
AMIODARONE 200MG TAB and

Local RX#: 2469
Drug: CIPROFLOXACIN 750MG TAB (ACTIVE)
SIG: TAKE ONE TABLET EVERY 12 HOURS
Processing Status: Released locally on 02/12/08@08:55:32 (Window)
Last Filled On: 02/12/08

*** REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? N//No

Do you want to Intervene? Y// ES

```

```

Now creating Pharmacy Intervention
for AMIODARONE 200MG TAB

PROVIDER:      OPROVIDER,ELEVEN      EPP
RECOMMENDATION: NO CHANGE

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

Would you like to edit this intervention ? N// O
.
.
  OR
Do you want to Intervene? Y// NO

You have changed the Orderable Item from
ASPIRIN to AMIODARONE.
There are 2 Available Dosage(s) :
  1. 200MG
  2. 400MG

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 200MG

You entered 200MG is this correct? Yes//  YES
VERB: TAKE// TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1

```

### Backdoor New Order Entry by Non-Pharmacist – Critical Interaction with Non-VA Med plus Significant Interaction with Local Rx

```

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

Eligibility: SERVICE CONNECTED 50% to 100%      SC%: 80
RX PATIENT STATUS: SC//
DRUG: WARFAR
  Lookup: GENERIC NAME
    1  WARFARIN 2.5MG TAB          BL110
    2  WARFARIN 5MG TAB           BL110
CHOOSE 1-2: 2  WARFARIN 5MG TAB          BL110

Now doing remote order checks. Please wait...
Now doing allergy checks. Please wait...
Now processing Clinical Reminder Order Checks. Please wait ...
Now Processing Enhanced Order Checks! Please Wait...

-----
***Critical*** Drug Interaction with Prospective Drug:
                WARFARIN 5MG TAB and

                Non-VA Med: CIMETIDINE 300MG TAB
                Dosage: ONE TABLET Schedule: AT BEDTIME

The pharmacologic effects of warfarin may be increased resulting in severe bleeding.
Display Professional Interaction Monograph? No// No

***SIGNIFICANT*** Drug Interaction with Prospective Drug:
                WARFARIN 5MG TAB and

```

Local RX#: 2443  
Drug: IBUPROFEN 600MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY  
Processing Status: Released locally on 11/08/07@08:55:32 (Window)  
Last Filled On: 11/08/07

\*\*\* REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// Yes

Device: Home// <Home would print to screen, or a specific device could be specified>

Professional Monograph  
Drug Interaction with WARFARIN and IBUPROFEN

MONOGRAPH TITLE: Anticoagulants/NSAIDs

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

MECHANISM OF ACTION: The exact mechanism is unknown. Some NSAIDs may displace anticoagulants from plasma protein binding sites. NSAIDs also have the potential to produce gastrointestinal ulceration and bleeding. Some NSAIDs may impair platelet function and prolong bleeding times.

CLINICAL EFFECTS: In some patients, NSAIDs have been associated with an increase in the hypoprothrombinemic effect to anticoagulants.

PREDISPOSING FACTORS: None determined.

PATIENT MANAGEMENT: If concurrent therapy with anticoagulants and NSAIDs is warranted, patients should be monitored for an increased hypoprothrombinemic response when NSAIDs are added to the patient's drug regimen. In addition to routine monitoring of INR values, the patient should be observed for signs of increased effect, including bruising or bleeding. The time of highest risk for a coumarin-type drug interaction is when the precipitant drug is initiated or discontinued. Consult with the prescriber before initiating, altering the dose of, or discontinuing either drug.

DISCUSSION: The effects of NSAIDs on the hypoprothrombinemic response to anticoagulants appears to vary between patients as well as with different NSAIDs. Documentation is frequently contradictory - while studies have shown several NSAIDs to have no effect on the pharmacokinetics of warfarin, case reports have documented increased effects with and without bleeding when these same NSAIDs were administered concurrently with warfarin. While celecoxib has been shown not to affect platelet aggregation or bleeding times and had no effects on the anticoagulant effect of warfarin in healthy subjects, increased prothrombin times and bleeding episodes, some of which were fatal, have been reported, predominantly in the elderly, in patients receiving concurrent therapy with celecoxib and warfarin. Rofecoxib has been shown to increase prothrombin times in subjects who received concurrent warfarin therapy. If concurrent therapy with anticoagulants and NSAIDs is warranted, it would be prudent to monitor patients closely for increased anticoagulant effects.

REFERENCES:

- 1.Thilo D, Nyman D. A study of the effects of the anti-rheumatic drug ibuprofen (Brufen) on patients being treated with the oral anti-coagulant phenprocoumon (Marcoumar). J Int Med Res 1974;2:276-8.
- 2.Boekhout-Mussert MJ, Loeliger EA. Influence of ibuprofen on oral anti-coagulant with phenprocoumon. J Int Med Res 1974;2:279-83.
- 3.Penner JA, Abbrecht PH. Lack of interaction between ibuprofen and warfarin Curr Ther Res Clin Exp 1975 Dec;18(6):862-71.
- 4.Michot F, Ajdacic K, Glaus L. A double-blind clinical trial to determine if an interaction exists between diclofenac sodium and the oral anticoagulant acenocoumarol (nicoumalone). J Int Med Res 1975;3(3):153-7.
- 5.Marbet GA, Duckert F, Walter M, Six P, Airene H. Interaction study between phenprocoumon and flurbiprofen. Curr Med Res Opin 1977;5(1):26-31.
- 6.Slattery JT, Levy G, Jain A, McMahon FG. Effect of naproxen on the kinetics of elimination and anticoagulant activity of a single dose or warfarin. Clin Pharmacol Ther 1979 Jan;25(1):51-60.

7.Jain A, McMahon FG, Slattery JT, Levy G. Effect of naproxen on the steady-state serum concentration and anticoagulant activity of warfarin. Clin Pharmacol Ther 1979 Jan;25(1):61-6.

8.Loftin JP, Vesell ES. Interaction between sulindac and warfarin: different results in normal subjects and in an unusual patient with a potassium-losing renal tubular defect. J Clin Pharmacol 1979 Nov-Dec; 19(11-12):733-42.

9.Carter SA. Potential effect of sulindac on response of prothrombin-time to oral anticoagulants. Lancet 1979 Sep 29;2(8144):698-9.

10.Ross JR, Beeley L. Sulindac, prothrombin time, and anticoagulants. Lancet 1979 Nov 17;2(8151):1075.

11.Stricker BH, Delhez JL. Interactions between flurbiprofen and coumarins. Br Med J (Clin Res Ed) 1982 Sep 18;285(6344):812-3.

12.Dahl SL, Ward JR. Pharmacology, clinical efficacy, and adverse effects of piroxicam, a new nonsteroidal anti-inflammatory agent. Pharmacotherapy 1982 Mar-Apr;2(2):80-90.

13.Rhodes RS, Rhodes PJ, Klein C, Sintek CD. A warfarin-piroxicam drug interaction. Drug Intell Clin Pharm 1985 Jul-Aug;19(7-8):556-8.

14.Flessner MF, Knight H. Prolongation of prothrombin time and severe gastrointestinal bleeding associated with combined use of warfarin and ketoprofen. JAMA 1988 Jan 15;259(3):353.

15.Griffin MR, Piper JM, Daugherty JR, Snowden M, Ray WA. Nonsteroidal anti-inflammatory drug use and increased risk for peptic ulcer disease in elderly persons. Ann Intern Med 1991 Feb 15;114(4):257-63.

16.Gabriel SE, Jaakkimainen L, Bombardier C. Risk for serious gastrointestinal complications related to use of nonsteroidal anti-inflammatory drugs. A meta-analysis. Ann Intern Med 1991 Nov 15; 115(10):787-96.

17.Shorr RI, Ray WA, Daugherty JR, Griffin MR. Concurrent use of nonsteroidal anti-inflammatory drugs and oral anticoagulants places elderly persons at high risk for hemorrhagic peptic ulcer disease. Arch Intern Med 1993 Jul 26;153(14):1665-70.

18.Hilleman DE, Mohiuddin SM, Lucas BD, Jr. Nonsteroidal antiinflammatory drug use in patients receiving warfarin: emphasis on nabumetone. Am J Med 1993 Aug 9;95(2A):30S-34S.

19.Mieszczak C, Winther K. Lack of interaction of ketoprofen with warfarin. Eur J Clin Pharmacol 1993;44(2):205-6.

20.Celebrex (celecoxib) US prescribing information. Pfizer Inc. December, 2006.21.Vioxx (rofecoxib) US prescribing information. Merck & Co., Inc. March, 2004.

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Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention  
for WARFARIN 5MG TAB

PROVIDER: OPPROVIDER,ELEVEN EPP  
RECOMMENDATION: NO CHANGE

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

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

.

.

OR

Do you want to Intervene? Y// NO

VERB: TAKE

There are 2 Available Dosage(s):

1. 5MG
2. 10MG

Select from list of Available Dosages (1-2), Enter Free Text Dose  
or Enter a Question Mark (?) to view list:

### Finishing a Pending Order by Non-Pharmacist

\*\*\*Critical\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN 5MG TAB and

Non-VA Med: CIMETIDINE 300MG TAB  
Dosage: ONE TABLET Schedule: AT BEDTIME

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

Display Professional Interaction Monograph? No// No

\*\*\*SIGNIFICANT\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN 5MG TAB and

Local RX#: 2443  
Drug: IBUPROFEN 600MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY  
Processing Status: Released locally on 11/08/07@08:55:32 (Window)  
Last Filled On: 11/08/07

\*\*\* REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention  
for WARFARIN 5MG TAB

PROVIDER: OPProvider,ELEVEN EPP  
RECOMMENDATION: NO CHANGE

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

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

.

OR

Do you want to Intervene? Y// NO

## Pharmacist Verifying order with 2 drug interactions

OP Medications (NON-VERIFIED) Mar 04, 2008@11:55:21 Page: 1 of 2  
OPPATIENT,ONE <A>  
PID: 666-00-0000 Ht (cm) : \_\_\_\_\_ (\_\_\_\_\_)  
DOB: JAN 1,1910 (98) Wt (kg) : \_\_\_\_\_ (\_\_\_\_\_)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2) :  
Rx #: 2560  
(1) \*Orderable Item: WARFARIN TAB  
(2) Drug: WARFARIN 5MG TAB  
NDC: 00056-0176-75  
(3) \*Dosage: 5 (MG)  
Verb: TAKE  
Dispense Units: 1  
Noun: TABLET  
\*Route: ORAL  
\*Schedule: QPM  
(4) Pat Instructions:  
SIG: TAKE ONE TABLET BY MOUTH EVERY EVENING  
(5) Patient Status: SC  
(6) Issue Date: 03/04/08 (7) Fill Date: 03/04/08  
Last Fill Date: 03/04/08 (Window)  
+ Enter ?? for more actions  
DC Discontinue PR (Partial) RL (Release)  
ED Edit RF (Refill) RN (Renew)  
Select Action: Next Screen// VF VF  
  
RX: 2560 PATIENT: OPPATIENT,ONE (666-00-0000)  
STATUS: Non-Verified  
DRUG: WARFARIN 5MG TAB  
QTY: 90 90 DAY SUPPLY  
SIG: TAKE ONE TABLET BY MOUTH EVERY EVENING  
LATEST: 03/04/2008 # OF REFILLS: 3 REMAINING: 3  
ISSUED: 03/04/08 PROVIDER:  
LOGGED: 03/04/08 CLINIC: BARB'S CLINIC



EXPIRES: 03/05/09 DIVISION: XXXXX (499)  
CAP: SAFETY ROUTING: WINDOW  
ENTRY BY: OERRPROVIDER,ONE VERIFIED BY:

ACTIVITY LOG:

# DATE REASON RX REF INITIATOR OF ACTIVITY

1 03/04/08 PATIENT INST.ORIGINAL  
COMMENTS: Patient Instructions Not Sent By Provider.  
PATIENT STATUS : SC COPIES : 1  
EDIT: (Y/N/P): N// NO

OPPATIENT,ONE ID#:666-00-0000 RX #2560

RX #	DRUG	ISSUE QTY ST	LAST DATE	REF FILL	DAY REM	SUP
-----ACTIVE-----						
1 2550	IBUPROFEN 600MG TAB	270 A	03-03	03-04	3	90
-----NON-VERIFIED-----						
2 2560	WARFARIN 5MG TAB	90 N	03-04	03-04	3	90
-----PENDING-----						
3	FAMOTIDINE 20MG TAB	QTY: 180	ISDT: 03-04>	REF: 3		
4	INDOMETHACIN 25MG CAP	QTY: 270	ISDT: 03-04	REF: 3		
5	LOVASTATIN 10MG TAB	QTY: 90	ISDT: 03-03	REF: 3		
6	NIFEDIPINE 90MG SA TAB	QTY: 90	ISDT: 03-03	REF: 3		

-----Non-VA MEDS (Not dispensed by VA)-----  
CIMETIDINE 300MG TAB 300MG TWICE A DAY Date Documented: 03/03/08  
Press RETURN to Continue:

Now doing allergy checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

\*\*\*Critical\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN 5MG TAB and

Non-VA Med: CIMETIDINE 300MG TAB  
Dosage: ONE TABLET Schedule: AT BEDTIME

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

Display Professional Interaction Monograph? No// No

\*\*\*SIGNIFICANT\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN 5MG TAB and

Local RX#: 2443  
Drug: IBUPROFEN 600MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES DAILY  
Processing Status: Released locally on 11/08/07@08:55:32 (Window)  
Last Filled On: 11/08/07

\*\*\* REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// ES

Do you want to Process or Cancel medication?  
Rx #2560 Drug: WARFARIN 5MG TAB: PROCESS//

Enter your Current Signature Code: SIGNATURE VERIFIED

```

Now creating Pharmacy Intervention
for WARFARIN 5MG TAB

PROVIDER:
RECOMMENDATION: NO CHANGE

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

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

OPPATIENT,ONE ID#:666-00-0000 RX#: 2560
WARFARIN 5MG TAB

VERIFY FOR OPPATIENT,ONE ? (Y/N/Delete/Quit): Y// ES

PI Patient Information SO Select Order

Medication Profile Mar 04, 2008@11:55:31 Page: 1 of 1
OPPATIENT,ONE <A>
PID: 666-00-0000 Ht (cm) : _____ (_____)
DOB: JAN 1,1910 (98) Wt (kg) : _____ (_____)
SEX: FEMALE Non-VA Meds on File Last entry on 03/03/08
ISSUE LAST REF DAY
# RX # DRUG QTY ST DATE FILL REM SUP
-----ACTIVE-----
1 2550 IBUPROFEN 600MG TAB 270 A 03-03 03-04 3 90
2 2560 WARFARIN 5MG TAB 90 A 03-04 03-04 3 90
-----PENDING-----
3 FAMOTIDINE 20MG TAB QTY: 180 ISDT: 03-04> REF: 3
4 INDOMETHACIN 25MG CAP QTY: 270 ISDT: 03-04 REF: 3
5 LOVASTATIN 10MG TAB QTY: 90 ISDT: 03-03 REF: 3
6 NIFEDIPINE 90MG SA TAB QTY: 90 ISDT: 03-03 REF: 3
-----Non-VA MEDS (Not dispensed by VA)-----
CIMETIDINE 300MG TAB 300MG TWICE A DAY Date Documented: 03/03/08

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

```

For orders with multiple drug interactions, the user is presented with a drug interaction monograph display prompt and intervention prompt after each drug interaction warning is displayed. Only users that hold the PSORPH key will be prompted to log an intervention.

### Multiple Drug Interactions

```

Another New Order for OPPATIENT,ONE? YES//

Eligibility: SERVICE CONNECTED 50% to 100% SC%: 60
PRISONER OF WAR
RX PATIENT STATUS: SC//
DRUG: WARFARIN
Lookup: GENERIC NAME
1 WARFARIN (COUMADIN) NA 2.5MG TAB BL110
2 WARFARIN 5MG TAB BL110
CHOOSE 1-2: 1 WARFARIN (COUMADIN) NA 2.5MG TAB BL110

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

```

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

-----  
\*\*\*Critical\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN 2.5MG TAB and

Local RX#: 2376  
Drug: CIMETIDINE 300MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
Processing Status: Released locally on 11/08/07@08:55:32 (Window)  
Last Filled On: 11/08/07

The pharmacologic effects of warfarin may be increased resulting in severe bleeding.  
Display Professional Interaction Monograph? No// No

-----  
\*\*\*SIGNIFICANT\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN 2.5MG TAB and

Local RX#: 2378  
Drug: ASPIRIN 325MG EC TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
Processing Status: Released locally on 11/08/07@08:55:32 (Window)  
Last Filled On: 11/08/07

\*\*\* REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL EFFECTS  
Display Professional Interaction Monograph? No// No

Do you want to Continue? Y// YES

Do you want to Process medication  
CIMETIDINE 300MG TAB P// ROCESS

Enter your Current Signature Code: SIGNATURE VERIFIED  
Remote data not available - Only local order checks processed.

Press Return to Continue...

Now creating Pharmacy Intervention  
for CIMETIDINE 300MG TAB

PROVIDER: OPPOVIDER, ONE  
RECOMMENDATION: NO CHANGE

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

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

.

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

-----  
\*\*\*Critical\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN (COUMADIN) NA 5MG TAB and

Local Rx#: 509974  
Drug: AMIODARONE 200MG TAB (SUSPENDED)  
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES A DAY  
Processing Status: Not released locally (Window)  
Last Filled On: 11/08/06

Pending Drug: AMIODARONE HCL (PACERONE) 200MG TAB  
SIG: TAKE ONE TABLET BY MOUTH EVERY 8 HOURS

The concurrent administration of amiodarone and an anticoagulant may result in an increase in the clinical effects of the anticoagulant and an increased risk of bleeding.(1-22) It may take several weeks of concurrent therapy before the full effects of this interaction are noted. The effect of amiodarone on anticoagulant levels may continue for several months after amiodarone is discontinued.

Display Interaction Monograph? No// NO

-----  
\*\*\*Critical\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN (COUMADIN) NA 5MG TAB  
Local Rx#: 502214  
Drug: KETOCONAZOLE 200MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH THREE TIMES A DAY  
Processing Status: Not released locally (Window)  
Last Filled On: 11/08/06

The anticoagulant effect of warfarin may be increased.

Display Interaction Monograph? No// NO

-----  
\*\*\*Critical\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN (COUMADIN) NA 5MG TAB and

Non-VA Med: CIMETIDINE 300MG TAB  
Dosage: 300MG Schedule: TWICE A DAY

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

Display Interaction Monograph? No// NO

-----  
\*\*\*Significant\*\*\* Drug Interaction with Prospective Drug:  
WARFARIN (COUMADIN) NA 5MG TAB and  
  
Location: <Remote facility name> Remote Rx#: 502211  
Drug: ASPIRIN 325MG EC TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
Last Filled On: 11/08/06

Non-VA Med: ASPIRIN 325MG EC TAB  
Dosage: 325MG Schedule: EVERY MORNING

\*\*\* REFER TO MONOGRAPH FOR SIGNIFICANT INTERACTION CLINICAL

Display Interaction Monograph? No// NO

Do you want to Continue? Y// ES

Do you want to Process medication  
WARFARIN (COUMADIN) NA 5MG TAB: P// ROCESS

Enter your Current Signature Code: SIGNATURE VERIFIED

Now creating Pharmacy Intervention  
for WARFARIN (COUMADIN) NA 5MG TAB

PROVIDER:  
RECOMMENDATION: NO CHANGE

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

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

## Therapeutic Duplication

This section describes enhancements to the existing VistA Duplicate Class order checks.

The current VistA Duplicate Class checks have been enhanced using the FDB business rules and database, as well as the FDB Enhanced Therapeutic Classification (ETC) system. The Duplicate Class check will now be referred to as the Duplicate Therapy order check. This order check will continue to be performed against active, pending, non-verified orders on hold (initiated through pharmacy or CPRS), expired and discontinued orders. The timeframe for inclusion of expired orders is determined by the display rules on the medication profile. The timeframe for inclusion of locally discontinued orders is determined by the following formula: Discontinued Date (Cancel Date) + Days Supply + 7. This check will be performed on active Non-VA Medication orders.

No changes have been made to the existing user actions for Duplicate Therapy order checks. Users will continue to have the ability to discontinue the order. The existing order will only be discontinued upon acceptance of the order being processed. No discontinue actions can be performed on remote outpatient orders, Non-VA medications, discontinued, and expired orders or orders placed on provider hold through CPRS. If the CANCEL DRUG IN SAME CLASS outpatient site parameter is set to 'No', no discontinue action is allowed on any duplicate class order.

Any remote Outpatient order (from another VAMC or Department of Defense (DoD) facility) using data from Health Data Repository Historical (HDR-Hx) or Health Data Repository-Interim Messaging Solution (HDR-IMS) that has been expired for 30 days or less will be included in the list of medications to be checked.

FDB custom tables will be used to store custom changes to the duplication allowance for a FDB therapeutic classification. Each duplicate therapy class is assigned a duplication allowance. The duplication allowance for a therapeutic allowance determines whether or not the therapeutic duplication warning will be displayed to the user.

The Vendor's (currently FDB) Enhanced Therapeutic Classification (ETC) System is now used in place of the VA Drug Class for the Duplicate Therapy (formerly duplicate class) order checks.

Duplicate Therapy order checks will no longer be processed in pairs. Each duplicate therapy warning includes as many outpatient medication orders that it applies to.

A duplicate therapy warning is only displayed if the number of duplicate therapy matches exceeds the duplication allowance specified for the FDB duplicate therapy class.

The following processes use the enhanced functionality:

- Entering a new outpatient medication order through pharmacy options
- Finishing a pending outpatient medication order
- Renewing an outpatient medication order
- When a new outpatient medication order is created via an edit
- Verification of an outpatient medication order entered or finished by a non-pharmacist
- Copy of an outpatient medication order
- Reinstatement of an outpatient medication order

See illustrations below:

### Local Rx

```
=====  
*** THERAPEUTIC DUPLICATION(S) *** FAMOTIDINE 20MG TAB with  
  
      Local Rx#: 2561  
      Drug: CIMETIDINE 300MG TAB (DISCONTINUED)  
      SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
      QTY: 30           Days Supply: 30  
      Processing Status: Released locally on 3/4/08@08:55:32 (Window)  
      Last Filled On: 11/08/06  
  
Class(es)Involved in Therapeutic Duplication(s): Peptic Ulcer Agents, Histamine-2  
Receptor Antagonists (H2 Antagonists)  
=====
```

### Remote Rx

```
=====  
*** THERAPEUTIC DUPLICATION(S) *** SUCRALFATE 1GM TAB with  
  
      LOCATION: <VA OR DOD FACILITY>   Remote Rx#: 65343  
      Drug: RANITIDINE HCL 150MG TAB (EXPIRED)  
      SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY  
      QTY: 180           Days Supply: 90  
      Last Filled On: 11/08/06  
  
Class(es)Involved in Therapeutic Duplication(s): Peptic Ulcer Agents  
=====
```

### Pending Order

```
=====  
*** THERAPEUTIC DUPLICATION(S) *** NIZATIDINE 150MG CAP with  
  
      Pending Drug: FAMOTIDINE 20MG TAB  
      SIG: TAKE ONE TABLET BY TWICE DAILY  
  
Class(es)Involved in Therapeutic Duplication(s): Peptic Ulcer Agents  
=====
```

### Non-VA Med Order

```
=====  
*** THERAPEUTIC DUPLICATION(S) *** FAMOTIDINE 20MG TAB with
```

```

Non-VA Med: CIMETIDINE 300MG TAB
Dosage: 300MG Schedule: TWICE A DAY

Class(es) Involved in Therapeutic Duplication(s): Peptic Ulcer Agents, Histamine-2
Receptor Antagonists (H2 Antagonists)
=====

```

If the CANCEL DRUG IN SAME CLASS outpatient site parameter is set to 'No', the following information is shown for the duplicate therapy warning:

```

=====
*** THERAPEUTIC DUPLICATION(S) *** NIZATIDINE 150MG CAP with

Local Rx #2561 (ACTIVE) for CIMETIDINE 300MG TAB

Local Rx #2572 (PROVIDER HOLD) for SUCRALFATE 1MG TAB

Remote Rx #2571 (DISCONTINUED) for RANITIDINE HCL 150MG TAB

Pending Order for FAMOTIDINE 20MG TAB

Non-VA Med Order for CIMETIDINE 300MG TAB

Class(es) Involved in Therapeutic Duplication(s): PEPTIC ULCER AGENTS, HISTAMINE-2
RECEPTOR ANTAGONISTS (H2 ANTAGONISTS)
=====

```

If there is more than one remote, local, pending or Non-VA med order involved in the therapeutic duplication, the order details will be displayed one after the other.

If the same drugs are involved in multiple therapeutic duplications, a single therapeutic duplication warning will be displayed, and multiple therapeutic classes will be listed.

If the CANCEL DRUG IN SAME CLASS outpatient site parameter is set to 'No', no discontinuation action prompt will be presented.

After all the therapeutic duplication warnings are displayed and if the CANCEL DRUG IN SAME CLASS outpatient site parameter is set to 'Yes', the user will be asked if they want to discontinue any of the orders.

**See Examples:**

```
Discontinue RX #2580A SUCRALFATE 1GM TAB? Y/N
```

```
Discontinue Pending Order SUCRALFATE 1GM TAB? Y/N
```

The system will only allow a discontinuation action on active, pending, non-verified and orders placed on hold by pharmacy.

The system will display the following information for the numbered list of orders:

- Prescription number (if applicable)
- Dispense Drug (Orderable item if dispense drug not assigned to order)
- Indicate if the order is pending (with text 'Pending Order')

See example below.

```
1. Pending order  AMLODIPINE 5MG/ATORVASTATIN 10MG
2. RX #2426  LOVASTATIN 40MG TAB
```

The discontinuation of selected orders by the system will occur at the time the user accepts the order that is being processed.

```
Discontinue order(s)? Y/N  Y es
```

```
1. RX #2577  AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
2. RX #2581  CHOLESTYRAMINE 9GM PACKETS
```

```
Select (1-2): 1  Duplicate Therapy RX #2577  AMLODIPINE 5MG/ATORVASTATIN 10MG TAB will be
discontinued after the acceptance of the new order.
```

```
Discontinue order(s)? Y/N  Y es
```

```
1. RX #2577  AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
2. Pending Order  CHOLESTYRAMINE 9GM PACKETS
```

```
Select (1-2): 2  Duplicate Therapy Pending Order  CHOLESTYRAMINE 9GM PACKETS will be
discontinued after the acceptance of the new order.
```

If the user fails to accept the order that is being processed or exits before accepting the order, the system will not discontinue the order(s) selected.

The message displayed to the user will contain:

- Indication that discontinuance was for Duplicate Therapy
- The prescription number or text ‘Pending order’ if order status is pending.
- Dispense Drug (Orderable item if dispense drug not assigned to order)
- Ending with text ‘NOT Discontinued.’

See examples below:

```
Duplicate Therapy  RX #2710  CIMETIDINE 300MG TAB NOT Discontinued.
```

```
Duplicate Therapy  Pending Order  RANITIDINE  150MG TAB NOT Discontinued.
```

Once the order being processed is accepted and there were orders selected for discontinuation, the system will inform the user when the discontinuation occurs.

The message displayed to the user will contain:

- Indicate that discontinuance was for Duplicate Therapy
  - The prescription number or text ‘Pending order’ if order status is pending.
  - Dispense Drug (Orderable item if dispense drug not assigned to order)
  - Ending with text ‘has been discontinued.’

See examples below.

```
Duplicate Therapy  RX #2549  CIMETIDINE 300MG TAB has been discontinued...
```

```
Duplicate Therapy  Pending Order  RANITIDINE  150MG TAB has been discontinued...
```



See Therapeutic Duplication examples below:

**Finishing pending order – Therapeutic Duplication with Non-VA med and discontinued order – No discontinue action allowed.**

```
* (1) Orderable Item: FAMOTIDINE TAB *** (N/F) *** <DIN>
(2)      CMOP Drug: FAMOTIDINE 20MG TAB *** (N/F) *** <DIN>
      NDC: 00056-0176-75
(3)      *Dosage: 20 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: TABLET
      *Route: ORAL
+      Enter ?? for more
BY Bypass          DC Discontinue
ED Edit           FN Finish
Select Item(s): Next Screen// FN Finish

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

=====
*** THERAPEUTIC DUPLICATION(S) *** FAMOTIDINE 20MG TAB with

      Local Rx#: 2561
      Drug: CIMETIDINE 300MG TAB (DISCONTINUED)
      SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
      QTY: 30          Days Supply: 30
      Processing Status: Released locally on 3/4/08@08:55:32 (Window)
      Last Filled On: 11/08/06
-----

      Non-VA Med: CIMETIDINE 300MG TAB
      Dosage: 300MG   Schedule: TWICE A DAY

Class(es) Involved in Therapeutic Duplication(s): Peptic Ulcer Agents, Histamine-2
Receptor Antagonists (H2 Antagonists)
=====

Press Return to Continue:

Rx # 2570          03/07/08
PSOPATIENT, ONE   #180
TAKE ONE TABLET BY MOUTH TWICE A DAY

FAMOTIDINE 20MG TAB
PSOPROVIDER, ONE      PSOPHARMACIST, ONE
# of Refills: 3

      SC Percent: 80%
      Disabilities: NONE STATED

Was treatment for a Service Connected condition? YES//
Are you sure you want to Accept this Order? NO//
```

**New Order Entry Backdoor – Therapeutic Duplication with pending and active order. Discontinue action shown.**

```
PU Patient Record Update          NO New Order
PI Patient Information             SO Select Order
Select Action: Quit// no   New Order

Eligibility: SERVICE CONNECTED 50% to 100%   SC%: 80
RX PATIENT STATUS: SC//
DRUG: Nizatidine
```

```

Lookup: DRUG  GENERIC NAME
NIZATIDINE 150MG CAP          GA302
...OK? Yes//  (Yes)

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

=====
*** THERAPEUTIC DUPLICATION(S) *** NIZATIDINE 150MG CAP with

      Local Rx#: 2549
      Drug: CIMETIDINE 300MG TAB (ACTIVE)
      SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
      QTY: 30                      Days Supply: 30
      Processing Status: Released locally on 3/4/09@08:55:32 (Window)
      Last Filled On: 11/08/06
-----

      Pending Drug: FAMOTIDINE 20MG TAB
      SIG: TAKE ONE TABLET BY TWICE DAILY

Class(es)Involved in Therapeutic Duplication(s): Peptic Ulcer Agents, Histamine-2
Receptor Antagonists (H2 Antagonists)
=====
Discontinue order(s)? Y/N  No

Press Return to Continue...

Thera are 2 Available Dosage(s):
  1. 150MG
  2. 300MG

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list:
.
.
      OR

Discontinue order(s)? Y/N  Yes

  1. Pending Order FAMOTIDINE 20MG TAB
  2. RX #2549 CIMETIDINE 300MG TAB

Select (1-2):  2  RX #2549 CIMETIDINE 300MG TAB will be discontinued after the acceptance
of the new order.

There are 2 Available Dosage(s):
  1. 150MG
  2. 300MG

Select from list of Available Dosages(1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 150MG

You entered 150MG is this correct? Yes//  YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 150MG

NOUN: TABLET
ROUTE: PO//  ORAL          PO  MOUTH
Schedule:
This is a required response. Enter '^' to exit
Schedule: BID
Now searching ADMINISTRATION SCHEDULE (#51.1) file...
  BID  BID  TWICE A DAY
  ...OK? Yes//  (Yes)
(TWICE A DAY)

```

LIMITED DURATION (IN DAYS, HOURS OR MINUTES):  
 CONJUNCTION:  
 PATIENT INSTRUCTIONS:  
  
 (TAKE ONE TABLET BY MOUTH TWO TIMES A DAY)  
  
 DAYS SUPPLY: (1-90): 60//  
 QTY ( ) : 360// 180  
 COPIES: 1// 1  
 # OF REFILLS: (0-3): 3//  
 PROVIDER: PSOPROVIDER,ONE  
 CLINIC: BARB'S CLINIC 2  
 MAIL/WINDOW: WINDOW// WINDOW  
 METHOD OF PICK-UP:  
 REMARKS:  
 ISSUE DATE: TODAY// (MAR 12, 2008)  
 FILL DATE: (3/12/2008 - 3/13/2009): TODAY// (MAR 12, 2008)  
 Nature of Order: WRITTEN// W  
 WAS THE PATIENT COUNSELED: NO// NO  
  
 Do you want to enter a Progress Note? No// NO  
  
 Rx # 2580 03/12/08  
 PSOPATIENT,ONE #180  
 TAKE ONE TABLET BY MOUTH TWO TIMES A DAY  
  
 NIZATIDINE 150MG CAP  
 PSOPROVIDER,ONE PSOPHARMACIST,ONE  
 # of Refills: 3  
  
 SC Percent: 80%  
 Disabilities: NONE STATED  
  
 Was treatment for a Service Connected condition?  
 This is a required response. Enter '^' to exit  
 Was treatment for a Service Connected condition? NO  
 Is this correct? YES//  
  
 -Duplicate Therapy RX #2549 CIMETIDINE 300MG TAB has been discontinued...  
  
 Another New Order for PSOPATIENT,ONE? YES//

**Finishing Pending Order – Therapeutic Duplication with Non-Verified and Active orders. One drug is involved in both therapeutic duplications. One duplication allowance value is greater than ‘0’.**

```

-----ACTIVE-----
1 2577      AMLODIPINE 5MG/ATORVASTATIN 10MG TAB  90 A  03-07 03-07  3  90
2 2578      ITRACONAZOLE 100MG CAP                    60 A  03-07 03-07  0  30
3 2576      SUCRALFATE 1MG TAB                        120 A 03-07 03-07  0  30
-----NON-VERIFIED-----
4 2581      CHOLESTYRAMINE 9GM PACKETS                60 N  03-12 03-12  11 30
-----PENDING-----
5 SIMVASTATIN 20MG TAB                      QTY: 30          ISDT: 03-12  REF:  6

Enter ?? for more actions

ED  Edit                      FN  Finish

Pending OP Orders (ROUTINE)  Mar 12, 2008@07:54:21          Page:  1 of  3
OPPATIENT, THREE                                     <A>
  PID: 666-44-4444                      Ht (cm): _____ (_____)
  DOB: JUL 3,1949 (58)                   Wt (kg): 51.36 (10/01/1996)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2):

CPRS Order Checks:
  CRITICAL drug-drug interaction: ITRACONAZOLE & SIMVASTATIN
  
```

(ITRACONAZOLE CAP,ORAL 100MG TAKE ONE CAPSULE BY MOUTH EVERY 12 HOURS  
[ACTIVE])  
Overriding Provider: PSOPROVIDER,ONE  
Overriding Reason: TESTING

CRITICAL drug-drug interaction: ITRACONAZOLE & SIMVASTATIN  
ITRACONAZOLE CAP,ORAL 100MG PO BID [ACTIVE])  
Overriding Provider: PSOPROVIDER,ONE  
Overriding Reason: TESTING

Duplicate drug class order: ANTILIPEMIC AGENTS (CHOLESTYRAMINE 9GM  
PACKETS TAKE ONE PACKET BY MOUTH TWICE A DAY DISSOLVE IN WATER OR  
JUICE. [PENDING])

+ Enter ?? for more actions  
BY Bypass DC Discontinue  
ED Edit FN Finish  
Select Item(s): Next Screen// FN Finish

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

=====

THERAPEUTIC DUPLICATION(S) \*\*\* SIMVASTATIN 20MG TAB with

Local Rx#: 2577  
Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
QTY: 90 Days Supply: 90  
Processing Status: Released locally on 3/7/08@08:55:32 (Window)  
Last Filled On: 03/07/08

-----

Local Rx#: 2581  
Drug: CHOLESTYRAMINE 9GM PACKETS (NON-VERIFIED)  
SIG: TAKE ONE PACKET BY MOUTH TWICE A DAY DISSOLVE IN WATER  
OR JUICE.  
QTY: 60 Days Supply: 30  
Processing Status: Not released locally (Window)  
Last Filled On: 11/08/06  
Class(es)Involved in Therapeutic Duplication(s): HMGCo-A Reductase Inhibitors,  
Antihyperlipidemics

=====

Discontinue order(s)? Y/N Yes

1. RX #2577 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
2. RX #2581 CHOLESTYRAMINE 9GM PACKETS

Select (1-2): 1 Duplicate Therapy RX #2577 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB will be discontinued after the acceptance of the new order.

Rx # 2582 03/12/08  
TEST,D #30  
TAKE ONE TABLET BY MOUTH EVERY EVENING

SIMVASTATIN 20MG TAB  
PSOPROVIDER,ONE PSOPHARMACIST,ONE  
# of Refills: 6

This Rx has been flagged by the provider as: NO COPAY

Was treatment related to Agent Orange exposure? YES//

```

Are you sure you want to Accept this Order? NO// YES

METHOD OF PICK-UP:
WAS THE PATIENT COUNSELED: NO// NO

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

-Duplicate Therapy RX #2577 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB has been discontinued...

Press Return to Continue:

```

**Renewing an order – Therapeutic Duplication involving 5 drugs, one therapy class and only one order can be discontinued.**

```

+          Enter ?? for more actions
DC  Discontinue          PR  Partial          RL  Release
ED  Edit                RF  Refill          RN  Renew
Select Action: Next Screen// rn  Renew
FILL DATE: (3/12/2008 - 3/13/2009): TODAY// (MAR 12, 2008)
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
Nature of Order: WRITTEN//          W
WAS THE PATIENT COUNSELED: NO// NO

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

Now Renewing Rx # 2580   Drug: SUCRALFATE 1GM TAB

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

=====
*** THERAPEUTIC DUPLICATION(S) *** SUCRALFATE 1GM TAB with

      Local Rx#: 2574
      Drug: CIMETIDINE 300MG TAB (DISCONTINUED)
      SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
      QTY: 180                      Days Supply: 90
      Processing Status: Released locally on 3/7/08@08:55:32 (Window)
      Last Filled On: 03/07/08
-----

      Local Rx#: 2573
      Drug: NIZATIDINE 150MG CAP (HOLD)
      SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
      QTY: 180                      Days Supply: 90
      Processing Status: Released locally on 3/7/08@08:55:32 (Window)
      Last Filled On: 03/07/08
-----

      LOCATION: <VA OR DOD FACILITY>   Remote Rx#: 65343
      Drug: RANITIDINE HCL 150MG TAB (EXPIRED)
      SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
      QTY: 180                      Days Supply: 90

Class(es)Involved in Therapeutic Duplication(s): Peptic Ulcer Agents, Histamine-2
Receptor Antagonists (H2 Antagonists)

=====
Discontinue RX #2573 NIZATIDINE 150MG CAP? Y/N No

Press Return to Continue:

2580A          SUCRALFATE 1GM TAB          QTY: 360
# OF REFILLS: 3  ISSUED: 03-12-08

```

SIG: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY  
 FILLED: 03-12-08  
 ROUTING: WINDOW PHYS: PSOPROVIDER,ONE

Edit renewed Rx ? Y// n NO

SC Percent: 80%  
 Disabilities: NONE STATED

Was treatment for a Service Connected condition? NO//

**Verification of Non-Verified Order**

OP Medications (NON-VERIFIED) Dec 20, 2011@14:45:54 Page: 1 of 2  
 PSOPATIENT,ONE <A>

PID: 666-00-0000 Ht (cm) : \_\_\_\_\_ (\_\_\_\_\_)  
 DOB: JAN 1,1945 (66) Wt (kg) : \_\_\_\_\_ (\_\_\_\_\_)  
 SEX: MALE  
 CrCL: <Not Found> (CREAT: Not Found) BSA (m2) : \_\_\_\_\_

Rx #: 2382\$  
 (1) \*Orderable Item: NIZATIDINE CAP,ORAL  
 (2) Drug: NIZATIDINE 150MG CAP  
 NDC: 00056-0176-75  
 (3) \*Dosage: 150 (MG)  
 Verb: TAKE  
 Dispense Units: 1  
 Noun: CAPSULE  
 \*Route: ORAL  
 \*Schedule: BID

(4) Pat Instructions:  
 SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY  
 (5) Patient Status: OPT NSC  
 (6) Issue Date: 12/20/11 (7) Fill Date: 12/20/11  
 Last Fill Date: 12/20/11 (Window)

+ Enter ?? for more actions  
 DC Discontinue PR (Partial) RL (Release)  
 ED Edit RF (Refill) RN (Renew)  
 Select Action: Next Screen// VF VF

RX: 2382 PATIENT: PSOPATIENT,ONE (666-00-0000)  
 STATUS: Non-Verified CO-PAY STATUS  
 DRUG: NIZATIDINE 150MG CAP  
 QTY: 180 90 DAY SUPPLY  
 SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY  
 LATEST: 12/20/2011 # OF REFILLS: 3 REMAINING: 3  
 ISSUED: 12/20/11 PROVIDER:  
 LOGGED: 12/20/11 CLINIC: NOT ON FILE  
 EXPIRES: 12/20/12 DIVISION: XXXXX (499)  
 CAP: SAFETY ROUTING: WINDOW  
 ENTRY BY: PSTECH,ONE VERIFIED BY:

EDIT: (Y/N/P): N// O

PSOPATIENT,ONE ID#:666-00-0000 RX#: 2382

RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF	DAY SUP
-----ACTIVE-----							
2380\$	ACETAMINOPHEN 325MG TAB U.D.	540	A	12-20	12-20	3	90
2379\$	WARFARIN 2.5MG TABS	90	A	12-20	12-20	3	90
-----DISCONTINUED-----							
2378\$	INDOMETHACIN 25MG CAP	270	DC	12-20	12-20	3	90
2377\$	WARFARIN 10MG TABS	2160	DC	12-20	12-20	3	90
-----NON-VERIFIED-----							
2382\$	NIZATIDINE 150MG CAP	180	N	12-20	12-20	3	90
2381\$	SUCRALFATE 1 GM TAB	360	N	12-20	12-20	3	90

Press Return to continue:

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

=====  
\*\*\* THERAPEUTIC DUPLICATION(S) \*\*\* NIZATIDINE 150MG CAP with

Local RX#: 2381  
Drug: SUCRALFATE 1 GM TAB (Non-Verified)  
SIG: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY  
QTY: 360 Days Supply: 90  
Processing Status: Not released locally (Window)  
Last Filled On: 12/20/11

Class(es) Involved in Therapeutic Duplication(s): Peptic Ulcer Agents  
=====

Press Return to continue:

Discontinue Rx #2381 SUCRALFATE 1 GM TAB Y/N ? NO

PSOPATIENT,ONE ID#:666-00-0000 RX#: 2382  
NIZATIDINE 150MG CAP

VERIFY FOR PSOPATIENT,ONE ? (Y/N/Delete/Quit): Y// ES

## Copying an Existing Order

New OP Order (COPY) Mar 12, 2008@09:15:48 Page: 1 of 2  
PSOPATIENT,TWO <A>  
PID: 000-00-0000 Ht(cm): 182.88 (04/13/2005)  
DOB: JAN 1,1945 (63) Wt(kg): 77.27 (04/13/2005)

Orderable Item: AMLODIPINE/ATORVASTATIN TAB

- (1) Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
- (2) Patient Status: OPT NSC
- (3) Issue Date: MAR 12,2008 (4) Fill Date: MAR 12,2008  
Verb: TAKE
- (5) Dosage Ordered: ONE TABLET  
Route: ORAL  
Schedule: QAM
- (6) Pat Instruction:  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
- (7) Days Supply: 30 (8) QTY ( ): 30
- (9) # of Refills: 11 (10) Routing: WINDOW
- (11) Clinic:
- (12) Provider: PSOPROVIDER,ONE (13) Copies: 1

+ Enter ?? for more actions

AC Accept ED Edit

Select Action: Next Screen// AC Accept

-----  
Duplicate Drug in Local Rx:

Rx #: 2584  
Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB  
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING  
QTY: 30 Refills remaining: 11  
Provider: OPPOVIDER, ONE Issued: 03/12/07  
Status: ACTIVE Last filled on: 03/12/07  
Processing Status: Released locally on 03/12/07@08:55:32 (Window)  
Days Supply: 30

-----  
Discontinue Rx #2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB? Y/N YES

Rx #2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB will be discontinued after the acceptance of the new order.

=====  
\*\*\* THERAPEUTIC DUPLICATION(S) \*\*\* AMLODIPINE 5MG/ATORVASTATIN 10MG TAB with

Pending Drug: LOVASTATIN 20MG TAB  
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME FOR HIGH CHOLESTEROL

Pending Drug: NIFEDIPINE 10MG CAP  
SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY

Class(es) Involved in Therapeutic Duplication(s): Calcium Channel Blockers, HMGCo-A Reductase Inhibitors

=====  
Discontinue order(s)? Y/N Y es

1. Pending Order NIFEDIPINE 10MG CAP
2. Pending Order LOVASTATIN 20MG TAB

Select (1-2): 1-2 Duplicate Therapy Pending Order NIFEDIPINE 10MG CAP will be discontinued after the acceptance of the new order.  
Duplicate Therapy Pending Order LOVASTATIN 20MG TAB will be discontinued after the acceptance of the new order.

Nature of Order: WRITTEN// W  
WAS THE PATIENT COUNSELED: NO// NO

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

Rx # 2585 03/12/08  
PSOPATIENT,TWO T #30  
TAKE ONE TABLET BY MOUTH EVERY MORNING

AMLODIPINE 5MG/ATORVASTATIN 10MG TAB  
PSOPROVIDER,ONE PSOPHARMACIST,ONE  
# of Refills: 11

SC Percent: 40%  
Disabilities: NONE STATED

Was treatment for Service Connected condition? NO//

Is this correct? YES// ...

Duplicate Drug Rx 2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB has been discontinued..  
Duplicate Therapy Pending Order NIFEDIPINE 10MG CAP has been discontinued..  
Duplicate Therapy Pending Order LOVASTATIN 20MG TAB has been discontinued..

## Reinstating a Discontinued Order

```
Rx #: 2586
(1) *Orderable Item: CIMETIDINE TAB
(2) Drug: CIMETIDINE 300MG TAB
    NDC: 00056-0176-75
(3) *Dosage: 300 (MG)
    Verb: TAKE
    Dispense Units: 1
    Noun: TABLET
    *Route: ORAL
    *Schedule: QHS
(4) Pat Instructions:
    SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
(5) Patient Status: OPT NSC
(6) Issue Date: 03/12/08 (7) Fill Date: 03/12/08
    Last Fill Date: 03/12/08 (Window)
+ Enter ?? for more actions
DC Discontinue PR (Partial) RL Release
```



```

ED (Edit)                RF (Refill)                RN  Renew
Select Action: Next Screen// dc  Discontinue
Are you sure you want to Reinstate? NO// y  YES

Comments: testing duplicate therapy check
Nature of Order: SERVICE CORRECTION//          S

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

=====
*** THERAPEUTIC DUPLICATION(S) *** CIMETIDINE 300MG TAB with

      Local Rx#: 2576
      Drug: SUCRALFATE 1GM TAB (ACTIVE)
      SIG: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY
      QTY: 1200                Days Supply: 30
      Processing Status: Released locally on 3/7/08@08:55:32 (Window)
      Last Filled On: 03/07/08

Class(es)Involved in Therapeutic Duplication(s): Peptic Ulcer Agents
=====
Discontinue RX # 2576 SUCRALFATE 1GM TAB? Y/N NO - Prescription was not discontinued...

Prescription #2586 REINSTATED!
  Prescription #2586 Filled: MAR 12, 2008Printed:      Released:
  Either print the label using the reprint option
  or check later to see if the label has been printed.

```

**Creating a New Order – Editing the Orderable Item**

```

Rx #: 2594
(1) *Orderable Item: ENALAPRIL TAB *** (N/F)***
(2) Drug: ENALAPRIL 5MG TAB *** (N/F)***
    NDC: 00056-0176-75
(3) *Dosage: 5 (MG)
    Verb: TAKE
    Dispense Units: 1
    Noun: TABLET
    *Route: ORAL
    *Schedule: QAM
(4) Pat Instructions:
    SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
(5) Patient Status: SC
(6) Issue Date: 03/12/08                (7) Fill Date: 03/12/08
    Last Fill Date: 03/12/08 (Window)
+ Enter ?? for more actions
DC Discontinue          PR Partial          RL Release
ED Edit                RF Refill         RN Renew
Select Action: Next Screen// 1

Current Orderable Item: ENALAPRIL TAB

Select PHARMACY ORDERABLE ITEM NAME: ENALAPRIL// dip
  1  DIPHENHYDRAMINE    CREAM, TOP
  2  DIPHENHYDRAMINE    CAP, ORAL
  3  DIPYRIDAMOLE      TAB
CHOOSE 1-3: 3  DIPYRIDAMOLE      TAB

New Orderable Item selected. This edit will create a new prescription!

Press Return to Continue...

```

DRUG NAME REQUIRED!

Instructions:

The following Drug(s) are available for selection:

1. DIPYRIDAMOLE 25MG TAB
2. DIPYRIDAMOLE 50MG TAB

Select Drug by number: (1-2): 1

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please Wait...

=====  
\*\*\* THERAPEUTIC DUPLICATION(S) \*\*\* DIPYRIDAMOLE 25MG TAB with

Local Rx#: 2560  
Drug: WARFARIN 5MG TAB (ACTIVE)  
SIG: TAKE ONE TABLET BY MOUTH EVERY EVENING  
QTY: 90 Days Supply: 90  
Processing Status: Released locally on 3/4/08@08:55:32 (Window)  
Last Filled On: 03/04/08

Class(es)Involved in Therapeutic Duplication(s): Antiplatelet Drugs, Antithrombotic Drugs

=====  
Discontinue RX # 2560 WARFARIN 5MG TAB? Y/N NO -Prescription was not discontinued...

You have changed the Orderable Item from ENALAPRIL to  
DIPYRIDAMOLE.

There are 2 Available Dosage(s):

1. 25MG
2. 50MG

Select from list of Available Dosages (1-2), Enter Free Text Dose  
or Enter a Question Mark (?) to view list: 1 25MG

You entered 25MG is this correct? Yes// YES

VERB: TAKE// TAKE

DISPENSE UNITS PER DOSE(TABLET): 1// 1

Dosage Ordered: 25MG

NOUN: TABLET// TABLET

ROUTE: ORAL// ORAL

Schedule: QAM// TID

Now searching ADMINISTRATION SCHEDULE (#51.1) file...

TID TID THREE TIMES A DAY

...OK? Yes// (Yes)

(THREE TIMES A DAY)

LIMITED DURATION (IN MONTHS, WEEKS, DAYS, HOURS OR MINUTES):

CONJUNCTION:

New OP Order (ROUTINE) Mar 12, 2008@10:58:24 Page: 1 of 2

PSOPATIENT,ONE

PID: 666-00-0000

Ht (cm) : \_\_\_\_\_ (\_\_\_\_\_)

DOB: JAN 1,1910 (98)

Wt (kg) : \_\_\_\_\_ (\_\_\_\_\_)

SEX: MALE

CrCL: <Not Found> (CREAT: Not Found)

BSA (m2):

Orderable Item: DIPYRIDAMOLE TAB

(1) Drug: DIPYRIDAMOLE 25MG TAB

(2) Patient Status: SC

```

(3) Issue Date: MAR 12,2008          (4) Fill Date: MAR 12,2008
(5) Dosage Ordered: 25 (MG)
    Verb: TAKE
    Dispense Units: 1
    Noun: TABLET
    Route: ORAL
    Schedule: TID
(6) Pat Instruction:
    SIG: TAKE ONE TABLET BY MOUTH THREE TIMES A DAY
(7) Days Supply: 90                  (8) QTY (TAB): 180
(9) # of Refills: 3                  (10) Routing: WINDOW
+ This change will create a new prescription!
AC Accept                            ED Edit
Select Action: Next Screen// ac Accept
Nature of Order: SERVICE CORRECTION// S
WAS THE PATIENT COUNSELED: NO// NO

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

Rx # 2595                            03/12/08
PSOPATIENT,ONE                        #180
TAKE ONE TABLET BY MOUTH THREE TIMES A DAY

DIPYRIDAMOLE 25MG TAB
PSOPROVIDER,ONE                       PSOPHARMACIST,ONE
# of Refills: 3

The Pharmacy Orderable Item has changed for this order. Please review any
existing SC or Environmental Indicator defaults carefully for appropriateness.

SC Percent: 80%
Disabilities: NONE STATED

Was treatment for a Service Connected condition? YES//
Is this correct? YES// ...

```

**Cancel drug in same class parameter set to No**

```

PSOPATIENT,ONE
PID: 666-00-0000                      Ht (cm): _____ (<A>_____)
DOB: JAN 1,1910 (98)                  Wt (kg): _____ (<A>_____)
SEX: FEMALE                            Non-VA Meds on File      Last entry on 03/03/08
CrCL: <Not Found> (CREAT: Not Found)    BSA (m2): _____

#  RX #    DRUG                                ISSUE  LAST REF DAY
QTY ST  DATE  FILL  REM  SUP
-----ACTIVE-----
1 2562    AMINOPHYLLINE 200MG TAB                360 A  03-04 03-04  3  90
2 2567    CAPTOPRIL 12.5MG TAB                    180 A  03-06 03-06  3  90
3 2563    CISAPRIDE 10MG                          90 A  03-06 03-06  3  90
4 2568    DIGOXIN 0.125MG                         30 A  03-06 03-06  3  90
5 2550    IBUPROFEN 600MG TAB                     270 A  03-03 03-04  3  90
6 2560    WARFARIN 5MG TAB                        90 A  03-04 03-04  3  90
-----DISCONTINUED-----
7 2561    CIMETIDINE 300MG TAB                    90 DC 03-04 03-04  3  90
-----HOLD-----
+ Enter ?? for more actions
PU Patient Record Update                NO New Order
PI Patient Information                    SO Select Order
Select Action: Next Screen// NO New Order

Eligibility: SERVICE CONNECTED 50% to 100%    SC%: 80
RX PATIENT STATUS: SC//
DRUG: NIZATIDINE
Lookup: GENERIC NAME
NIZATIDINE 150MG CAP                      GA301
...OK? Yes// (Yes)

```

```

=====
*** THERAPEUTIC DUPLICATION(S) *** NIZATIDINE 150MG CAP with

Local Rx #2561 (ACTIVE) for CIMETIDINE 300MG TAB

Local Rx #2572 (PROVIDER HOLD) for SUCRALFATE 1MG TAB

Remote Rx #2571 (DISCONTINUED) for RANITIDINE HCL 150MG TAB

Pending Order FAMOTIDINE 20MG TAB

Non-VA Med Order for CIMETIDINE 300MG TAB

Class(es) Involved in Therapeutic Duplication(s): PEPTIC ULCER AGENTS, HISTAMINE-2
RECEPTOR ANTAGONISTS (H2 ANTAGONISTS)
=====
VERB: TAKE
There are 2 Available Dosage(s) :
    1. 150MG
    2. 300MG

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list:

```

### Entering a New Order – Not accepting order, duplicate therapy not discontinued

```

Select Action: Quit// NO   New Order

Eligibility: NSC      SC%: 5
RX PATIENT STATUS: OPT NSC//
DRUG: FAMOTIDINE
  Lookup: GENERIC NAME
FAMOTIDINE 20MG TAB      GA301
  ...OK? Yes// (Yes)

Restriction/Guideline(s) exist.  Display? : (N/D/O/B): No// NO

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

=====
*** THERAPEUTIC DUPLICATION(S) *** FAMOTIDINE 20MG TAB with

Local RX#: 2586A
Drug: CIMETIDINE 300MG TAB (DISCONTINUED)
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
QTY: 90                      Days Supply: 30
Processing Status: Released locally on 3/12/08@08:55:32 (Window)
Last Filled On: 03/12/08

-----
Press Return to Continue:

Local RX#: 2710
Drug: RANITIDINE HCL 150MG TAB (ACTIVE)
SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
QTY: 60                      Days Supply: 30
Processing Status: Released locally on 6/1/09@08:55:32 (Window)
Last Filled On: 06/01/09

-----
Press Return to Continue:

Class(es) Involved in Therapeutic Duplication(s): Peptic Ulcer Agents, Histamine-2
Receptor Antagonists (H2 Antagonists)

```

```

=====
Press Return to Continue:

Discontinue Rx #2710 for RANITIDINE HCL 150MG TAB Y/N ? YES

Duplicate Therapy RX #2710 RANITIDINE HCL 150MG TAB will be discontinued after the
acceptance of the new order.
=====

VERB: TAKE
There are 2 Available Dosage(s) :
    1. 20MG
    2. 40MG

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 20MG

You entered 20MG is this correct? Yes//  YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 20MG

NOUN: TABLET
ROUTE: PO//  ORAL      PO  MOUTH
Schedule: BID//  QAM
Now searching ADMINISTRATION SCHEDULE (#51.1) file...
    QAM  QAM  EVERY MORNING
        ...OK? Yes//  (Yes)
    (EVERY MORNING)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES):
CONJUNCTION:
PATIENT INSTRUCTIONS:

(TAKE ONE TABLET BY MOUTH EVERY MORNING )

DAYS SUPPLY: (1-90): 30//  ^
RX DELETED
Duplicate Therapy RX #2710 RANITIDINE HCL 150MG TAB NOT Discontinued.

```

## Allergy/ADR Order Checks (PSO\*7\*251)

This section will detail the Allergy/ADR order check display within Outpatient Pharmacy.

Outpatient Pharmacy displays the same Allergy/ADR warning only once if both a drug class(es) and drug ingredient(s) are defined for the Allergy/ADR. The drug class and drug ingredient will be listed on the single display. The user is prompted to intervene once. If no intervention is chosen, the standard order entry dialog will resume. Local and remote Allergy/ADRs are combined.

If no Allergy Assessment has been documented for the patient for whom the medication order is being processed, the user will be forced to log an intervention for every medication order entered until the allergy assessment is resolved.

See examples below:

### Remote Allergy/ADR – New Order Entry Backdoor – Both Ingredient and Drug Class defined for Allergy/ADR

```

Select Action: Quit// NO  New Order
PATIENT STATUS: SC//

```

```

DRUG: DILTIAZEM
Lookup: GENERIC NAME
  1  DILTIAZEM (DILACOR XR) 240MG SA CAP          CV200    N/F      This
drug will not be processed without Drug Request Form 10-7144
  2  DILTIAZEM (INWOOD) 120MG SA CAP             CV200
  3  DILTIAZEM (INWOOD) 180MG SA CAP             CV200
  4  DILTIAZEM (INWOOD) 240MG SA CAP             CV200
  5  DILTIAZEM (INWOOD) 300MG SA CAP             CV200
Press <RETURN> to see more, '^' to exit this list, '^ ^' to exit all lists, OR
CHOOSE 1-5: 1  DILTIAZEM (DILACOR XR) 240MG SA CAP          CV200    N/F      This drug will
not be processed without Drug Request Form 10-7144

Now doing allergy checks.  Please wait...

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

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

Do you want to Intervene? Y// NO

VERB: TAKE
There are 2 Available Dosage(s):
  1. 240MG
  2. 480MG

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list:
.
.
OR

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for DILTIAZEM (DILACOR XR) 240MG SA CAP

PROVIDER:      PSOPROVIDER,THREE      TPP      119
RECOMMENDATION:  NO CHANGE

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

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

VERB: TAKE
There are 2 Available Dosage(s):
  1. 240MG
  2. 480MG

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list:

```

### Local Allergy/ADR – New Order Entry Backdoor – Only Drug Class defined.

```

Another New Order for PSOPATIENT, TEN? YES//

Eligibility: NSC
RX PATIENT STATUS: OPT NSC//
DRUG: SEPTRA
Lookup: GENERIC NAME
SEPTRA DS TAB          AM650

```

```

...OK? Yes// (Yes)

Now doing allergy checks. Please wait...

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

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

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for SEPTRA DS TAB

PROVIDER: PSOPROVIDER,FOUR FPP 119
RECOMMENDATION: NO CHANGE

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

Would you like to edit this intervention ? N// O
There are 2 Available Dosage(s):
1. 1 TABLET
2. 2 TABLETS

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 1 TABLET

You entered 1 TABLET is this correct? Yes// YES
VERB: TAKE
ROUTE: PO// ORAL PO MOUTH
Schedule: BID
Now searching ADMINISTRATION SCHEDULE (#51.1) file...
BID BID TWICE A DAY
...OK? Yes// (Yes)
(TWICE A DAY)

LIMITED DURATION (IN DAYS, HOURS OR MINUTES):

```

### Local & Remote Allergy/ADR – Multi-ingredients, Pending Order

```

ED Edit FN Finish
Select Item(s): Next Screen// NEXT SCREEN

Pending OP Orders (ROUTINE) Mar 24, 2008@21:56:03 Page: 2 of 3
PSOPATIENT,THREE <A>
PID: 000-00-0000 Ht (cm): 167.64 (06/10/1993)
DOB: FEB 2,1939 (69) Wt (kg): 68.18 (06/10/1993)
+

* (1) Orderable Item: SULFAMETHOXAZOLE/TRIMETHOPRIM TAB
(2) Drug: SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
NDC: 00056-0176-75
Verb: TAKE
(3) *Dosage: 1 TABLET
*Route: ORAL
*Schedule: Q12H
(4) Pat Instruct:
Provider Comments:
Instructions: TAKE 1 TABLET PO Q12H
SIG: TAKE 1 TABLET BY MOUTH EVERY 12 HOURS
(5) Patient Status: OPT NSC
(6) Issue Date: MAR 24,2008 (7) Fill Date: MAR 24,2008

```

```

+          Enter ?? for more actions
BY Bypass          DC Discontinue
ED Edit           FN Finish
Select Item(s): Next Screen// FN Finish

Now doing allergy checks. Please wait...

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

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

Do you want to Intervene? Y// ES

Now creating Pharmacy Intervention
for SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB

PROVIDER: PSOPROVIDER, 11 PP 119
RECOMMENDATION: NO CHANGE

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

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

Rx # 2611          03/24/08
PSOPATIENT,THREE #20
TAKE 1 TABLET BY MOUTH EVERY 12 HOURS
SULFAMETHOXAZOLE/TRIMETHOPRIM DS TAB
PSOPROVIDER, 11 PSOPHARMACIST,TWO
# of Refills: 1

Are you sure you want to Accept this Order? NO// Y

```



## Chapter 23: Dosing Order Checks

---

MOCHA v2.0 implements the first increment of dosage checks and introduces the Maximum Single Dose Check for simple and complex orders for both Outpatient Pharmacy and Inpatient Medications applications. MOCHA v2.1b implements the second increment of dosage checks and introduces the Max Daily Dose Check for simple orders for both Outpatient Pharmacy and Inpatient Medications applications. MOCHA v2.0 and MOCHA v2.1b use the same interface to First Databank (FDB) as MOCHA v1.0.



Please refer to the **Dosing Order Checks User Manual** for a detailed description of dosing order checks.

# Chapter 24: Releasing Medication

---

This chapter describes the option used for releasing medications.

## Release Medication

[PSO RELEASE]

The *Release Medication* option is used at the time the prescription is filled and ready to be given to the patient. Inventory is decreased, certain fields in the file are updated, and a copay is generated if the action is applicable to the prescription. With this option, prescriptions can be batch processed. Communication is made with the Integrated Funds Control, Accounting and Procurement (IFCAP) and Integrated Billing (IB) software to generate copay charges. IFCAP and IB software handle patient billing, tracking of charges, and payment received.

The copay status of a prescription is re-evaluated whenever a fill is released. Various actions can occur based on changes to the criteria that determine the copay status of a prescription. The actions that may result at the time a fill is released are described below.

1. **No action is taken.** No changes to the criteria that determine copay status of a prescription have occurred.
2. **The copay status of the prescription is automatically reset, and an entry is placed in the Copay activity log.**

**Example:** The drug for which the prescription is written is no longer marked for investigational use. The copay status of the prescription is reset from No Copayment to Copay.

3. **The copay status of the prescription is automatically reset, an entry is placed in the Copay activity log, and a MailMan message is generated detailing missing information required for user follow up.**

**Example:** The drug for which the prescription is written is no longer marked for investigational use. The copay status of the prescription is reset from No Copayment to Copay. The patient has been documented as being exposed to Southwest Asia Conditions during Persian Gulf War service since the last fill. A MailMan message will be generated informing the user that the ‘Is this Rx for treatment related to service in SW Asia?’ question must be addressed and documented using the *Reset Copay Status/Cancel Charges* option.

4. **A MailMan message is generated detailing missing information required for user follow-up.**

**Example:** A Veteran is documented as having Agent Orange exposure. Refill #2 for a prescription entered into the system before the new medication copay exemptions took effect on January 1, 2002 is released. The prescription is copay eligible. A MailMan message will be generated informing recipients that the ‘Is this Rx for treatment of Vietnam-Era Herbicide (Agent Orange) exposure?’ question must be addressed. The copay status of the Rx may change based on the response entered using the *Reset Copay Status/Cancel Charges* option.

If a MailMan message is generated at the time a prescription fill is released, the recipients of the message will be the provider of record, the pharmacy user who finished the order, and holders of the PSO COPAY key. The message lists the patient name, prescription number, and medication ordered, current copay status, and applicable copay exemption questions that need addressing to determine the prescription's copay status. The *Reset Copay Status/Cancel Charges* option must be used to enter the responses to the medication copay exemption questions listed in the MailMan message. If responses are not entered for the applicable medication copay exemption questions, any subsequent refills when released for this prescription and possibly other prescriptions for this patient will continue to generate the same MailMan message.

### Example: MailMan Message

```
Subj: PRESCRIPTION QUESTIONS REVIEW NEEDED (500) [#30364] 10/11/05@19:56
35 lines
From: OUTPATIENT PHARMACY PACKAGE In 'IN' basket. Page 1
-----
OPPATIENT29,ONE (6543P) CHEYENNE VAM&ROC
Eligibility: SC LESS THAN 50% SC%: 20
REIMBURSABLE INSURANCE

Disabilities: ARTHRITIS-10%(SC), FOREARM CONDITION-5%(NSC),
FOREARM CONDITION-4%(NSC), BENIGN EYE GROWTH-0%(NSC),
LOSS OF FIELD OF VISION-20%(SC),

Rx# 101906 (1) COPAY
ALBUTEROL SO4 0.083% INHL 3ML

Due to a change in criteria, additional information listed below is needed
to determine the final VA copay and/or insurance billable status for this Rx
so that appropriate action can be taken by pharmacy personnel.

Is this Rx for a Service Connected Condition?

Is this Rx for treatment related to service in SW Asia?

This message has been sent to the provider of record, the pharmacist who
finished the prescription order, and all holders of the PSO COPAY key.

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

Subj: PRESCRIPTION QUESTIONS REVIEW NEEDED (500) [#30364] Page 2
-----
Providers:
Please respond with your answer to the question(s) as a reply to this
message. The prescription will be updated by the appropriate staff.

Staff assigned to update the Prescription responses:
Please use the RESET COPAY STATUS/CANCEL CHARGES option to enter the responses
to the questions above, which may result in a Rx copay status change and/or
the need to remove VA copay charges or may result in a change to the patient's
insurance carrier.

Note: The SC question is now asked for Veterans who are SC>49% in order to
determine if the Rx can be billed to a third party insurance. These Veterans
will NOT be charged a VA copay.

Supply, nutritional, and investigational drugs are not charged a VA copay but could be
reimbursable by third party insurance.

Enter message action (in IN basket): Ignore//
```

An annual copayment cap is applied to patients in specific priority enrollment groups. Once a patient reaches the annual copayment cap, no further medication copay charges will be billed for the calendar year. An entry to that effect is made to the Copay Activity Log. The '\$' indicator remains next to the prescription number to indicate that the prescription is still copay eligible.

Integrated Billing software keeps track of all prescription fills not billed due to the annual cap.

**Example: Copay Activity Log When Annual Cap Reached**

Copay Activity Log:				
#	Date	Reason	Rx Ref	Initiator Of Activity
1	10/23/01	ANNUAL CAP REACHED	ORIGINAL	OPPHARMACIST11,THREE
Comment: NO BILLING FOR THIS FILL				

If a patient falls below the annual copayment cap for whatever reason (e.g., prescription fill is returned to stock and copay charges cancelled), the Integrated Billing package can initiate copay charges to bring the patient back up to the annual copayment cap. Integrated billing software will go back and bill a copay charge for those fills previously not charged due to the annual cap, bringing the patient’s total copayment up to the cap. Whenever this occurs an entry will be placed in the Copay activity log.


**Example: Copay Activity Log With IB-Initiated Charge**

Copay Activity Log:				
#	Date	Reason	Rx Ref	Initiator Of Activity
1	10/23/01	ANNUAL CAP REACHED	ORIGINAL	OPPHARMACIST11,THREE
Comment: NO BILLING FOR THIS FILL				
2	10/23/01	IB-INITIATED COPAY	ORIGINAL	OPPHARMACIST11,THREE
Comment: PARTIAL CHARGE				

If a prescription is not in a releasable status, the user will be given an error message, such as:

- Prescription has a status of (status) and is not eligible for release.
- Prescription was deleted.
- Improper barcode format.
- Non-existent prescription.

Copay is not charged for a partial fill.

	<p><b>***Important***</b></p> <p>This is a mandatory function that must be used by the pharmacy.</p>
---	--

**Changes to Releasing Orders Function – Digitally Signed Orders Only**

The release function in the *Patient Prescription Processing* option has been modified with patch PSO\*7\*131 to require that all digitally signed orders for Schedule II controlled substances (CSII orders) be released through the *Outpatient Rx’s* option in the *Controlled Substances* (CS) menu. If DEA/PKI is activated and an order is digitally signed, the user will be advised that the order must be released through the *Outpatient Rx’s* option in the *Controlled Substances* (CS) menu.

The same message will display if a user attempts to release a digitally signed CSII order during Speed Release or when using the *Release Medication* option.

A new security key named "PSDRPH" was introduced by the Controlled Substances patch PSD\*3\*76 that authorizes pharmacists to finish/verify digitally signed Schedule II-V CS orders placed via CPRS.

When processing a digitally signed pending order, the integrity of the original order placed in CPRS is now being checked to ensure that the data fields listed below are not altered from the time the order is signed in CPRS and later selected for processing in backdoor pharmacy. This is done by passing the data elements listed below to a Kernel Application Programming Interface (API), Integration Control Registration (ICR) #3539 along with the CPRS hash count provided by ICR #5709. The Kernel API compares these two hash values and returns an "OK" if the pending order is unaltered; otherwise, a "-1^error code^error message" is returned.

Example: "-1^89802016^Mismatched digital signature hash values."

The following fields are used in the hash check:

- Date of Issuance
- Full Name and Address of the Patient
- Drug Name
- Quantity Prescribed
- Directions for Use
- Prescriber Name
- Prescriber Address (site address)
- Prescriber DEA/VA Registration Number
- Order Number (CPRS)

The Kernel API will also check for the validity of the PIV card certificate. If the certificate is revoked or expired, the API will return the appropriate error code. If the error code is related to hash mismatch, or the PIV card certificate is revoked, the following events will be triggered during pending order processing:

- The order will be auto discontinued.
- First line of the pending order screen will have the message "Digital Signature Failed: Corrupted (Hash mismatch)" or " Rx NOT processed: PIV Card Certificate Revoked", and the message will be highlighted.
- The status bar of the screen will have the message "Signature Failed: Corrupted (Hash mismatch)" or "PIV Certificate Revoked".

A mail message will be generated to the holders of the PSDMGR key notifying that the order has been auto-discontinued (similar to the example listed below). If the discontinuation is due to a hash mismatch as a result of altering one of the fields listed above, the mail message will show the altered fields with the discrepancies as shown in the following example.

### Example: Mail Message of Discontinuation Due to Hash Mismatch

```
Subj: DIGITALLY SIGNED NEW ORDER AUTO DISCONTINUED [#196353]
      03/20/12@17:1024 lines
From: POSTMASTER In 'IN' basket. Page 1 *New*

-----

Following order was auto discontinued when finishing a pending order
due to Corrupted (Hash mismatch) - 89802016

Division      : GREELEY CLINIC
CPRS Order #  : 5587651
Issue Date    : MAR 7,2012
Patient       : TEST,PATIENT (0908)
Address       : P.O. BOX 31
               LAPORTE, CA 95981
Drug          : CODEINE SULFATE 60MG TAB
Dosage Ordered: 120 (MG)
Dosage Form   : TABLETS
Quantity      : 54
Provider      : TEST,PROVIDER
DEA#          : TA1234563
Site Address  : 2360 E PERSHING BLVD
               2360 East Pershing Boulevard
               CHEYENNE

Differences in CPRS and Pharmacy Pending File

Data Name          CPRS File          Pharmacy Pending File
-----
QTY PRESCRIBED    15                                30
```

If the error code is related to 'certificate expired', the pending order will be processed (will not be auto-discontinued), and a notification will be sent to the provider with the message " Rx processed: PIV Card Cert Expired - NO ACTION REQ."

The following changes have been made for finishing a CS order:

- When finishing a pending CS order, if the user does not hold the new PSDRPH security key, the order will be marked as 'Non-Verified'. To verify a 'Non-Verified' CS order, the PSDRPH security key is now required. To discontinue a pending CS order, the PSDRPH security key is now required.
- The pending order screen will now display the provider's DEA/VA #, the DETOX# (if available), and the site address.
- When finishing a new pending CS order, the dosage, provider name, or the number of refills will not be allowed editing; however, the user will be allowed to select other possible dosages for the same drug if available. If the changes to the dispense drug results in creating a new order, the user will be notified by the message " Digitally Signed Order – No such changes allowed". If pharmacy wants to make such changes, then they have to discontinue (DC) the pending order and start a new order. However, the user will be allowed to select other possible dosages for the same drug that does not change the prescribed dosage.
- When finishing a new pending CS order, the day supply or the quantity will not be allowed to increase but can be decreased. If the day supply is decreased, the number of refills will also be adjusted accordingly depending on the drug setup (maximum refills,

not refillable, etc.). The quantity may be auto-calculated to a higher quantity by the system only when the dosage remains the same, but the dispense drug strength is changed – i.e., 2mg tablets #30 is changed to 1mg tablets, the Sig is updated, and the system changes the quantity to 60. A manual change to a higher quantity is not allowed.

- When finishing a pending CS order or verifying a CS order by the PSDRPH key holder, any edit to some of the key fields, such as dispense drug, dosage, dispense units, issue date, day's supply, quantity, or number of refills, will now be captured and stored in the activity log.



**Note:** In patch PSO\*7\*99, a change was made for pending orders not to recalculate the quantity for CS drugs on selecting a different strength of the same drug and resulting in the same prescribed dosage. This change is removed in patch PSO\*7\*391.

## Changes to Releasing Orders Function – ScripTalk®

The release function in the *Patient Prescription Processing* option has been modified to display a message to the user when the site is using a Bingo Board and when the patient is enrolled in ScripTalk®. This message will alert the user that the patient is enrolled in ScripTalk® and may need to have a verbal announcement that the prescription(s) is ready, instead of a visual announcement.

### Example: Releasing Medication to a ScripTalk® Patient

```
Prescription Number 400693 Released
No Refill(s) to be Released
No Partial(s) to be Released

OPPATIENT16,ONE added to the WAITING display.
This patient is enrolled in ScripTalk and may benefit from
a non-visual announcement that prescriptions are ready.

Press Return to Continue:
```

## Changes to Releasing Orders Function – Signature Alert

With Patch PSO\*7\*385, the release function in the *Patient Prescription Processing* option has been modified to display a message to the user when an ECME-billable prescription is being released as a window fill. This message will alert the user that the patient's signature must be obtained. The user is not required to press <Enter> to continue or respond to the alert in any other manner.

### Example: Releasing an ePharmacy Window Fill

```
Prescription Number 100003853 Released
No Refill(s) to be Released
No Partial(s) to be Released

ePharmacy Rx - Obtain Signature
```

## Changes to Releasing Orders Function – HIPAA NCPDP Global

The release function has been modified with patch PSO\*7\*148 to perform National Drug Code (NDC) validation for ePharmacy prescriptions. These changes also affect the Controlled Substance prescription release, which is performed through the Controlled Substances package.

The user releasing the third-party electronically billable prescription will be prompted for the NDC for the drug being dispensed to the patient. The NDC code previously retrieved when the prescription was finished will be presented as the current (default) NDC for the prescription. The other possible values that the user will be able to choose from are:

- NDC field value in the DRUG file, if valid and different than the current prescription NDC.
- LAST LOCAL NDC field value in NDC BY OUTPATIENT SITE sub-file in the DRUG file for the division filling the prescription, if valid and different than the current prescription NDC.
- NDC CODE field values in the SYNONYM sub-file in the DRUG file, if valid and different than the current prescription NDC.

If the NDC dispensed is not on the list to select, the user must contact the ADPAC or other designated person to add the NDC in a synonym multiple for that drug in the DRUG file.

If the NDC code selected matches the current NDC in the prescription no further NDC processing is required. However, if the user selects a different NDC, the following steps will occur:

1. Outpatient Pharmacy V. 7.0 will instruct the Electronic Claims Management Engine (ECME) to reverse the previous claim for the previous NDC code and submit a new claim for the newly selected NDC code.
2. The newly selected NDC code will be saved in the LAST LOCAL NDC field in NDC BY OUTPATIENT SITE sub-file in the DRUG file for the division filling the prescription.

The following examples show the new prompt for NDC validation during the release process.

### Example: Releasing an ePharmacy Order – Selecting Default NDC

```
Select Outpatient Pharmacy Manager Option: RELEASE Medication
Enter PHARMACIST: OPPHARMACIST4,THREE
Enter/Wand PRESCRIPTION number: 100003853
NDC: 00580-0277-10// ?
Select one of the following valid NDC code(s) below:
      1 - 00580-0277-10
```



```
NDC: 00580-0277-10// <Enter> 00580-0277-10
Prescription Number 100003853 Released
No Refill(s) to be Released
No Partial(s) to be Released
```

ePharmacy Rx - Obtain Signature

### Example: Releasing an ePharmacy Order – Selecting Different NDC

```
Select Outpatient Pharmacy Manager Option: RELEASE Medication

Enter PHARMACIST: OPPHARMACIST4,THREE

Enter/Wand PRESCRIPTION number: 100003853

NDC: 00580-0277-10// ?

Select one of the following valid NDC code(s) below:

    1 - 00580-0277-10
    2 - 00580-0277-14

NDC: 00580-0277-10// 2 00580-0277-14

Veteran Prescription 100003853 successfully submitted to ECME for claim generation.

Claim Status:
Reversing and Rebilling a previously submitted claim...
Reversing...
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
Resubmitting...
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E PAYABLE

Prescription Number 100003853 Released
No Refill(s) to be Released
No Partial(s) to be Released
```

# Chapter 25: Returning Medication to Stock

---

This chapter describes the option used for returning medication to stock.

## Return Medication to Stock [PSO RETURNED STOCK]

This option is used when a prescription has been released, but has been refused, not picked up, or not given to the patient for some reason. Comments can be entered to explain why the medication was returned to stock.

A prescription can only be returned to stock if the prescription status is Active, Discontinued, or Expired. If the prescription is not released, there is no need to return it to stock. This function increases the inventory so that a more current level is maintained by the Outpatient Pharmacy package and removes the copay charge if it is applicable to the prescription. It is highly recommended that this option be used.

When an ePharmacy prescription is returned to stock, the software checks to see if it has a PAYABLE claim. If so, a request is sent to ECME to electronically reverse the claim with the third party payer. Also, if the prescription contains any unresolved DUR or REFILL TOO SOON reject, it will be marked resolved with the reason 'Prescription Returned To Stock'.

If a copay charge is removed by returning a prescription fill to stock, an entry will be placed in the Copay activity log documenting the action.

### Example: Copay Activity Log

```
Copay Activity Log:
#   Date       Reason                Rx Ref      Initiator Of Activity
-----
1   11/21/01   REMOVE COPAY CHARGE  REFILL 1   OPPHARMACIST9,THREE
Comment: RX REFUSED Returned to stock
```

If an **original fill** is returned to stock and reprinted, it can be released again. If a **refill** is returned to stock, the refill is deleted so the patient will not lose it.

## Chapter 26: Processing a Prescription

---

This chapter describes the menu and options used in processing prescriptions.

### **Rx (Prescriptions)**

[PSO RX]

The *Rx (Prescriptions)* menu allows the pharmacist to manipulate information that pertains to prescriptions. Actions are taken on prescriptions via this menu. Some previous options, such as renew, refill, edit, release, are now actions in the *Patient Prescription Processing* option found on this menu. Also, data now must be entered for the individual fields that are used to build a Sig.

Default values are also displayed for possible dosages, schedules, med routes, and patient instructions. When possible, default quantities are calculated using data entered into specific fields during medication order entry.

The following options are available on this menu:

- *Patient Prescription Processing*
- *Barcode Rx Menu ...*
- *Check Drug Interaction*
- *Complete Orders from OERR*
- *Discontinue Prescription(s)*
- *Edit Prescriptions*
- *ePharmacy Menu ...*
- *List One Patient's Archived Rx's*
- *Manual Print of Multi-Rx Forms*
- *OneVA Pharmacy Prescription Report*
- *Reprint an Outpatient Rx Label*
- *Signature Log Reprint*
- *View Prescriptions*

### **Patient Prescription Processing**

[PSO LM BACKDOOR ORDERS]

This option is used to process outpatient medication through OERR V. 3.0. The *Patient Prescription Processing* option is found on the *Outpatient Pharmacy Manager Menu* and the *Pharmacist Menu* under the *Rx (Prescriptions)* option. This option uses List Manager features to allow the outpatient pharmacy manager and pharmacist to perform the following actions on a prescription without leaving this option.

- Enter a new Rx
- Discontinue
- Edit
- Refill
- Renew
- Hold

- Unhold
- Order a partial
- Release
- Reprint
- Copy
- Verify a prescription
- Show a profile
- View activity log
- Pull early from suspense



If the order utilizes the EXCEPT conjunction, copy, renew, and reinstate will no longer be allowed.

When a new drug order is processed (new, renewal, finish, verify, copy, or an edit that creates a new order), order checks are performed. These include checking for Duplicate Drug, Duplicate Drug Therapy, Drug-Drug Interaction, and Drug-Drug Allergy.

Patient demographics and clinical alerts display in the header area when this option is selected. Refer to [Patient Demographics and Clinical Alerts](#) for more information.

With the introduction of enhanced Order checks, Outpatient Pharmacy generated order checks are displayed in this sequence:

- System Errors
- Duplicate Drug
- Clozapine
- Allergy/ADR (local & remote) or Non-Assessment
- CPRS checks generated backdoor (3 new checks)
- Drug Level Errors
- Local & Remote Critical Drug Interactions
- Local & Remote Significant Drug Interactions
- Local & Remote Duplicate Therapy

Additionally, the order check display sequence is applied to the following processes:

- Backdoor new order entry
- Finishing a pending order
- When renewing an outpatient medication order
- Creating a new order when editing an outpatient medication order
- Verifying an outpatient medication order
- Copying an outpatient medication order
- Reinstating a discontinued outpatient medication order

There are three levels of error messages associated with Enhanced Order Checking (Drug Interactions, Duplicate Therapy, and Dosing):

1. System - When such an error occurs, no Drug Interaction, Duplicate Therapy, or Dosing order checks will be performed. Other order checks that do not use the COTS database (FDB) will still be performed such as allergy/ADRs, duplicate drug (for outpatient only), and new CPRS order checks, etc.

2. Drug - The second error level is for the drug and no Drug Interaction, Duplicate Therapy, or Dosing order checks will be performed for a specific drug. Drug level errors can occur for the prospective drug (drug being processed) or the profile drug. If a drug level error occurs on the prospective drug, no profile drug errors will be displayed. The only exception to this is when you are processing an IV order with multiple prospective drugs (i.e. multiple IV Additives). Profile drug level errors will only be shown once per patient session.

There are two reasons that a drug level error is generated; the drug is not matched to NDF or the drug is matched to NDF, but the VA Product to which it is matched does not have a GCNSEQNO assigned or the GCNSEQNO assigned does not match up to the GCNSEQNO in the COTS database. The latter (GCNSEQNO mismatch) is rare.

3. Order - The third error level is for the order. Order level errors will only occur with dosing order checks. Please see the *Dosing Order Check User Manual* for more information.

See table below for an explanation of the errors:

**Table 40: Enhanced Order Checking Error Messages**

Error Level	Error Message	Reason	Why message is being displayed.
System	No Enhanced Order Checks can be performed	Vendor Database cannot be reached	The connectivity to the vendor database has gone down. A MailMan message is sent to the G. PSS ORDER CHECKS mail group when the link goes down and when it comes back up.
System	No Enhanced Order Checks can be performed	The connection to the vendor database has been disabled	A user has executed the Enable/Disable Vendor Database Link [PSS ENABLE/DISABLE DB LINK] option and disabled the interface.
System	No Enhanced Order Checks can be performed	Vendor database updates are being processed	The vendor database (custom and standard data) is being updated using the DATUP (Data Update) process.
System	No Enhanced Order Checks can be performed	An unexpected error has occurred	There is a system network problem and the vendor database cannot be reached or a software interface issue.
System	No Dosing Order Checks can be performed	Dosing Order Checks are disabled	A user has executed the Enable/Disable Dosing Order Checks [PSS Dosing Order Checks] option.
Drug	Enhanced Order Checks cannot be performed for Local or Local Outpatient Drug: <DRUG NAME>	Drug not matched to NDF	The local drug being ordered/ or on profile has not been matched to NDF. Matching the drug to a VA Product will eliminate this message.

Error Level	Error Message	Reason	Why message is being displayed.
Drug	Order Checks could not be done for Remote Drug: <DRUG NAME>, please complete a manual check for Drug Interactions and Duplicate Therapy. Remote order indicator		If this error message is displayed, it means that the VA product that the local or remote drug being ordered/or on the local or remote profile does not have a GCNSEQNO or in rare cases, the GCNSEQNO assigned to the VA Product does not match up with a GCNSEQNO in the vendor database.
Drug	Enhanced Order Checks cannot be performed for Orderable Item: <OI NAME>	No active Dispense Drug found	Highly unlikely that this error would be seen. At the time the order check was being performed the orderable item did not have an active dispense drug associated.

See examples below to illustrate error sequences.

**New Order Entry – System Level Error**

```
Select Action: Quit// NO   New Order

Eligibility: SC LESS THAN 50%   SC%: 40
RX PATIENT STATUS: SC LESS THAN 50%//
DRUG: AMLOD
  Lookup: GENERIC NAME
    1  AMLODIPINE 10MG/BENAZEPRIL 20MG TAB           CV400
    2  AMLODIPINE 5MG/ATORVASTATIN 10MG TAB         CV200
CHOOSE 1-2: 1  AMLODIPINE 10MG/BENAZEPRIL 20MG TAB           CV400

Now doing remote checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

No Enhanced Order Checks can be performed.
Reason: Vendor database cannot be reached.

Press Return to Continue...

There are 2 Available Dosage(s):
  1.  1 TABLET
  2.  2 TABLETS

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 1 TABLET

You entered 1 TABLET is this correct? Yes//   YES
VERB: TAKE
ROUTE: PO//
  1  PO  ORAL (BY MOUTH)           PO
  2  PO  ORAL                       PO
CHOOSE 1-2: 1  ORAL (BY MOUTH)           PO  MOUTH
Schedule: Q4H
Now searching ADMINISTRATION SCHEDULE (#51.1) file...
```

```
Q4H Q4H EVERY 4 HOURS
...OK? Yes// (Yes)
(EVERY 4 HOURS)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES):
CONJUNCTION:
```

### Drug Error Message – Finishing Pending Outpatient Order

```
+ Enter ?? for more actions
BY Bypass DC Discontinue
ED Edit FN Finish
Select Item(s): Next Screen// FN Finish

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

Enhanced Order Checks cannot be performed for Local Drug: WARFARIN 5MG TAB
Reason: Drug not matched to NDF

Press Return to Continue...

Was treatment for Service Connected condition? YES//

Are you sure you want to Accept this Order? NO//
```

### Renewing an Order – Therapeutic Duplication – Drug Level Error

```
+ Enter ?? for more actions
DC Discontinue PR Partial RL Release
ED Edit RF Refill RN Renew
Select Action: Next Screen// rn Renew
FILL DATE: (3/12/2008 - 3/13/2009): TODAY// (MAR 12, 2008)
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
Nature of Order: WRITTEN// W
WAS THE PATIENT COUNSELED: NO// NO

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

Now Renewing Rx # 2580 Drug: SUCRALFATE 1GM TAB

Press Return to Continue...

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

Enhanced Order Checks cannot be performed for Local Drug: RANITIDINE 150MG TAB
Reason: No GCNSEQNO exists for VA Product

=====
*** THERAPEUTIC DUPLICATION *** Local Rx for SUCRALFATE 1GM TAB with Local Rx for
CIMETIDINE 300MG TAB and Local Rx for NIZATIDINE 150MG CAP and Local Rx for FAMOTIDINE
20MG TAB

Rx: #2574
Drug: CIMETIDINE 300MG TAB
SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
QTY: 180 Refills remaining: 3
Provider: PSOPROVIDER,ONE Issued: 02/12/08
```

```

                Status: Discontinued                Last filled on: 03/07/08
Processing Status: Released locally on 03/07/08@08:55:32 (Window)
                                                Days Supply: 90
-----
                Rx: #2573
                Drug: NIZATIDINE 150MG CAP
                SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
                QTY: 180                Refills remaining: 3
                Provider: PSOPROVIDER,ONE                Issued: 03/07/08
                Status: Hold                Last filled on: 03/07/08
Processing Status: Released locally on 03/07/08@08:55:32 (Window)
                                                Days Supply: 90
-----
                Rx: #2599
                Drug: FAMOTIDINE 20MG TAB
                SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
                QTY: 180                Refills remaining: 3
                Provider: PSOPROVIDER,ONE                Issued: 03/07/08
                Status: Provider Hold                Last filled on: 03/07/08
Processing Status: Released locally on 03/07/08@08:55:32 (Window)
                                                Days Supply: 90

Duplicate Therapy Class(es): Peptic Ulcer Agents

=====
Discontinue RX #2573 NIZATIDINE 150MG CAP? Y/N No

Press Return to Continue:

2580A                SUCRALFATE 1GM TAB                QTY: 360
# OF REFILLS: 3 ISSUED: 03-12-08
SIG: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY
FILLED: 03-12-08
ROUTING: WINDOW                PHYS: PSOPROVIDER,ONE

Edit renewed Rx ? Y// n NO

                SC Percent: 80%
                Disabilities: NONE STATED

Was treatment for a Service Connected condition? NO//

```

## Duplicate Drug Order Check

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

### Local Rx

```

Duplicate Drug in Local Rx:

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

```

### Remote Rx

```

Duplicate Drug in Remote Rx:

                LOCATION NAME: <NAME OF FACILITY>
                Rx #: 2608
                Drug: ASPIRIN 81MG EC TAB

```



```
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
QTY: 30 Refills remaining: 11
Provider: PSOPROVIDER,TEN Issued: 03/24/08
Status: Active Last filled on: 03/24/08
Days Supply: 30
```

## Duplicate Drug order check for Pending Orders:

### Pending Order

```
DUPLICATE DRUG in a Pending Order for:

Drug: ALLOPURINOL 300MG TAB
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
QTY: 180 # of Refills: 3
Provider: PSOPROVIDER,TEN Issue Date: 03/24/08@14:44:15
Provider Comments:
```

## Duplicate Drug order check for Non-VA Medications:

### Non-VA Med Order

```
Duplicate Drug in a Non-VA Med Order for

Drug: CIMETIDINE 300MG TAB
Dosage: 300MG
Schedule: AT BEDTIME
Medication Route: MOUTH
Start Date: <NOT ENTERED> CPRS Order #: 13554
Documented By: PSOPROVIDER,TEN on Mar 24, 2008@14:44:15
Order Check #1:
SIGNIFICANT drug-drug interaction: CIMETIDINE & PROPRANOLOL (PROPRANOLOL
TAB 40MG PO QID [PENDING])
Overriding Provider: PSOPROVIDER,TEN
Reason:<NOT ENTERED>
Statement/Explanation/Comments:
Patient wants to buy from Non-VA pharmacy
```

## Duplicate Drug Order Check business rules:

- a. If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO, the system will not prompt a clerk (no PSORPH key) to discontinue the order when a Duplicate Drug order check occurs.
- b. If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO, and a new order is being entered by a clerk (no PSORPH key) via the pharmacy backdoor, the order being processed will be deleted by the system immediately after the duplicate drug warning is displayed.
- c. If the duplicate drug is a remote order, the system will allow the clerk to process the new order after the display of the duplicate drug warning.
- d. If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO, and a clerk (no PSORPH key) is finishing a pending order:
  - d1. When the VERIFICATION outpatient site parameter is set to YES and the duplicate drug is a local order, the system will return the user back to the detailed order ListMan display with the available actions of Accept/Edit/Discontinue.

- d2. When the VERIFICATION outpatient site parameter is set to YES and the duplicate drug is a remote order
  - d2a. A duplicate drug warning will be displayed
  - d2b. The clerk will be allowed to finish the order
  - d2c. The finished order will have a status of non-verified
- d3. When the VERIFICATION outpatient site parameter is set to NO, the clerk will not be allowed to finish the order.
- d4. If the DRUG CHECK FOR CLERK outpatient site parameter is set to Yes, a clerk (no PSORPH key) will see the same discontinue prompts as a pharmacist.
- e. If the VERIFICATION outpatient site parameter is set to YES when reinstating an order, no duplicate message will be displayed, and the reinstated order will have a non-verified status.
- f. No discontinuation prompt will be displayed for a duplicate Non-VA medication order in any situation.

After the Duplicate Drug warning is displayed, the system will ask the user if they wish to discontinue the order.

#### Active Order

Discontinue RX #2580A SUCRALFATE 1GM TAB? Y/N

#### Pending Order

Discontinue Pending Order for ALLOPURINOL 300MG? Y/N

If the user chooses not to discontinue the displayed order when entering a new order via the pharmacy backdoor, the system will delete the order being entered (prospective drug).

If the user chooses not to discontinue the displayed order when finishing a pending order, the system will redisplay the pending order and prompt them to accept, edit or discontinue the order.

If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO, and if the clerk (no PSORPH key) is copying an order, the system will return them back to the detailed order ListMan display where the copy action was initiated.

If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO and the VERIFICATION outpatient site parameter is set to YES when a clerk (no PSORPH key) is reinstating a discontinued order for a medication for which an active local order exists, the system will delete the active order and reinstate the discontinued order.

If the DRUG CHECK FOR CLERK outpatient site parameter is set to NO and the VERIFICATION outpatient site parameter is set to NO when a clerk is reinstating a discontinued order for a medication for which an active local order exists, the system will display a duplicate drug warning, but the order will not be reinstated.

If the DRUG CHECK FOR CLERK outpatient site parameter is set to YES or NO and the VERIFICATION outpatient site parameter is set to NO when a clerk is reinstating a discontinued order for a medication for which a remote order exists, the system will display a duplicate drug warning and the reinstated order will be assigned an active status.

If the DRUG CHECK FOR CLERK outpatient site parameter is set to YES or NO and the VERIFICATION outpatient site parameter is set to YES when a clerk is reinstating a discontinued order, the system will not display a duplicate drug warning and the reinstated order will be assigned a non-verified status.

If a duplicate drug warning is displayed for a medication order, it will not be included in a duplicate therapy order check.

The following examples illustrate the conditions described above.

### Duplicate Pending Order

```
Pending OP Orders (ROUTINE) Mar 24, 2008@13:52:04 Page: 1 of 2
PSOPATIENT,FOUR <NO ALLERGY ASSESSMENT>
  PID: 000-00-0000 Ht(cm): 168.91 (04/11/2006)
  DOB: MAY 20,1966 (41) Wt(kg): 68.18 (09/06/2006)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.77

Order Checks:
  Duplicate drug order: ASPIRIN TAB,EC 325MG TAKE ONE TABLET BY MOUTH EVERY
  MORNING [ACTIVE]
  Overriding Provider: PSOPROVIDER,TEN
  Overriding Reason: TESTING DUPLICATE THERAPY FUNCTIONALITY

*(1) Orderable Item: ASPIRIN TAB,EC
(2) Drug: ASPIRIN 325MG EC TAB <DIN>
    NDC: 00056-0176-75
(3) *Dosage: 325 (MG)
    Verb: TAKE
    Dispense Units: 1
    Noun: TABLET
    *Route: ORAL
    *Schedule: QAM
+ Enter ?? for more actions
BY Bypass DC Discontinue
ED Edit FN Finish
Select Item(s): Next Screen// FN Finish

-----
Duplicate Drug in Local Rx:

    RX #: 2603
    Drug: ASPIRIN 325MG EC TAB
    SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
    QTY: 30 Refills remaining: 11
    Provider: PSOPROVIDER,TEN Issued: 03/24/08
    Status: Active Last filled on: 03/24/08
    Processing Status: Released locally on 3/24/08@08:55:32 (Window)
    Days Supply: 30

-----
Discontinue RX #2603 ASPIRIN 325MG EC TAB? Y/N NO -Prescription was not discontinued...

Pending OP Orders (ROUTINE) Mar 24, 2008@13:52:45 Page: 1 of 2
PSOPATIENT,FOUR <NO ALLERGY ASSESSMENT>
  PID: 000-00-0000 Ht(cm): 168.91 (04/11/2006)
  DOB: MAY 20,1966 (41) Wt(kg): 68.18 (09/06/2006)
```

```

Order Checks:
  Duplicate drug order: ASPIRIN TAB,EC 325MG TAKE ONE TABLET BY MOUTH EVERY
  MORNING [ACTIVE]
  Overriding Provider: PSOPROVIDER,TEN
  Overriding Reason: TESTING DUPLICATE THERAPY FUNCTIONALITY

*(1) Orderable Item: ASPIRIN TAB,EC
(2) Drug: ASPIRIN 325MG EC TAB <DIN>
    NDC: 00056-0176-75
(3) *Dosage: 325 (MG)
    Verb: TAKE
    Dispense Units: 1
    NOUN: TABLET
    *Route: ORAL
    *Schedule: QAM
+ Enter ?? for more actions
AC Accept ED Edit DC Discontinue
Select Item(s): Next Screen//
.
.
OR

Discontinue RX #2603 ASPIRIN 325MG EC TAB? Y/N YES

RX #2603 ASPIRIN 325MG EC TAB will be discontinued after the acceptance of the new order.

Rx # 2604 03/24/08
PSOPATIENT,FOUR #30
TAKE ONE TABLET BY MOUTH EVERY MORNING

ASPIRIN 325MG EC TAB
PSOPROVIDER,TEN PSOPHARMACIST,ONE
# of Refills: 11

SC Percent: 100%
Disabilities: NONE STATED

Was treatment for a Service Connected condition? YES// YES
Are you sure you want to Accept this Order? NO// YES
WAS THE PATIENT COUNSELED: NO// NO

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

-Duplicate Drug Rx #2603 ASPIRIN 325MG EC TAB has been discontinued...

Press Return to Continue:

```

### New Order Entry Backdoor – Duplicate Drug

```

Eligibility: SERVICE CONNECTED 50% to 100% SC%: 100
RX PATIENT STATUS: OPT NSC//
DRUG: aspirin
  Lookup: DRUG  GENERIC NAME
  1  ASPIRIN 325MG EC TAB          CN103
  2  ASPIRIN 325MG SUPPOSITORY     CN103
  3  ASPIRIN 325MG TAB            CN103
  4  ASPIRIN 650MG/BUTALBITAL 50MG TAB          CN103
  5  ASPIRIN 81MG EC TAB          CN103
Press <RETURN> to see more, '^' to exit this list, '^ ^' to exit all lists, OR
CHOOSE 1-5: 1  ASPIRIN 325MG EC TAB          CN103
  Restriction/Guideline(s) exist.  Display? : (N/D): No// NO
-----
Duplicate Drug in Local Rx:

      RX #: 2604
      Drug: ASPIRIN 325MG EC TAB
      SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
      QTY: 30                               Refills remaining: 11
      Provider: PSOPROVIDER,TEN              Issued: 03/24/08

```

```

Status: Active                               Last filled on: 03/24/08
Processing Status: Released locally on 3/24/08@08:55:32 (Window)
                                                Days Supply: 30
-----
Discontinue RX #2604 ASPIRIN 325MG EC TAB? Y/N NO -Prescription was not discontinued...
RX DELETED

OR

Discontinue RX #2604 ASPIRIN 325MG EC TAB? Y/N YES
RX #2604 ASPIRIN 325MG EC TAB will be discontinued after the acceptance of the new order.

VERB: TAKE
There are 2 Available Dosage(s):
    1. 325MG
    2. 650MG

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 325MG

You entered 325MG is this correct? Yes// YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 325MG

NOUN: TABLET
ROUTE: PO// ORAL PO MOUTH
Schedule: BID
Now searching ADMINISTRATION SCHEDULE (#51.1) file...
    BID BID TWICE A DAY
        ..OK? Yes// (Yes)
(TWICE A DAY)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES):
CONJUNCTION:
PATIENT INSTRUCTIONS:

(TAKE ONE TABLET BY MOUTH TWICE A DAY)

DAYS SUPPLY: (1-90): 30//
QTY ( TAB ) : 60// 60
COPIES: 1// 1
# OF REFILLS: (0-11): 11//
PROVIDER: PSOPROVIDER,TEN
CLINIC:
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
REMARKS:
ISSUE DATE: TODAY// (MAR 24, 2008)
FILL DATE: (3/24/2008 - 3/25/2009): TODAY// (MAR 24, 2008)
Nature of Order: WRITTEN// W
WAS THE PATIENT COUNSELED: NO// NO

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

Rx # 2605                                03/24/08
PSOPATIENT,FOUR                            #60
TAKE ONE TABLET BY MOUTH TWICE A DAY

ASPIRIN 325MG EC TAB
PSOPROVIDER,TEN                            PSOPHARMACIST,ONE
# of Refills: 11

SC Percent: 100%
Disabilities: NONE STATED

Was treatment for a Service Connected condition? n NO
Is this correct? YES//

```

-Duplicate Drug RX #2604 ASPIRIN 325MG EC TAB has been discontinued...

Another New Order for PSOPATIENT,FOUR? YES//

### Editing Dispense Drug – Create New Order

```

Rx #: 2605A
(1) *Orderable Item: ASPIRIN TAB,EC
(2) Drug: ASPIRIN 325MG EC TAB <DIN>
    NDC: 00056-0176-75
(3) *Dosage: 325 (MG)
    Verb: TAKE
    Dispense Units: 1
    Noun: TABLET
    *Route: ORAL
    *Schedule: BID
(4) Pat Instructions:
    SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
(5) Patient Status: OPT NSC
(6) Issue Date: 03/24/08 (7) Fill Date: 03/24/08
    Last Fill Date: 03/24/08 (Window)
+ Enter ?? for more actions
DC Discontinue PR Partial RL Release
ED Edit RF Refill RN Renew
Select Action: Next Screen// ED Edit

Select fields by number: (1-19): 2
DRUG: ASPIRIN 325MG EC TAB// ASPIRIN 8

Lookup: GENERIC NAME
ASPIRIN 81MG EC TAB CN103
...OK? Yes// (Yes)

TRADE NAME:
-----
Duplicate Drug in Local Rx:

Rx #: 2606
Drug: ASPIRIN 81MG EC TAB
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
QTY: 30 Refills remaining: 11
Provider: PSOPROVIDER,TEN Issued: 03/24/08
Status: Active Last filled on: 03/24/08
Processing Status: Released locally on 03/24/08@08:55:32 (Window)
Days Supply: 30
-----
Discontinue RX #2606 ASPIRIN 81MG EC TAB? Y/N NO -Prescription was not discontinued...
.
.
OR
Discontinue RX #2606 ASPIRIN 81MG EC TAB? Y/N YES

RX #2606 ASPIRIN 81MG EC TAB will be discontinued after the acceptance of the new order.

You have changed the dispense drug from
ASPIRIN 325MG EC TAB to ASPIRIN 81MG EC TAB.

Current SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
There are 2 Available Dosage(s):
1. 81MG
2. 162MG

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 81MG

You entered 81MG is this correct? Yes// YES
This edit will discontinue the duplicate Rx & change the dispensed drug!
Do You Want to Proceed? NO// YES
```

```

VERB: TAKE// TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 81MG

NOUN: TABLET// TABLET
ROUTE: ORAL// ORAL
Schedule: BID// QAM
Now searching ADMINISTRATION SCHEDULE (#51.1) file...
  QAM QAM EVERY MORNING
  ...OK? Yes// (Yes)
  (EVERY MORNING)
LIMITED DURATION (IN MONTHS, WEEKS, DAYS, HOURS OR MINUTES):
CONJUNCTION:

New OP Order (ROUTINE)           Mar 24, 2008@14:10:20           Page: 1 of 2
PSOPATIENT,FOUR                 <NO ALLERGY ASSESSMENT>
  PID: 000-00-0000                Ht(cm): 168.91 (04/11/2006)
  DOB: MAY 20,1966 (41)           Wt(kg): 68.18 (09/06/2006)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 1.77

  Orderable Item: ASPIRIN TAB,EC
(1)      Drug: ASPIRIN 81MG EC TAB
(2) Patient Status: OPT NSC
(3)      Issue Date: MAR 24,2008           (4) Fill Date: MAR 24,2008
(5) Dosage Ordered: 81 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: TABLET
      Route: ORAL
      Schedule: QAM
(6) Pat Instruction:
      SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
(7)      Days Supply: 30                   (8) QTY (TAB): 60
(9)      # of Refills: 11                  (10) Routing: WINDOW
+      This change will create a new prescription!
AC  Accept                               ED  Edit
Select Action: Next Screen// AC  Accept

Nature of Order: SERVICE CORRECTION//      S
WAS THE PATIENT COUNSELED: NO// NO

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

Rx # 2607                               03/24/08
PSOPATIENT,FOUR                          #60
TAKE ONE TABLET BY MOUTH EVERY MORNING

ASPIRIN 81MG EC TAB
PSOPROVIDER,TEN                           PSOPHARMACIST,ONE
# of Refills: 11

      SC Percent: 100%
      Disabilities: NONE STATED

Was treatment for a Service Connected condition? YES//
Is this correct? YES// ...

-Duplicate Drug RX #2606 ASPIRIN 81MG EC TAB has been discontinued...

```

### Clerk Entering New Order via Backdoor – Drug Check for Clerk Parameter set to No

```

PI Patient Information           SO Select Order
Select Action: Quit// NO      New Order

Eligibility: SERVICE CONNECTED 50% to 100%      SC%: 100
RX PATIENT STATUS: OPT NSC//
DRUG: ASPIRIN 81
  Lookup: GENERIC NAME
ASPIRIN 81MG EC TAB           CN103

```

```

...OK? Yes// (Yes)
-----
Duplicate Drug in Local Rx:

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

Another New Order for PSOPATIENT,FOUR? YES//

```

**Clerk Entering New Order via Backdoor – Drug Check for Clerk Parameter set to No – Duplicate Drug – Discontinued Status**

```

Eligibility: SERVICE CONNECTED 50% to 100% SC%: 100
RX PATIENT STATUS: OPT NSC//
DRUG: ASPIRIN
Lookup: GENERIC NAME
1 ASPIRIN 325MG EC TAB CN103
2 ASPIRIN 325MG SUPPOSITORY CN103
3 ASPIRIN 325MG TAB CN103
4 ASPIRIN 650MG/BUTALBITAL 50MG TAB CN103
5 ASPIRIN 81MG EC TAB CN103
Press <RETURN> to see more, '^' to exit this list, '^ ^' to exit all lists, OR
CHOOSE 1-5: 1 ASPIRIN 325MG EC TAB CN103
Restriction/Guideline(s) exist. Display? : (N/D): No// NO
-----
Duplicate Drug in Local Rx:

Rx #: 2605A
Drug: ASPIRIN 325MG EC TAB
SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
QTY: 60 Refills remaining: 11
Provider: PSOPROVIDER,TEN Issued: 03/24/08
Status: Discontinued (Edit) Last filled on: 03/24/08
Processing Status: Released locally on 3/24/08@08:55:32 (Window)
Days Supply: 30
-----
Press Return to Continue:

```

**Clerk Finishing Pending Order – Drug Check for Clerk parameter set to No**

```

ED (Edit) FN Finish
-----
Pending OP Orders (ROUTINE) Mar 24, 2008@14:35:21 Page: 1 of 3
PSOPATIENT,FOUR <NO ALLERGY ASSESSMENT>
PID: 000-00-0000 Ht(cm): 168.91 (04/11/2006)
DOB: MAY 20,1966 (41) Wt(kg): 68.18 (09/06/2006)

Order Checks:
Duplicate drug order: ASPIRIN TAB,EC 81MG TAKE ONE TABLET BY MOUTH EVERY
MORNING [ACTIVE]
Overriding Provider: PSOPROVIDER,TEN
Overriding Reason: TESTING

Duplicate drug class order:(ASPIRIN TAB,EC 325MG
TAKE ONE TABLET BY MOUTH EVERY MORNING [UNRELEASED])
Overriding Provider: PSOPROVIDER,TEN
Overriding Reason: TESTING

```



```

*(1) Orderable Item: ASPIRIN TAB,EC
(2)      Drug: ASPIRIN 81MG EC TAB
        NDC: 00056-0176-75
(3)      *Dosage: 81 (MG)
+        Enter ?? for more actions
BY Bypass          DC (Discontinue)
ED (Edit)         FN Finish
Select Item(s): Next Screen// FN Finish
-----
Duplicate Drug in Local Rx:

        Rx #: 2608
        Drug: ASPIRIN 81MG EC TAB
        SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
        QTY: 30          Refills remaining: 11
        Provider: PSOPROVIDER,TEN          Issued: 03/24/08
        Status: Active          Last filled on: 03/24/08
        Processing Status: Released locally on 3/24/08@08:55:32 (Window)
                               Days Supply: 30
-----
Pending OP Orders (ROUTINE)   Mar 24, 2008@14:35:25          Page: 1 of 3
PSOPATIENT,FOUR              <NO ALLERGY ASSESSMENT>
PID: 000-00-0000              Ht (cm): 168.91 (04/11/2006)
DOB: MAY 20,1966 (41)        Wt (kg): 68.18 (09/06/2006)

Order Checks:
Duplicate drug order: ASPIRIN TAB,EC 81MG TAKE ONE TABLET BY MOUTH EVERY
MORNING [ACTIVE]
Overriding Provider: PSOPROVIDER,TEN
Overriding Reason: TESTING

Duplicate drug class order: NON-OPIOID ANALGESICS (ASPIRIN TAB,EC 325MG
TAKE ONE TABLET BY MOUTH EVERY MORNING [UNRELEASED])
Overriding Provider: PSOPROVIDER,TEN
Overriding Reason: TESTING

*(1) Orderable Item: ASPIRIN TAB,EC
(2)      Drug: ASPIRIN 81MG EC TAB
        NDC: 00056-0176-75
(3)      *Dosage: 81 (MG)
+        Enter ?? for more actions
AC Accept          ED Edit          DC Discontinue
Select Item(s): Next Screen// DC Discontinue

Nature of Order: SERVICE CORRECTION//          S

Requesting PROVIDER: PSOPROVIDER,TEN//          LBB          119
Comments: Per Pharmacy Request Replace

Press Return to :

PI Patient Information          SO Select Order

PU Patient Record Update          NO New Order
PI Patient Information          SO Select Order
Select Action: Quit// 2

Medication Profile           Mar 24, 2008@14:36:28          Page: 1 of 1
PSOPATIENT,FOUR              <NO ALLERGY ASSESSMENT>
PID: 000-00-0000              Ht (cm): 168.91 (04/11/2006)
DOB: MAY 20,1966 (41)        Wt (kg): 68.18 (09/06/2006)
SEX: MALE

# RX #          DRUG          ISSUE LAST REF DAY
          QTY ST DATE FILL REM SUP
-----ACTIVE-----
1 2608          ASPIRIN 81MG EC TAB          30 A 03-24 03-24 11 30
-----NON-VERIFIED-----
2 2609          ASPIRIN 325MG EC TAB          30 N 03-24 03-24 5 30

```

### Duplicate with Non-VA Med – No Action Required

```
DRUG: CIMETIDINE
Lookup: GENERIC NAME
  1  CIMETIDINE 100MG TAB          GA301
  2  CIMETIDINE 200MG TAB          GA301
  3  CIMETIDINE 300MG TAB          GA301      90 DAY SUPPLY
  4  CIMETIDINE 400MG TAB          GA301
  5  CIMETIDINE 800MG TAB          GA301
CHOOSE 1-5: 3  CIMETIDINE 300MG TAB          GA301      90 DAY SUPPLY
-----
Duplicate Drug in a Non-VA Med Order for

      Drug: CIMETIDINE 300MG TAB
      Dosage: 300MG
      Schedule: AT BEDTIME
      Medication Route: MOUTH
      Start Date:                CPRS Order #: 13554
      Documented By: PSOPROVIDER,TEN on Mar 24, 2008@14:44:15
Order Check #1:
      SIGNIFICANT drug-drug interaction: CIMETIDINE & PROPRANOLOL (PROPRANOLOL
      TAB 40MG PO QID [PENDING])
Overriding Provider: PSOPROVIDER,TEN
      Reason:
Statement/Explanation/Comments:
      Patient wants to buy from Non-VA pharmacy
-----

Press Return to Continue:

VERB: TAKE
There are 2 Available Dosage(s):
  1. 300MG
  2. 600MG

Select from list of Available Dosages(1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 300MG

You entered 300MG is this correct? Yes//
```

### Duplicate Drug with Pending Order

```
Another New Order for PSOPATIENT,FOUR? YES//

Eligibility: SERVICE CONNECTED 50% to 100%      SC%: 100
RX PATIENT STATUS: OPT NSC//
DRUG: ALLOPURINOL
Lookup: GENERIC NAME
  1  ALLOPURINOL 100MG TAB          MS400
  2  ALLOPURINOL 300MG TAB          MS400
CHOOSE 1-2: 2  ALLOPURINOL 300MG TAB          MS400
-----
DUPLICATE DRUG in a Pending Order for:

      Drug: ALLOPURINOL 300MG TAB
      SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
      QTY: 180                      # of Refills: 3
      Provider: PSOPROVIDER,TEN      Issue Date: 03/24/08@14:44:15
      Provider Comments:
-----

Discontinue Pending Order for ALLOPURINOL 300MG? Y/N YES

Pending Order for ALLOPURINOL 300MG will be discontinued after the acceptance of the new
order.
```

```

VERB: TAKE
There are 2 Available Dosage(s):
    1. 300MG
    2. 600MG

Select from list of Available Dosages(1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 300MG

You entered 300MG is this correct? Yes//  YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 300MG

NOUN: TABLET
ROUTE: PO//  ORAL      PO  MOUTH
Schedule: QAM//
Now searching ADMINISTRATION SCHEDULE (#51.1) file...
    QAM  QAM  EVERY MORNING
    ...OK? Yes//  (Yes)
    (EVERY MORNING)

LIMITED DURATION (IN DAYS, HOURS OR MINUTES):
CONJUNCTION:
PATIENT INSTRUCTIONS:

(TAKE ONE TABLET BY MOUTH EVERY MORNING)

DAYS SUPPLY: (1-90): 30//
QTY ( TAB ) : 30// 30
COPIES: 1// 1
# OF REFILLS: (0-11): 11//
PROVIDER:  PSOPROVIDER,TEN
CLINIC:
MAIL/WINDOW: WINDOW// WINDOW
METHOD OF PICK-UP:
REMARKS:
ISSUE DATE: TODAY//  (MAR 24, 2008)
FILL DATE: (3/24/2008 - 3/25/2009): TODAY//  (MAR 24, 2008)
Nature of Order: WRITTEN//  W

Rx # 2610          03/24/08
PSOPATIENT,FOUR          #30
TAKE ONE TABLET BY MOUTH EVERY MORNING

ALLOPURINOL 300MG TAB
PSOPROVIDER,TEN          PSOPHARMACIST,ONE
# of Refills: 11

    SC Percent: 100%
    Disabilities: NONE STATED

Was treatment for a Service Connected condition? y  YES
Is this correct? YES//

- Duplicate Drug Pending Order for ALLOPURINOL 300MG has been discontinued...

```

### Copying an Existing Order

```

RN  Renew
Select Action: Next Screen// CO  CO

OP Medications (ACTIVE)      Mar 12, 2008@09:15:48      Page: 1 of 2
PSOPATIENT,TWO              <A>
    PID: 000-00-0000          Ht(cm): 182.88 (04/13/2005)
    DOB: JAN 1,1945 (63)      Wt(kg): 77.27 (04/13/2005)
    SEX: MALE
    CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 2.09

    Rx #: 2584$
(1) *Orderable Item: AMLODIPINE/ATORVASTATIN TAB

```

```

(2)          Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
            NDC: 00056-0176-75
            Verb: TAKE
(3)          *Dosage: ONE TABLET
            *Route: ORAL
            *Schedule: QAM
(4) Pat Instructions:
            SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
(5) Patient Status: OPT NSC
(6) Issue Date: 03/12/08          (7) Fill Date: 03/12/08
            Last Fill Date: 03/12/08 (Window)
            Last Release Date:          (8) Lot #:
            Expires: 03/13/09          MFG:
+          Enter ?? for more actions

AC  Accept          ED  Edit

New OP Order (COPY)          Mar 12, 2008@09:15:48          Page: 1 of 2
PSOPATIENT,TWO          <A>
PID: 000-00-0000          Ht (cm): 182.88 (04/13/2005)
DOB: JAN 1,1945 (63)          Wt (kg): 77.27 (04/13/2005)

            Orderable Item: AMLODIPINE/ATORVASTATIN TAB
(1)          Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
(2) Patient Status: OPT NSC
(3) Issue Date: MAR 12,2008          (4) Fill Date: MAR 12,2008
            Verb: TAKE
(5) Dosage Ordered: ONE TABLET
            Route: ORAL
            Schedule: QAM
(6) Pat Instruction:
            SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
(7) Days Supply: 30          (8) QTY ( ): 30
(9) # of Refills: 11          (10) Routing: WINDOW
(11) Clinic:
(12) Provider: PSOPROVIDER,ONE          (13) Copies: 1
+          Enter ?? for more actions
AC  Accept          ED  Edit
Select Action: Next Screen// AC  Accept
-----
Duplicate Drug in Local RX:

            Rx #: 2584
            Drug: AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
            SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING
            QTY: 30          Refills remaining: 11
            Provider: OPPOVIDER, ONE          Issued: 03/12/07
            Status: ACTIVE          Last filled on: 03/12/07
            Processing Status: Released locally on 3/12/07@08:55:32 (Window)
            Days Supply: 30
-----
Discontinue Rx #2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB? Y/N YES

Rx #2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB will be discontinued after the acceptance
of the new order.

Nature of Order: WRITTEN//          W
WAS THE PATIENT COUNSELED: NO// NO

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

Rx # 2585          03/12/08
PSOPATIENT,TWO T          #30
TAKE ONE TABLET BY MOUTH EVERY MORNING

AMLODIPINE 5MG/ATORVASTATIN 10MG TAB
PSOPROVIDER,ONE          PSOPHARMACIST,ONE
# of Refills: 11

```

```
SC Percent: 40%
Disabilities: NONE STATED

Was treatment for Service Connected condition? NO//

Is this correct? YES// ...

Duplicate Drug Rx #2584 AMLODIPINE 5MG/ATORVASTATIN 10MG TAB has been discontinued...
```

The CPRS Auto Refill field can be updated using the *Pharmacy Systems Parameter Edit* [PSS MGR] option. This parameter works in conjunction with the PSOATRFR security key.

- When the CPRS Auto Refill field is set to YES and the PSOATRFR security key has been assigned to at least one user, all refills placed in CPRS by the provider are processed and suspended with the next fill date and all routing is set to Mail automatically.
- When the CPRS Auto Refill field is set to NO or if the PSOATRFR security key is not assigned, the manual refill process is required.

If the auto refill process fails, the order will not be processed and will require manual refilling. A MailMan message will be sent to the holders of the PSOATRFR key describing the reason for not filling the auto refill. All of the refill activity, manual or automatic, is recorded in the Activity Log entry notes.

With Patch PSO\*7\*233, when a name is selected, if the patient's address is flagged with a Bad Address Indicator, a warning message is displayed. If the user has proper authorization (i.e., the PSO SITE parameter "EDIT PATIENT DATA" is set to Yes or the user holds the new PSO ADDRESS UPDATE security key), a prompt displays asking if the user wants to update the address.

Following the installation of patches PSO\*7\*207 and OR\*3\*238 (Remote Data Interoperability (RDI) trigger patch), order checks will be made using additional data from the Health Data Repository Interim Messaging Solution (HDR-IMS) and the HDR-Historical (HDR-Hx). This will contain both Outpatient orders from other VAMCs as well as from Department of Defense (DoD) facilities, if available. All remote prescription statuses will be included in order checking for a new order being processed from within backdoor Outpatient Pharmacy and for new orders being placed by CPRS or by Inpatient Medications. Any remote Outpatient order that has been expired or discontinued for 30 days or less will be included in the list of medications to be checked.



For the *Patient Prescription Processing*, if a temporary address has no end date, the following text is displayed in the Status column: "(Temp address from XXX 99,9999 till (no end date))".

The check for remote data availability is performed upon entering the patient's profile, rather than on each order, to ensure that both remote data and local data are used for order checking.

The following will not be included in order checks (after patch PSO\*7\*243):

- Prescriptions with a status of “DELETED” in the STATUS field in the PRESCRIPTION file from a remote facility
- Prescriptions with a missing expiration date, unless the ISSUE DATE field of the PRESCRIPTION file is within the past year

Remote order checking added (after patch PSO\*7\*243):

- For drug class when orders are placed for locally defined drugs
- Allergy Analgesic class order checks only match against the specific 5-character class if the class begins with “CN10”

If for any reason remote order checks cannot be performed, the following message displays:

```
Remote data not available - Only local order checks processed.
```



**Note:** For remote order checking, if the remote order does not have a VA PRODUCT file VUID, then it will not be included in drug-drug order checks.

This option also prompts for 1<sup>st</sup> reference International Classification of Diseases (ICD) Diagnosis Codes (maximum of eight). Along with the PROVIDER key, the VistA Outpatient Pharmacy application evaluates the IBB Clinical Indicator Data Capture (CIDC) Insurance Switch to determine if CIDC prompts appear. This allows sites to choose whether to collect CIDC data.

These new ICD Diagnosis Code prompts only appear when the:

1. User entering the prescription holds the PROVIDER key.
2. IBB CIDC Insurance Switch is set to ‘YES’. (Yes = Prompt user for ICD Diagnosis Codes)

User response to the ICD Diagnosis Code prompts is optional.

This option is also found on the *Pharmacy Technician's Menu*, but with limited actions. A pharmacy technician can only enter a new order, refill, copy, renew, reprint, release, order a partial, or pull early from suspense.

When an order is an ePharmacy order (determined to be third party billable), the billing data is sent to ECME when an order is finished. ECME sends a message back to Outpatient Pharmacy displaying the status of the claim. This message displays for new, edited, copied, and renewed ePharmacy orders.

```
Is this correct? YES// <Enter>
-Rx 100003869A has been discontinued...

Veteran Prescription 100003919 successfully submitted to ECME for claim generation.
```

```

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE

```

## Titration

Introduced in PSO\*7\*313, the user has the ability to mark prescriptions as 'Titration to Maintenance' when finishing prescriptions from CPRS as well as via the Patient Prescription Processing [PSO LM BACKDOOR ORDERS] option by invoking the new hidden action 'TM' - Mark Rx as Titration. This action will result in preventing the following actions to be taken on the prescription: Refill, Renewal (including via CPRS), and Copy and editing of any field that requires a new Rx to be created. This action will also set the new field TITRATION RX FLAG (#45.3) in the PRESCRIPTION File (#52) as well as the new field TITRATION DOSE RX (#45.1) in the PRESCRIPTION File (#52). Prescriptions that are marked as Titration/Maintenance will have the letter 't' postfix to the RX # as seen below (entry #1):

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
1	100005024t	AMOXAPINE 50MG TAB	30	S	09-26	09-26	2	30
2	100005022	AMOXICILLIN 250MG CAP	30	A	08-18	08-18	11	30
3	100005035	KALETRA	3	A	09-29	09-29	0	3



**Note:** A prescription can be unmarked as Titration/Maintenance by invoking the same TM action on an already marked prescription.

There is also a new hidden action in the Patient Prescription Processing [PSO LM BACKDOOR ORDERS] option called TR (Convert Titration Rx). This action populates the MAINTENANCE DOSE RX (#45.2) field in the PRESCRIPTION File (#52). When a titration to maintenance prescription needs to be refilled so the patient can continue on the Maintenance Dose, this option allows users to create a new prescription with the maintenance dose only. The process works similar to copying an existing prescription; however, it can only be used on prescriptions with the following characteristics:

- Rx is a complex order with a THEN conjunction
- Rx is released
- Rx status is ACTIVE
- Rx does not have refills previously ordered
- Rx # Of Refills is greater than 0 (zero)

Before the new Maintenance Rx can be accepted, the user is prompted to validate the QTY field for the new Rx, which may or may not be automatically re-calculated. Only the last dose from the original prescription is carried over to the new Maintenance Rx, and the # of Refills field is

decreased by 1 because the new Maintenance Rx counts as a fill. Once the user verifies the information for the Maintenance Rx is accurate, they can accept the Maintenance Rx. This action will trigger a Duplicate Drug check against the original complex order, which must be discontinued before the new Maintenance Rx can be accepted.

After the new Maintenance Rx is accepted, it will have the new indicator 'm' on the right side of the Rx # in the patient's Medication Profile as seen below (entry #1):

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----ACTIVE-----								
1	100005436m	AMOXAPINE 50MG TAB	30	S	09-26	09-26	1	30
2	100005022	AMOXICILLIN 250MG CAP	30	A	08-18	08-18	11	30
3	100005035	KALETRA	3	A	09-29	09-29	0	3

## CPRS Order Checks

The following CPRS order checks have been added to the existing list of order checks performed in the Outpatient Pharmacy application:

- Aminoglycoside Ordered
- Dangerous Meds for Patient >64
- Glucophage –Lab Results



**Note:** Please see the CPRS (OERR) documentation for details on each order check.

The CPRS order checks shall be incorporated in the following Outpatient Pharmacy order entry processes:

- Entering a new order via backdoor pharmacy options
- Finishing a pending order
- Renewing an order
- Editing an order that results in a new order being created.
- Verifying an order
- Copying an order
- Reinstating a discontinued order

No user action/intervention shall be required after a CPRS order check warning is displayed.

See examples below:

### New Order Entry – Backdoor – Dangerous Meds for Patient >64 for Dipyridamole

```
Select Action: Quit// NO   New Order

Eligibility: NSC
RX PATIENT STATUS: OPT NSC//
DRUG: DIPYRIDAMOLE
Lookup: GENERIC NAME
  1  DIPYRIDAMOLE 25MG TAB          BL117
  2  DIPYRIDAMOLE 50MG TAB          BL117
```



```

CHOOSE 1-2: 1  DIPYRIDAMOLE 25MG TAB          BL117

***DANGEROUS MEDS FOR PATIENT >64***

Patient is 78.  Older patients can experience adverse reactions at high doses of
Dipyridamole (e.g., headache, dizziness, syncope, GI intolerance.)  There is also
questionable efficacy at lower doses.

VERB: TAKE
There are 2 Available Dosage(s):
    1. 25MG
    2. 50MG

Select from list of Available Dosages(1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 25MG

You entered 25MG is this correct? Yes//  YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// 1
Dosage Ordered: 25MG

NOUN: TABLET
ROUTE: PO//

```

### Finishing a Pending Order – Dangerous Meds for Patient >64 for Amitriptyline

```

Pending OP Orders (ROUTINE)  Mar 25, 2008@15:29:09          Page: 1 of 2
PSOPATIENT,NINE                                     <A>
  PID: 000-00-0000                                Ht (cm): 177.80 (10/14/2005)
  DOB: JAN 1,1930 (78)                            Wt (kg): 136.36 (10/14/2005)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)             BSA (m2): 1.77

* (1) Orderable Item: AMITRIPTYLINE TAB
  (2)      Drug: AMITRIPTYLINE 25MG TAB
           00056-0176-75
  (3)      *Dosage: 25 (MG)
           Verb: TAKE
           Dispense Units: 1
           Noun: TABLET
           *Route: ORAL
           *Schedule: QHS
  (4) Pat Instruct:
  Provider Comments:
           Instructions: TAKE ONE TABLET PO QHS
           SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME
  (5) Patient Status: OPT NSC
  (6)      Issue Date: MAR 25,2008          (7) Fill Date: MAR 25,2008
+ Enter ?? for more actions
BY Bypass                                         DC Discontinue
ED Edit                                           FN Finish
Select Item(s): Next Screen// FN  Finish

***DANGEROUS MEDS FOR PATIENT >64***

Patient is 78.  Amitriptyline can cause cognitive impairment and loss of balance in older
patients.  Consider other antidepressant medications on formulary.

Rx # 2612                                03/25/08
PSOPATIENT,NINE                             #30
TAKE ONE TABLET BY MOUTH AT BEDTIME

AMITRIPTYLINE 25MG TAB
PSOPROVIDER,TEN                               PSOPHARMACIST,22
# of Refills: 3

Are you sure you want to Accept this Order? NO// YES
WAS THE PATIENT COUNSELED: NO//
.

```

Renewing an Order - Dangerous Meds for Patient >64 for Chlorpropamide

Rx #: 2613\$  
(1) \*Orderable Item: CHLORPROPAMIDE TAB  
(2) Drug: CHLORPROPAMIDE 250MG TAB  
NDC: 00056-0176-75  
(3) \*Dosage: 250 (MG)  
Verb: TAKE  
Dispense Units: 1  
Noun: TABLET  
\*Route: ORAL  
\*Schedule: BID  
(4) Pat Instructions:  
SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY  
(5) Patient Status: OPT NSC  
(6) Issue Date: 03/25/08 (7) Fill Date: 03/25/08  
Last Fill Date: 03/25/08 (Mail)  
+ Enter ?? for more actions  
DC Discontinue PR Partial RL Release  
ED Edit RF Refill RN Renew  
Select Action: Next Screen// RN Renew

FILL DATE: (3/25/2008 - 3/26/2009): TODAY// (MAR 25, 2008)  
MAIL/WINDOW: WINDOW// WINDOW  
METHOD OF PICK-UP:  
Nature of Order: WRITTEN// W  
WAS THE PATIENT COUNSELED: NO// NO

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

Now Renewing Rx # 2613 Drug: CHLORPROPAMIDE 250MG TAB

\*\*\*DANGEROUS MEDS FOR PATIENT >64\*\*\*

Patient is 78. Older patients may experience hypoglycemia with Chlorpropamide due do its long duration and variable renal secretion. They may also be at increased risk for Chlorpropamide-induced SIADH.

2613A CHLORPROPAMIDE 250MG TAB QTY: 60  
# OF REFILLS: 3 ISSUED: 03-25-08  
SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY  
.

Creating New Order from Edit - Glucophage Lab Results for Metformin

\* (1) Orderable Item: METFORMIN TAB,ORAL  
(2) Drug: METFORMIN 500MG TAB  
NDC: 00056-0176-75  
(3) \*Dosage: 500 (MG)  
Verb: TAKE  
ED Edit FN Finish  
Select Item(s): Next Screen// NEXT SCREEN  
BY Bypass DC Discontinue  
Pending OP Orders (ROUTINE) Mar 25, 2008@15:33:47 Page: 2 of 3  
PSOPATIENT,NINE <A>  
PID: 000-00-0000 Ht (cm): 177.80 (10/14/2005)  
DOB: JAN 1,1930 (78) Wt (kg): 136.36 (10/14/2005)  
+  
Dispense Units: 1  
Noun: TABLET  
\*Route: ORAL  
\*Schedule: Q12H  
(4) Pat Instruct:  
Provider Comments:  
Instructions: TAKE ONE TABLET PO Q12H  
SIG: TAKE ONE TABLET BY MOUTH EVERY 12 HOURS  
(5) Patient Status: OPT NSC

```

(6) Issue Date: MAR 25,2008 (7) Fill Date: MAR 25,2008
(8) Days Supply: 30 (9) QTY (TAB): 60
Provider ordered 2 refills
(10) # of Refills: 2 (11) Routing: MAIL
(12) Clinic: BARB'S CLINIC
+ Enter ?? for more actions
ED Edit FN Finish
Select Item(s): Next Screen// ED Edit
* Indicates which fields will create a new Order
Select Field to Edit by number: (1-15): 3

Press Return to :

There are 2 Available Dosage(s):
1. 500MG
2. 1000MG

Select from list of Available Dosages(1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 500MG// 2 1000MG

You entered 1000MG is this correct? Yes// YES
VERB: TAKE// TAKE
DISPENSE UNITS PER DOSE(TABLETS): 2// 2
Dosage Ordered: 1000MG

NOUN: TABLETS// TABLETS
ROUTE: ORAL// ORAL
Schedule: Q12H// QHS
Now searching ADMINISTRATION SCHEDULE (#51.1) file...
QHS QHS AT BEDTIME
...OK? Yes// (Yes)
(AT BEDTIME)

LIMITED DURATION (IN DAYS, HOURS OR MINUTES):
CONJUNCTION:

Pending OP Orders (ROUTINE) Mar 25, 2008@15:34:08 Page: 1 of 3
PSOPATIENT,NINE <A>
PID: 000-00-0000 Ht (cm): 177.80 (10/14/2005)
DOB: JAN 1,1930 (78) Wt (kg): 136.36 (10/14/2005)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.77

CPRS Order Checks:
Duplicate drug class order: ORAL HYPOGLYCEMIC AGENTS,ORAL (CHLORPROPAMIDE
TAB 250MG TAKE ONE TABLET BY MOUTH TWICE A DAY [PENDING])
Overriding Provider: PSOPROVIDER,TEN
Overriding Reason: testing

Metformin - no serum creatinine within past 60 days.
Overriding Provider: PSOPROVIDER,TEN
Overriding Reason: testing

*(1) Orderable Item: METFORMIN TAB,ORAL
(2) Drug: METFORMIN 500MG TAB
NDC: 00056-0176-75
(3) *Dosage: 1000 (MG)
Verb: TAKE

+ This change will create a new prescription!
AC Accept ED Edit DC Discontinue
Select Item(s): Next Screen// AC Accept

***Metformin Lab Results***

Metformin - no serum creatinine within past 60 days.

Rx # 2614 03/25/08
PSOPATIENT,NINE #1440
TAKE TWO TABLETS BY MOUTH AT BEDTIME

```

METFORMIN 500MG TAB  
PSOPROVIDER,TEN PSOPHARMACIST,22  
# of Refills: 2

Are you sure you want to Accept this Order? NO// YES  
Nature of Order: SERVICE CORRECTION//

### Verifying an Order – Dangerous Meds for Patient >64 for Dipyridamole

OP Medications (NON-VERIFIED) Mar 25, 2008@15:39:03 Page: 1 of 2  
PSOPATIENT,NINE <A>  
PID: 000-00-0000 Ht (cm): 177.80 (10/14/2005)  
DOB: JAN 1,1930 (78) Wt (kg): 136.36 (10/14/2005)  
SEX: MALE  
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 1.77

Rx #: 2615\$  
(1) \*Orderable Item: DIPYRIDAMOLE TAB  
(2) Drug: DIPYRIDAMOLE 25MG TAB  
NDC: 00056-0176-75  
(3) \*Dosage: 25 (MG)  
Verb: TAKE  
Dispense Units: 1  
Noun: TABLET  
\*Route: ORAL  
\*Schedule: QHS  
(4) Pat Instructions:  
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
(5) Patient Status: OPT NSC  
(6) Issue Date: 03/25/08 (7) Fill Date: 03/25/08  
Last Fill Date: 03/25/08 (Mail)  
+ Enter ?? for more actions  
DC Discontinue PR (Partial) RL (Release)  
ED Edit RF (Refill) RN (Renew)  
Select Action: Next Screen// VF VF

RX: 2615 PATIENT: PSOPATIENT,NINE (000-00-0000)  
STATUS: Non-Verified CO-PAY STATUS  
DRUG: DIPYRIDAMOLE 25MG TAB  
QTY: 30 30 DAY SUPPLY  
SIG: TAKE ONE TABLET BY MOUTH AT BEDTIME  
LATEST: 03/25/2008 # OF REFILLS: 3 REMAINING: 3  
ISSUED: 03/25/08 PROVIDER:  
LOGGED: 03/25/08 CLINIC: BARB'S CLINIC  
EXPIRES: 03/26/09 DIVISION: XXXXX (499)  
CAP: SAFETY ROUTING: MAIL  
ENTRY BY: PSOPROVIDER,TEN VERIFIED BY:

#### ACTIVITY LOG:

#	DATE	REASON	RX REF	INITIATOR OF ACTIVITY
---	------	--------	--------	-----------------------

=====

1	03/25/08	PATIENT INST.ORIGINAL		
---	----------	-----------------------	--	--

COMMENTS: Patient Instructions Not Sent By Provider.  
PATIENT STATUS : OPT NSC COPIES : 1

Press RETURN to Continue:

\*\*\*DANGEROUS MEDS FOR PATIENT >64\*\*\*

Patient is 78. Older patients can experience adverse reactions at high doses of Dipyridamole (e.g., headache, dizziness, syncope, GI intolerance.) There is also questionable efficacy at lower doses.

EDIT: (Y/N/P): N// O

VERIFY FOR PSOPATIENT,NINE ? (Y/N/Delete/Quit): Y// ES

## Copying an Order – Aminoglycoside Ordered – Gentamicin

```

Select Action: Next Screen// CO   CO

OP Medications (ACTIVE)           Mar 25, 2008@15:46:18           Page: 1 of 2
PSOPATIENT,NINE                                                           <A>
  PID: 000-00-0000                Ht (cm): 177.80 (10/14/2005)
  DOB: JAN 1,1930 (78)            Wt (kg): 136.36 (10/14/2005)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)          BSA (m2): 1.77

      Rx #: 2616$
(1) *Orderable Item: GENTAMICIN INJ,SOLN
(2)      Drug: GENTAMICIN 40MG/ML 2ML VI
      NDC: 00056-0176-75
      Verb: INJECT
(3)      *Dosage: 80MG
      *Route: INTRAMUSCULAR
      *Schedule: Q8H
(4) Pat Instructions:
      SIG: INJECT 80MG IM EVERY 8 HOURS
(5) Patient Status: OPT NSC
(6) Issue Date: 03/25/08           (7) Fill Date: 03/25/08
      Last Fill Date: 03/25/08 (Window)
      Last Release Date:           (8) Lot #:
      Expires: 04/24/08           MFG:
+ Enter ?? for more actions

AC   Accept                       ED   Edit

New OP Order (COPY)               Mar 25, 2008@15:46:18           Page: 1 of 2
PSOPATIENT,NINE                                                           <A>
  PID: 000-00-0000                Ht (cm): 177.80 (10/14/2005)
  DOB: JAN 1,1930 (78)            Wt (kg): 136.36 (10/14/2005)

      Orderable Item: GENTAMICIN INJ,SOLN
(1)      Drug: GENTAMICIN 40MG/ML 2ML VI
(2) Patient Status: OPT NSC
(3) Issue Date: MAR 25,2008       (4) Fill Date: MAR 25,2008
      Verb: INJECT
(5) Dosage Ordered: 80MG
      Route: INTRAMUSCULAR
      Schedule: Q8H
(6) Pat Instruction:
      SIG: INJECT 80MG IM EVERY 8 HOURS
(7) Days Supply: 10               (8) QTY (VI): 10
(9) # of Refills: 0               (10) Routing: WINDOW
(11) Clinic: SHIRL-2
(12) Provider: PSOPROVIDER,TEN   (13) Copies: 1
+ Enter ?? for more actions

AC   Accept                       ED   Edit
Select Action: Next Screen// AC   Accept

***Aminoglycoside Ordered***

Aminoglycoside - est. CrCl: <Unavailable> (<Results Not Found>) [Est.
CrCl based on modified Cockcroft-Gault equation using Adjusted Body
Weight (if ht > 60 in)]

Nature of Order: WRITTEN//        W
WAS THE PATIENT COUNSELED: NO// NO

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

Rx # 2617                          03/25/08
PSOPATIENT,NINE                    #10
INJECT 80MG IM EVERY 8 HOURS

```

```
GENTAMICIN 40MG/ML 2ML VI
PSOPROVIDER,TEN          PSOPHARMACIST,22
# of Refills: 0
```

```
Is this correct? YES//
```

### Reinstating a Discontinued Order – Glucophage Lab Results for Metformin

```
Rx #: 2614$
(1) *Orderable Item: METFORMIN TAB,ORAL
(2) Drug: METFORMIN 500MG TAB
    NDC: 00056-0176-75
(3) *Dosage: 1000 (MG)
    Verb: TAKE
    Dispense Units: 2
    Noun: TABLETS
    *Route: ORAL
    *Schedule: QHS
(4) Pat Instructions:
    SIG: TAKE TWO TABLETS BY MOUTH AT BEDTIME
(5) Patient Status: OPT NSC
(6) Issue Date: 03/25/08          (7) Fill Date: 03/25/08
    Last Fill Date: 03/25/08 (Mail)
+ Enter ?? for more actions
DC Discontinue      PR (Partial)          RL Release
ED (Edit)          RF (Refill)           RN Renew
Select Action: Next Screen// DC Discontinue
Are you sure you want to Reinstate? NO// YES

Comments: TESTING
Nature of Order: SERVICE CORRECTION//      S
=====
2614 METFORMIN 500MG TAB

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

***Metformin Lab Results***

Metformin - Creatinine results: <creatinine greater than 1.5 w/in past <x> days>

Prescription #2614 REINSTATED!
Prescription #2614 Filled: MAR 25, 2008Printed: MAR 25, 2008Released:
Either print the label using the reprint option
or check later to see if the label has been printed.
```

### Entering a New Order

Actions display in the action area of the screen. Actions with parentheses ( ) around them are invalid actions for that order. A double question mark (??) displays all the actions available, including the Outpatient Pharmacy actions described in the section "Using List Manager". If an invalid hidden action is selected, a message will display in the message window.

### Example: Entering a New Order

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)

Orders to be completed for all divisions: 14

Do you want an Order Summary? No// <Enter>
```

A summary list of the number of pending orders can be displayed by Division or by each Clinic within the Division where the user is signed on. This is helpful when completing batch orders. In this example, an individual patient name is entered.

```
Patient Prescription Processing
Barcode Rx Menu ...
Complete Orders from OERR
Discontinue Prescription(s)
Edit Prescriptions
List One Patient's Archived Rx's
Manual Print of Multi-Rx Forms
Reprint an Outpatient Rx Label
Signature Log Reprint
View Prescriptions

Select Rx (Prescriptions) Option: PATient Prescription Processing
Select PATIENT NAME: OPPATIENT16 OPPATIENT16,ONE 04-03-41 000246802
YES SC VETERAN
Patient is enrolled to receive ScripTalk 'talking' prescription labels.

Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED// <Enter>
```

If RDI is active and a patient has prescriptions at another location, when the user selects the patient to enter a new order from Patient Prescription Processing, the following message appears:

```
REMOTE PRESCRIPTIONS AVAILABLE!
Display Remote Data? N//
```

If the user responds **NO**, then the normal procedure occurs for entering prescriptions. If the user responds **YES**, the “Remote Facilities Visited” screen appears. See the Displaying a Patient’s Remote Prescriptions section later in Entering a New Order for more details.

A detailed explanation of the different parts of the screen can be found under in Chapter 2: List Manager. The Patient Information screen is displayed on two screens; however, only the second screen is shown in this example.

### Example: Entering a New Order (continued)

```
Patient Information May 22, 2006 10:44:38 Page: 2 of 2
OPPATIENT16,ONE
PID: 000-24-6802 Ht (cm): 177.80 (02/08/2004)
DOB: APR 3,1941 (60) Wt (kg): 90.45 (02/08/2004)
SEX: MALE
+
Allergies:
Remote: ASPIRIN, NON-OPIOID ANALGESICS
Adverse Reactions:

Enter ?? for more actions
EA Enter/Edit Allergy/ADR Data PU Patient Record Update
DD Detailed Allergy/ADR List EX Exit Patient List
Select Action: Quit// <Enter>
```

Although the default option is “Quit” at the “Select Action” prompt, pressing the **Enter** key here quits the Patient Information screen and displays the Medication Profile. This Medication Profile includes any Non-VA Med orders documented via the CPRS GUI application.

```

Medication Profile           May 22, 2006 10:44:56           Page:    1 of    1
OPPACIENT16,ONE
  PID: 000-24-6802                Ht(cm): 177.80 (02/08/2004)
  DOB: APR 3,1941 (60)           Wt(kg): 90.45 (02/08/2004)
  AGE: 60                        Non-VA Meds on File Last entry on 01/13/03
  CrCL: 102.4(est.) (CREAT:1.0mg/dL 10/30/12)  BSA (m2): 2.09
                                     ISSUE  LAST REF DAY
#  RX #          DRUG                QTY ST  DATE  FILL REM SUP
-----
-----ACTIVE-----
  1 503902        ACETAMINOPHEN 500MG TAB          60 A> 05-22 05-22   3 30
  2 503886$      DIGOXIN (LANOXIN) 0.2MG CAP      60 A> 05-07 05-07   5 30
-----
  3 AMPICILLIN 250MG CAP          QTY: 40      ISDT: 05-29 REF: 0
-----NON-VA MEDS (Not dispensed by VA)-----
GINKGO EXT 1 TAB ONCE A DAY BY MOUTH      Date Documented: 01/13/03
IBUPROFEN 50MG TAB                        Date Documented: 12/10/02
TERFENADINE TAB 200 MILLIGRAMS
MIX ½ CUP PDR & 6 OZ WATER & DRINK 1 MIXED CUP
                                     Date Documented: 03/17/02

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

```

If a double question mark (??) had been entered at the above “Select Action” prompt, the following hidden actions would display in the action area:

```

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

```

Typing in the letters **no** creates a new order.

**Example: Entering a New Order (continued)**

```

Medication Profile           Mar 29, 2011@14:34:27           Page:    1 of    1
(Patient information is displayed here.)
:
Enter ?? for more actions
PU Patient Record Update              NO New Order
PI Patient Information                 SO Select Order
Select Action: Quit// NO New Order

Eligibility:

```



```

RX PATIENT STATUS: SC LESS THAN 50%//
DRUG: ACETAMINOPHEN
  Lookup: GENERIC NAME
    1 ACETAMINOPHEN 160MG/5ML LIQUID          CN103      NATL FORM; 480 M
L/BT (NDC)
    2 ACETAMINOPHEN 325MG TAB                CN103      NATL FORM; DU: INCREMEN
TS OF 100 ONLY *** AUTOMED & SCRIPTPRO ***
    3 ACETAMINOPHEN 325MG/BUTALBITAL 50MG TAB          CN103      N/F      N
ATL N/F
    4 ACETAMINOPHEN 500MG TAB                CN103      NATL FORM; DU: INCREMEN
TS OF 100 ONLY*** AUTOMED & SCRIPTPRO ***
    5 ACETAMINOPHEN 650MG RTL SUPP          CN103      NATL FORM (IEN)
CHOOSE 1-5: 5 ACETAMINOPHEN 650MG RTL SUPP          CN103      NATL FORM (IEN)

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

=====
*** THERAPEUTIC DUPLICATION(S) *** ACETAMINOPHEN 650MG RTL SUPP with

      Local RX#: 2054930
      Drug: ACETAMINOPHEN 500MG TAB (Active)
      SIG: TAKE ONE TABLET BY MOUTH EVERY FOUR HOURS AS NEEDED
      QTY: 180                               Days Supply: 30
      Processing Status: Not released locally (Window)
      Last Filled On: 03/29/11

Class(es) Involved in Therapeutic Duplication(s): Non-Narcotic
Analgesic/Antipyretic, Non-Salicylate
=====

Press Return to continue:
Discontinue Rx #2054930 ACETAMINOPHEN 500MG TAB Y/N ?

```

The system checks the medication selected for any duplicate drugs or classes, interactions, or allergies that are noted in the patient's local and remote record. This also includes any local Non-VA Meds. See the following example of local and remote order checking.

**Example: Entering a New Order (continued)**

```

-----
Duplicate Drug in Local Rx:

      Rx: 6223755
      Drug: ACETAMINOPHEN 325MG RTL SUPP
      SIG: UNWRAP AND INSERT 1 SUPPOSITORY IN RECTUM EVERY 4
           HOURS AS NEEDED
      QTY: 30                               Refills remaining: 11
      Provider: PROVIDER,PRE                 Issued: 01/21/15
      Status: Active                         Last filled: 01/21/15
      Processing Status: Not released locally (Window)
                                           Days Supply: 30
-----

Discontinue RX # 6223755 ACETAMINOPHEN 325MG RTL SUPP Y/N? y YES

Rx #6223755 ACETAMINOPHEN 325MG RTL SUPP will be discontinued after the
acceptance of the new order.

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

```

```

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

Prospective Drug: ACETAMINOPHEN 325MG RTL SUPP
Causative Agent: ACETAMINOPHEN (MARTINSBURG VAMC - 05/13/14)
Historical/Observed: OBSERVED
Severity: SEVERE
Ingredients: ACETAMINOPHEN
Signs/Symptoms: NAUSEA AND VOMITING

Provider Override Reason: N/A - Order Check Not Evaluated by Provider

Do you want to Intervene? YES//

Enter your Current Signature Code: SIGNATURE VERIFIED

Now creating Pharmacy Intervention
for ACETAMINOPHEN 325MG RTL SUPP

PROVIDER: PROVIDER,TEST
RECOMMENDATION: 9 OTHER

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

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

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

-----
***Significant*** Drug Interaction with Prospective Drug:
ACETAMINOPHEN 325MG RTL SUPP and

Local RX#: 6223756
Drug: ISONIAZID 100MG TAB (Active)
SIG: TAKE ONE TABLET BY MOUTH EVERY MORNING AN HOUR
BEFORE BREAKFAST (ON AN EMPTY STOMACH, AN HOUR
BEFORE OR TWO HOURS AFTER A MEAL; TAKE WITH FOOD
IF IT UPSETS THE STOMACH)
Processing Status: Not released locally (Window)
Last Filled On: 01/21/15

*** Refer to MONOGRAPH for SIGNIFICANT INTERACTION CLINICAL EFFECTS

Display Interaction Monograph? No// NO

Do you want to Intervene? Y// N

=====
*** THERAPEUTIC DUPLICATION(S) *** ACETAMINOPHEN 325MG TAB with

LOCATION: CHEYENNE VAMROC Remote RX#: 712996
Drug: ACETAMINOPHEN 500MG TAB (Active)
SIG: TAKE ONE TABLET BY MOUTH EVERY DAY
QTY: 30 Days Supply: 30
Processing Status: Released locally on 09/21/05@11:34:13 (Window)
Last Filled On: 09/21/05

Class(es) Involved in Therapeutic Duplication(s): Non-Narcotic
Analgesic/Antipyretic, Non-Salicylate
=====
Press Return to continue...<Enter>

```



If a patient does not have an allergy assessment, the user will have to create an intervention. If the patient already has a prescription for which an Intervention was

created, the user will have the option to copy the existing Intervention. For more information about copying an existing Intervention, refer to the *Complete Orders from OERR* section.

```
Select Action: Quit// NO   New Order

Eligibility: SC LESS THAN 50%      SC%: 10
RX PATIENT STATUS: OPT NSC//
DRUG: ACETAMINOPHEN 325MG RTL SUPP      CN103      N/F      NON-FORMULAR
Y ORDERS WILL BE DC'D IF NOT APPROVED WITHIN 72 HOURS
...OK? Yes//   (Yes)

Restriction/Guideline(s) exist.  Display? : (N/D): No//   NO

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

There is no allergy assessment on file for this patient.
You will be prompted to intervene if you continue with this prescription
Do you want to Continue?: N// YES

Now creating Pharmacy Intervention
for ACETAMINOPHEN 325MG RTL SUPP

PROVIDER: PROVIDER,TEST
RECOMMENDATION: 9 OTHER

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

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

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

VERB: UNWRAP AND INSERT
There are 2 Available Dosage(s):
  1. 1 SUPPOSITORY
  2. 2 SUPPOSITORIES

Select from list of Available Dosages(1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list:
```



If the new order is for Clozapine, there are additional restrictions for filling a prescription. See “Chapter 9: Controlling the Dispensing of Clozapine” for more information.

```
A Drug-Allergy Reaction exists for this medication and/or class!
Drug: ACETAMINOPHEN 325MG TAB
Drug Class: CN103 NON-OPIOID ANALGESICS (REMOTE SITE(S))
Do you want to Intervene? Y// NO
```

If the drug or orderable item is edited, PROVIDER key users may be prompted for the appropriate ICD Diagnosis Codes. User response is optional.

If prompted for ICD Diagnosis Codes, the user can enter partial names and ICD Diagnosis Code numbers or a valid Diagnosis Code number or name.

### Example: Entering a New Order (continued)

```
Select Primary ICD Code: neuropathy
  1  NEUROPATHY  337.1  AUT NEUROPATHY IN OTH DIS
  2  NEUROPATHY  356.2  HERED SENSORY NEUROPATHY
  3  NEUROPATHY  356.8  IDIO PERIPH NEURPTHY NEC
  4  NEUROPATHY  356.9  IDIO PERIPH NEURPTHY NOS
  5  NEUROPATHY  377.33  NUTRITION OPTC NEUROPATHY
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 3 356.8  IDIO PERIPH NEURPTHY NEC
Select Secondary ICD Code: diabetes
  1  DIABETES  250.01  DIABETES MELLI W/O COMP TYP I  COMPLICATION/CO MORBIDITY
  2  DIABETES  250.11  DIABETES W KETOACIDOSIS TYPE I  COMPLICATION/CO
MORBIDITY
  3  DIABETES  250.21  DIABETES W HYPEROSMOLAR TYPE I  COMPLICATION/CO
MORBIDITY
  4  DIABETES  250.31  DIABETES W OTHER COMA TYPE I  COMPLICATION/CO MORBIDITY
Press <RETURN> to see more, '^' to exit this list,
OR CHOOSE 1-4: 1 250.01  DIABETES MELLI W/O COMP TYP I  COMPLICATION/COMORBIDITY
Select Secondary ICD Code: <Enter>
VERB: <Enter> TAKE
```

The list of available possible dosages display after order checks is linked to the drug ordered. The user can choose from the list or use free text to enter the dosage. Confirmation of the selected (or entered) dosage is required to confirm that it is correct.

With patch PSO\*7\*402, there were changes made to the display of the available dosage list to break only after the third dosage. Text changes were also made to existing prompts (with or without a page break) to inform a user of the number of dosages defined for the drug selected and that more dosages exist should a break occur. Text changes were also made when no dosages are available.

```
There are 3 Available Dosage(s):
  1. 250MG
  2. 500MG
  3. 1000MG
Select from list of Available Dosages (1-3), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 3 500MG
You entered 500MG is this correct? Yes// <Enter> YES
```

### Break only after 3 dosages with text changes

```
There are 5 Available Dosage(s):
  1. 10MG
  2. 20MG
  3. 40MG
Enter RETURN to view additional dosages or '^' to exit list of dosages:
-----<Page Break>-----
  4. 80MG
  5. 120MG
Select from list of Available Dosages (1-5), Enter Free Text Dose
or Enter a Question Mark (?) to view list:
```

### No Available Dosages

```
There are NO Available Dosage(s).

Please Enter a Free Text Dose:
```

For numeric dosages, the Dispense Units Per Dose value is calculated based on the strength of the dosage ordered divided by the strength of the medication ordered. For example, the 500 mg dosage ordered requires two 250 mg capsules. The Dosage Ordered is re-displayed after the Dispense Units to allow the entry to be verified.

```
DISPENSE UNITS PER DOSE (CAPSULES) : 2// <Enter> 2
Dosage Ordered: 500MG
```

If a Route has not been associated with the Dispense Drug, the default Route of PO or Oral will be displayed. A different Route can be entered, or it can be deleted at this point if needed. The Route is not required to complete a prescription. If the abbreviation entered is in the stored list of possible routes, the entry will be expanded in the Sig.

#### Example: Entering a New Order (continued)

```
ROUTE: PO// <Enter> ORAL PO MOUTH
or
ROUTE: PO// @ <Enter to delete>
```

A default schedule associated with the drug ordered is displayed. The default can be accepted, or a different free text schedule can be entered. Free text entries cannot contain more than two spaces or be more than twenty characters long. Entries will be compared against a list of common abbreviations and expanded if the entry matches. Any entry not found in the list of common abbreviations will be displayed in the Sig as entered.

With patch PSO\*7\*402, the user will be informed from which file the schedule selection is made and if the value entered will be considered as free text. The NAME, OLD SCHEDULE NAME(S) fields will be used for lookup from the ADMINISTRATION SCHEDULE file. The NAME, SYNONYM and OLD MED INSTRUCTION NAME(S) fields will be used for lookup from the MEDICATION INSTRUCTION file. The user will first be presented with selections from the ADMINISTRATION SCHEDULE file based on the value entered at the schedule prompt. If the user selects an entry, the lookup is complete. If the user chooses not to select a value from the ADMINISTRATION SCHEDULE file, the software displays selections from the MEDICATION INSTRUCTION file. If a selection is made, the lookup is complete. If the user chooses not to select a value, the software informs the user that the value as entered will be accepted at the schedule prompt as a free text entry.

```
Schedule: BID
Now searching ADMINISTRATION SCHEDULE (#51.1) file...
  BID  BID  TWICE A DAY
      ...OK? Yes// N (No)

  1  BID EXCLUDE MDD  BID
  2  BID PRN  BID
  3  BID-AM  BID
  4  BID-NOON  BID
  5  BID-W/MEAL  BID
Press <Enter> to see more, '^' to exit this list, OR
CHOOSE 1-5:
  6  BID2 PRN  BID
CHOOSE 1-6:
Now searching MEDICATION INSTRUCTION (#51) file...
  BID  TWICE A DAY
      ...OK? Yes// N (No)
```

```
AP      BIDAP  TWICE A DAY IN MORNING AND EVENING
      ...OK? Yes// N (No)

Free text 'BID' entered for schedule (TWICE A DAY)
```

The LIMITED DURATION field is used only when a medication should be taken for a limited period of time. Days are assumed for numeric entries. Follow the number with an “H” to specify hours or an “M” to specify minutes.



Do not use the LIMITED DURATION field for Days Supply.

LIMITED DURATION (IN DAYS, HOURS OR MINUTES): **10 (DAYS)**

The CONJUNCTION field is used to join dosing sequences in complex orders. Entries are limited to AND, THEN, or EXCEPT. For concurrent doses, use AND; for example, “Take 1 tablet every morning AND take 2 tablets at bedtime”. For consecutive doses, use “THEN”; for example, “Take 2 tablets daily for one week THEN take 1 tablet for five days.” For any dosing sequence that is not routine, use “EXCEPT”; for example, “Take 1 tablet every day EXCEPT take no tablets Wednesday.” See Appendix B for additional examples.

```
CONJUNCTION: <Enter>
```

Any entry in the PATIENT INSTRUCTIONS field will first be checked to see if it contains any abbreviations that can be expanded. The entry will be added to the end of the Sig, after the dosing information, and the entire Sig will be displayed.

```
PATIENT INSTRUCTIONS: WF WITH FOOD
(TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS WITH FOOD)
OTHER PATIENT INSTRUCTIONS: WF CON ALIMENTO
```

Two optional fields, OTHER LANGUAGE PREFERENCE and PMI LANGUAGE PREFERENCE in the PHARMACY PATIENT file, store if a patient has another language preference and if the patient’s PMI sheets should print in English or Spanish at the CMOP. The CMOP functionality was requested for future CMOP use. When printing locally from Outpatient Pharmacy this parameter is not used. These fields are accessed through the *Update Patient Record* option and the protocol Patient Record Update [PSO PATIENT RECORD UPDATE]. If the other language preference is indicated for a patient, the user will be prompted to enter OTHER PATIENT INSTRUCTIONS after selecting the PATIENT INSTRUCTIONS field to enter/edit. If a quick code is entered at the OTHER PATIENT INSTRUCTIONS prompt, the expansion entered at the OTHER PATIENT INSTRUCTIONS EXPANSIONS will print on the prescription label.

A default value for Days Supply based on patient status is displayed. A default quantity is calculated when possible. See Appendix B for more information on this calculation.

**Example: Entering a New Order (continued)**

```
DAYS SUPPLY: (1-90): 30// 10
QTY ( CAP ) : 80// <Enter> 80
```

Pharmacy Data Management (PDM) V. 1.0 patch PSS\*1.0\*61 added the NON REFILLABLE ("F") code to values for the DEA SPECIAL HDLG field of the DRUG file (#50). No refills will be allowed for any Outpatient Pharmacy prescription for a drug that contains an "F" in that field.

```
COPIES: 1// <Enter> 1
# OF REFILLS: (0-11): 11// 0
PROVIDER:      OPPROVIDER4,TWO
CLINIC:       OUTPT NURSE GREEN TEAM
MAIL/WINDOW:  WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
REMARKS: <Enter>
ISSUE DATE: TODAY// <Enter> (MAY 30, 2006)
FILL DATE: (5/30/2006 - 6/9/2006): TODAY// <Enter> (MAY 30, 2006)
Nature of Order: WRITTEN// ??
```

Nature of Order Activity	Require E.Signature	Print Chart Copy	Print on Summary
WRITTEN			x
VERBAL	x	x	x
TELEPHONED	x	x	x
SERVICE CORRECTION POLICY		x	x
DUPLICATE			
SERVICE REJECT	x	x	

```
Nature of Order: WRITTEN// <Enter> W
WAS THE PATIENT COUNSELED: NO// Y YES
WAS COUNSELING UNDERSTOOD: NO// Y YES
```

An option to add a progress note has been added. If “Yes” is entered at this prompt, the progress note entry will begin after the order information has been displayed and confirmed. The order is redisplayed, along with information on any service-connected disabilities on record.

**Example: Entering a New Order (continued)**

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

Rx # 503906          05/30/01
OPPATIENT25,ONE      #80
TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS WITH FOOD

AMPICILLIN 250MG CAP
OPPROVIDER1,TWO      OPPHARMACIST4,THREE
# of Refills: 11

      SC Percent: 40%
      Disabilities: NONE STATED

Was treatment for Service Connected condition? NO
```

To determine if the order should be charged copay, eligible copay exemptions for the order are displayed one at a time. The user is asked if the order is being prescribed for the first service-connected condition displayed. If yes is entered at this point, the fill is set for No Copay and no other exemption questions are asked. Otherwise, the next eligible exemption is displayed, and the question repeated. In the following example, the patient has reported exposure to herbicides during Vietnam-era service.

```
Was treatment related to Agent Orange exposure? NO
Is this correct? YES// <Enter>
Another New Order for OPPATIENT25,ONE? YES//
```

## **Entering a new order with Local or Free-Text Dosage**

The software checks the medication selected for any interactions or allergies noted in the patient's record, which includes any Non-VA Meds. The next prompts shown will be the new fields used to build a Sig. The list of available possible dosages shown after order checks is linked to the drug ordered. One of the dosages listed may be chosen or a different, free text dosage may be entered. Confirmation of the dosage is required, and the value entered is displayed again to allow the user to confirm that it is correct.

Medications with non-numeric dosages, such as ointments and creams, will display non-numeric possible default dosages. Because the dosage is non-numeric, values for dispense units per dose and quantity cannot be calculated.

### **Example: Entering a New Order with Local or Free-Text Dosage**

```
DRUG:      TYLENOL #3  ACETAMINOPHEN AND CODEINE 30MG      CN101
          ...OK? Yes//  (Yes)

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

There are 3 Available Dosage(s) :
          1. 1 TABLET
          2. 2 TABLET(S)
          3. 3 TABLET(S)

Select from list of Available Dosages (1-3), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 2 2 TABLET(S)
You entered 2 TABLET(S) is this correct? Yes// <Enter> YES
OTHER LANGUAGE DOSAGE: DOS TABLET(S)
```



The OTHER LANGUAGE DOSAGE field is only prompted for if a local or free-text dosage is entered, and the patient has been identified as having another language preference.

For local or free-text dosages, the Dispense Units Per Dose and Dosage Ordered are not prompted for.



The optional field, OTHER LANGUAGE PREFERENCE in the PHARMACY PATIENT file, stores if a patient has another language preference. This field is accessed through the *Update Patient Record* option and the protocol Patient Record Update. If the other language preference is indicated for a patient, the user will be prompted to enter OTHER LANGUAGE DOSAGE.



If a Route has not been associated with the Dispense Drug, the default Route of PO or Oral will be displayed. A different Route can be entered, or it can be deleted at this point if needed. The Route is not required to complete a prescription. If the abbreviation entered is in the MEDICATION ROUTES file, the entry will be expanded in the Sig based on the OUTPATIENT EXPANSION field.

**Example: Entering a New Order with Local or Free-Text Dosage (continued)**

```
ROUTE: PO// <Enter>   ORAL   PO  MOUTH
      or
ROUTE: PO// @ <Enter to delete>
```

A default schedule associated with the Orderable Item of the drug ordered is displayed at the “Schedule:” prompt. The default can be accepted, or a different free text schedule can be entered. Free text entries cannot contain more than two spaces or be more than twenty characters long. Entries will be compared against a list of common abbreviations, first in the ADMINISTRATION SCHEDULE file and then in the MEDICATION INSTRUCTION file and expanded if the entry matches. Any entry not found in the list of common abbreviations will be displayed in the Sig as entered.

With patch PSO\*7\*402, the user will be informed from which file the schedule selection is made and if the value entered will be considered as free text. The NAME, OLD SCHEDULE NAME(S) fields will be used for lookup from the ADMINISTRATION SCHEDULE file. The NAME, SYNONYM and OLD MED INSTRUCTION NAME(S) fields will be used for lookup from the MEDICATION INSTRUCTION file. The user will first be presented with selections from the ADMINISTRATION SCHEDULE file based on the value entered at the schedule prompt. If the user selects an entry, the lookup is complete. If the user chooses not to select a value from the ADMINISTRATION SCHEDULE file, the software displays selections from the MEDICATION INSTRUCTION file. If a selection is made, the lookup is complete. If the user chooses not to select a value, the software informs the user that the value as entered will be accepted at the schedule prompt as a free text entry.

```
Schedule: BID
Now searching ADMINISTRATION SCHEDULE (#51.1) file...
  BID  BID  TWICE A DAY
      ...OK? Yes// N (No)

  1  BID EXCLUDE MDD  BID
  2  BID PRN  BID
  3  BID-AM  BID
  4  BID-NOON  BID
  5  BID-W/MEAL  BID
Press <Enter> to see more, '^' to exit this list, OR
CHOOSE 1-5:
  6  BID2 PRN  BID
CHOOSE 1-6:
Now searching MEDICATION INSTRUCTION (#51) file...
  BID  TWICE A DAY
      ...OK? Yes// N (No)
  AP  BIDAP  TWICE A DAY IN MORNING AND EVENING
      ...OK? Yes// N (No)

Free text 'BID' entered for schedule (TWICE A DAY)
```

The LIMITED DURATION field is used only when a medication should be taken for a limited period of time. Days are assumed for numeric entries. The user should follow the number with a “H” to specify hours or a “M” to specify minutes.



**Note:** Do not use this field for Days Supply.

```
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 90 (DAYS)
```

The CONJUNCTION field is used to join dosing sequences in complex orders. Entries are limited to AND or THEN. AND is used for concurrent doses, such as “Take 1 tablet every morning AND take 2 tablets at bedtime.” THEN is used for consecutive doses, such as “Take 2 tablets daily for one week THEN take 1 tablet for five days.” See Chapter 2 in the *User Manual - Supplemental* for examples.

```
CONJUNCTION: <Enter>
```

Any entry in the PATIENT INSTRUCTIONS field will first be checked to see if it contains any abbreviations that can be expanded. The entry will be added to the end of the Sig, after the dosing information, and the entire Sig will be displayed.

```
PATIENT INSTRUCTIONS: WF WITH FOOD
(TAKE 2 TABLETS BY MOUTH FOUR TIMES A DAY FOR 90 DAYS WITH FOOD)
OTHER PATIENT INSTRUCTIONS: WF CON ALIMENTO
```

Patch PSS\*1\*47 adds two optional fields, OTHER LANGUAGE PREFERENCE and PMI LANGUAGE PREFERENCE in the PHARMACY PATIENT file that stores if a patient has another language preference and what language their PMI sheets should print at the CMOP.



These fields are accessed through the *Update Patient Record* option and the protocol Patient Record Update. If the other language preference is indicated for a patient, the user will be prompted to enter OTHER PATIENT INSTRUCTIONS after selecting the PATIENT INSTRUCTIONS field to enter/edit. If a quick code is entered at the OTHER PATIENT INSTRUCTIONS prompt, the expansion entered at the OTHER PATIENT INSTRUCTIONS EXPANSIONS will print on the prescription label.

A default value for Days Supply based on patient status is displayed. A default quantity is NOT calculated for local and free-text dosages. See Appendix B for more information on QUANTITY calculations.

**Example: Entering a New Order with Local or Free-Text Dosage (continued)**

```
DAYS SUPPLY: (1-90): 30// 90
QTY ( CAP ): 720
```

The remaining prompts have not changed.

```
COPIES: 1// <Enter> 1
# OF REFILLS: (0-1): 1// 1
```

```

PROVIDER:      OPProvider4,TWO
CLINIC:        OUTPT NURSE GREEN TEAM
MAIL/WINDOW:   WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
REMARKS: <Enter>
ISSUE DATE:    TODAY// <Enter> (MAY 30, 2006)
FILL DATE:     (5/30/2006 - 6/9/2006): TODAY// <Enter> (MAY 30, 2006)
Nature of Order: WRITTEN// <Enter> W
WAS THE PATIENT COUNSELED: NO// Y YES
WAS COUNSELING UNDERSTOOD: NO// Y YES

```

An option to add a progress note has been added. If “Yes” is entered at this prompt, the progress note entry will begin after the order information has been displayed and confirmed. The order is redisplayed, along with information on any service-connected disabilities on record.

**Example: Entering a New Order with Local or Free-Text Dosage (continued)**

```

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

Rx # 503908          05/30/01
OPPATIENT25,ONE          #80
TAKE 2 TABLETS BY MOUTH FOUR TIMES A DAY FOR 90 DAYS WITH FOOD

ACETAMINOPHEN AND CODEINE 30MG
OPPROVIDER1,TWO          OPPHARMACIST4,THREE
# of Refills: 1

          SC Percent: 40%
          Disabilities: NONE STATED

Was treatment for Service Connected condition? NO

Is this correct? YES//

Another New Order for OPPATIENT25,ONE? YES//

View of Rx

OP Medications (ACTIVE)          May 30, 2006 16:48:05          Page: 1 of 3
OPPATIENT29,ONE
  PID: 000-87-6543          Ht (cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)          Wt (kg): 79.09 (06/07/2000) f
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)          BSA (m2): 1.77

          Rx #: 503908
(1) *Orderable Item: ACETAMINOPHEN TAB
(2)          Drug: ACETAMINOPHEN AND CODEINE 30MG
          NDC: 00056-0176-75
          Verb: TAKE
(3)          *Dosage: 2 TABLET(S)
  Oth. Lang. Dosage: TRE TABLETA(S)
          *Route: ORAL
          *Schedule: QID
          *Duration: 10D (DAYS)
(4) Pat Instructions: WITH FOOD
  Other Pat. Instruc: CON ALIMENTO
          SIG: TAKE 2 TABLET(S) BY MOUTH FOUR TIMES A DAY FOR 90 DAYS
          WITH FOOD
(5) Patient Status: SERVICE CONNECTED

```

## **Entering a new order – ePharmacy (third party billable)**

For patients who have active third party insurance and have the appropriate eligibility requirements, the software will submit electronic claims to their insurance companies when prescriptions for billable drugs are ordered.

After a WINDOW order is entered and finished, the billing data is sent to the Electronic Claims Management Engine (ECME). ECME sends a message back to Outpatient Pharmacy displaying the status of the claim. For MAIL orders, the communication between Outpatient Pharmacy and ECME occurs either during the Local Mail Label Print or during the CMOP transmission.

The following example shows the creation of a new WINDOW order starting with the "DRUG:" prompt.

### **Example: Entering a New Order for ePharmacy Billing**

```
DRUG: PREDNISONONE
Lookup: GENERIC NAME
  1  PREDNISONONE 1MG TAB          HS051
  2  PREDNISONONE 20MG S.T.       HS051
  3  PREDNISONONE 5MG TAB         HS051
CHOOSE 1-3: 3 PREDNISONONE 5MG TAB      HS051

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

Previously entered ICD diagnosis codes: <Enter>

Select Primary ICD Code: <Enter>
VERB: TAKE
There are 2 Available Dosage(s):
  1. 20MG
  2. 40MG

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 1 20MG

You entered 20MG is this correct? Yes// <Enter> YES
VERB: TAKE
DISPENSE UNITS PER DOSE(TABLET): 1// <Enter> 1
Dosage Ordered: 20MG

NOUN: TABLET
ROUTE: PO// <Enter>
  1  PO  ORAL (BY MOUTH)          PO
  2  PO  ORAL                    PO
CHOOSE 1-2: 2 ORAL          PO  BY MOUTH
Schedule: TID
Now searching ADMINISTRATION SCHEDULE (#51.1) file...
  TID TID THREE TIMES A DAY
    ...OK? Yes// (Yes)
  (THREE TIMES A DAY)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10 (DAYS)
CONJUNCTION: <Enter>
PATIENT INSTRUCTIONS: WF
WITH FOOD
```

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

```
(TAKE ONE TABLET BY MOUTH THREE TIMES A DAY FOR 10 DAYS WITH FOOD)

DAYS SUPPLY: (1-90): 30// <Enter>
QTY ( TAB ) : 30// <Enter> 30
COPIES: 1// <Enter> 1
# OF REFILLS: (0-5): 5// <Enter>
PROVIDER: OPPROVIDER4,TWO
CLINIC: <Enter>
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
REMARKS: <Enter>
ISSUE DATE: TODAY// <Enter> (NOV 02, 2005)
FILL DATE: (11/2/2005 - 11/3/2006): TODAY// <Enter> (NOV 02, 2005)
Nature of Order: WRITTEN// <Enter> W
WAS THE PATIENT COUNSELED: NO// YES
WAS COUNSELING UNDERSTOOD: NO// YES

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

Rx # 100003840          11/02/05
OPPATIENT,FOUR          #30
TAKE ONE TABLET BY MOUTH THREE TIMES A DAY FOR 10 DAYS WITH FOOD

PREDNISONE 5MG TAB
OPPROVIDER4,TWO          OPPHARMACIST4,THREE
# of Refills: 5

Is this correct? YES// <Enter> YES

Veteran Prescription 100003840 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Gathering claim info
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E PAYABLE

Another New Order for OPPATIENT,FOUR? YES// NO
```

**View of RX:**

```
Medication Profile          Nov 02, 2005@07:33:29          Page: 1 of 1
OPPATIENT,FOUR
  PID: 000-01-1322P          Ht (cm) : _____ (_____)
  DOB: JAN 13,1922 (83)      Wt (kg) : _____ (_____)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)          BSA (m2) : _____
                                          ISSUE  LAST REF DAY
#  RX #          DRUG          QTY ST  DATE  FILL  REM  SUP
-----
1  100003840e    PREDNISONE 5MG TAB          30 A> 11-02 11-02  5  30
-----ACTIVE-----
```

^ Denotes ePharmacy Rx

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

If a new order is rejected due to a Drug Utilization Review (DUR), Refill Too Soon, or Reject Resolution Required, the prescription will be marked as “REJECTED”, and the user will have the opportunity to resolve the reject before continuing.

The following example shows a sample ECME transmission rejection, and how to resolve the rejection.

### Example: Handling a Rejected New Order for ePharmacy Billing

```
Veteran Prescription 999999 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E REJECTED

*** VETERAN - REJECT RECEIVED FROM THIRD PARTY PAYER ***
-----
Division :ANYTOWN                NPI#: 1234567890    NCPDP: 4150001
Patient  : OPPATIENT,FOUR(000-01-1322P) Sex: M    DOB: JAN 13,1922(83)
Prescription : 999999999/0 - TESTOSTERONE (ANDROD    ECME#: 000001234567
Reject Type  : 88 - DUR REJECT received on FEB 27, 2006@10:58:25
Payer Message: DUR Reject Error
Reason      : ER (OVERUSE PRECAUTION)
DUR Text    : ANDRODERM    DIS 5MG/24HR
Insurance   : TEST INS                    Contact: 800 555-5555
Group Name  : RXINS                      Group Number: 12454
Cardholder ID: 000011322P
-----
Select one of the following:

O          (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
I          (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION
Q          (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)verride, (I)gnore, (Q)uit: Q//  OVERRIDE
```

When a claim is rejected, typically the Payer provides a “Reason for Service Code”, which displays on the reject as “Reason”. The user can use this reason to then select which code is entered for “Professional Service Code” and “Result of Service Code”. To see a list of service codes, enter ? at the specified prompt.

```
Reason for Service Code : ER - OVERUSE
Professional Service Code: RT          RECOMMENDED LABORATORY TEST
Result of Service Code   : 1G          FILLED, WITH PRESCRIBER APPROVAL

Reason for Service Code : ER - OVERUSE
Professional Service Code: RT - RECOMMENDED LABORATORY TEST
Result of Service Code   : 1G - FILLED, WITH PRESCRIBER APPROVAL

Confirm? ? YES// <Enter>

Veteran Prescription 99999999 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E PAYABLE
```

For Refill Too Soon rejects, the same choices apply.

### Example: Handling a TRICARE Rejected New Order for ePharmacy Billing

Rejected TRICARE claims will be denoted with “TRICARE” during submission to ECME and within the subsequent reject notification screen. Also, the reject codes will be displayed in both places. The following example shows a prescription being submitted to ECME and this process occurs directly following the “Is this correct? YES//” prompt during finish. Where DUR or RTS are one of the reject codes, the user will be able to select from (D)iscontinue the prescription, submit (O)verride codes, or (Q)uit, which sends the rejection to the Third Party Payer Rejects – Worklist. A TRICARE rejection may not be (I)gnored.

```
TRICARE Prescription 101110 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Processing response
E REJECTED
  79 - Refill Too Soon
  14 - M/I Eligibility Clarification Code

*** REJECT RECEIVED FOR TRICARE PATIENT ***

-----
Division :ANYTOWN ISC                               NPI#: 5000000021
Patient  : OPTRICARE,ONE(666-55-4789) Sex: M        DOB: OCT 18,1963(44)
Rx/Drug  : 101110/0 - NAPROXEN 250MG S.T.          ECME#: 000000112303
Reject(s): REFILL TOO SOON (79), 14 - M/I Eligibility Clarification Code (14).
          Received on MAR 03, 2008@14:40:57.

Insurance   : TRICARE                               Contact:
Group Name  : TRICARE PRIME                          Group Number: 123123
Cardholder ID: SI9844532
Patient Billing Comment(s):
MAR 01, 2008@12:22:42 - NON BILLABLE FILLS FOR DIABETIC SUPPLIES (USER,ONE)
-----

Select one of the following:

O          (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
D          (D)ISCONTINUE - DO NOT FILL PRESCRIPTION
Q          (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)verride, (D)iscontinue, (Q)uit: Q//
```

### Example: Handling a non-DUR/RTS or non-clinical TRICARE rejected New Order for ePharmacy Billing

For TRICARE prescription rejections that have non-DUR/RTS or non-clinical rejects, the user will be able to select from (D)iscontinue the prescription or (Q)uit which sends it to the Third Party Payer Rejects – Worklist. TRICARE prescriptions with these type rejects cannot be filled until the rejection is resolved. Example:

```
TRICARE Prescription 101113 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Building the HL7 packet
IN PROGRESS-Transmitting
```

```

E REJECTED
  07 - M/I Cardholder ID Number
  14 - M/I Eligibility Clarification Code

*** REJECT RECEIVED FOR TRICARE PATIENT ***

-----
Division :ANYTOWN ISC                               NPI#: 5000000021
Patient  : OPTRICARE,ONE(666-55-4789) Sex: M       DOB: OCT 18,1963(44)
Rx/Drug  : 101113/0 - SIMETHICONE 40MG TAB        ECME#: 000000112306
Reject(s): M/I Eligibility Clarification Code (14), M/I Cardholder ID
          Number (07). Received on MAR 03, 2008@14:43:42.

Insurance : TRICARE                               Contact:
Group Name : TRICARE PRIME                       Group Number: 123123
Cardholder ID: SI9844532
Patient Billing Comment(s):
MAR 01, 2008@12:22:42 - NON BILLABLE FILLS FOR DIABETIC SUPPLIES (USER,ONE)
-----

Select one of the following:

D (D)iscontinue - DO NOT FILL PRESCRIPTION
Q (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(D)iscontinue,(Q)uit: Q//

```

For non-billable TRICARE prescriptions, an abbreviated version of the reject notification screen will be displayed. Because the prescription is non-billable, the insurance and ECME information that's currently provided for DUR/RTS rejects will not be displayed (i.e., insurance, group name, group #, ECME #, contact, cardholder ID). In this case, the prescription must be discontinued.

```

Is this correct? YES// ...

*** TRICARE - NON-BILLABLE ***

-----
Division :ANYTOWN ISC                               NPI#:
Patient  : OPTRICARE,ONE(666-55-4789) Sex: M       DOB: OCT 18,1963(44)
Rx/Drug  : 102058/0 - ABSORBABLE GELATIN S
Date/Time: AUG 27, 2008@16:49:46
Reason   : Drug not billable.
Patient Billing Comment(s):
MAR 01, 2008@12:22:42 - NON BILLABLE FILLS FOR DIABETIC SUPPLIES (USER,ONE)
-----

This is a non-billable TRICARE prescription. It cannot be filled or sent
to the reject worklist. It must be discontinued.

Press <RETURN> to continue...
Nature of Order: SERVICE CORRECTION//           S
Requesting PROVIDER: OPHARM OPPHARM,ONE        OO

```

Labels will not print for discontinued TRICARE prescriptions, and reprint label will not be allowed for TRICARE rejected prescriptions.

```

Select Rx (Prescriptions) Option: REPrint an Outpatient Rx Label

Reprint Prescription Label: 101113             SIMETHICONE 40MG TAB
Number of Copies? : (1-99): 1//
Print adhesive portion of label only? ? No// NO
Do you want to resend to Dispensing System Device? No// NO

```



```

Comments: REPRINT

Rx # 101113          03/03/08
OPTRICARE,ONE      #180

ONE MOUTH TWICE A DAY

SIMETHICONE 40MG TAB
OPPHARM,ONE          OPPHARM,ONE
# of Refills: 3

Select LABEL DEVICE: NULL Bit Bucket

No Label(s) printed.

Reprint Prescription Label:

```

Suspended TRICARE prescriptions will remain on suspense when a reject occurs, when the prescription is non-billable, or when the third party claim remains in an 'IN PROGRESS' status in ECME. Labels will not print. Once the reject is resolved, the user may pull the prescription early from suspense or wait for the next scheduled Print from Suspense option runs at which time labels will print accordingly. This includes CMOP and local suspense.

```

TRICARE Prescription 101607 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response

*** TRICARE - 'IN PROGRESS' ECME status ***

-----
Division :ANYTOWN ISC                      NPI#: 5000000021
Patient  : OPTRICARE,ONE(666-55-4789) Sex: M      DOB: OCT 18,1963(44)
Rx/Drug  : 101607/0 - ACETAZOLAMIDE 250MG
Date/Time: APR 20, 2008@20:11:17
Reason   : ECME Status is in an 'IN PROGRESS' state and cannot be filled
-----

This prescription will be suspended. After the third party claim is resolved,
it may be printed or pulled early from suspense.

Press <RETURN> to continue...

```

A rejected TRICARE prescription may not have a partial fill ordered until the reject is resolved.

```

OP Medications (SUSPENDED)   Apr 18, 2008@19:10:16           Page: 1 of 2
OPTRICARE,ONE
  PID: 666-55-4789                      Ht (cm) : _____ (_____)
  DOB: OCT 18,1963 (44)                  Wt (kg) : _____ (_____)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)    BSA (m2) : _____

          Rx #: 101526e
(1) *Orderable Item: ACETAZOLAMIDE PILL
(2)   Drug: ACETAZOLAMIDE 500MG SEQUELS
      NDC: 00056-0176-75
      Verb: TAKE
(3)   *Dosage: 1 PILL
      *Route: ORAL
      *Schedule: BID

```

```

(4)Pat Instructions:
      SIG: TAKE 1 PILL BY MOUTH TWICE A DAY
(5) Patient Status: OTHER FEDERAL
(6) Issue Date: 04/18/08 (7) Fill Date: 04/19/08
      Last Fill Date: 04/19/08 (Window)
      Last Release Date: (8) Lot #:
      Expires: 04/19/09 MFG:
+
DC Discontinue PR Partial RL Release
ED Edit RF (Refill) RN Renew
Select Action: Next Screen//  Partial

OP Medications (SUSPENDED) Apr 18, 2008@19:10:16 Page: 1 of 2
OPTRICARE,ONE
PID: 666-55-4789 Ht(cm) : _____ (_____)
DOB: OCT 18,1963 (44) Wt(kg): _____ (_____)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found) BSA (m2):

Rx #: 101526e
(1) *Orderable Item: ACETAZOLAMIDE PILL
(2) Drug: ACETAZOLAMIDE 500MG SEQUELS
      NDC: 00056-0176-75
      Verb: TAKE
(3) *Dosage: 1 PILL
      *Route: ORAL
      *Schedule: BID
(4)Pat Instructions:
      SIG: TAKE 1 PILL BY MOUTH TWICE A DAY
(5) Patient Status: OTHER FEDERAL
(6) Issue Date: 04/18/08 (7) Fill Date: 04/19/08
      Last Fill Date: 04/19/08 (Window)
      Last Release Date: (8) Lot #:
      Expires: 04/19/09 MFG:
+ Partial cannot be filled on TRICARE non-payable Rx
DC Discontinue PR Partial RL Release
ED Edit RF (Refill) RN Renew
Select Action: Next Screen//

```

If ECME's status on the claim remains in an "In Progress" state past the processing timeout during finish of the prescription, TRICARE prescriptions will not be allowed to be filled. Instead it will be placed on suspense until the rejection is resolved. Below is an example of this screen:

```

TRICARE Prescription 101607 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response

*** TRICARE - 'IN PROGRESS' ECME status ***
-----
Division :ANYTOWN ISC NPI#: 5000000021
Patient : OPTRICARE,ONE(666-55-4789) Sex: M DOB: OCT 18,1963(44)
Rx/Drug : 101607/0 - ACETAZOLAMIDE 250MG
Date/Time: APR 20, 2008@20:11:17
Reason : ECME Status is in an 'IN PROGRESS' state and cannot be filled
-----

This prescription will be suspended. After the third party claim is resolved,
it may be printed or pulled early from suspense.

Press <RETURN> to continue...

```

If a pharmacy is active for ePharmacy processing but an insurance plan is not linked or not active, TRICARE prescription will be allowed to be filled without third party claim submission. The phrase "Inactive ECME TRICARE" will be displayed during Finish and an ECME log entry will be added stating such.

**Example of message during finish:**

```

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

Rx # 102046          08/27/08
OPTRICARE,TEST          #180
ONE MOUTH TWICE A DAY

DANTROLENE 25MG CAP
OPPROVIDER,ONE          OPPHAR,ONE
# of Refills: 3

Is this correct? YES// ...
-Rx 101921 has been discontinued...

Inactive ECME TRICARE
  
```

**Example of ECME Activity Log entry:**

```

ECME Log:
#   Date/Time           Rx Ref           Initiator Of Activity
=====
1   8/27/08@11:07:45    ORIGINAL         OPPHARM,ONE
Comments: TRICARE-Inactive ECME TRICARE
  
```

**Example: Handling a CHAMPVA Rejected New Order for ePharmacy Billing**

Rejected CHAMPVA claims will be denoted with “CHAMPVA” during submission to ECME and within the subsequent reject notification screen. Also, the reject codes will be displayed in both places. The following example shows a prescription being submitted to ECME and this process occurs directly following the “Is this correct? YES//” prompt during finish. Where DUR or RTS are one of the reject codes, the user will be able to select from (D)iscontinue the prescription, submit (O)verride codes, or (Q)uit, which sends the rejection to the Third Party Payer Rejects – Worklist. A CHAMPVA rejection may not be (I)gnored unless the user holds the PSO TRICARE/CHAMPVA security key.

```

CHAMPVA Prescription 101110 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Processing response
E REJECTED
  79 - Refill Too Soon
  14 - M/I Eligibility Clarification Code

*** REJECT RECEIVED FOR CHAMPVA PATIENT ***

-----
Division :ANYTOWN ISC           NPI#: 5000000021   NCPDP: 1234567
Patient  : OPCHAMPVA,ONE(666-55-4789) Sex: M           DOB: OCT 18,1963(44)
Rx/Drug  : 101110/0 - NAPROXEN 250MG S.T.             ECME#: 000000112303
Reject(s): REFILL TOO SOON (79), 14 - M/I Eligibility Clarification Code (14).
  
```

```

Received on MAR 03, 2008@14:40:57.

Insurance      : CHAMPVA                      Contact:
Group Name     : CHAMPVA PRIME                Group Number: 123123
Cardholder ID : SI9844532
Patient Billing Comment(s):
MAR 01, 2008@12:22:42 - NON BILLABLE FILLS FOR DIABETIC SUPPLIES (USER,ONE)
-----

Select one of the following:

O          (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
D          (D)ISCONTINUE - DO NOT FILL PRESCRIPTION
Q          (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)verride, (D)iscontinue, (Q)uit: Q//

```

**Example: Handling a non-DUR/RTS or non-clinical CHAMPVA rejected New Order for ePharmacy Billing**

For CHAMPVA prescription rejections that have non-DUR/RTS or non-clinical rejects, the user will be able to select from (D)iscontinue the prescription or (Q)uit which sends it to the Third Party Payer Rejects – Worklist. CHAMPVA prescriptions with these type rejects cannot be filled until the rejection is resolved. Example:

```

CHAMPVA Prescription 101113 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Building the HL7 packet
IN PROGRESS-Transmitting
E REJECTED
  07 - M/I Cardholder ID Number
  14 - M/I Eligibility Clarification Code

*** REJECT RECEIVED FOR CHAMPVA PATIENT ***
-----
Division :ANYTOWN ISC                      NPI#: 5000000021
Patient  : OPCHAMPVA,ONE(666-55-4789) Sex: M      DOB: OCT 18,1963(44)
Rx/Drug  : 101113/0 - SIMETHICONE 40MG TAB      ECME#: 000000112306
Reject(s): M/I Eligibility Clarification Code (14), M/I Cardholder ID
          Number (07). Received on MAR 03, 2008@14:43:42.

Insurance   : CHAMPVA                      Contact:
Group Name  : CHAMPVA PRIME                Group Number: 123123
Cardholder ID: SI9844532
Patient Billing Comment(s):
MAR 01, 2008@12:22:42 - NON BILLABLE FILLS FOR DIABETIC SUPPLIES (USER,ONE)
-----

Select one of the following:

D          (D)ISCONTINUE - DO NOT FILL PRESCRIPTION
Q          (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(D)iscontinue, (Q)uit: Q//

```

For non-billable CHAMPVA prescriptions, an abbreviated version of the reject notification screen will be displayed. Because the prescription is non-billable, the insurance and ECME information that's currently provided for DUR/RTS rejects will not be displayed (i.e., insurance, group name, group #, ECME #, contact, cardholder ID). In this case, the prescription must be discontinued.

```

Is this correct? YES// ...

*** CHAMPVA - NON-BILLABLE ***
-----
Division :ANYTOWN ISC                               NPI#:
Patient  : OPCHAMPVA,ONE(666-55-4789) Sex: M       DOB: OCT 18,1963(44)
Rx/Drug  : 102058/0 - ABSORBABLE GELATIN S
Date/Time: AUG 27, 2008@16:49:46
Reason   : Drug not billable.
-----

This is a non-billable CHAMPVA prescription. It cannot be filled or sent
to the reject worklist. It must be discontinued.

Press <RETURN> to continue...
Nature of Order: SERVICE CORRECTION//              S
Requesting PROVIDER: OPHARM  OPPHARM,ONE          OO

```

Labels will not print for discontinued CHAMPVA prescriptions, and reprint label will not be allowed for CHAMPVA rejected prescriptions.

```

Select Rx (Prescriptions) Option: REPrint an Outpatient Rx Label

Reprint Prescription Label: 101113          SIMETHICONE 40MG TAB
Number of Copies? : (1-99): 1//
Print adhesive portion of label only? ? No// NO
Do you want to resend to Dispensing System Device? No// NO
Comments: REPRINT

Rx # 101113          03/03/08
OPCHAMPVA,ONE          #180

ONE MOUTH TWICE A DAY

SIMETHICONE 40MG TAB
OPPHARM,ONE          OPPHARM,ONE
# of Refills: 3

Select LABEL DEVICE: NULL Bit Bucket

No Label(s) printed.

Reprint Prescription Label:

```

Suspended CHAMPVA prescriptions will remain on suspense when a reject occurs, when the prescription is non-billable, or when the third party claim remains in an 'IN PROGRESS' status in ECME. Labels will not print. Once the reject is resolved, the user may pull the prescription early from suspense or wait for the next scheduled Print from Suspense option runs at which time labels will print accordingly. This includes CMOP and local suspense.

```

CHAMPVA Prescription 101607 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response

```

```

*** CHAMPVA - 'IN PROGRESS' ECME status ***
-----
Division :ANYTOWN ISC                               NPI#: 5000000021
Patient  : OPCHAMPVA,ONE(666-55-4789) Sex: M        DOB: OCT 18,1963(44)
Rx/Drug  : 101607/0 - ACETAZOLAMIDE 250MG
Date/Time: APR 20, 2008@20:11:17
Reason   : ECME Status is in an 'IN PROGRESS' state and cannot be filled
-----

This prescription will be suspended. After the third party claim is resolved,
it may be printed or pulled early from suspense.

Press <RETURN> to continue...

```

A rejected CHAMPVA prescription may not have a partial fill ordered until the reject is resolved.

```

OP Medications (SUSPENDED)   Apr 18, 2008@19:10:16           Page: 1 of 2
OPCHAMPVA,ONE
  PID: 666-55-4789                Ht (cm) : _____ (_____)
  DOB: OCT 18,1963 (44)           Wt (kg) : _____ (_____)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2):
                                     _____

  Rx #: 101526e
(1) *Orderable Item: ACETAZOLAMIDE PILL
(2)   Drug: ACETAZOLAMIDE 500MG SEQUELS
      NDC: 00056-0176-75
      Verb: TAKE (3)           *Dosage: 1 PILL
      *Route: ORAL
      *Schedule: BID
(4) Pat Instructions:
      SIG: TAKE 1 PILL BY MOUTH TWICE A DAY
(5) Patient Status: OTHER FEDERAL
(6) Issue Date: 04/18/08           (7) Fill Date: 04/19/08
      Last Fill Date: 04/19/08 (Window)
      Last Release Date:           (8) Lot #:
      Expires: 04/19/09           MFG:
+
DC Discontinue      PR Partial      RL Release
ED Edit            RF (Refill)      RN Renew
Select Action: Next Screen//  Partial

```

```

OP Medications (SUSPENDED)   Apr 18, 2008@19:10:16           Page: 1 of 2
OPCHAMPVA,ONE
  PID: 666-55-4789                Ht (cm) : _____ (_____)
  DOB: OCT 18,1963 (44)           Wt (kg) : _____ (_____)

  Rx #: 101526e
(1) *Orderable Item: ACETAZOLAMIDE PILL
(2)   Drug: ACETAZOLAMIDE 500MG SEQUELS
      NDC: 00056-0176-75
      Verb: TAKE
(3)   *Dosage: 1 PILL
      *Route: ORAL
      *Schedule: BID
(4) Pat Instructions:
      SIG: TAKE 1 PILL BY MOUTH TWICE A DAY
(5) Patient Status: OTHER FEDERAL
(6) Issue Date: 04/18/08           (7) Fill Date: 04/19/08
      Last Fill Date: 04/19/08 (Window)
      Last Release Date:           (8) Lot #:
      Expires: 04/19/09           MFG:
+
Partial cannot be filled on CHAMPVA non-payable Rx
DC Discontinue      PR Partial      RL Release
ED Edit            RF (Refill)      RN Renew
Select Action: Next Screen//

```

If ECME's status on the claim remains in an "In Progress" state past the processing timeout during finish of the prescription, a CHAMPVA prescription will not be allowed to be filled. Instead it will be placed on suspense until the rejection is resolved. Below is an example of this screen:

```

CHAMPVA Prescription 101607 submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
IN PROGRESS-Parsing response

*** CHAMPVA - 'IN PROGRESS' ECME status ***
-----
Division :ANYTOWN ISC                               NPI#: 5000000021
Patient  : OPCHAMPVA,ONE(666-55-4789) Sex: M       DOB: OCT 18,1963(44)
Rx/Drug  : 101607/0 - ACETAZOLAMIDE 250MG
Date/Time: APR 20, 2008@20:11:17
Reason   : ECME Status is in an 'IN PROGRESS' state and cannot be filled
-----

This prescription will be suspended. After the third party claim is resolved,
it may be printed or pulled early from suspense.

Press <RETURN> to continue...

```

If a pharmacy is active for ePharmacy processing but an insurance plan is not linked or not active, the CHAMPVA prescription will be allowed to be filled without third party claim submission. The phrase "Inactive ECME CHAMPVA" will be displayed during Finish and an ECME log entry will be added stating such.

**Example of message during finish:**

```

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

Rx # 102046          08/27/08
OPCHAMPVA,TEST      #180
ONE MOUTH TWICE A DAY

DANTROLENE 25MG CAP
OPPROVIDER,ONE      OPPHAR,ONE
# of Refills: 3

Is this correct? YES// ...
-Rx 101921 has been discontinued...

Inactive ECME CHAMPVA

```

**Example of ECME Activity Log entry:**

```

ECME Log:
#   Date/Time           Rx Ref           Initiator Of Activity
-----
1   8/27/08@11:07:45    ORIGINAL        OPPHARM,ONE
Comments: CHAMPVA -Inactive ECME CHAMPVA

```

## **Displaying a Patient's Remote Prescriptions**

If RDI is active and a patient has prescriptions at another location, when the user selects the patient to enter a new order from Patient Prescription Processing, the following message appears.

```
REMOTE PRESCRIPTIONS AVAILABLE!  
Display Remote Data? N//
```

If the user responds **NO**, then the normal procedure occurs for entering prescriptions. If the user responds **YES**, the “Remote Facilities Visited” screen appears as in the following example.

```
Remote Facilities Visited      Dec 30, 2008@17:26:47      Page: 1 of 1  
  
Patient: PSOPATIENT,ONE      (000-00-0000)      DOB: 01/02/1967  
  
Station  
HDR CHEYENNE  
  
Enter ?? for more actions  
DR Display Remote Pharmacy Data      DB Display Both Pharmacy Data  
Action:Quit//DR
```

To display the prescriptions at the remote pharmacy location, enter DR at the “Action” prompt. The “Medication Profile – Remote” screen appears as in the following example.

```
Medication Profile - Remote  Dec 30, 2008@17:29:43      Page: 1 of 2  
  
Patient: PSOPATIENT,ONE      (000-00-0000)      DOB: 01/02/1967  
  
RX#      DRUG      ST QTY ISSUED      LAST FILLED  
HDR CHEYENNE  
712885      AMOXICILLIN TRIHYDRATE 250MG CAP      A      90 11/06/08      11/06/08  
SIG: TAKE ONE CAPSULE BY MOUTH THREE TIMES A DAY  
PROVIDER: MCKAY,ELMER  
712886      DILTIAZEM (INWOOD) 240MG CAP,SA      A      30 11/28/08      11/28/08  
SIG: TAKE ONE CAPSULE BY MOUTH EVERY DAY  
PROVIDER: MCKAY,ELMER  
712888      LABETALOL HCL 200MG TAB      A      60 12/30/08      12/30/08  
SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY  
PROVIDER: MCKAY,ELMER  
712887      SIMVASTATIN 20MG TAB      A      15 12/09/08      12/09/08  
SIG: TAKE ONE-HALF TABLET BY MOUTH EVERY EVENING TESTING  
FOR PATTESTING FOR PATIENT TESTING FOR PATTESTING  
FOR PATIENTENT INSTRUCTION ON SIG1 TESTING FOR  
PATIENT INSTRUCTION ON SIG1 TESTING FOR PATIENT  
REPLACE IENT WITH IENT TESTING FOR PATIENT  
+      Enter ?? for more actions  
Select Action: Next Screen//
```

### **Example: Handling a Reject Resolution Required rejected New Prescription for ePharmacy Billing**

For VETERAN prescriptions, a reject code can be specified in the Reject Resolution Required section of the ePharmacy Site Parameter screen to stop a prescription from being filled. The Reject Resolution Required reject codes will prevent a prescription from being filled during any claims processing under the following conditions:

- VETERAN eligibility



- The prescription is an original fill
- The prescription is not released
- The reject is on the Reject Resolution Required list for the division
- The total gross amount of the prescription is at or above the specified threshold amount

For VETERAN prescription rejections that have Reject Resolution Required rejects, the user will be able to select from (I)gnore, which bypasses claims processing and allows the prescription to be filled, or (Q)uit which sends it to the Third Party Payer Rejects – Worklist. Prescriptions with these type of rejects cannot be filled until the reject is resolved.

**Example: Handling a Reject Resolution Required rejected New Order for ePharmacy Billing (continued)**

```

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Building the HL7 packet
IN PROGRESS-Transmitting
IN PROGRESS-Processing response
E REJECTED

*** VETERAN - REJECT RECEIVED FROM THIRD PARTY PAYER ***
-----
Division :ANYTOWN                NPI: 1234567890        NCPDP: 4150001
Patient  : OP,FOUR(000-01-1322P) Sex: M        DOB: JAN 13, 1922(83)
Rx/Drug  : 99999999/0 - TESTOSTERONE (ANDROD   ECME#: 000001234567
Reject(s): 76 - Plan Limitations Exceeded.   Received on JUN 07, 2013@11:26:05

Payer Message: DAYS SUPPLY IS MORE THAN ALLOWED BY PLAN

Insurance   : TEST INS                Contact: 800-555-5555
Group Name  : RXINS                   Group Number: 12454
Cardholder ID: 0000011322P

Reject Resolution Required
Gross Amount Due ($34.42) is greater than or equal to
Threshold Dollar Amount ($0)
Please select Quit to resolve this reject on the Reject Worklist.
-----

Select one of the following:

I          (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION
Q          (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(I)gnore, (Q)uit: Q//

```

**Editing an Order**

An asterisk or star (\*) is shown in front of each field that will create a new order if it is changed. The Sig field cannot be edited directly, but it will change if the fields that are used to build it are edited.

When editing fields preceded by an asterisk (\*) in an ePharmacy order (or electronically third party billable prescription), upon acceptance of the edited order the original prescription will be discontinued, and a new order created. If the latest fill of the original order has not been released

and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription. For more information, see the example Editing an ePharmacy Order.



Do not use the up-arrow (^) after editing one field to jump past the rest of the fields. Using just the up-arrow results in the changes just entered being deleted. The user must press **<Enter>** through *all* the order fields when editing to save the changes.

### Example: Editing an Order

```

OP Medications (ACTIVE)      May 30, 2006 16:48:05      Page: 1 of 3
OPPATIENT29,ONE
  PID: 000-87-6543           Ht (cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)     Wt (kg): 79.09 (06/07/2000) f
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 2.09

  Rx #: 503908
(1) *Orderable Item: AMPICILLIN CAP,ORAL *** (N/F) ***
(2) Drug: AMPICILLIN 250MG CAP *** (N/F) ***
  NDC: 00056-0176-75
(3) *Dosage: 500 (MG)
  Verb: TAKE
  Dispense Units: 2
  Noun: CAPSULES
  *Route: ORAL
  *Schedule: QID
  *Duration: 10D (DAYS)
(4) Pat Instructions: with food
  SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
  WITH FOOD
(5) Patient Status: SERVICE CONNECTED
+ Enter ?? for more actions
DC Discontinue PR Partial RL Release
ED Edit RF (Refill) RN Renew
Select Action: Next Screen// ED Edit
Select fields by number: (1-19): 4
PATIENT INSTRUCTIONS: WITH FOOD// WITH FOOD AVOIDING DAIRY FOODS
  
```

Changes to fields that are not starred (\*), like Patient Instructions, will not create a new order. Note that the new Patient Instruction text appears at the end of the Sig.

### Example: Editing an Order (continued)

```

OP Medications (ACTIVE)      May 30, 2006 16:54:25      Page: 1 of 3
OPPATIENT29,ONE
  PID: 000-87-6543           Ht (cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)     Wt (kg): 79.09 (06/07/2000)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 2.09

  Rx #: 503908
(1) *Orderable Item: AMPICILLIN CAP,ORAL *** (N/F) ***
(2) Drug: AMPICILLIN 250MG CAP *** (N/F) ***
  NDC: 00056-0176-75
(3) *Dosage: 500 (MG)
  Verb: TAKE
  Dispense Units: 2
  Noun: CAPSULES
  *Route: ORAL
  *Schedule: QID
  *Duration: 10D (DAYS)
(4) Pat Instructions: WITH FOOD AVOIDING DAIRY FOODS
  SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
  
```

```

                                WITH FOOD AVOIDING DAIRY FOODS
(5) Patient Status: SERVICE CONNECTED
+      Enter ?? for more actions
DC  Discontinue          PR  Partial          RL  Release
ED  Edit                 RF  (Refill)       RN  Renew
Select Action: Next Screen//

```

If a new order is created due to the editing of a field that affects copay, like Duration, the values previously entered display as defaults.

If editing the PATIENT STATUS field of a prescription results in a change to the copay status of that prescription, the copay status of the prescription is automatically updated, and an entry made in the prescription Copay activity log.

```

+      Enter ?? for more actions
DC  Discontinue          PR  Partial          RL  Release
ED  Edit                 RF  Refill         RN  Renew
Select Action: Next Screen// E Edit
Select fields by number: (1-18): 5
PATIENT STATUS: OPT NSC// AUT
  1  AUTH ABS +96
  2  AUTH ABS -96
CHOOSE 1-2: 2 AUTH ABS -96
11 refills are greater than 0 allowed for AUTH ABS -96 Rx Patient Status.

The last fill has been released, do you want a reprint label? Y// NO

Patient Status field for this Rx has been changed from a COPAYMENT ELIGIBLE
patient status to a COPAYMENT EXEMPT patient status. The copay status of this Rx will be
automatically adjusted. If action needs to be taken to adjust charges you MUST use the
Reset Copay Status/Cancel Charges option.

```

If a starred field, like Dosage, is changed a new order will be created that will include a remark noting the original prescription number. Note that when the dosage is changed the dispense units per dose and quantity are recalculated.

**Example: Editing an Order (continued)**

```

Select from list of Available Dosages (1-2), Enter Free Text Dose
or Enter a Question Mark (?) to view list: 500// 750MG 750MG

You entered 750MG is this correct? Yes// <Enter> YES
VERB: TAKE// <Enter> TAKE
DISPENSE UNITS PER DOSE (CAPSULE(S)): 3// <Enter> 3
Dosage Ordered: 750MG
NOUN: CAPSULE(S)// <Enter> CAPSULE(S)
ROUTE: ORAL// <Enter> ORAL
Schedule: QID
Now searching ADMINISTRATION SCHEDULE (#51.1) file...
  QID  QID  FOUR TIMES A DAY
  ...OK? Yes// (Yes)
(FOUR TIMES A DAY)
LIMITED DURATION (IN DAYS, HOURS OR MINUTES): 10D// <Enter> 10D (DAYS)
CONJUNCTION: <Enter>

New OP Order (ROUTINE)          May 30, 2006 17:11:44          Page: 1 of 2
OPPATIENT29,ONE                <A>
  PID: 000-87-6543              Ht (cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)        Wt (kg): 79.09 (06/07/2000)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)          BSA (m2): 2.09

Orderable Item: AMPICILLIN CAP,ORAL *** (N/F) ***

```

```

(1) Drug: AMPICILLIN 250MG CAP *** (N/F) ***
(2) Patient Status: SERVICE CONNECTED
(3) Issue Date: MAY 30,2006 (4) Fill Date: MAY 30,2006
(5) Dosage Ordered: 750 (MG)
    Verb: TAKE
    Dispense Units: 3
    Noun: CAPSULE(S)
    Route: ORAL
    Schedule: QID
    *Duration: 10D (DAYS)
(6) Pat Instruction: WITH FOOD AVOIDING DAIRY FOODS
    SIG: TAKE THREE CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10
        DAYS WITH FOOD AVOIDING DAIRY FOODS
+ This change will create a new prescription!
AC Accept ED Edit
Select Action: Next Screen//

```

```

New OP Order (ROUTINE) May 30, 2006 17:15:09 Page: 2 of 2
OPPATIENT29,ONE <A>
  PID: 000-87-6543 Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81) Wt(kg): 79.09 (06/07/2000)
+
(7) Days Supply: 10 (8) QTY (CAP): 120
(9) # of Refills: 0 (10) Routing: WINDOW
(11) Clinic: OUTPT NURSE GREEN TEAM
(12) Provider: OPPOVIDER4,TWO (13) Copies: 1
(14) Remarks: New Order Created by editing Rx # 503908.
    Entry By: OPPOVIDER4,TWO Entry Date: MAY 30,2006 17:11:44

    This change will create a new prescription!
AC Accept ED Edit
Select Action: Edit// AC

```



If the DAYS SUPPLY field is edited, the QTY field is recalculated. If the QTY field is edited, the DAYS SUPPLY field value does not change, but a message is displayed warning the user of the change and recommending that the value be checked.

**Example: Editing an Order (continued)**

```

New OP Order (ROUTINE) May 31, 2006 12:57:06 Page: 2 of 2
OPPATIENT29,ONE <A>
  PID: 000-87-6543 Ht(cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81) Wt(kg): 79.09 (06/07/2000)
+
(7) Days Supply: 30 (8) QTY (CAP): 120
(9) # of Refills: 0 (10) Routing: WINDOW
(11) Clinic: OUTPT NURSE GREEN TEAM
(12) Provider: OPPOVIDER4,TWO (13) Copies: 1
(14) Remarks: New Order Created by editing Rx # 503910.
    Entry By: OPPOVIDER4,TWO Entry Date: MAY 31,2006 12:57:06

    Enter ?? for more actions
AC Accept ED Edit
Select Action: Edit// <Enter> Edit
Select Field to Edit by number: (1-14): 7
DAYS SUPPLY: (1-90): 10// 7

```

Once changes are entered the screen redisplay with the changes and the order can be accepted or edited again. If the order is accepted, the prescription is checked for drug/drug interactions and, if none exist, prompts follow for nature of order and whether the patient was counseled.

```

Now doing drug interaction and allergy checks. Please wait...

Nature of Order: WRITTEN// ??

Nature of Order Activity      Require      Print      Print on
-----            E.Signature  Chart Copy  Summary
WRITTEN                                x
VERBAL                x            x            x
TELEPHONED           x            x            x
SERVICE CORRECTION
POLICY                                x            x
DUPLICATE
REJECTED
SERVICE REJECT       x            x

Nature of Order: WRITTEN// <Enter> WRITTEN
WAS THE PATIENT COUNSELED: NO// Y YES
WAS COUNSELING UNDERSTOOD: NO// Y YES
  
```

If the drug or orderable item is edited, PROVIDER key users may be prompted for the appropriate ICD Diagnosis Codes. User response is optional.

If prompted for ICD Diagnosis Codes, the user can enter partial names and ICD Diagnosis Code numbers or a valid Diagnosis Code number or name.

```

Patient Information      Mar 23, 2004@10:14:45      Page: 1 of 2
OPPATIENT29,ONE      <A>
  PID: 000-87-6543      Ht (cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)      Wt (kg): 79.09 (06/07/2000)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 2.09

Eligibility: SC LESS THAN 50%      SC%: 10
RX PATIENT STATUS: SC LESS THAN 50%

Disabilities: BACK STRAIN-10% (SC), UPPER ARM CONDITION-0% (SC),
              CONDITION OF THE SKELETAL SYSTEM-0% (SC),

123 ANY STREET      HOME PHONE:
ANYTOWN      CELL PHONE:
NEW YORK      WORK PHONE:
Prescription Mail Delivery: Regular Mail
Allergies
  Verified: THEOPHYLLINE,
+      Enter ?? for more actions
EA Enter/Edit Allergy/ADR Data      PU Patient Record Update
DD Detailed Allergy/ADR List      EX Exit Patient List
Select Action: Next Screen// <Enter>
Select Primary ICD Code: neuropathy
  1 NEUROPATHY 337.1      AUT NEUROPATHY IN OTH DIS
  2 NEUROPATHY 356.2      HERED SENSORY NEUROPATHY
  3 NEUROPATHY 356.8      IDIO PERIPH NEURPHTY NEC
  4 NEUROPATHY 356.9      IDIO PERIPH NEURPHTY NOS
  5 NEUROPATHY 377.33      NUTRITION OPTC NEUROPATHY
Press <RETURN> to see more, '^' to exit this list, OR CHOOSE 1-5: 3 356.8      IDIO
PERIPH NEURPHTY NEC
Select Secondary ICD Code: diabetes
  1 DIABETES 250.01      DIABETES MELLI W/O COMP TYP I      COMPLICATION/CO MORBIDITY
  2 DIABETES 250.11      DIABETES W KETOACIDOSIS TYPE I      COMPLICATION/CO
MORBIDITY
  
```

```

3 DIABETES 250.21 DIABETES W HYPEROSMOLAR TYPE I COMPLICATION/CO
MORBIDITY
4 DIABETES 250.31 DIABETES W OTHER COMA TYPE I COMPLICATION/CO MORBIDITY
5 DIABETES 250.41 DIABETES W RENAL MANIFES TYP I COMPLICATION/CO
MORBIDITY
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1 250.01 DIABETES MELLI W/O COMP TYP I COMPLICATION/COMORBIDITY

Select Secondary ICD Code:

```

## Editing an ePharmacy Order

When editing fields preceded by an asterisk (\*) in an ePharmacy order (or electronically third party billable prescription), upon acceptance of the edited order the original prescription will be discontinued, and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription.

If the original claim was E Payable, and edits are made to any of these fields – Provider, Qty, Days Supply, Division, Fill Date, NDC, or DAW Code – then the original payable claim is reversed, and a new claim is submitted to ECME. If the original claim was rejected, then a reversal is not necessary, and a new claim is submitted to ECME.

```

Medication Profile Nov 03, 2005@12:33:29 Page: 1 of 1
OPPATIENT, FOUR
PID: 000-01-1322P Ht (cm) : _____ (_____)
DOB: JAN 13,1922 (83) Wt (kg) : _____ (_____)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found) BSA (m2) : _____

ISSUE LAST REF DAY
# RX # DRUG QTY ST DATE FILL REM SUP
-----ACTIVE-----
1 100003840e PREDNISONE 5MG TAB 30 A> 11-02 11-02 5 30

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

```

Press **<Enter>** twice to scroll to page 3 of the Medication Profile. Notice that a new field displays on the profile: DAW Code. DAW stands for “Dispense as Written” and refers to a set of ten NCPDP codes (0-9) that tells third party payers why a brand or generic product was selected to fill a prescription. When a new prescription is entered for a specific drug, the DAW code from the drug is stored in the PRESCRIPTION file (#52) for each fill. This field is solely being used for electronic billing purposes. It communicates to the third party payer that a drug has a special characteristic, which may prevent the payer from rejecting the claim. The available codes include:

**Table 41: NCPDP Codes**

Code	Description
0	NO PRODUCT SELECTION INDICATED

Code	Description
1	SUBSTITUTION NOT ALLOWED BY PRESCRIBER
2	SUBSTITUTION ALLOWED-PATIENT REQUESTED PRODUCT DISPENSED
3	SUBSTITUTION ALLOWED-PHARMACIST SELECTED PRODUCT DISPENSED
4	SUBSTITUTION ALLOWED-GENERIC DRUG NOT IN STOCK
5	SUBSTITUTION ALLOWED-BRAND DRUG DISPENSED AS A GENERIC
6	OVERRIDE
7	SUBSTITUTION NOT ALLOWED-BRAND DRUG MANDATED BY LAW
8	SUBSTITUTION ALLOWED-GENERIC DRUG NOT AVAILABLE IN MARKETPLACE
9	OTHER

The DAW Code default is 0 – No Product Selection Indicated, unless the DAW Code has been set for this drug at the DRUG file level.

Enter **21** to edit the field.

**Example: Editing an ePharmacy Order (continued)**

```

OP Medications (ACTIVE)      Nov 03, 2005@12:51:52      Page: 3 of 3
OPPATIENT,FOUR
PID: 000-01-1322P           Ht (cm) : _____ (_____)
DOB: JAN 13,1922 (83)      Wt (kg) : _____ (_____)

(19) Counseling: YES           Was Counseling Understood: YES
(20) Refill Data
(21) DAW Code: 0 - NO PRODUCT SELECTION INDICATED
    Entry By: OPPHARMACIST4,THREE      Entry Date: 11/03/05 12:50:51

+ Enter ?? for more actions
DC Discontinue      PR Partial      RL Release
ED Edit            RF Refill      RN Renew
Select Action: Next Screen// 21

DAW CODE: 0// ??

Answer with BPS NCPDP DAW CODE
Choose from:
0 NO PRODUCT SELECTION INDICATED
1 SUBSTITUTION NOT ALLOWED BY PRESCRIBER
2 SUBSTITUTION ALLOWED-PATIENT REQUESTED PRODUCT DISPENSED
3 SUBSTITUTION ALLOWED-PHARMACIST SELECTED PRODUCT DISPENSED
4 SUBSTITUTION ALLOWED-GENERIC DRUG NOT IN STOCK
5 SUBSTITUTION ALLOWED-BRAND DRUG DISPENSED AS A GENERIC
6 OVERRIDE
7 SUBSTITUTION NOT ALLOWED-BRAND DRUG MANDATED BY LAW
8 SUBSTITUTION ALLOWED-GENERIC DRUG NOT AVAILABLE IN MARKETPLACE
9 OTHER

Dispensed As Written code. This information is used for electronic claim transmission on
to third party payers (insurance companies).

DAW CODE: 0// 5 - SUBSTITUTION ALLOWED-BRAND DRUG DISPENSED AS A GENERIC
Are You Sure You Want to Update Rx 100003853? Yes// <Enter>

```

The field is updated and displayed in the Medication Profile.

```
OP Medications (ACTIVE)      Nov 03, 2005@12:51:52      Page: 1 of 3
OPPATIENT,FOUR              <A>
  PID: 000-01-1322P          Ht (cm): _____ (_____)
  DOB: JAN 13,1922 (83)     Wt (kg): _____ (_____)

(19)   Counseling: YES      Was Counseling Understood: YES
(20)   Refill Data
(21)   DAW Code: 0 - NO PRODUCT SELECTION INDICATED
      Entry By: OPPHARMACIST4,THREE      Entry Date: 11/03/05 12:50:51
```

```
+      Enter ?? for more actions
DC  Discontinue      PR  Partial      RL  Release
ED  Edit             RF  Refill      RN  Renew
Select Action: Quit//
```

```
New OP Order (ROUTINE)      Nov 04, 2005@08:36:29      Page: 2 of 2
OPPATIENT,FOUR              <A>
  PID: 000-01-1322P          Ht (cm): _____ (_____)
  DOB: JAN 13,1922 (83)     Wt (kg): _____ (_____)
+
(7)   Days Supply: 30      (8)   QTY (TAB): 30
(9)   # of Refills: 5      (10)  Routing: WINDOW
(11)  Clinic:
(12)  Provider: OP PROVIDER4,TWO      (13)  Copies: 1
(14)  Remarks: New Order Created by editing Rx # 100003840.
      Entry By: OPPHARMACIST4,THREE      Entry Date: NOV 4,2005 08:36:06
```

```
      This change will create a new prescription!
AC  Accept      ED  Edit
Select Action: Edit// AC  Accept
Nature of Order: SERVICE CORRECTION// <Enter> S
WAS THE PATIENT COUNSELED: NO// YES
WAS COUNSELING UNDERSTOOD: NO// YES
```

```
Do you want to enter a Progress Note? No// <Enter> NO
-----example continues-----
```

```
Rx # 100003852      11/04/05
OPPATIENT,FOUR      #30
TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY FOR 30 DAYS WITH FOOD
AVOIDING DAIRY FOODS
```

```
PREDNISONE 5MG TAB
OP PROVIDER4,TWO      OPPHARMACIST4,THREE
# of Refills: 5
```

```
Is this correct? YES// <Enter> YES...
Claim has status E REJECTED. Not reversed.
```

Veteran Prescription 100003852 successfully submitted to ECME for claim generation.

```
Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE
```



## DAW/NDC Edit

The Dispensed As Written (DAW)/National Drug Code (NDC) field for discontinued and expired orders can be edited.

For ePharmacy prescriptions, the DAW/NDC field for discontinued and expired orders can be edited. The following statuses are editable.

- 11 – EXPIRED
- 12 – DISCONTINUED
- 14 – DISCONTINUED BY PROVIDER
- 15 – DISCONTINUED (EDIT).

Status's 14 and 15 above result from the prescription being discontinued from CPRS. For status 14 – DISCONTINUED BY PROVIDER, the user can choose to discontinue the prescription in CPRS by selecting “Requesting Physician Cancelled” for the reason.

The following is an example of the activity log entry stored on the prescription for this type of discontinue:

```
1 06/20/08 DISCONTINUED ORIGINAL OPPHARM, ONE
Comments: Discontinued by OE/RR.
```

For status 15 – DISCONTINUED (EDIT), the user can edit a prescription in CPRS which discontinues the prescription being edited resulting in status 15 in the Outpatient Pharmacy package. The following is an example of the activity log entry on the prescription in OP:

```
2 06/05/08 DISCONTINUED ORIGINAL OPHARM, ONE
Comments: Discontinued due to CPRS edit
```

## Using the Copy Action

If a double question mark (??) had been entered at the “Select Action:” prompt, the following hidden actions would display in the action area.

The following actions are also available:

AL	Activity Logs (OP)	REJ	View REJECT	DN	Down a Line
VF	Verify (OP)	VER	View ePharmacy Rx	FS	First Screen
CO	Copy (OP)	RES	Resubmit Claim	GO	Go to Page
TR	Convert Titration Rx	REV	Reverse Claim	LS	Last Screen
TM	Titration Mark/Unmark	IN	Intervention Menu	PS	Print Screen
RP	Reprint (OP)	DA	Display Drug Allergies	PT	Print List
HD	Hold (OP)	DIN	Drug Restr/Guide (OP)	QU	Quit
UH	Unhold (OP)	+	Next Screen	RD	Re Display Screen
PI	Patient Information	-	Previous Screen	SL	Search List
PP	Pull Rx (OP)	<	Shift View to Left	UP	Up a Line
IP	Inpat. Profile (OP)	>	Shift View to Right		
OTH	Other OP Actions	ADPL	Auto Display (On/Off)		



If the order utilizes the EXCEPT conjunction, copy will no longer be allowed. The message bar will display: Cannot COPY. Invalid 'except' conjunction!

Copy is a hidden action used to copy an order and edit any field.

### Example: Copying an Order

```

Medication Profile Jun 04, 2006 15:49:09 Page: 1 of 1
OPPATIENT6,ONE
PID: 000-13-5790 Ht(cm): 175.26 (08/10/2004)
DOB: FEB 8,1922 (79) Wt(kg): 75.45 (08/10/2004)
SEX: MALE
CrCL: 102.4(est.) (CREAT:1.0mg/dL 10/30/12) BSA (m2): 1.91
-----ISSUE LAST REF DAY
# RX # DRUG QTY ST DATE FILL REM SUP
-----ACTIVE-----
1 503911$ AMPICILLIN 250MG CAP 80 A 05-25 06-01 0 10
2 503901 LISINOPRIL 10MG TAB 150 A> 05-17 05-17 2 30

Enter ?? for more actions
PU Patient Record Update NO New Order
PI Patient Information SO Select Order
Select Action: Quit// SO Select Order [Or enter the order number here, e.g., 1]
Select Orders by number: (1-2): 1
  
```

Remember that actions in parentheses, like Refill in this example, are not available for the order.

### Example: Copying an Order (continued)

```

OP Medications (ACTIVE) Jun 04, 2006 15:50:49 Page: 1 of 3
OPPATIENT6,ONE
PID: 000-13-5790 Ht(cm): 175.26 (08/10/2004)
DOB: FEB 8,1922 (79) Wt(kg): 75.45 (08/10/2004)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 2.09

Rx #: 503911$
(1) *Orderable Item: AMPICILLIN CAP,ORAL *** (N/F) ***
(2) Drug: AMPICILLIN 250MG CAP *** (N/F) ***
NDC: 00056-0176-75
(3) *Dosage: 500 (MG)
Verb: TAKE
Dispense Units: 2
Noun: CAPSULES
*Route: ORAL
*Schedule: QID
(4) Pat Instructions: Prov Comments
Provider Comments: Prov Comments
SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV COMMENTS
(5) Patient Status: OUTPT NON-SC
(6) Issue Date: 05/25/01 (7) Fill Date: 06/01/01
+ Enter ?? for more actions
DC Discontinue PR Partial RL Release
ED Edit RF (Refill) RN Renew
Select Action: Next Screen//CO CO
  
```

Once “Copy” is entered, the heading on the screen changes to “New OP Order (COPY)” and the available actions are limited to “Edit” or “Accept”.

```

New OP Order (COPY) Jun 04, 2006 15:51:32 Page: 1 of 2
OPPATIENT6,ONE
PID: 000-13-5790 Ht(cm): 175.26 (08/10/2004)
  
```

```

DOB: FEB 8,1922 (79)                                Wt (kg): 75.45 (08/10/2004)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)                BSA (m2): 2.09

Orderable Item: AMPICILLIN CAP,ORAL *** (N/F) ***
(1) Drug: AMPICILLIN 250MG CAP *** (N/F) ***
(2) Patient Status: OUTPT NON-SC
(3) Issue Date: JUN 4,2006                        (4) Fill Date: JUN 4,2006
(5) Dosage Ordered: 500 (MG)
Verb: TAKE
Dispense Units: 2
Noun: CAPSULES
Route: ORAL
Schedule: QID
(6) Pat Instruction: Prov Comments
SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV
COMMENTS
(7) Days Supply: 10                                (8) QTY (CAP): 80
+ Enter ?? for more actions
AC Accept ED Edit
Select Action: Next Screen// AC Accept

```

Once the copied order is accepted, the previous order information displays, and the user is asked whether to discontinue the original order.

If the orderable item or drug is edited, PROVIDER key users may be prompted for the appropriate ICD Diagnosis Codes. User response is optional.

If prompted for ICD Diagnosis Codes, the user can enter partial names and ICD Diagnosis Code numbers or a valid Diagnosis Code number or name.

```

Patient Information      Mar 23, 2004@10:14:45      Page: 1 of 2
OPPATIENT6,ONE
PID: 000-13-5790      Ht (cm): 175.26 (08/10/2004)
DOB: FEB 8,1922 (79)      Wt (kg): 75.45 (08/10/2004)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 2.09

Eligibility: SC LESS THAN 50%      SC%: 10
RX PATIENT STATUS: SC LESS THAN 50%

Disabilities: BACK STRAIN-10% (SC), UPPER ARM CONDITION-0% (SC),
CONDITION OF THE SKELETAL SYSTEM-0% (SC),
123 ANY STREET      HOME PHONE:
ANYTOWN      CELL PHONE:
NEW YORK      WORK PHONE:
Prescription Mail Delivery: Regular Mail
Allergies
Verified: THEOPHYLLINE,
+ Enter ?? for more actions
EA Enter/Edit Allergy/ADR Data      PU Patient Record Update
DD Detailed Allergy/ADR List      EX Exit Patient List
Select Action: Next Screen// <Enter>
Select Primary ICD Code: neuropathy
1 NEUROPATHY 337.1      AUT NEUROPATHY IN OTH DIS
2 NEUROPATHY 356.2      HERED SENSORY NEUROPATHY
3 NEUROPATHY 356.8      IDIO PERIPH NEURPTHY NEC
4 NEUROPATHY 356.9      IDIO PERIPH NEURPTHY NOS
5 NEUROPATHY 377.33      NUTRITION OPTC NEUROPATHY
Press <RETURN> to see more, '^' to exit this list, OR CHOOSE 1-5: 3 356.8      IDIO
PERIPH NEURPTHY NEC
Select Secondary ICD Code: diabetes
1 DIABETES 250.01      DIABETES MELLI W/O COMP TYP I      COMPLICATION/CO MORBIDITY
2 DIABETES 250.11      DIABETES W KETOACIDOSIS TYPE I      COMPLICATION/CO
MORBIDITY

```

```

3    DIABETES    250.21    DIABETES W HYPEROSMOLAR TYPE I    COMPLICATION/CO
MORBIDITY
4    DIABETES    250.31    DIABETES W OTHER COMA TYPE I    COMPLICATION/CO MORBIDITY
5    DIABETES    250.41    DIABETES W RENAL MANIFES TYP I    COMPLICATION/CO
MORBIDITY
Press <RETURN> to see more, '^' to exit this list, OR
CHOOSE 1-5: 1 250.01    DIABETES MELLI W/0 COMP TYP I    COMPLICATION/COMORBIDITY
Select Secondary ICD Code:

```

ICD Diagnosis Codes from copied, edited, or renewed prescriptions will carry forward as default answers.

### Example: Copying an Order (continued)

```

-----
DUPLICATE DRUG AMPICILLIN 250MG CAP in Prescription: 503911

          Status: Active                      Issued: 05/25/01
Processing Status: Released locally on 06/01/01@11:34:13 (Mail)
          SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV
          COMMENTS
          QTY: 80                             # of refills: 0
          Provider: OPPROVIDER4,TWO          Refills remaining: 0
                                          Last filled on: 06/01/01
                                          Days Supply: 10
-----
Discontinue RX # 503911 AMPICILLIN 250MG CAP      Y/N? YES

Rx #503911 AMPICILLIN 250MG CAP will be discontinued
after the acceptance of the new order.

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

Nature of Order: WRITTEN// <Enter>           W
WAS THE PATIENT COUNSELED: NO// <Enter> NO

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

The new order information is displayed and, if it is verified as correct, the old order
is discontinued.

Rx # 503913                06/04/01
OPPATIENT6,ONE            #80
TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY PROV COMMENTS

AMPICILLIN 250MG CAP
OPPROVIDER4,TWO          OPPHARMACIST4,THREE
# of Refills: 0

Is this correct? YES// <Enter>...
-Rx 503911 has been discontinued...

          SC Percent: 10%
          Disabilities:
PROSTATE GLAND CONDITION          10% - SERVICE CONNECTED
INGUINAL HERNIA                   0% - SERVICE CONNECTED

Was treatment for Service Connected condition? NO// <Enter>

Is this correct? YES// <Enter>...

```

The Medication Profile screen is redisplayed at this point. The dollar sign next to the first prescription number means a copay charge is associated with that order.

**Example: Copying an Order (continued)**

```

Medication Profile           Jun 04, 2006 16:03:55           Page: 1 of 1
OPPATIENT6,ONE
  PID: 000-13-5790           Ht (cm) : 175.26 (08/10/2004)
  DOB: FEB 8,1922 (79)      Wt (kg) : 75.45 (08/10/2004)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)           BSA (m2) : 1.91

#  RX #          DRUG
-----ACTIVE-----
1  503913$      AMPICILLIN 250MG CAP           80 A  06-04 06-04  0 10
2  503901       LISINOPRIL 10MG TAB           150 A> 05-17 05-17  2 30

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

Label Printer: TELNET
LABEL: QUEUE/CHANGE PRINTER/HOLD/SUSPEND or '^' to bypass Q// <Enter>

LABEL(S) QUEUED TO PRINT

Select PATIENT NAME: <Enter>
  
```

The label displays the copay status of the prescription except for a partial fill.

**Copying an ePharmacy Order**

When copying an ePharmacy order, upon acceptance of the copied order the original prescription will be discontinued, and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription.

**Example: Copying an ePharmacy Order**

```

Patient Information           Nov 04, 2005@09:19:26           Page: 1 of 1
OPPATIENT,FOUR
  PID: 000-00-0001P           Ht (cm) : _____ (_____)
  DOB: JAN 13,1922 (83)      Wt (kg) : _____ (_____)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)           BSA (m2) : _____

Eligibility: NSC, VA PENSION
RX PATIENT STATUS: PENSION NSC

Disabilities:

123 ANY STREET                HOME PHONE:
ANYTOWN                       CELL PHONE:
ALABAMA                       WORK PHONE:
Prescription Mail Delivery: Regular Mail
  
```

```

Allergies:

Adverse Reactions:

      Enter ?? for more actions
EA Enter/Edit Allergy/ADR Data      PU Patient Record Update
DD Detailed Allergy/ADR List        EX Exit Patient List
Select Action: Quit// <Enter>  QUIT

Medication Profile      Nov 04, 2005@09:23:47      Page: 1 of 1
OPPATIENT,FOUR
  PID: 000-01-1322P      Ht (cm) : _____ (_____)
  DOB: JAN 13,1922 (83)  Wt (kg) : _____ (_____)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2) : _____
                                           ISSUE  LAST REF DAY
#  RX #      DRUG      QTY ST  DATE  FILL REM SUP
-----ACTIVE-----
1 100003852e  PREDNISONE 5MG TAB      30 A> 11-04 11-04 5 30

PU Patient Record Update      NO New Order
PI Patient Information        SO Select Order
Select Action: Quit// 1

```

Once “Copy” is entered, the heading on the screen changes to “New OP Order (COPY)” and the available actions are limited to “Edit” or “Accept”.

```

New OP Order (COPY)      Nov 04, 2005@09:24:17      Page: 1 of 2
OPPATIENT,FOUR
  PID: 000-01-1322P      Ht (cm) : _____ (_____)
  DOB: JAN 13,1922 (83)  Wt (kg) : _____ (_____)

  Orderable Item: PREDNISONE TAB
(1)  CMOP Drug: PREDNISONE 5MG TAB
(2)  Patient Status: OPT NSC
(3)  Issue Date: NOV 4,2005      (4)  Fill Date: NOV 4,2005
(5)  Dosage Ordered: 20 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: TABLET
      Route: ORAL
      Schedule: QID
      *Duration: 30 (DAYS)
(6)  Pat Instruction: WITH FOOD AVOIDING DAIRY FOODS
      SIG: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY FOR 30
          DAYS WITH FOOD AVOIDING DAIRY FOODS
+      Enter ?? for more actions
AC Accept      ED Edit
Select Action: Next Screen// AC Accept

Medication Profile      Nov 04, 2005@09:24:04      Page: 1 of 1
OPPATIENT,FOUR
  PID: 000-01-1322P      Ht (cm) : _____ (_____)
  DOB: JAN 13,1922 (83)  Wt (kg) : _____ (_____)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2) : _____
                                           ISSUE  LAST REF DAY
#  RX #      DRUG      QTY ST  DATE  FILL REM SUP
-----ACTIVE-----
OP Medications (ACTIVE)  Nov 04, 2005@09:24:17      Page: 1 of 3
OPPATIENT,FOUR
  PID: 000-01-1322P      Ht (cm) : _____ (_____)
  DOB: JAN 13,1922 (83)  Wt (kg) : _____ (_____)

```

Rx #: 100003852e  
 (1) \*Orderable Item: PREDNISONE TAB  
 (2) CMOF Drug: PREDNISONE 5MG TAB  
 NDC: 00056-0176-75  
 (3) \*Dosage: 20 (MG)  
 Verb: TAKE  
 Dispense Units: 1  
 Noun: TABLET  
 \*Route: ORAL  
 \*Schedule: QID  
 \*Duration: 30 (DAYS)  
 (4) Pat Instructions: WITH FOOD AVOIDING DAIRY FOODS  
 SIG: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY FOR 30 DAYS  
 WITH FOOD AVOIDING DAIRY FOODS  
 (5) Patient Status: OPT NSC

Enter ?? for more actions  
 DC Discontinue PR Partial RL Release  
 ED Edit RF Refill RN Renew  
 Select Action: Next Screen// **CO** CO

-----  
 DUPLICATE DRUG PREDNISONE 5MG TAB in Prescription: 100003852

Status: Active Issued: 11/04/05  
 Processing Status: Released locally on 11/04/05@11:34:13 (Mail)  
 SIG: TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY FOR 30  
 DAYS WITH FOOD AVOIDING DAIRY FOODS  
 QTY: 30 # of refills: 5  
 Provider: OP PROVIDER4,TWO Refills remaining: 5  
 Last filled on: 11/04/05  
 Days Supply: 30

-----  
 Discontinue RX # 100003852 PREDNISONE 5MG TAB Y/N? YES

Rx #100003852 PREDNISONE 5MG TAB will be discontinued  
 after the acceptance of the new order.

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

Nature of Order: WRITTEN// W  
 WAS THE PATIENT COUNSELED: NO// NO

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

Rx # 100003853 11/04/05  
 OP PATIENT,FOUR #30  
 TAKE ONE TABLET BY MOUTH FOUR TIMES A DAY FOR 30 DAYS WITH FOOD  
 AVOIDING DAIRY FOODS

PREDNISONE 5MG TAB  
 OP PROVIDER4,TWO OP PHARMACIST4,THREE  
 # of Refills: 5

Is this correct? YES// **YES**...  
 Reversing prescription 100003852.

Claim Status:  
 Reversing and Rebilling a previously submitted claim...  
 Reversing...  
 IN PROGRESS-Waiting for transmit  
 IN PROGRESS-Transmitting  
 IN PROGRESS-Waiting to process response

```

E REVERSAL ACCEPTED

-Rx 100003852 has been discontinued...

Veteran Prescription 100003853 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE

```

### View of RX:

```

Medication Profile          Nov 04, 2005@09:25:14          Page: 1 of 1
OPPATIENT,FOUR
  PID: 000-01-1322P          Ht (cm) : _____ (_____)
  DOB: JAN 13,1922 (83)     Wt (kg) : _____ (_____)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)          BSA (m2) : _____
                                     ISSUE   LAST REF DAY
#  RX #          DRUG          QTY ST  DATE   FILL REM SUP
-----
1 100003853e     PREDNISONE 5MG TAB          30 A> 11-04 11-04 5 30
-----
                                -ACTIVE-
Enter ?? for more actions
PU Patient Record Update          NO New Order
PI Patient Information            SO Select Order
Select Action: Quit//

```

## Reversing an ePharmacy Claim

Reverse Claim is another hidden action, used to reverse a claim. Claims are almost always reversed by the ePharmacy Site Manager and not by untrained Pharmacy staff members. If the prescription has a primary and secondary claim, neither claim may be reversed with this action. In that case, contact an OPECC to resolve the issue.

The action will prompt for a fill number with a default value of the most recent fill.

### Example: Reversing an ePharmacy Claim

```

Select Action: Next Screen// REV Reverse Claim
Enter the line numbers for the Payable claim(s) to be Reversed.

You've chosen to REVERSE the following prescription for OPPATIENT,ONE
  2.62 COLCHICINE 0.6MG 00143120110 05/06 2720684 0/000004317569 W RT AC/N
Enter REQUIRED REVERSAL REASON: ?

This response must have no more than 60 characters
and must not contain embedded up arrow.

Enter REQUIRED REVERSAL REASON: TESTING
Are you sure?(Y/N)? YES

Processing Primary claim...

Claim Status:
Reversing...
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting

```



E REVERSAL ACCEPTED

Reversal Accepted  
1 claim reversal submitted.

## OneVA Pharmacy Processing within Patient Prescription Processing



**Note:** For information regarding OneVA Pharmacy processing go to the VA Software Document Library (VDL), select the Clinical section then choose the “Pharm: Outpatient Pharmacy” page. Locate the “User Manual – OneVA Pharmacy” document.

OneVA Pharmacy patch PSO\*7\*454 introduces new messaging to query the Health Data Repository/Clinical Data Services (HDR/CDS) Repository for prescriptions from other VA Pharmacy locations and displays them in the Medications Profile view. The new query will only execute if the patient has been treated at more than one VA Medical Center. The query retrieves all prescriptions associated with the patient from the repository, which requires additional time. To execute the HDR/CDS Repository query, the user must accept the default of ‘YES’ to the ‘Would you like to query prescriptions from other OneVA Pharmacy locations?’ prompt. When the user responds ‘YES’ to the OneVA Pharmacy prompt, the system displays the OneVA Pharmacy Query Message.



The OneVA Pharmacy’s feature to query the HDR/CDS Repository will not execute if the patient has only one entry in the ‘TREATING FACILITY LIST file (#391.91)’.



The system identifies and queries the HDR/CDS Repository for all the prescriptions that are active, suspended, on hold, expired (within 120 days), or discontinued (within 120 days).



If the query connection to the HDR/CDS Repository fails, a message will display stating "The system is down or not responding (Connection Failed).Could not query prescriptions at other VA Pharmacy locations. Press RETURN to continue." The user should press return to continue and contact local support if this problem persists.



When the system is down message displays, the VistA session will continue to display the local/dispensing sites prescriptions on the Medication Profile view. There will be no indication if a patient is registered or has prescriptions on other sites (i.e., remote site/OneVA Pharmacy prescriptions will not display on the Medication Profile view.)



If the patient does not have any prescription records from other VA Pharmacy locations, matching the search criteria, a message will display stating the “Patient found with no prescription records matching search criteria.”

**Example: OneVA Pharmacy Processing**

```

Select PATIENT NAME:  PSOPATIENT,SIX      2-13-61   666012136   NO
NSC VETERAN

No Patient Warnings on file for PSOPATIENT,SIX.

Press RETURN to continue...

      PSOPATIENT,SIX (666-01-2136)
      No Allergy Assessment!

Press Return to continue:

Would you like to query prescriptions from other OneVA Pharmacy
locations? //NO

Please wait. Checking for prescriptions at other VA Pharmacy locations. This may
take a moment...

REMOTE PRESCRIPTIONS AVAILABLE!
Display Remote Data? N// O

Eligibility:
RX PATIENT STATUS: OUTPT NON-SC//

OneVA Pharmacy Refill Example

Medication Profile                Jul 27, 2016@10:11:28                Page: 1 of 1
PSOPATIENT,SIX                        <NO ALLERGY ASSESSMENT>
  PID: 000-00-0001                      Ht(cm) : _____ (_____)
  DOB: FEB 13,1961 (55)                  Wt(kg) : _____ (_____)
  SEX: FEFEMALE
  CrCL: <Not Found> (CREAT: Not Found)    BSA (m2) : _____

#  RX #      DRUG                                QTY ST  DATE  FILL  REM  SUP
-----
<No local prescriptions found.>
-----DAYTSHR TEST LAB (984) ACTIVE-----
1 2718861    CETIRIZINE HCL 10MG TAB                30 A  05-21 07-07   7  30
2 2718863    HYDRALAZINE HCL 25MG TAB                60 A  05-11 05-11   5  60
3 2718862    IBUPROFEN 800MG TAB                     60 A  05-31 05-31  11  30

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

Select Action: Quit// SO  Select Order
Select Orders by number: (1-3): 3

REMOTE OP Medications (ACTIVE)Jul 27, 2016@10:12:37                Page: 1 of 1
PSOPATIENT,SIX                        <NO ALLERGY ASSESSMENT>
  PID: 000-00-0001                      Ht(cm) : _____ (_____)
  DOB: FEB 13,1961 (55)                  Wt(kg) : _____ (_____)
  SEX: FEFEMALE
  CrCL: <Not Found>                      BSA (m2) : _____

      Site #: 984(DAYTSHR TEST LAB)
      Rx #: 2718862
      Drug Name: IBUPROFEN 800MG TAB
      Days Supply: 30
      Quantity: 60
      Refills: 11
  
```

Expiration Date: 06/01/17  
 Issue Date: 05/31/16  
 Stop Date: 06/01/17  
 Last Fill Date: 05/31/16  
 Sig: TAKE ONE TABLET BY MOUTH TWICE A DAY AS NEEDED --TAKE WITH  
 FOOD IF GI UPSET OCCURS/DO NOT CRUSH OR CHEW--  
  
 Enter ?? for more actions  
 RF Refill Rx from Another VA Pharmacy PR Partial  
  
 Select Action: Quit// RF Refill Rx from Another VA Pharmacy  
  
 Remote site drug name: IBUPROFEN 800MG TAB  
 Matching Drug Found for Dispensing: IBUPROFEN 800MG TAB  
 Would you like to use the system matched drug for this  
 refill/partial fill? NO//  
  
 refill/partial fill? NO// YES  
  
 Processing refill request. Please be patient as it may take a moment  
 for the host site to respond and generate your label data...  
  
 MESSAGE SENT TO TARGET VISTA; TIMED OUT AWAITING REPLY  
 Press RETURN to continue:  
  
 Processing refill request. Please be patient as it may take a moment  
 for the host site to respond and generate your label data...  
  
 Select LABEL DEVICE:  
  
 Select LABEL DEVICE: 0 DEC Windows  
  

VAMC ANYTOWN, OH 45428-0415	VAMC ANYTOWN, OH 45428-041
5 (REPRINT)	
984 937-267-5325 (35783/ )	984 937-267-5325 (35783
/ ) 984 (35783/ ) JUL 27,2016@10:14:57	
Rx# 2718862 JUL 27,2016 Fill 2 of 12	Rx# 2718862 JUL 27,2016
Fill 2 of 12 Rx# 2718862 JUL 27,2016 Fill 2 of 12	
PSOPATIENT,SIX	PSOPATIENT,SIX
PSOPATIENT,SIX	
TAKE ONE TABLET BY MOUTH TWICE A DAY AS NEEDED	TAKE ONE TABLET BY MOUTH T
WICE A DAY AS NEEDED TAKE ONE TABLET BY MOUTH TWICE A DAY AS NEEDED	
--TAKE WITH FOOD IF GI UPSET OCCURS/DO NOT	--TAKE WITH FOOD IF GI UPS
ET OCCURS/DO NOT --TAKE WITH FOOD IF GI UPSET OCCURS/DO NOT	
CRUSH OR CHEW--	CRUSH OR CHEW--
CRUSH OR CHEW--	
GUIGLIA,MARY C	GUIGLIA,MARY C
GUIGLIA,MARY C	
Qty: 60 TAB	Qty: 60 TAB
IBUPROFEN 800MG TAB	IBUPROFEN 800MG TAB
IBUPROFEN 800MG TAB	
JUN 1,2017	10 Refills remain prior to
PO BOX 415	COPAY Days Supply: 30
ANYTOWN, OH 45428-0415	
Mfg _____ Lot# _____	
Tech _____ RPh _____	

  
 ADDRESS SERVICE REQUESTED  
 Read FDA Med Guide  
  
 \*\*\*DO NOT MAIL\*\*\*  
 Routing: WINDOW  
  
 Days supply: 30 Cap: SAFETY

Isd: MAY 31,2016 Exp: JUN 1,2017  
 PSOPATIENT,SIX \*Indicate address change o  
 n back of this form Last Fill: 05/31/2016  
 [ ] Permanent  
 Pat. Stat ONSC Clinic: CINCI [ ] Temporary until \_\_/\_\_/

DRUG WARNING 8,10,19  
 Signature \_\_\_\_\_  
 PSOPATIENT,SIX  
 Rx# 2718862  
 IBUPROFEN 800MG TAB  
 DRUG WARNING:  
 DO NOT DRINK ALCOHOLIC BEV  
 when taking this medication.  
 TAKE WITH FOOD OR MILK.  
 This is the same medication you  
 have been getting. Color, size  
 or shape may appear different.

PSOPATIENT,SIX JUL 27,20

16

Pharmacy Service (119)  
 ANYTOWN  
 P.O. BOX 415  
 ANYTOWN, OH 45428-0415

Use the label above to mail the computer  
 copies back to us. Apply enough postage  
 to your envelope to ensure delivery.

The VA Notice of Privacy Practices, IB 10-163, which outlines your privacy  
 rights is available online at <http://www1.va.gov/Health/> or you may obtain  
 a copy by writing the VHA Privacy Office (19F2), 810 Vermont Avenue NW,  
 Washington, DC 20420.

Rx # 2718862 refilled.  
 Press RETURN to continue:

Updating prescription order list...

OneVA Pharmacy Partial Example

Medication Profile	Jul 27, 2016@10:26:23	Page: 1 of 1
PSOPATIENT,SIX	<NO ALLERGY ASSESSMENT>	
PID: 000-00-0001	Ht (cm): _____ (_____)	
DOB: FEB 13,1961 (55)	Wt (kg): _____ (_____)	
SEX: FEFEMALE		
CrCL: <Not Found> (CREAT: Not Found)	BSA (m2): _____	

#	RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
<No local prescriptions found.>								
-----DAYTSHR TEST LAB (984) ACTIVE-----								
1	2718861	CETIRIZINE HCL 10MG TAB	30	A	05-21	07-07	7	30
2	2718863	HYDRALAZINE HCL 25MG TAB	60	A	05-11	05-11	5	60
3	2718862	IBUPROFEN 800MG TAB	60	A	05-31	07-27	10	30

Enter ?? for more actions

PU Patient Record Update                   NO New Order  
 PI Patient Information                    SO Select Order  
 Select Action: Quit//

Select Action:Quit// PR    Partial

Remote site drug name: CETIRIZINE HCL 10MG TAB  
 Matching Drug Found for Dispensing: CETIRIZINE HCL 10MG TAB  
 Would you like to use the system matched drug for this  
 refill/partial fill? NO// YES  
 Enter Quantity: 10  
 DAYS SUPPLY: 10  
 Select PHARMACIST Name: COPE,THOMAS J//           TJC    192        BAY PINES TEST LA  
 B  
 REMARKS: last refill lost

Processing partial fill request. Please be patient as it may take a moment  
 for the host site to respond and generate your label data...

Select LABEL DEVICE:

Select LABEL DEVICE: 0    DEC Windows

VAMCANYTOWN, OH 45428-0415	VAMCANYTOWN, OH 45428-041
5                                    (REPRINT) (PARTIAL)	
984 937-267-5325 (35783/ )	984 937-267-5325 (35783
/ )                                984 (35783/ ) JUL 27,2016@10:29:20	
Rx# 2718861 JUL 27,2016 Fill 2 of 9	Rx# 2718861 JUL 27,2016
Fill 2 of 9                        Rx# 2718861 JUL 27,2016 Fill 2 of 9	
PSOPATIENT,SIX	
PSOPATIENT,SIX	
TAKE ONE TABLET BY MOUTH DAILY	TAKE ONE TABLET BY MOUTH D
AAILY	AILY

GUIGLIA,MARY C	GUIGLIA,MARY C
Qty: 10    TAB	Qty: 10    TAB
CETIRIZINE HCL 10MG TAB	CETIRIZINE HCL 10MG TAB
	7 Refills remain prior to
MAY 22,2017	Days Supply: 10
PO BOX 415	
ANYTOWN, OH 45428-0415	

ADDRESS SERVICE REQUESTED

\*\*\*DO NOT MAIL\*\*\*

Routing: WINDOW

Days supply: 10 Cap: SAFETY

Isd: MAY 21,2016 Exp: MAY 22,2017

PSOPATIENT,SIX  
n back of this form

Last Fill: 05/23/2016

Pat. Stat ONSC Clinic: CINCI

DRUG WARNING 1,8

\*Indicate address change o

Permanent

Temporary until \_\_/\_\_/

Signature\_\_\_\_\_

PSOPATIENT,SIX

Rx# 2718861

CETIRIZINE HCL 10MG TAB

DRUG WARNING:

-MAY CAUSE DROWSINESS-

Alcohol may intensify this

USE CARE when driving or

when operating dangerous machinery.

DO NOT DRINK ALCOHOLIC BEVERAGES.

when taking this medication.

effect.

Non-Verified Allergies

-----

Verified Adverse Reactions

-----

Non-Verified Adverse Reactions

-----

PSOPATIENT,SIX JUL 27,2016

Pharmacy Service (119)  
ANYTOWN  
P.O. BOX 415  
ANYTOWN, OH 45428-0415

Use the label above to mail the computer  
copies back to us. Apply enough postage  
to your envelope to ensure delivery.

The VA Notice of Privacy Practices, IB 10-163, which outlines your privacy  
rights is available online at <http://www1.va.gov/Health/> or you may obtain  
a copy by writing the VHA Privacy Office (19F2), 810 Vermont Avenue NW,  
Washington, DC 20420.

Partial complete for RX #2718861.  
Press RETURN to continue:

Updating prescription order list...

Medication Profile	Jul 27, 2016@10:31:11	Page: 1 of 1
PSOPATIENT,SIX	<NO ALLERGY ASSESSMENT>	
PID: 000-00-0001	Ht (cm) : _____ (_____)	
DOB: FEB 13,1961 (55)	Wt (kg) : _____ (_____)	
SEX: FEFEMALE		
CrCL: <Not Found> (CREAT: Not Found)	BSA (m2) : _____	
	ISSUE	LAST REF DAY

```

# RX #          DRUG          QTY ST  DATE  FILL REM SUP
<No local prescriptions found.>
-----DAYTSHR TEST LAB (984) ACTIVE-----
1 2718861      CETIRIZINE HCL 10MG TAB      30 A  05-21 07-07   7 30
2 2718863      HYDRALAZINE HCL 25MG TAB     60 A  05-11 05-11   5 60
3 2718862      IBUPROFEN 800MG TAB         60 A  05-31 07-27  10 30

Enter ?? for more actions
PU Patient Record Update      NO New Order
PI Patient Information        SO Select Order
Select Action: Quit//
Medication Profile           Jul 28, 2016@05:20:23           Page: 1 of 3
PSOPATIENT,SIX              <NO ALLERGY ASSESSMENT>
  PID: 000-00-0001           Ht (cm): _____ (_____)
  DOB: FEB 13,1961 (55)     Wt (kg): _____ (_____)
  SEX: FEMALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): _____
                                           ISSUE  LAST REF DAY
# RX #          DRUG          QTY ST  DATE  FILL REM SUP
-----ACTIVE-----
1 10000126      FLUTICAS 100/SALMETEROL 50 INHL DISK 60 E> 06-01 02-02  11 45
                                           Qty: 2
2 10000128      NIACIN 250MG TAB            270 S> 06-08 08-27   2 90
3 10000122      RAMIPRIL 5MG CAP            30 A> 05-31 05-31   8 30
-----DISCONTINUED-----
4 10000125      HYDROCHLOROTHIAZIDE 25MG TAB  60 DC>02-01 02-02   5 60
-----HOLD-----
5 10000127      LISINOPRIL 2.5MG TAB        90 H> 03-10  -    3 90
-----ANYTOWN (552) ACTIVE-----
+ Enter ?? for more actions
PU Patient Record Update      NO New Order
PI Patient Information        SO Select Order

```

## Holding and Unholding a Prescription

If a double question mark (??) is entered at the “Select Action” prompt, the hidden actions on the following page will display in the action area.

```

The following actions are also available:
AL Activity Logs (OP) REJ View REJECT          DN Down a Line
VF Verify (OP)        VER View ePharmacy Rx      FS First Screen
CO Copy (OP)          RES Resubmit Claim        GO Go to Page
TR Convert Titration Rx REV Reverse Claim     LS Last Screen
TM Titration Mark/UnmarkIN Intervention Menu    PS Print Screen
RP Reprint (OP)       DA Display Drug AllergiesPT Print List
HD Hold (OP)          DIN Drug Restr/Guide (OP) QU Quit
UH Unhold (OP)        + Next Screen            RD Re Display Screen
PI Patient Information - Previous Screen      SL Search List
PP Pull Rx (OP)       < Shift View to Left    UP Up a Line
IP Inpat. Profile (OP) > Shift View to Right
OTH Other OP Actions  ADPL Auto Display(On/Off)

```

Use the Hold (HD) action to put a prescription on hold. Use the Unhold (UH) action to remove a prescription from hold.

Only key holders of the PSORPH security key or the PSO TECH ADV security key can hold or unhold a prescription.

PSORPH security key holders are allowed to put a prescription on hold using the following HOLD reasons:

```
1 INSUFFICIENT QTY IN STOCK
2 DRUG-DRUG INTERACTION
4 PROVIDER TO BE CONTACTED
6 ADVERSE DRUG REACTION
7 BAD ADDRESS
8 PER PATIENT REQUEST
9 CONSULT/PRIOR APPROVAL NEEDED
98 OTHER/TECH (NON-CLINICAL)
99 OTHER/RPH (CLINICAL)
```



**Note:** HOLD reasons 98 and 99 require the user to enter a HOLD comment.

PSO TECH ADV security key holders are allowed to put a prescription on hold using the following HOLD reasons:

```
1 INSUFFICIENT QTY IN STOCK
7 BAD ADDRESS
8 PER PATIENT REQUEST
98 OTHER/TECH (NON-CLINICAL)
```



**Note:** HOLD reason 98 requires the user to enter a HOLD comment.

While PSORPH security key holders are allowed to remove a prescription from HOLD under any HOLD reason, PSO TECH ADV security key holders are only allowed to remove a prescription from hold under the above HOLD reasons (reasons 1,7, 8, and 98).

**Example: HOLD with PSORPH Security Key or PSO TECH ADV Security Key**

```
OP Medications (SUSPENDED)    May 11, 2012@10:12:56    Page: 1 of 3
PAGPATNM,M                    <A>
PID: 666-00-0286              Ht (cm) : _____ (_____)
DOB: DEC 1,1900               Wt (kg) : _____ (_____)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)    BSA (m2) : _____

Rx #: 100002926
(1) *Orderable Item: FLUOXETINE CAP,ORAL
(2)   CMOP Drug: EFFEXOR
      NDC: 00056-0176-75
(3)   *Dosage: 10 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: CAPSULE
      *Route: ORAL
      *Schedule: QAM
(4) Pat Instructions:
      SIG: TAKE ONE CAPSULE MOUTH EVERY MORNING
(5) Patient Status: OPT NSC
(6) Issue Date: 02/14/12      (7) Fill Date: 05/09/12
      Last Fill Date: 05/29/12 (Mail)
+ Enter ?? for more actions
DC Discontinue                PR Partial                    RL Release
ED Edit                        RF (Refill)                 RN Renew
Select Action: Next Screen// HD HD
```



```

Nature of Order: WRITTEN//          W

If the user has the PSORPH security key, the following HOLD reasons are available:

HOLD REASON: ?

Enter reason medication is placed in a 'Hold' status.
Choose from:
1          INSUFFICIENT QTY IN STOCK
2          DRUG-DRUG INTERACTION
4          PROVIDER TO BE CONTACTED
6          ADVERSE DRUG REACTION
7          BAD ADDRESS
8          PER PATIENT REQUEST
9          CONSULT/PRIOR APPROVAL NEEDED
98         OTHER/TECH (NON-CLINICAL)
99         OTHER/RPH (CLINICAL)

If the user has the PSO TECH ADV security key, the following HOLD reasons are available:

HOLD REASON: ?

Enter reason medication is placed in a 'Hold' status.
Choose from:
1          INSUFFICIENT QTY IN STOCK
7          BAD ADDRESS
8          PER PATIENT REQUEST
98         OTHER/TECH (NON-CLINICAL)

```

The same conditions apply for Unholding a prescription. Users with the PSORPH security key can unhold for the following reason:

```

1          INSUFFICIENT QTY IN STOCK
2          DRUG-DRUG INTERACTION
4          PROVIDER TO BE CONTACTED
6          ADVERSE DRUG REACTION
7          BAD ADDRESS
8          PER PATIENT REQUEST
9          CONSULT/PRIOR APPROVAL NEEDED
98         OTHER/TECH (NON-CLINICAL)
99         OTHER/RPH (CLINICAL)

```

Users with only the PSO TECH ADV security key can unhold for the following reasons:

```

1          INSUFFICIENT QTY IN STOCK
7          BAD ADDRESS
8          PER PATIENT REQUEST
98         OTHER/TECH (NON-CLINICAL)

```

Note: If a user does not have a PSORPH security key and tries to unhold a prescription, the message “**The HOLD can only be removed by a pharmacist**” is displayed.

Each time a user holds or unholds a prescription, an entry is created in the Activity Log. These entries include HOLD COMMENTS and the HOLD REASON when a prescription is placed on HOLD and UNHOLD COMMENTS when the prescription is removed from HOLD. Again, HOLD reasons 98 and 99 require the user to enter a HOLD comment.

**Example: Activity Log with HOLD/UNHOLD Comments**

Activity Log:				
#	Date	Reason	Rx Ref	Initiator Of Activity
...				
8	05/10/12	HOLD	REFILL 1	USER, PHARMACY

```

Comments: Rx placed on HOLD (Reason: BAD ADDRESS) and removed from
          SUSPENSE - HOLD COMMENTS ENTERED BY THE USER MANUALLY.
...
9 05/10/12 UNHOLD REFILL 1 USER,PHARMACY
Comments: Rx Removed from HOLD - UNHOLD COMMENTS ENTERED BY THE USER
          WHEN REMOVING THE RX FROM HOLD.

```

## Renewing a Prescription

This action allows the pharmacy manager, pharmacist, or pharmacy technician to process renewals for existing orders.

### Example: Renewing a Prescription

*[This example begins after an order is selected from the Medication Profile screen.]*

```

OP Medications (ACTIVE) Jun 04, 2006 16:14:40 Page: 1 of 3
OPPATIENT29,ONE
  PID: 000-87-6543 Ht (cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81) Wt (kg): 79.09 (06/07/2000)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found) BSA (m2): 2.09

      Rx #: 503910
(1) *Orderable Item: AMPICILLIN CAP,ORAL *** (N/F) ***
(2) Drug: AMPICILLIN 250MG CAP *** (N/F) ***
    NDC: 00056-0176-75
(3) *Dosage: 500 (MG)
    Verb: TAKE
    Dispense Units: 2
    Noun: CAPSULES
    *Route: ORAL
    *Schedule: QID
    *Duration: 10D (DAYS)
(4) Pat Instructions: with food
    SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
    WITH FOOD
(5) Patient Status: SERVICE CONNECTED
+ Enter ?? for more actions
DC Discontinue PR Partial RL Release
ED Edit RF (Refill) RN Renew
Select Action: Next Screen// RN Renew
FILL DATE: (6/4/2006 - 7/4/2006): TODAY// <Enter> (JUN 04, 2006)
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
Nature of Order: WRITTEN// <Enter> W
WAS THE PATIENT COUNSELED: NO// <Enter> NO

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

Now Renewing Rx # 503910 Drug: AMPICILLIN 250MG CAP

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

503910A AMPICILLIN 250MG CAP QTY: 80
# OF REFILLS: 0 ISSUED: 06-04-01
SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS WITH FOOD
FILLED: 06-20-01
ROUTING: WINDOW PHYS: OPPROVIDER4,TWO

Edit renewed Rx ? Y// <Enter> ES

```

**Example: Renewing a Prescription (continued)**

*[To save space, only the second Prescription Renew screen is displayed in this example.]*

```
Prescription Renew          Jun 04, 2006 16:18:17          Page:    2 of    2
OPPATIENT29,ONE
PID: 000-87-6543          Ht (cm): 175.26 (06/07/2000)
DOB: SEP 12,1919 (81)    Wt (kg): 79.09 (06/07/2000)
+
          SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
          WITH FOOD
          Days Supply: 30
          QTY (CAP): 80
(3) # of Refills: 0
(4) Routing: WINDOW
(5) Clinic: OUTPT NURSE GREEN TEAM
(6) Provider: OP PROVIDER4,TWO
(7) Copies: 1
(8) Remarks: RENEWED FROM RX # 503910
Entry By: OP PROVIDER4,TWO          Entry Date: JUN 4,2006 16:16:27

Enter ?? for more actions
AC  Accept          DC  Discontinue
BY  Bypass         ED  Edit
Select Item(s): Quit// ED  Edit  [Or enter the field(s), e.g., 1,5,7]

Select Field to Edit by number: (1-8): 5
CLINIC: OUTPT NURSE GREEN TEAM //OUT
1  OUTPT NURSE BLUE TEAM
2  OUTPT NURSE GREEN TEAM
3  OUTPT NURSE YELLOW TEAM
CHOOSE 1-3: 1  OUTPT NURSE BLUE TEAM
```

The user may renew more than one order on the same patient by typing the desired order numbers separated by a comma (for Example: 1,3,5).

```
Prescription Renew          Jun 04, 2006 16:24:32          Page:    2 of    2
OPPATIENT29,ONE
PID: 000-87-6543          Ht (cm): 175.26 (06/07/2000)
DOB: SEP 12,1919 (81)    Wt (kg): 79.09 (06/07/2000)
+
          SIG: TAKE TWO CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
          WITH FOOD
          Days Supply: 30
          QTY (CAP): 80
(3) # of Refills: 0
(4) Routing: WINDOW
(5) Clinic: OUTPT NURSE BLUE TEAM
(6) Provider: OP PROVIDER4,TWO
(7) Copies: 1
(8) Remarks: RENEWED FROM RX # 503910
Entry By: OP PROVIDER4,TWO          Entry Date: JUN 4,2006 16:23:56

Enter ?? for more actions
AC  Accept          DC  Discontinue
BY  Bypass         ED  Edit
Select Item(s): Quit// AC  Accept

RX# 503910A has been suspended until 06-20-01.
```



Original provider comments are not carried over to any renewals in Outpatient Pharmacy.

## Renewing an ePharmacy Order

When renewing an ePharmacy order, upon acceptance of the renewed order the original prescription will be discontinued, and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription.

*[This example begins after an order is selected from the Medication Profile screen.]*

```
OP Medications (ACTIVE)      Nov 04, 2005@11:48:14      Page: 1 of 3
OPPATIENT,FOUR
  PID: 000-01-1322P          Ht (cm) : _____ (_____)
  DOB: NOV 12,1975 (29)     Wt (kg) : _____ (_____)

      Rx #: 100003642$e
(1) *Orderable Item: SIMETHICONE TAB,CHEWABLE
(2)   Drug: SIMETHICONE 40MG TAB
      NDC: 00056-0176-75
(3)   *Dosage: 40 (MG)
      Verb: CHEW
      Dispense Units: 1
      Noun: TABLET
      *Route: ORAL
      *Schedule: TID
(4) Pat Instructions:
      SIG: CHEW ONE TABLET BY MOUTH THREE TIMES A DAY
(5) Patient Status: OPT NSC
(6) Issue Date: 08/11/05      (7) Fill Date: 08/11/05
      Last Fill Date: 08/11/05 (Window)
+ Enter ?? for more actions
DC Discontinue      PR Partial      RL Release
ED Edit            RF Refill       RN Renew
Select Action: Next Screen// RN Renew
FILL DATE: (11/4/2005 - 11/5/2006): TODAY// <Enter> (NOV 04, 2005)
MAIL/WINDOW: WINDOW// <Enter> WINDOW
METHOD OF PICK-UP: <Enter>
Nature of Order: WRITTEN// <Enter> W
WAS THE PATIENT COUNSELED: NO//<Enter> NO

Now Renewing Rx # 100003642 Drug: SIMETHICONE 40MG TAB

Now doing remote order checks. Please wait...

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

100003642A SIMETHICONE 40MG TAB QTY: 90
# OF REFILLS: 5 ISSUED: 11-04-05
SIG: CHEW ONE TABLET BY MOUTH THREE TIMES A DAY
FILLED: 11-04-05
ROUTING: WINDOW PHYS: OPPROVIDER4,TWO

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

### Example: Renewing an ePharmacy Order (continued)

*[To save space, only the second Prescription Renew screen is displayed in this example.]*

```
Prescription Renew          Jun 04, 2006 16:18:17      Page: 2 of 2
OPPATIENT,FOUR
  PID: 000-01-1322P          Ht (cm) : _____ (_____)

```

```

DOB: NOV 12,1975 (29)                                Wt (kg) : _____ (_____)
+
    Days Supply: 30
    QTY ( ): 90
(3) # of Refills: 5
(4) Routing: WINDOW
(5) Clinic:
(6) Provider: OPPROVIDER4,TWO
(7) Copies: 1
(8) Remarks: RENEWED FROM RX # 100003642
    Entry By: OPPHARMACIST4,THREE                    Entry Date: NOV 4,2005 11:56:31

    Enter ?? for more actions
AC  Accept                DC  Discontinue
BY  Bypass                ED  Edit
Select Item(s): Quit// 5

CLINIC: 3EN

Prescription Renew          Jun 04, 2006 16:24:32          Page: 2 of 2
OPPATIENT,FOUR
  PID: 000-01-1322P          Ht (cm) : _____ (_____)
  DOB: NOV 12,1975 (29)     Wt (kg) : _____ (_____)
+
    Days Supply: 30
    QTY ( ): 90
(3) # of Refills: 5
(4) Routing: WINDOW
(5) Clinic: 3EN
(6) Provider: OPPROVIDER4,TWO
(7) Copies: 1
(8) Remarks: RENEWED FROM RX # 100003642
    Entry By: OPPHARMACIST4,THREE                    Entry Date: NOV 4,2005 11:56:31

    Enter ?? for more actions
AC  Accept                DC  Discontinue
BY  Bypass                ED  Edit
Select Item(s): Quit// AC Accept
    SC Percent: 40%
    Disabilities: NONE STATED

Was treatment for Service Connected condition? NO// <Enter>

```

### Example: Renewing an ePharmacy Order (continued)

```

Reversing prescription 100003642.

Claim Status:
Reversing and Rebilling a previously submitted claim...
Reversing...
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E REVERSAL ACCEPTED

-Rx 100003642 has been discontinued...

Veteran Prescription 100003642A successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Receiving response
E PAYABLE

```



Original provider comments are not carried over to any renewals in Outpatient Pharmacy.

## Flagging and Unflagging Pending Orders

Flagging a pending order allows you to prevent an order from processing and attach a note known as a flag to the pending order. Flag/Unflag functionality is only available for Pending new orders and Pending renewals; only holders of the PSORPH security key can flag or unflag an order.

The following provides examples of how to flag and unflag a pending order from a medication profile within *Patient Prescription Processing*.

If a pending order is flagged, the row number is highlighted on the Medication Profile screen (shown in the following example). Select the order to view the flag or to flag the new pending order.

### Example: A Flagged Pending Order

```

Medication Profile           Mar 13, 2008@16:31:24           Page: 1 of 1
OPPACIENT16,ONE             <NO ALLERGY ASSESSMENT>
  PID: 000-24-6802           Ht (cm): 177.80 (02/08/2007)
  DOB: APR 3,1941 (66)       Wt (kg): 90.45 (02/08/2007)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)           BSA (m2): 2.08
                                     ISSUE  LAST REF DAY
#  RX #           DRUG                                     QTY ST  DATE  FILL  REM  SUP
-----
-----ACTIVE-----
1 100002518       PENICILLAMINE 250MG TAB           31 A   02-29 02-29  5  31
-----PENDING-----
2 ACETAMINOPHEN 500MG TAB           QTY: 60           ISDT: 03-13  REF: 3
  Enter ?? for more actions
PU Patient Record Update           NO New Order
PI Patient Information             SO Select Order
Select Action: Quit// SO Select Order
Select Orders by number: (1-2): 2
  
```

From the Pending OP Orders screen, you can flag and unflag an order, as well as view the flagged reason. To flag the order, enter **FL** and then enter a “REASON FOR FLAG”, alert the proper individual that the flag has been added by pressing **<Enter>** to select the default name or entering a different user name and pressing **<Enter>**, and the flagging process is complete.

### Example: Flagging an Order

```

REASON FOR FLAG: DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE DISPENSING.
Send alert to: PSUSER,ONE//           BIRMINGHAM           ALABAMA           OP           PHARMACIST
... order flagged.
  
```

When an order is flagged, “FL-” is placed in front of “Pending OP Orders” in the upper left corner, and the flagged reason is listed below the patient identifying information.

### Example: A Flagged New Pending Order

```

FL-Pending OP Orders (ROUTINE)March 13, 2008 16:31:33           Page: 1 of 2
OPPACIENT16,ONE             <NO ALLERGY ASSESSMENT>
  PID: 000-24-6802           Ht (cm): 177.80 (02/08/2007)
  
```

```

DOB: APR 3,1941 (66)                                Wt (kg): 90.45 (02/08/2007)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)                BSA (m2): 2.09

Flagged by OPPHARM,TWO on 03/13/08@23:14:  DOUBLE CHECK WITH PATIENT FOR HEART CONDITION
BEFORE DISPENSING.

* (1) Orderable Item: ACETAMINOPHEN TAB             * Editing starred fields will
(2)   CMOF Drug: ACETAMINOPHEN 500MG TAB           create a new order
      Drug Message: NATL FORM
(3)   *Dosage: 500 (MG)
      Verb: TAKE
      Dispense Units: 1
      *Route: ORAL
      *Schedule: BID
(4)   Pat Instruct:
      Provider Comments: ProvComments
      SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
(5)   Patient Status: SERVICE CONNECTED
(6)   Issue Date: MAR 13,2008      (7) Fill Date: MAR 13,2008
(8)   Days Supply: 30              (9) QTY (TAB): 60
+     Enter ?? for more actions
BY Bypass          DC Discontinue          FL Flag/Unflag
ED Edit           FN Finish
Select Item(s): Next Screen// FL Flag/Unflag

```

### Example: A Flagged Renewal

```

FL-Prescription Renew           Jun 12, 2012@14:00:51           Page: 1 of 2
PAGPATNM,M                               <A>
PID: 666-00-0286                         Ht (cm) : _____ (_____)
DOB: DEC 1,1900                           Wt (kg) : _____ (_____)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)      BSA (m2) : _____

Flagged by PHARMACY,USER on 6/12/12@14:00: test

      Rx#: 100001943A
      Orderable Item: ACETAMINOPHEN TAB
      CMOF Drug: THIORIDAZINE 30MG/ML CONC.
      Patient Status: OPT NSC
(1)   Issue Date: JUN 12,2012
(2)   Fill Date: JUN 12,2012
      Dosage: 20 (MG)
      Verb: TAKE
      Dispense Units: 2
      Noun: TABLETS
      Route: ORAL (BY MOUTH)
      Schedule: BID-PRN
+     Enter ?? for more actions
AC Accept          DC Discontinue          FL Flag/Unflag
BY Bypass          ED Edit
Select Item(s): Next Screen//

```

To unflag an order, enter **FL** at the “Select Item(s)” prompt, and then enter your “COMMENTS”. When you press **<Enter>**, the order is no longer flagged.

### Example: Unflagging an Order

```

FLAGGED: 03/13 23:14 by OPPHARM,TWO
      DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE DISPENSING.
COMMENTS: CHECKED WITH PATIENT. NO HEART CONDITION.
      ... order unflagged.

```

At that point, the flag from the Medication Profile is removed, but the flagged/unflagged reason remains on the Pending OP Orders screen unless you reflag the order.



**Note:** If a user does not have the PSORPH security key, they cannot unflag an order and will receive the following message when selecting the Accept (AC) action:

```

+          Enter ?? for more actions
AC  Accept          DC  (Discontinue)      FL  (Flag/Unflag)
BY  Bypass          ED  (Edit)
Select Item(s): Next Screen// AC  Accept

Order must be unflagged by a pharmacist before it can be finished.

Enter RETURN to continue:

```

### Example: An Unflagged Order

```

Pending OP Orders (ROUTINE)  March 14, 2008 09:16:33      Page: 1 of 2
OPPATIENT16,ONE          <NO ALLERGY ASSESSMENT>
  PID: 000-00-0002          Ht (cm): 177.80 (02/08/2007)
  DOB: APR 3,1941 (66)      Wt (kg): 90.45 (02/08/2007)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)          BSA (m2): 2.09

Flagged by OPPHARM,TWO on 03/13/08@23:14:  DOUBLE CHECK WITH PATIENT FOR HEART CONDITION
BEFORE DISPENSING.
Unflagged by OPPHARM,TWO on 03/14/08@09:26:  CHECKED WITH PATIENT. NO HEART CONDITION.

* (1) Orderable Item: ACETAMINOPHEN TAB          * Editing starred fields will
(2)  CMOP Drug: ACETAMINOPHEN 500MG TAB          create a new order
      Drug Message: NATL FORM
(3)  *Dosage: 500 (MG)
      Verb: TAKE
      Dispense Units: 1
      *Route: ORAL
      *Schedule: BID
(4)  Pat Instruct:
      Provider Comments: ProvComments
      SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
(5) Patient Status: SERVICE CONNECTED
(6)  Issue Date: MAR 13,2008          (7) Fill Date: MAR 13,2008
(8)  Days Supply: 30          (9)  QTY (TAB): 60
+          Enter ?? for more actions
BY  Bypass          DC  Discontinue          FL  Flag/Unflag
ED  Edit            FN  Finish
Select Item(s): Next Screen//

```

### Example: An Unflagged Renewal

```

Prescription Renew          Jun 12, 2012@14:02:18      Page: 1 of 2
PAGPATNM,M          <A>
  PID: 666-00-0286          Ht (cm): _____ (_____)
  DOB: DEC 1,1900          Wt (kg): _____ (_____)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)          BSA (m2): _____

Flagged by PHARMACY,USER on 6/12/12@14:00: test
Unflagged by PHARMACY,USER on 6/12/12@14:02: testing unflag

      Rx#: 100001943A
      Orderable Item: ACETAMINOPHEN TAB
      CMOP Drug: THIORIDAZINE 30MG/ML CONC.
      Patient Status: OPT NSC
(1)  Issue Date: JUN 12,2012
(2)  Fill Date: JUN 12,2012
      Dosage: 20 (MG)
      Verb: TAKE
      Dispense Units: 2

```



```

          Noun: TABLETS
          Route: ORAL (BY MOUTH)
+         Enter ?? for more actions
AC  Accept          DC  Discontinue          FL  Flag/Unflag
BY  Bypass          ED  Edit
Select Item(s): Next Screen// Prescription Renew          Jun 12, 2012@14:02:1
8         Page:      1 of      2

```

After pending orders have been unflagged, they can be processed.



If you attempt to process a flagged order and are a user with a PSORPH security key, you are prompted “Unflag Order? NO//”. If you respond **YES**, enter comments to unflag the order and continue with processing. If you respond **NO**, you cannot process the order because it is still flagged. Users with only the PSO TECH ADV security key cannot unflag an order and will receive the following message when selecting the Accept (AC) action:

```

+         Enter ?? for more actions
AC  Accept          DC  (Discontinue)          FL  (Flag/Unflag)
BY  Bypass          ED  (Edit)
Select Item(s): Next Screen// AC  Accept

Order must be unflagged by a pharmacist before it can be finished.

Enter RETURN to continue:

```

## Barcode Rx Menu [PSO BARCODE MENU]



If the order utilizes the EXCEPT conjunction, renew will no longer be allowed. The message bar will display: Cannot be Reinstated – dosage contains an invalid Except conjunction.

Use this menu to batch barcode refills and renewals of prescriptions and check the quality of the barcode print. The menu contains the following options:

- *Process Telephone Refills*
- *Barcode Batch Prescription Entry*
- *Check Quality of Barcode*
- *Process Internet Refills*

## Process Telephone Refills [PSO PROCESS TELEPHONE REFILLS]

Process telephone refills and renewals originating from the AudioCARE third-party system.

Patch PSO\*7\*503 replaced the class III option Process Telephone Refills [A3A PHONE REFILLS] with the class I option Process Telephone Refills [PSO PROCESS TELEPHONE REFILLS].

### Example: Process Telephone Refills

```
Outpatient Pharmacy software - Version 7.0
Division: 500 ALABAMA TEST CLINIC 500
    You are logged on under the ALABAMA TEST CLINIC division.
Select LABEL PRINTER: HOME//   Linux Telnet /SSh
OK to assume label alignment is correct? YES//
Bingo Board Display: OUTPATIENT//
    Division: ALABAMA TEST CLINIC
Please answer the following for this session of prescriptions
FILL DATE: (DEC 17, 2020-DEC 31, 2699): TODAY//   (JUN 15, 2021)
MAIL/WINDOW: MAIL// WINDOW
METHOD OF PICK-UP:
Will these refills be Queued or Suspended ? S// QUEUED
Allow refills for Inpatient ? NO//
Allow refills for CNH ? NO//
Process telephone refill requests at this time? YES//
Process telephone refills for all divisions? NO// YES
```

1. The new PROC TEL REFILLS ALL DIVISIONS field (#4.2) in the OUTPATIENT SITE file (#59) acts as a parameter to store the default selection for the "Process Telephone Refills for all divisions" prompt, which can be set at the site level to default to either "YES" or "NO."
2. The software that supports the following 2 prompts was enhanced to retrieve the stored values and implement as the default response:

"Allow refills for CNH ?"

"Allow refills for Inpatient ? "

These prompts are implemented when processing refills for Community Nursing Home (CNH) and Inpatient facilities when using any of the following Outpatient Pharmacy options: Process Internet Refills [PSO INTERNET REFILLS], Barcode Batch Prescription Entry [PSO BATCH BARCODE], and Process Telephone Refills [PSO PROCESS TELEPHONE REFILLS]. The existing PROCESS AUTO REFILLS FOR CNH field (#2035) and PROCESS AUTO REFILLS FOR INPAT field (#2030) in the OUTPATIENT SITE file (#59) stores the default selection for each pharmacy division. The existing Site Parameter Enter/Edit [PSO SITE PARAMETERS] option enables setting the default values. If these fields are not populated, then "Allow refills for CNH ?" and "Allow refills for Inpatient ? " defaults to "NO".

3. A new Class I option, Process Telephone Refills [PSO PROCESS TELEPHONE REFILLS], available from the Barcode RX Menu [PSO BARCODE MENU], copies all prescription refill and renewal requests contained in the Class III global (^VEXHRX) into the new Fileman-compatible Class I PHARMACY TELEPHONE REFILLS file #52.444. Only refill/renewal prescription requests that do not yet have a processed date are copied from ^VEXHRX.
4. The new option will then process the refill and renewal prescriptions just copied into the new PHARMACY TELEPHONE REFILLS file #52.444.
  - a. User prompts are identical to the current Class III Option, A3A PHONE REFILLS.
  - b. Prescriptions are to be updated in PHARMACY TELEPHONE REFILLS file (#52.444) the same as they are in the current Class III global array, ^VEXHRX.
  - c. On-screen messages are displayed indicating the status of each refill and renewal request per criteria provided in 2.a. as they are processed.
5. The telephone refills system processes prescriptions by refilling, renewing, or marking the order as not filled or not sent to the provider. These actions produce various processing results that are recorded into the PHARMACY TELEPHONE REFILLS file (#52.444). These results include the processed date and renewal processing codes. This information is then sent back to the ^VEXHRX global array to enable further processing functions by the AudioCARE system.
6. When processing is complete, the new option will send Mailman messages to the G.AUTORENEWAL mail group with counts of Refills Processed and Refills Not Processed, Renewals sent to provider and Renewals not sent to provider.
7. The Class III global array (^VEXHRX) shall be updated from PHARMACY TELEPHONE REFILLS (#52.444) that contains the results of the order processing.
8. The Class I PHARMACY TELEPHONE REFILLS, file #52.444 is purged of all requests that have a processed date.
  - a. The new Purge Processed Telephone Refill Requests [PSO PURGE PROCESSED 52.444] has been scheduled to run daily by the patch post-installation routine. The option purges the new PHARMACY TELEPHONE REFILLS file (#52.444) of prescriptions that have been processed, as determined by the presence of a processed date in the file.
  - b. A mailman message is sent to members of the AUTORENEWAL mail group upon completion of the purge.
  - c. Prescriptions with no processed date remain in the file.

## Barcode Batch Prescription Entry [PSO BATCH BARCODE]

Enter refills or renewals by batch entry using barcodes with this option.

### Example: Barcode Batch Prescription Entry -- Refills

```
Select Barcode Rx Menu Option: Barcode Batch Prescription Entry
```

```
Select one of the following:
```

```
1          REFILLS
```

```

Batch Barcode for: REFILLS// 1 REFILLS
Please answer the following for this session of prescriptions

FILL DATE: (2/14/2007 - 12/31/2699): TODAY// <Enter> (AUG 13, 2007)
MAIL/WINDOW: MAIL// <Enter> MAIL
Will these refills be Queued or Suspended ? S// <Enter> USPENDED
Allow refills for inpatient ? N// <Enter> 0
Allow refills for CNH ? N// <Enter> 0
WAND BARCODE: [Scan barcode]

```

When using the Barcode Batch Prescription Entry option [PSO BATCH BARCODE], if the prescription has been marked as a Titration/Maintenance Rx, and the user attempts to renew or refill the prescription, the following message will display:

For a renewal:

"Rx# XXXXXX is marked as Titration Rx and cannot be renewed."

For a refill:

"Rx# XXXXXX is marked as Titration Rx and cannot be refilled."

### **Check Quality of Barcode** [PSO BARCODE CHECK]

No action is taken on the prescription by using this option. Use this option to check the quality of printed barcodes or use it to practice using the barcode reader. After the barcode is scanned, the barcode number will echo back on the screen and screen will return to the "Read Barcode" prompt. No action is taken on the prescription by using this option.

The following are some common causes for failure of the barcode reader and how they can be corrected.

- Barcode too faint (change printer ribbon)
- Improper scanning (move the wand at a steady rate)
- Defective barcode reader (replace the reader)

### **Process Internet Refills** [PSO INTERNET REFILLS]

This option allows the pharmacist to process prescription orders entered on the Internet through My HealthVet. The system will prompt the user for the information as shown in the following example. The user enters the appropriate response for each prompt by pressing **Enter** on the keyboard to accept the default setting for a prompt. The user must type the appropriate word or letter to enter a response contrary to the default.



The recommended usage of this option is three times a day to ensure the requested refills are processed in a timely manner. Or, the *Automate Internet Refill* option, located on the

Maintenance (Outpatient Pharmacy) menu, may be set up to schedule a background job for automatically processing Internet refills.

#### Example: Process Internet Refills Screen

```
Select Barcode Rx Menu Option: Process Internet Refills

Division: ANYTOWN

Please answer the following for this session of prescriptions

FILL DATE: (1/28/2005 - 12/31/2699): TODAY// <Enter> (AUG 11, 2005)
MAIL/WINDOW: MAIL// <Enter> MAIL
Will these refills be Queued or Suspended? Q// S <Enter> USPENDED
Allow refills for inpatient ? N// <Enter> O
Allow refills for CNH ? N//<Enter> O
Allow early refills? N// <Enter> O

Process internet refill requests at this time? YES// <Enter> YES
Process internet refills for all divisions? NO// <Enter> O
```

Users can process refills for their division or all divisions within a site. However, sites can set parameters in the PHARMACY SYSTEM file for the INTERDIVISIONAL PROCESSING and DIVISION PROMPT ASKED fields that control responses to user input on the Process Internet Refills screen. Note that site control parameters override any entries made by the user in the Process Internet Refills screen.

If the INTERDIVISIONAL PROCESSING parameter is set to **No**, only the refills for the user’s division will be filled, regardless of the user’s input at the “Process internet refills for all divisions?” prompt.

If the INTERDIVISIONAL PROCESSING parameter is set to **Yes** and the DIVISION PROMPT ASKED parameter is set to **No**, then the refill orders are processed for all divisions without any additional user input.

If the INTERDIVISIONAL PROCESSING parameter is set to **Yes** and the DIVISION PROMPT ASKED parameter is set to **Yes**, refills for the user’s division will be processed without any additional input. If unprocessed refills outside the user’s division exist, the “Continue?” prompt displays, allowing the user to confirm each refill, as shown in the following example.

#### Example: Process Internet Refills for all Divisions?

```
Process internet refills for all divisions? NO// Y YES

Now refilling Rx# 100002310      Drug: CAPTOPRIL 100MG TABS
Qty: 60      Sig: TAKE ONE TABLET BY MOUTH TWICE A DAY

Rx # 100002310 is for (ANYTOWN) division.
Continue? N// Y YES
```



**Note:** In the above screen capture, this refill is outside the user’s division.

If the user enters Yes at the “Continue?” prompt, the refill will be processed.

If the user enters No at the “Continue?” prompt, the refill will not process at this time, and the refill request will remain in the PRESCRIPTION REFILL REQUEST file. These refill requests may be processed later by a user in the same division, or any division, depending on the PHARMACY SYSTEM file parameters.

Refills processed successfully are flagged as FILLED in the RESULTS field of the PRESCRIPTION REFILL REQUEST file.

Refills not processed due to conditions such as: Rx Expired, Discontinued, On Hold, or Deleted, are flagged as NOT FILLED in the RESULTS field of PRESCRIPTION REFILL REQUEST file.

### **Complete Orders from OERR [PSO LMOE FINISH]**

When a clinician has created an order for a patient, the pharmacist needs to finish and verify the order. This option is used to finish orders entered into the patient record via Order Entry Results Reporting (OERR) V. 3.0. This option uses the List Manager features. PSO\*7\*391 added a new sort selection, 'CS' to the Complete Orders from OERR, enabling users to select digitally signed pending CS orders separately. Patient demographics and clinical alerts display in the header area when this option is selected. Refer to [Patient Demographics and Clinical Alerts](#) for more information.

The user may select orders by patient, route, priority, clinic, flag, or controlled substances. If Clinic is selected, the user may then choose to select by Clinic or Clinic Sort Group. In any sort, orders are completed on a first-in/first-out basis by patient. Clinic Sort Groups can be added or edited in the *Enter/Edit Clinic Sort Groups* option, found under the *Maintenance (Outpatient Pharmacy)* menu option. Orders entered before implementation of patch PSO\*7\*46 (Pharmacy Ordering Enhancements (POE)) must have the fields used to build the Sig filled in before processing can be completed.



Enter “E” at the “Select By:” prompt to stop processing orders.

If a temporary address has no end date, the following text is now displayed: “(Temp address from XXX 99,9999 till (no end date))”.

For ePharmacy orders, after an order is finished, the billing data is sent to ECME, which sends a message back to Outpatient Pharmacy displaying the status of the claim. For an example, see “Finishing an ePharmacy Order” in this section.

#### **Example: Finishing an Order from OERR**

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)

      Orders to be completed for all divisions: 16

Do you want an Order Summary? No// <Enter> NO
```

```

Patient Prescription Processing
Barcode Rx Menu ...
Complete Orders from OERR
Discontinue Prescription(s)
Edit Prescriptions
ePharmacy Menu...
List One Patient's Archived Rx's
Manual Print of Multi-Rx Forms
  Reprint an Outpatient Rx Label
  Signature Log Reprint
View Prescriptions

Select Rx (Prescriptions) Option: Complete Orders from OERR

There are multiple Institutions associated with this Outpatient Site for
finishing orders entered through CPRS. Select the Institution for which to
finish orders from. Enter '?' to see all choices.

Select CPRS ORDERING INSTITUTION:ANYTOWN// <Enter>   NY  VAMC  500

You have selected ANYTOWN.
After completing these orders, you may re-enter this option and select again.

<There are 3 flagged orders for ANYTOWN>

Select By: (PA/RT/PR/CL/FL/CS/E): PATIENT// <Enter>

All Patients or Single Patient: (A/S/E): SINGLE// <Enter>
Select Patient: OPPATIENT16,ONE  OPPATIENT16,ONE      4-3-41      000246802
  YES      SC VETERAN
WARNING : ** This patient has been flagged with a Bad Address Indicator.

Do you want to see Medication Profile? Yes// <Enter>

```



The user may enter a question mark at the “Select Patient” prompt to get a list of patients with pending orders. A single patient may be selected for processing, or pending orders for all patients may be processed in sequence by the time of each order’s entry into the system.



Flagged orders will not be processed. They are not a part of any pending orders. To process flagged orders, you should enter **FL** at the “Select By” prompt. This ensures you will view all patients with flagged pending orders, allowing you to address their flagged orders; however, if you know which patients have flagged orders, you can access the flagged orders through the Medication Profile.



If the user answers **YES** to “Do you want to see Medication Profile?” and the patient has remote prescription(s), the following prompt appears.

```

REMOTE PRESCRIPTIONS AVAILABLE!
Display Remote Data? N//

```

If the user answers **YES** to “Display Remote Data?” then the “Remote Facilities Visited” screen appears, allowing the user to see what facilities the patient has prescriptions at and what those prescriptions are.

After the user answers the medication profile prompt, a warning displays if no allergy assessment has been made. The patient's eligibility and RX patient status also displays.

```
OPPATIENT16,ONE      4-3-41      000-24-6802
YES      SC VETERAN
      No Allergy Assessment!

Press Return to continue: <Enter>
Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED// <Enter>
```

[The Patient Information and Medication Profile screens display next, but are not shown in this example.]

```
Pending OP Orders (ROUTINE)  March 13, 2008 16:31:33      Page: 1 of 2
OPPATIENT16,ONE      <NO ALLERGY ASSESSMENT>
PID: 000-24-6802      Ht (cm): 177.80 (02/08/2008)
DOB: APR 3,1941 (66)      Wt (kg): 90.45 (02/08/2008)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 2.09

* (1) Orderable Item: ACETAMINOPHEN TAB      * Editing starred fields will
(2)      CMOP Drug: ACETAMINOPHEN 500MG TAB      create a new order
      Drug Message: NATL FORM
(3)      *Dosage: 500 (MG)
      Verb: TAKE
      Dispense Units: 1
      *Route: ORAL
      *Schedule: BID
(4) Pat Instruct:
      Provider Comments: ProvComments
      SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
(5) Patient Status: SERVICE CONNECTED
(6) Issue Date: MAR 13,2008      (7) Fill Date: MAR 13,2008
(8) Days Supply: 30      (9) QTY (TAB): 60
+      Enter ?? for more actions
BY Bypass      DC Discontinue      FL Flag/Unflag
ED Edit      FN Finish
Select Item(s): Next Screen//// FN Finish
```

After “Finish” is selected, the user is prompted to fill in any information missing from fields needed to complete the order.



If you attempt to process a flagged order, you are prompted “Unflag Order? NO//”. If you respond **YES**, enter comments to unflag the order and continue with processing. If you respond **NO**, you cannot process the order because it is still flagged.



If an order is sent from OERR without a Dispense Drug selected, and there is only one Dispense Drug tied to the Orderable Item, that drug will be inserted in the DRUG field (#2 on the screen). If there is more than one Dispense Drug tied to the Orderable Item, a “No Dispense Drug Selected” message will display in the DRUG field (#2 on the screen) and a Dispense Drug must be selected to complete/finish the order.

```
The following Drug are available for selection:
1. ACETAMINOPHEN 325MG
2. ACETAMINOPHEN EXTRA STR 500MG
```





If the drug list is empty, the user should select a new orderable item or the order can be discontinued.

```
Select Drug by number: (1-2): 1
```

Drug interaction and allergy checks are now performed. If the patient does not have an allergy assessment, a warning is displayed. If the user continues with the order, the user will have to create an intervention.

```
Now doing drug interaction and allergy checks. Please wait...  
There is no allergy assessment on file for this patient.  
You will be prompted to intervene if you continue with this prescription  
Do you want to Continue?: N// YES
```

To continue with the order, respond **YES**. To cancel the order, respond **NO**.

If the user continues with the order, and the patient does not have an allergy assessment, and does not already have a prescription for which an Intervention was created, the user will have to create an intervention.

To create a new intervention, respond to the prompts as they are presented.

```
Now creating Pharmacy Intervention  
for ACETAMINOPHEN 325MG  
  
PROVIDER: OPProvider4,TWO  
RECOMMENDATION: ?  
Answer with APSP INTERVENTION RECOMMENDATION, or NUMBER  
Choose from:  
1 CHANGE DRUG  
2 CHANGE FORM OR ROUTE OF ADMINISTRATION  
3 ORDER LAB TEST  
4 ORDER SERUM DRUG LEVEL  
5 CHANGE DOSE  
6 START OR DISCONTINUE A DRUG  
7 CHANGE DOSING INTERVAL  
8 NO CHANGE  
9 OTHER  
  
RECOMMENDATION: 2 CHANGE FORM OR ROUTE OF ADMINISTRATION  
  
See 'Pharmacy Intervention Menu' if you want to delete this  
intervention or for more options.  
  
Would you like to edit this intervention ? N//
```

If the patient does not have an allergy assessment, but already has a prescription for which an Intervention was created, the user will have the option to copy the existing Intervention.

```
Now doing drug interaction and allergy checks. Please wait...  
No Allergy Assessment - Do you want to duplicate Intervention?: Yes//
```

To duplicate the intervention, respond YES. The Intervention is displayed, and the user is prompted to edit the Intervention.

```
No Allergy Assessment - Do you want to duplicate Intervention?: Yes// YES

INTERVENTION DATE: JUL 20, 2009          PATIENT: OPPATIENT16,ONE
PROVIDER: OPPROVIDER4,TWO              PHARMACIST: OPPHARMACIST4,THREE
DRUG: 325MG                             INSTITUTED BY: PHARMACY
INTERVENTION: ALLERGY                    RECOMMENDATION: NO CHANGE
ORIGINATING PACKAGE: OUTPATIENT          DIVISION:ANYTOWN

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

To accept the existing intervention as is, respond NO. To edit the intervention, respond YES. Edit as any other intervention.

To create a new intervention, respond NO.

```
No Allergy Assessment - Do you want to duplicate Intervention?: Yes// n NO

Now creating Pharmacy Intervention
for 325MG
```

If the user chooses to copy Provider Comments into the Patient Instructions, they will display on the end of both the Patient Instructions and the Sig.



If the patient has been identified as having another language preference, the Provider Comments will not be appended to the other language Sig.

#### Example: Finishing an Order from OERR (continued)

```
Provider Comments:
WITH A FULL MEAL
Copy Provider Comments into the Patient Instructions? No// Y YES

(TAKE ONE TABLET BY MOUTH TWICE A DAY WITH A FULL MEAL)

Rx # 503902          05/22/01
OPPATIENT16,ONE    #60
TAKE ONE TABLET BY MOUTH TWICE A DAY WITH A FULL MEAL

ACETAMINOPHEN 325MG TAB
OPPROVIDER4,TWO    OPPHARMACIST4,THREE
# of Refills: 3

Are you sure you want to Accept this Order? NO// Y YES
```

After an order is accepted, the user will be prompted to enter the missing information.

```
METHOD OF PICK-UP:
WAS THE PATIENT COUNSELED: NO// Y YES
WAS COUNSELING UNDERSTOOD: NO// Y YES

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

SC Percent: 20%
Disabilities:
KNEE CONDITION          10% - SERVICE CONNECTED
```

```

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

This Rx has been flagged as: SC
Was treatment for Service Connected condition? YES// <Enter>
Press Return to Continue:

```

## Flagging and Unflagging Pending Orders

Flagging a pending order allows you to prevent an order from being processed and attach a note known as a flag to the pending order. Flag/Unflag functionality is only available for Pending new orders and Pending renewals; only holders of the PSORPH security key can flag or unflag an order.

Flagged orders will not be processed. When you have flagged orders to process from the *Complete Orders from OERR* option, you should enter **FL** at the “Select By” prompt (shown in the following example). This ensures you will view all patients with flagged pending orders, allowing you to address their flagged orders; however, if you know which patients have flagged orders, you can access the flagged orders through the Medication Profile.

The following provides examples of how to flag and unflag pending orders from a medication profile within the *Complete Orders from OERR* option.

### Example: Finishing an Order from OERR

```

Select Outpatient Pharmacy Manager Option: RX (Prescriptions)

      Orders to be completed for all divisions: 16

Do you want an Order Summary? No// <Enter> NO

  Patient Prescription Processing
  Barcode Rx Menu ...
  Complete Orders from OERR
  Discontinue Prescription(s)
  Edit Prescriptions
  ePharmacy Menu...
  List One Patient's Archived Rx's
  Manual Print of Multi-Rx Forms
  Reprint an Outpatient Rx Label
  Signature Log Reprint
  View Prescriptions

Select Rx (Prescriptions) Option: COMplete Orders from OERR

There are multiple Institutions associated with this Outpatient Site for
finishing orders entered through CPRS. Select the Institution for which to
finish orders from. Enter '?' to see all choices.

Select CPRS ORDERING INSTITUTION:ANYTOWN// <Enter>  NY  VAMC  500

You have selected ANYTOWN.
After completing these orders, you may re-enter this option and select again.

<There are 3 flagged orders for ANYTOWN>

Select By: (PA/RT/PR/CL/FL/CS/E): PATIENT// FL <Enter>

Do you want to see Medication Profile? Yes// <Enter>

```

After answering the “Medication Profile” prompt, a warning displays if no allergy assessment has been made. The patient’s eligibility and RX patient status also displays.

```

OPPATIENT16,ONE      4-3-41      000246802
YES      SC VETERAN
      No Allergy Assessment!

Press Return to continue: <Enter>
Eligibility: SC
RX PATIENT STATUS: SERVICE CONNECTED// <Enter>

```

If a pending order is flagged, the row number is highlighted on the Medication Profile screen (shown in the following example). Select the order to view the flag or to flag the new pending order.

### Example: A Flagged Pending Order

```

Medication Profile      Mar 13, 2008@16:31:24      Page: 1 of 1
OPPATIENT16,ONE      <NO ALLERGY ASSESSMENT>
  PID: 000-24-6802      Ht (cm): 177.80 (02/08/2007)
  DOB: APR 3,1941 (66)      Wt (kg): 90.45 (02/08/2007)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 2.08
  ISSUE      LAST REF DAY
#  RX #      DRUG      QTY ST  DATE  FILL  REM  SUP
-----ACTIVE-----
1 100002518  PENICILLAMINE 250MG TAB      31 A  02-29  02-29  5  31
-----PENDING-----
2 ACETAMINOPHEN 500MG TAB      QTY: 60      ISDT: 03-13  REF: 3
  Enter ?? for more actions
PU Patient Record Update      NO New Order
PI Patient Information      SO Select Order
Select Action: Quit// SO Select Order
Select Orders by number: (1-2): 2

```

From the Pending OP Orders screen, you can flag and unflag an order, as well as view the flagged reason. To flag the order, enter **FL** and then enter a “REASON FOR FLAG”, alert the proper individual that the flag has been added, and the flagging process is complete.

### Example: Flagging an Order

```

REASON FOR FLAG: DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE DISPENSING.
Send alert to: PSUSER,ONE//      BIRMINGHAM      ALABAMA      OP      PHARMACIST
... order flagged.

```

When an order is flagged, “**FL-**” is placed in front of “Pending OP Orders” in the upper-left corner, and the flagged reason is listed below the patient identifying information.

### Example: A Flagged Order

```

FL-Pending OP Orders (ROUTINE)March 13, 2008 16:31:33      Page: 1 of 2
OPPATIENT16,ONE      <NO ALLERGY ASSESSMENT>
  PID: 000-24-6802      Ht (cm): 177.80 (02/08/2007)
  DOB: APR 3,1941 (66)      Wt (kg): 90.45 (02/08/2007)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 2.09
  Flagged by OPPHARM,TWO on 03/13/08@23:14: DOUBLE CHECK WITH PATIENT FOR HEART CONDITION
  BEFORE DISPENSING.
* (1) Orderable Item: ACETAMINOPHEN TAB      * Editing starred fields will

```

```

(2)      CMOF Drug: ACETAMINOPHEN 500MG TAB      create a new order
      Drug Message: NATL FORM
(3)      *Dosage: 500 (MG)
      Verb: TAKE
      Dispense Units: 1
      *Route: ORAL
      *Schedule: BID
(4)      Pat Instruct:
      Provider Comments: ProvComments
      SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
(5)      Patient Status: SERVICE CONNECTED
(6)      Issue Date: MAR 13,2008      (7) Fill Date: MAR 13,2008
(8)      Days Supply: 30      (9) QTY (TAB): 60
+      Enter ?? for more actions
BY Bypass      DC Discontinue      FL Flag/Unflag
ED Edit      FN Finish
Select Item(s): Next Screen// FL Flag/Unflag

```

To unflag an order, enter **FL** at the “Select Item(s)” prompt, and then enter your “COMMENTS”. When you press <Enter>, the order is no longer flagged.

### Example: Unflagging an Order

```

FLAGGED: 03/13 23:14 by OPPHARM,TWO
      DOUBLE CHECK WITH PATIENT FOR HEART CONDITION BEFORE DISPENSING.
COMMENTS: CHECKED WITH PATIENT. NO HEART CONDITION.
      ... order unflagged.

```

At that point, the flag from the Medication Profile is removed, but the flagged/unflagged reason remains on the Pending OP Orders screen unless you reflag the order.

### Example: An Unflagged Order

```

Pending OP Orders (ROUTINE)      March 14, 2008 09:16:33      Page: 1 of 2
OPPATIENT16,ONE      <NO ALLERGY ASSESSMENT>
  PID: 000-00-0001      Ht (cm): 177.80 (02/08/2007)
  DOB: APR 3,1941 (66)      Wt (kg): 90.45 (02/08/2007)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 2.09

Flagged by OPPHARM,TWO on 03/13/08@23:14: DOUBLE CHECK WITH PATIENT FOR HEART CONDITION
BEFORE DISPENSING.
Unflagged by OPPHARM,TWO on 03/14/08@09:26: CHECKED WITH PATIENT. NO HEART CONDITION.

* (1) Orderable Item: ACETAMINOPHEN TAB      * Editing starred fields will
(2)      CMOF Drug: ACETAMINOPHEN 500MG TAB      create a new order
      Drug Message: NATL FORM
(3)      *Dosage: 500 (MG)
      Verb: TAKE
      Dispense Units: 1
      *Route: ORAL
      *Schedule: BID
(4)      Pat Instruct:
      Provider Comments: ProvComments
      SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
(5)      Patient Status: SERVICE CONNECTED
(6)      Issue Date: MAR 13,2008      (7) Fill Date: MAR 13,2008
(8)      Days Supply: 30      (9) QTY (TAB): 60
+      Enter ?? for more actions
BY Bypass      DC Discontinue      FL Flag/Unflag
ED Edit      FN Finish
Select Item(s): Next Screen//

```

After pending orders have been unflagged, they can be processed.



If you attempt to process a flagged order, you are prompted “Unflag Order? NO//”. If you respond **YES**, enter comments to unflag the order and continue with processing. If you respond **NO**, you cannot process the order because it is still flagged.

## Changes to Finishing Pending Orders Process - Digitally Signed Orders Only

Digitally signed orders will be identifiable by the “Digitally Signed Order” message in reverse video on the message bar.



If the terminal in use is set up as a VT-100, there may be problems with this message display and the “Processing Digitally Signed Order” message. Updating the Vista terminal session to use VT-320 will avoid this problem.

The provider’s PIV/PKI certificate is revalidated when accessing a digitally signed order. If the validation check is unsuccessful, an error code is sent to the pharmacist and an entry is made in the Rx Activity Log. The error code type results in either the order being automatically rejected/discontinued, or the pharmacist being given the choice to finish, bypass, or discontinue the order. Digitally signed prescriptions that have been discontinued cannot be reinstated. The Speed Discontinuation functionality no longer deletes unverified prescriptions.

## Finishing an Order from OERR with Multiple Institutions

Multiple Institution entries can be added using the *Site Parameter Enter/Edit* option. If a site has multiple entries in the CPRS ORDERING INSTITUTION field, the user is prompted for an Institution when entering the *Complete Orders from OERR* option. After an Institution is selected, the Pending Orders shown for completion will be those Pending Orders from clinics that are associated with the Institution selected.

### Example: Finishing an Order from OERR with Multiple Institutions

```
Select Outpatient Pharmacy Manager Option: RX (Prescriptions)
      Orders to be completed for all divisions: 21
Do you want an Order Summary:? No// <Enter> NO
Select Rx (Prescriptions) Option: COmplete Orders from OERR
There are multiple Institutions associated with this Outpatient Site for finishing orders
entered through CPRS. Select the Institution from which to finish orders. Enter '?' to
see all choices.
Select CPRS ORDERING INSTITUTION: BIRMINGHAM, AL.// <Enter> BIRMINGHAM, AL.521
You have selected BIRMINGHAM, AL..
After completing these orders, you may re-enter this option and select again.
Select By: (PA/RT/PR/CL/FL/E): PATIENT// PA
```

*[See the previous example for completion of this option.]*

## Finishing an ePharmacy Order

After the user reviews the ePharmacy order and chooses to accept the order, the billing data is sent to ECME, which sends a message back to Outpatient Pharmacy displaying the status of the claim. The ECME section of the Activity Log is also updated.

```
Veteran Prescription 100003840 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Gathering claim info
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE

Another New Order for OPPATIENT,FOUR? YES//
```

## Activity Log

Multiple Activity Logs exist for a completed or finished order. Any single activity log or all activity logs can be viewed.

Use the hidden action (AL) to view the activity log once a completed or finished order is selected.

### Example: Activity Log

```
OP Medications (ACTIVE)      Jun 08, 2006 11:01:29      Page: 1 of 3
OPPATIENT29,ONE
  PID: 000-00-0001           Ht (cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)     Wt (kg): 79.09 (06/07/2000)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 2.09
  Rx #: 503915
(1) *Orderable Item: AMPICILLIN CAP,ORAL *** (N/F) ***
(2)   Drug: AMPICILLIN 250MG CAP *** (N/F) ***
      NDC: 00056-0176-75
(3)   *Dosage: 750 (MG)
      Verb: TAKE
      Dispense Units: 3
      Noun: CAPSULE(S)
      *Route: ORAL
      *Schedule: QID
      *Duration: 10D (DAYS)
(4) Pat Instructions: WITH FOOD AVOIDING DAIRY FOODS
      SIG: TAKE THREE CAPSULES BY MOUTH FOUR TIMES A DAY FOR 10 DAYS
      WITH FOOD AVOIDING DAIRY FOODS
(5) Patient Status: SERVICE CONNECTED
+ Enter ?? for more actions
DC  Discontinue      PR  Partial          RL  Release
ED  Edit             RF  (Refill)        RN  Renew
Select Action: Next Screen// AL
Select Activity Log by number
1. Refill      2. Partial      3. Activity      4. Labels
5. Copay      6. ECME        7. All Logs: (1-7): 7// <Enter>
```

The prompt for the selection of the Activity Log depends on what type of prescription is selected. For example, if the prescription is an ePharmacy prescription, ECME displays as item #6. If the prescription is a CMOP prescription, CMOP displays as item #6.

**Example: Activity Log (continued)**

```

Rx Activity Log                               Jun 08, 2006 11:02:51           Page:    1 of    2
OPPATIENT29,ONE
  PID: 000-00-0001                           Ht (cm): 175.26 (06/07/2000)
  DOB: SEP 12,1919 (81)                       Wt (kg): 79.09 (06/07/2000)

Rx #: 503904   Original Fill Released: 5/25/01
Routing: Window   Finished by: OPProvider,ONE

Refill Log:
#  Log Date  Refill Date  Qty          Routing  Lot #        Pharmacist
=====
There are NO Refills For this Prescription

Partial Fills:
#  Log Date  Date        Qty          Routing  Lot #        Pharmacist
=====
There are NO Partial for this Prescription

Activity Log:
#  Date        Reason          Rx Ref          Initiator Of Activity
=====
1  05/25/01                ORIGINAL
Comments: Patient Instructions Not Sent By Provider.
2  05/25/01   PROCESSED      ORIGINAL        OPProvider,ONE
Comments: Label never queued to print by User

Label Log:
#  Date        Rx Ref          Printed By
=====
1  09/25/06   ORIGINAL        OPProvider,ONE
Comments: ScripTalk label printed
2  09/25/06   ORIGINAL        OPProvider,ONE
Comments: ROUTING=WINDOW (BAD ADDRESS)

Copay Activity Log:
#  Date        Reason          Rx Ref          Initiator Of Activity
=====
There's NO Copay activity to report

ECME Log:
#  Date/Time          Rx Ref          Initiator Of Activity
=====
1  11/30/05@18:38:29  ORIGINAL        OPPharmacist,ONE
Comments: No claim submission made. Billing Determination was: DRUG NOT BILLABLE.

[This shows an extended view of what is seen on the screen.]

Enter ?? for more actions

Select Action:Quit// <Enter>

```

The Activity Logs will appear the same as the OP logs with the exception of the addition of a CMOP Event Log. Here is an example of a sample CMOP Event Log:

**Example: Activity Log (continued)**

```

Rx Activity Log                               Jul 06, 1996 09:54:24           Page:    2 of    2
OPPATIENT2,ONE
  PID: 000-00-0001                           Ht (cm): 188.40 (12/02/00)
  DOB: DEC 14,1960 (34)                       Wt (kg): 109.10 (12/02/00)

CMOP Event Log:
Date/Time          Rx Ref  TRN-Order  Stat          Comments
=====
09/17/00@1526     Ref 1   267-4     DISP          NDC: 1234TEST5678

```



```

CMOP Lot#/Expiration Date Log:
Rx Ref          Lot #          Expiration Date
=====
Ref 1           1234TST          07/07/00

Enter ?? for more actions

Select Action:Quit// <Enter>

```

If this were an ePharmacy prescription, the prompt would display as follows:

```

Select Activity Log by number
1. Refill      2. Partial      3. Activity      4. Labels
5. Copay       6. ECME         7. All Logs: (1-7): 7/// 6

```

For an ePharmacy prescription, the ECME Event Log displays before the CMOP Event Log.

**Example: ECME Event Log of an ePharmacy prescription**

```

Rx Activity Log          Nov 07, 2005@12:23:37          Page: 1 of 1
OPPATIENT,FOUR
  PID: 000-00-0001P          Ht (cm) : _____ (_____)
  DOB: NOV 12,1975 (29)      Wt (kg) : _____ (_____)

Rx #: 100003861    Original Fill Released:
Routing: Window    Finished by: OPPHARMACIST4,THREE

ECME Log:
#   Date           Rx Ref           Initiator Of Activity
=====
1   11/07/05       ORIGINAL        OPPHARMACIST4,THREE
Comments: ECME:REJECT WORKLIST-DUR OVERRIDE CODES(DD/M0/1B)-E
PAYABLE-pOPP INSURANCE

ECME REJECT Log:
#   Date/Time Rcvd    Rx Ref           Reject Type       STATUS           Date/Time Resolved
=====
Enter ?? for more actions

Select Action:Quit// <Enter>

```

The Domain Name Server (DNS) information of the automated dispensing device is appended to the Comment field of the activity log. This is usually an IP address or the DNS name.

The activity log has an entry indicating that the Rx has been sent to the external interface. With patch PSO\*7\*354, this activity entry is enhanced to indicate the routing automated dispensing device. The Domain Name Server (DNS) information of the automated dispensing device is appended to the Comment field of the activity log. This is usually an IP address or the DNS name.

The activity log was also updated to display the mail tracking information available in the RXD-13 segment of the HL7 message received by VistA from the external dispensing interface.

**Example: Activity Log with multiple dispensing devices**

```

Rx Activity Log          May 23, 2011@12:30:12          Page: 2 of 3
OPPATIENT,SIX          <A>
  PID: 000-00-0001          Ht (cm) : _____ (_____)
  DOB: OCT 29,1932 (78)     Wt (kg) : _____ (_____)
+

```

```

1 05/04/11 REPRINT ORIGINAL OPPHARMACIST4,FOUR
Comments: TESTING MULTIDEVICES (1 COPIES)
2 05/04/11 X-INTERFACE ORIGINAL OPPHARMACIST4,FOUR
Comments: Prescription (Reprint) sent to external interface.
3 05/04/11 X-INTERFACE ORIGINAL POSTMASTER
Comments: HL7 ID - 50073974 MESSAGE TRANSMITTED TO 10.4.131.13
4 05/04/11 X-INTERFACE ORIGINAL POSTMASTER
Comments: HL7 ID - 50073975 MESSAGE TRANSMITTED TO 10.4.142.22
Comments: External Interface Dispensing is Complete. Filled By: OPTECH,ONE
Checking Pharmacist: OPPHARMACIST4,FOUR
Mail Tracking Info.: USPS #123456789 received at 05/04/11@15:32:23

Label Log:
# Date Rx Ref Printed By
=====
1 05/02/11 ORIGINAL OPPHARMACIST4,FIVE
Comments: From RX number 100002987
2 05/04/11 ORIGINAL OPPHARMACIST4,FOUR
Comments: From RX number 100002987 (Reprint)
+ Enter ?? for more actions
Select Action:Next Screen//

```

For HOLD/UNHOLD of prescriptions, the activity log entries include HOLD COMMENTS and the HOLD REASON when a prescription is placed on HOLD and UNHOLD COMMENTS when the prescription is removed from HOLD.

**Example: Activity Log with HOLD/UNHOLD Comments**

```

Activity Log:
# Date Reason Rx Ref Initiator Of Activity
...
8 05/10/12 HOLD REFILL 1 USER,PHARMACY
Comments: Rx placed on HOLD (Reason: BAD ADDRESS) and removed from
SUSPENSE - HOLD COMMENTS ENTERED BY THE USER MANUALLY.
...
9 05/10/12 UNHOLD REFILL 1 USER,PHARMACY
Comments: Rx Removed from HOLD - UNHOLD COMMENTS ENTERED BY THE USER
WHEN REMOVING THE RX FROM HOLD.

```

The activity logs for both Titration and Maintenance Rx's will record the corresponding Titration and Maintenance Rx # if they exist.

**Example: Activity Log with activity logs for both Titration and Maintenance Rx's**

```

Titration Rx:
-----
# Date Reason Rx Ref Initiator of Activity
=====
1 09/29/08 EDIT ORIGINAL OPUSER,ONE
Comments: Maintenance Dose Rx: 100005130

Maintenance Rx:
-----
# Date Reason Rx Ref Initiator of Activity
=====
1 09/29/08 EDIT ORIGINAL OPUSER,TWO
Comments: Titration Dose Rx: 100005392

```

## Discontinue Prescription(s) [PSO C]



If the order utilizes the EXCEPT conjunction, discontinue will no longer be allowed. The message bar will display: Cannot be Reinstated – dosage contains an invalid Except conjunction

The *Discontinue Prescription(s)* option is used to either discontinue a prescription without deleting its record from the files, or reinstate a prescription discontinued by pharmacy.

### Example: Discontinuing a prescription

```
Select Rx (Prescriptions) Option: DISCONTINUE Prescription(s)
Discontinue/Reinstate by Rx# or patient name: (R/P): PATIENT NAME
Are you entering the patient name or barcode: (P/B): Patient Name
Select PATIENT NAME: OPPATIENT16,ONE  OPPATIENT16,ONE          9-7-52      000246802
      YES          SC VETERAN

      RX #          DRUG          QTY ST  ISSUE  LAST REF DAY
      -----          -----          -----
                        --ACTIVE--
      1 100003218    AMPICILLIN 500MG CAP          10 A  05-11 05-11   5 30
      2 100003238    PREDNISONE 5MG TAB           30 A  05-30 05-30   3 10
      3 100003205$    TRIPROLIDINE & PSEUDOEPHEDRINE 10 A  05-01 05-01   5 31
                        --DISCONTINUED--
      4 100003216$    AMPICILLIN 10GM INJ. M.D.V.    30 DC 05-07 05-07   5 30
      5 100003214    PREDNISONE 1MG TAB           30 DE 05-07 05-07   3 10
Press RETURN to continue: <Enter>

Discontinue all or specific Rx#'s?: (A/S): SPECIFIC Rx's
ENTER THE LINE #: (1-5): 2
Comments: RESTRICTED/NF MED
Nature of Order: SERVICE CORRECTION// ??

      Nature of Order Activity      Require      Print      Print on
      -----          -----          -----          -----
      WRITTEN                                x
      VERBAL                                x          x          x
      TELEPHONED                            x          x          x
      SERVICE CORRECTION
      POLICY                                x          x
      DUPLICATE
      SERVICE REJECT                        x          x

Nature of Order: SERVICE CORRECTION// SERVICE REJECT  R
Requesting PROVIDER: OPPROVIDER30,TWO // <Enter>      TO
100003238 PREDNISONE 5MG TAB                          OPPATIENT16,ONE
      Rx to be Discontinued

Press Return to Continue: <Enter>
OK to Discontinue? N// YES
```

When a prescription is discontinued, the software checks for any unresolved ECME rejections for that prescription. If a DUR REJECT, REJECT RESOLUTION REQUIRED, or REFILL TOO SOON REJECT is found, it will be marked resolved with the reason PRESCRIPTION DISCONTINUED.

When an ePharmacy prescription is discontinued, the software checks for any unreleased fills with a PAYABLE claim. If found, a reversal request is sent to ECME, which forwards it on to the third party payer.

When a pending renewal order is discontinued, Outpatient Pharmacy verifies if there is an active prescription for the same drug. If an active prescription is found, you are prompted with “There is an active Rx for this pending order, Discontinue both (Y/N)?” If you respond **YES**, both the pending order and the active order are discontinued. If you respond **NO**, only the pending order is discontinued and the active order is not discontinued.

## **Edit Prescriptions**

### **[PSO RXEDIT]**

This option allows changes to be made to entered orders. Newly entered orders can be edited before release by typing in the corresponding field number. Previously entered orders can be edited by entering the prescription number, then specifying the field to be edited. An asterisk or star (\*) is shown in front of each field that will create a new order if it is changed. See the section “Editing an Order” for an example.

When editing fields preceded by an asterisk (\*) in an ePharmacy order (or electronically third party billable prescription), upon acceptance of the edited order the original prescription will be discontinued and a new order created. If the latest fill of the original order has not been released and is E Payable, the claim for that fill will be reversed. A new claim is submitted for the new prescription. See “Editing an ePharmacy Order” for an example of editing ePharmacy orders.

### **MAXIMUM DAYS SUPPLY**

Maximum Days Supply has been added to both the VA PRODUCT File (50.68) and the Drug File (#50.0). This field allows the user to increase the Max Days supply allowed for a drug to greater than 90 up to 365. Controlled substances will remain at 1-90 days supply.

With the addition of Max Days Supply, Days Supply can now be entered from 1-365 for a drug.

Important Note: When the MAXIMUM DAYS SUPPLY is populated in both the VA PRODUCT File (50.68) and the Drug File (#50), the lower of the two values takes priority.

### **Example: DAYS SUPPLY: (1-90): 90// (Active Order)**

The MAXIMUM DAYS SUPPLY in the Drug File (#50) and the MAXIMUM DAYS SUPPLY in the VA PRODUCT File (#50.68) are NOT set.

The MAXIMUM DAYS SUPPLY for the Drug File (#50) is a NULL value.  
 The MAXIMUM DAYS SUPPLY for the VA PRODUCT File (#50.68) is a NULL value.  
 The DAYS SUPPLY for this prescription can be set to a maximum of 90.

```

OP Medications (ACTIVE)      May 26, 2016@10:33:19      Page: 1 of 3
TEST,PATIENT                <NO ALLERGY ASSESSMENT>
  PID: 000-00-0000          Ht (cm) : _____ (_____)
  DOB: JAN 2,1947 (69)     Wt (kg) : _____ (_____)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2) : _____
-----
Rx #: 100002610$
(1) *Orderable Item: ASPIRIN TAB
(2) Drug: ASPIRIN BUFFERED 325MG TAB
    NDC: 00182-0196-10
(3) *Dosage: 325 (MG)
    Verb: TAKE
    Dispense Units: 1
        Noun: TABLET
        *Route: ORAL (BY MOUTH)
        *Schedule: PRN
(4) Pat Instructions:
    SIG: TAKE ONE TABLET BY MOUTH AS NEEDED
(5) Patient Status: OPT NSC
(6) Issue Date: 05/26/16          (7) Fill Date: 05/26/16
    Last Fill Date: 05/26/16 (Window)
    Last Release Date:
    Expires: 05/27/17          (8) Lot #:
(9) Days Supply: 90              (10) QTY (CAP): 90
(11) # of Refills: 3             Remaining: 3
(12) Provider: XXXX,XXXXX
(13) Routing: WINDOW            (14) Copies: 1
    Method of Pickup:
(15) Clinic: Not on File
(16) Division: ANYTOWN (500)
+-----Enter ?? For more actions-----
DC Discontinue      PR Partial      RL Release
ED Edit            RF Refill      RN Renew
Select Action: Next Screen// 9
DAYS SUPPLY: (1-90): 90//
  
```

**Example: DAYS SUPPLY: (1-265): 90// (Active Order)**

MAXIMUM DAYS SUPPLY in the Drug File (#50) is greater than the MAXIMUM DAYS SUPPLY in the VA PRODUCT File (#50.68).

The MAXIMUM DAYS SUPPLY for the Drug File (#50) is 365.  
 The MAXIMUM DAYS SUPPLY for the VA PRODUCT File (#50.68) is null.

After an update from the Pharmacy Product System for a maximum days supply of 265 the following would occur:

The MAXIMUM DAYS SUPPLY for the Drug File (#50) is 365.  
 The MAXIMUM DAYS SUPPLY for the VA PRODUCT File (#50.68) is 265.

In this scenario, the value in the VA PRODUCT File (#50.68) takes priority since it is the lower of the two values.

The DAYS SUPPLY for this prescription can be set to a maximum of 265.

```

OP Medications (ACTIVE)      May 25, 2016@17:18:47      Page: 1 of 3
TEST,PATIENT                <NO ALLERGY ASSESSMENT>
  PID: 000-00-0000          Ht (cm) : _____ (_____)
  DOB: JAN 2,1947 (69)     Wt (kg) : _____ (_____)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2) : _____
-----
Rx #: 100002609$
(1) *Orderable Item: ASPIRIN TAB
(2) Drug: ASPIRIN BUFFERED 325MG TAB
    NDC: 00182-0196-10
(3) *Dosage: 325 (MG)
    Verb: TAKE
    Dispense Units: 1
    Noun: TABLET
    *Route: ORAL (BY MOUTH)
    *Schedule: PRN
(4) Pat Instructions:
    SIG: TAKE ONE TABLET BY MOUTH AS NEEDED
(5) Patient Status: OPT NSC
(6) Issue Date: 05/25/16      (7) Fill Date: 05/25/16
    Last Fill Date: 05/25/16 (Window)
    Last Release Date:
    Expires: 05/26/17
(8) Lot #:
    MFG:
(9) Days Supply: 90          (10) QTY (CAP): 90
(11) # of Refills: 3        Remaining: 3
(12) Provider: XXXX,XXXXX
(13) Routing: WINDOW        (14) Copies: 1
    Method of Pickup:
(15) Clinic: Not on File
(16) Division: ANYTOWN (500)
+-----Enter ?? for more actions-----
DC Discontinue      PR Partial      RL Release
ED Edit            RF Refill      RN Renew
Select Action: Next Screen// 9
DAYS SUPPLY: (1-265): 90//

```

**Example: DAYS SUPPLY: (1-250): 90// (Active Order)**

MAXIMUM DAYS SUPPLY in the VA PRODUCT File (#50.68) is greater than the MAXIMUM DAYS SUPPLY in the Drug File (#50).

The MAXIMUM DAYS SUPPLY for the Drug File (#50) is 250.

The MAXIMUM DAYS SUPPLY for the VA PRODUCT File (#50.68) is 365.

In this scenario, the value in the Drug File (#50) takes priority since it is the lower of the two values.

The DAYS SUPPLY for this prescription can be set to a maximum of 250.

```

OP Medications (ACTIVE)      May 25, 2016@16:37:28      Page: 1 of 3
TEST,PATIENT                <NO ALLERGY ASSESSMENT>
  PID: 000-00-0000          Ht (cm) : _____ (_____)
  DOB: JAN 2,1947 (69)     Wt (kg) : _____ (_____)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2) : _____
-----
Rx #: 100002608$
(1) *Orderable Item: ASPIRIN TAB
(2) Drug: ASPIRIN BUFFERED 325MG TAB
    NDC: 00182-0196-10

```

```

(3)      *Dosage: 325 (MG)
          Verb: TAKE
          Dispense Units: 1
          Noun: TABLET
          *Route: ORAL (BY MOUTH)
          *Schedule: PRN
(4) Pat Instructions:
          SIG: TAKE ONE TABLET BY MOUTH AS NEEDED
(5) Patient Status: OPT NSC
(6) Issue Date: 05/25/16          (7) Fill Date: 05/25/16
          Last Fill Date: 05/25/16 (Window)
          Last Release Date:
          Expires: 05/26/17
(9) Days Supply: 90          (10) QTY (CAP): 90
(11) # of Refills: 3          Remaining: 3
(12) Provider: XXXX,XXXXX
(13) Routing: WINDOW          (14) Copies: 1
          Method of Pickup:
(15) Clinic: Not on File
(16) Division: ANYTOWN (500)
+-----Enter ?? for more actions-----+
DC Discontinue          PR Partial          RL Release
ED Edit                RF Refill           RN Renew
Select Action: Next Screen// 9
DAYS SUPPLY: (1-250): 90//

```

**Example: DAYS SUPPLY: (1-365): 90// (Pending Order)**

MAXIMUM DAYS SUPPLY in the Drug File (#50) is greater than the MAXIMUM DAYS SUPPLY in the VA PRODUCT File (#50.68)

The MAXIMUM DAYS SUPPLY for the Drug File (#50) is 365.

The MAXIMUM DAYS SUPPLY for the VA PRODUCT File (#50.68) is a NULL value.

In this scenario, the value in the Drug File (#50) takes priority since it is the only value.

The DAYS SUPPLY for this prescription can be set to a maximum of 365.

```

Pending OP Orders (ROUTINE)  May 31, 2016@11:00:04          Page: 1 of 2
TEST,PATIENT                <NO ALLERGY ASSESSMENT>
PID: 000-00-0000            Ht (cm) : _____ (_____)
DOB: JAN 2,1947 (69)        Wt (kg) : _____ (_____)
-----+-----
* (1) Orderable Item: ASPIRIN TAB
(2) Drug: ASPIRIN BUFFERED 325MG TAB
   Drug Message: INTEN
(3) *Dosage: 325 (MG)
   Verb: TAKE
   Dispense Units: 1
   Noun: TABLET
   *Route: ORAL (BY MOUTH)
   *Schedule: PRN
(4) Pat Instruct:
   Provider Comments:
   Instructions: TAKE ONE TABLET PO PRN
   SIG: TAKE ONE TABLET BY MOUTH AS NEEDED
(5) Patient Status: OPT NSC
(6) Issue Date: MAY 31,2016   (7) Fill Date: MAY 31,2016
(8) Days Supply: 90          (9) QTY (CAP): 90
   Provider ordered 3 refills
(10) # of Refills: 3          (11) Routing: WINDOW
(12) Clinic: 242
(13) Provider: XXXXX,XXXX
(14) Copies: 1

```

```

(15)      Remarks:
Entry By: XXXXX,XXXX                               Entry Date: 05/31/16 10:56:42

-----Enter ?? for more actions-----
BY Bypass          DC Discontinue          FL Flag/Unflag
ED Edit           FN Finish
Select Item(s): Quit// 8
DAYS SUPPLY: (1-365): 90//

```

**Table 42: MAXIMUM DAYS SUPPLY  
VA Product File (#50.68) vs Local Drug File (#50)**

Days Supply	VA Product File	Local Drug File	Outpatient Pharmacy 'Days Supply' Prompt
60	NULL	NULL	Days Supply (1-90): 60//
60	NULL	365	Days Supply (1-365): 60//
60	365	365	Days Supply (1-365): 60//
60	300	265	Days Supply (1-265): 60//
60	300	365	*****
60	150	NULL	Days Supply (1-150): 60//

The above table displays the MAXIMUM DAYS SUPPLY for files 50.68 and 50, and the effect on the days supply range displayed to the user in Outpatient Pharmacy. The maximum value for the days supply is always the lesser value if the MAXIMUM DAYS SUPPLY is populated in both files.

\*\*The default of 60 is set by the days supply established in the Rx Patient Status file (#53).



When entering a MAXIMUM DAYS SUPPLY value using the *Drug Enter/Edit* [PSS DRUG ENTER/EDIT], and the value is greater than the VA Product File value, the following message displays to the user:

*“Cannot be greater than NDF Maximum Days Supply: <value>”*



The MAXIMUM DAYS SUPPLY value in the Local Drug File (#50) should not exceed the MAXIMUM DAYS SUPPLY value in the VA Product File (#50.68).

## ePharmacy Menu

### [PSO EPHARMACY MENU]



The following menu items are locked with the PSORPH key: ePharmacy Medication Profile Division Preferences, Third Party Payer Rejects – View/Process and Third Party Payer Rejects – Worklist. The following menu item is locked with the [PSO TRICARE/CHAMPVA MGR key](#): TRICARE CHAMPVA Override Report. The following menu item are locked with the PSO EPHARMACY SITE MANAGER key: ePharmacy Site Parameters, ePharmacy Patient Comment.



The following menu items allow the user to perform ePharmacy specific functions:

- *Ignored Rejects Report*
- *ePharmacy Medication Profile (View Only)*
- *NDC Validation*
- *ePharmacy Medication Profile Division Preferences*
- *ePharmacy Site Parameters*
- *Third Party Payer Rejects – View/Process*
- *Third Party Payer Rejects – Worklist*
- *TRICARE CHAMPVA Override Report*
- *Pharmacy Productivity/Revenue Report*
- *ePharmacy Patient Comment*
- *View ePharmacy Rx*
- *Bypass 3/4 Day Supply*

DURs can occur when a third party determines there are safety issues involved with an Rx claim submission, and they can be due to high dose, drug interaction, and excessive utilization. The third party payer returns an NCPDP rejection code of 88 to indicate a DUR.

Refill Too Soon rejections happen when a third party payer determines that a prescription is being processed too early compared to the last time the prescription was filled. This can occur for several reasons, including third party payer's policy differs from VA policy, patient receiving medication at another pharmacy, or the provider may have increased the dosage or frequency of the medication. The third party payer returns an NCPDP rejection code of 79 to indicate a Refill Too Soon.

Prescriptions rejected as DUR and Refill Too Soon are moved to the REFILL TOO SOON/DUR REJECTS (Third Party) section of the Medication Profile. Prescriptions rejected as Reject Resolution Required, TRICARE, and CHAMPVA are displayed in the OTHER REJECTS PENDING RESOLUTION section of the Medication Profile. The user must resolve a rejected prescription before other actions such as release, label print, renew, and refill, among others, can be performed on it. Actions may still be taken on these prescriptions through CPRS.

## **Ignored Rejects Report**

### **[PSO IGNORED REJECTS REPORT]**

This option gives the user the ability to run a report for third-party rejects that have been ignored and consequently closed by the pharmacy users.

The user can select one of the following parameters to filter the data in the report:

- **DIVISION:** Allows the user to select one, some or all divisions.
- **DATE RANGE:** Allows the user to select a date range.
- **SORT BY:** Allows the user to choose different fields to sort the report by. Any combination can be selected:

- **PATIENT:** Allows the user to select a single, multiple or all patients
- **DRUG:** Allows the user to select a single, multiple or all drugs.
- **USER:** Allows the user to select a single, multiple or all users that have ignored third party rejects.

Even though the report displays the Billed Amount, that amount cannot be used to determine potential revenue. The Billed Amount shows what was billed to the third-party payer.

**Example: Ignored Rejects Report**

```
Select ePharmacy Menu Option: IR Ignored Rejects Report

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION: ^ALL

BEGIN REJECT DATE: 030606 (MAR 06, 2006)

END REJECT DATE: 061407 (JUN 14, 2007)

Enter the SORT field(s) for this Report:

1 - PATIENT
2 - DRUG
3 - USER

Or any combination of the above, separated by comma,
as in these examples:

2,1 - BY PATIENT, THEN DRUG
3,1,2 - BY USER, THEN BY PATIENT, THEN BY DRUG

SORT BY: PATIENT// 1,2

SORT BY PATIENT
THEN BY DRUG

You may select a single or multiple PATIENTS,
or enter ^ALL to select all PATIENTS.

PATIENT: ^ALL

You may select a single or multiple DRUGS,
or enter ^ALL to select all DRUGS.

DRUG: ^ALL

DEVICE: HOME// [Select Printer Device]
Ignored Rejects Report
Sorted by PATIENT, DRUG
Date Range: 03/06/2007 - 06/14/2007

Page: 1
Division: ANYTOWN
Run Date: Jun 15, 2007@15:26:35

Note: Billed amount is what was billed and
cannot be used to determine potential revenue.

-----
Rx#          DRUG          PATIENT          IGNORE DT IGNORED BY
-----
1192029A     SODIUM CHLORIDE 0.9% OPPATIENT,ONE(9999) 04/18/07 OPUSER,ONE
Insurance:   OPIinsurance One
Reject:      79:Refill Too Soon
Billed Amount: $14.19
Comments:    PATIENT WAS RUNNING OUT OF DRUG.
Payer Message: NEXT RFL 041907,DAYS TO RFL 1,LAST FILL 112706 VIA MAIL,REFILL
TOO SOON.
2990211     ALENDRONATE 70MG/75M OPPATIENT,TWO(0000) 05/20/07 OPUSER,ONE
Insurance:   OPIinsurance Two
-----
```

```

Reject:      88:DUR Reject Error
Billed Amount: $21.99
Comments: NEXT POSSIBLE FILL WAS TOO FAR OUT.
Payer Message: PLAN LIMIT EXCEEDED. NEXT POSSIBLE FILL: 05/29/2007

TOTAL: 2 Patients.

```

## ePharmacy Medication Profile (View Only) [PSO PMP]

Although the name indicates “ePharmacy Medication Profile”, this option can be used to list the medication profile for any patient on file. It will be used mostly by ePharmacy users for claims research purposes. This functionality is also available from the Reject Worklist through the Medication Profile (MP) action.

### Example 1: Medication Profile with default view

```

Patient Medication Profile      Jun 04, 2007@19:22:16      Page: 1 of 1
OPPATIENT, ONE                                     <A>
  PID: 000-12-5678                                HEIGHT (cm): 175.26 (11/21/2006)
  DOB: NOV 28,1946 (60)                            WEIGHT (kg): 108.18 (08/09/2007)
  SEX: MALE                                         EXP/CANCEL CUTOFF: 120 DAY
  CrCL: <Not Found> (CREAT: Not Found)              BSA (m2): 2.23

```

#	Rx#	DRUG [^]	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
1	100004112e	ALBUTEROL INHALER	1	A	04-21-07	04-21-07	11	7
2	300483e	ALPRAZOLAM 0.25MG TABS	30	DC	06-14-07	06-14-07	11	30
3	100004113e	AMITRIPTYLINE 10MG TAB	60	A	04-21-07	04-21-07	11	30
4	100004075e	CABERGOLINE 0.5MG TAB	7	E	05-18-05	05-18-05	6	7
5	100004155	DESIPRAMINE 25MG	90	S	02-23-07	02-11-07	11	90
6	100004022\$e	DIGOXIN 0.05MG/ML ELIX (60CC)	30	A	02-01-07	02-20-07	10	90
7	100004081	METAPROTERENOL 5% SOLUTION 10ML	15	DC	06-02-07	06-03-07	11	15
8	100004082	METAPROTERENOL 5% SOLUTION 10ML	10	DC	06-02-07	06-03-07	11	10
9	100004083e	METAPROTERENOL 5% SOLUTION 10ML	15	A>	06-02-07	06-23-07	11	15
10	100004079e	NICOTINE 10MG/ML SOLN NASAL SPRAY	1	A>	06-02-07	06-23-07	11	15
11	100003298	SIMVASTATIN 20MG TAB	5	DC	05-28-05	04-27-07	3	30
12	100003298A	SODIUM CHLORIDE 0.9% NASAL SOLN(O	1	A	05-10-07	05-10-07	11	30
13	100004070e	VALSARTAN 80MG TAB	5	S	06-28-07	05-31-07	11	30
PENDING (2 order)								
14	ALBUTEROL INHALER			RF	06-03-07		2	30
15	AMITRIPTYLINE 10MG TAB			RN	06-02-07		3	10
Non-VA MEDS (Not dispensed by VA) (1 order)								
16	TAMOXIFEN CITRATE 10MG TABS							

```

Date Documented: 06/04/07

Enter ?? for more actions
CV Change View          PI Patient Information  SIG Show/Hide SIG
GS Group by Status      PU Patient Record Update
Select: Quit//

```

The following options are available as Hidden Menu actions on this screen.

```

DR - Sort by Drug          LF - Sort by Last Fill
RX - Sort by Prescription  ID - Sort by Issue Date
RDD - Switch between LAST FILL and LAST RELD (release date)

```

After selecting a prescription on this screen, the *REJ* option is available on the “RX View” screen’s hidden menu. This action displays third party reject information for the prescriptions with third party rejects.

The *CV (Change View)* option allows the user to change some characteristics of the screen above. The user can also save and/or delete preferences, which will be used every time the user runs the *Medication Profile* option or invokes it from the Reject Worklist. The users can have one set of preferences for each Division defined.

### Example 2: Change View action

Enter CV at the “Select:” prompt to change the view preferences.

```

OPPROVIDER,ONE's current default view (ANYTOWN):
-----
EXP/CANCEL CUTOFF   : 120 DAYS
SORT BY             : DRUG NAME
SORT ORDER          : ASCENDING
DISPLAY SIG         : NO
GROUP BY STATUS     : YES
DISPLAY ORDER COUNT: YES

Delete this default view? NO// <Enter>

EXP/CANCEL CUTOFF: 120// 120 DAYS
SORT BY: DR// DRUG NAME
SORT ORDER: ASCENDING// ASCENDING
DISPLAY SIG: OFF// OFF
GROUP BY STATUS: OFF// ON
DISPLAY ORDER COUNT: ON// OFF

Save as your default View? NO// YES

Saving...OK!

```

### Example 3: Display SIG action

Enter SIG at the “Select:” prompt to toggle the Sig display on or off.

```

Patient Medication Profile   Jun 04, 2007@19:22:16           Page: 1 of 1
PID: 000-12-5678             HEIGHT (cm): 175.26 (11/21/2006)
DOB: NOV 28,1946 (60)        WEIGHT (kg): 108.18 (08/09/2007)
SEX: MALE                    EXP/CANCEL CUTOFF: 120 DAY
CrCL: <Not Found> (CREAT: Not Found)    BSA (m2): 2.23

# Rx#          DRUG [^]          QTY ST DATE   LAST   DAY
1 100004112e   ALBUTEROL INHALER          1 A 04-21-07 04-21-07 7
  SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
2 300483e     ALPRAZOLAM 0.25MG TABS     30 DC 06-14-07 06-14-07 30
  SIG: TAKE 2 CAPSULES BY MOUTH TAKE
3 100004113e   AMITRIPTYLINE 10MG TAB     60 A 04-21-07 04-21-07 30
  SIG: TAKE TWO BY MOUTH EVERY DAY
4 100004075e   CEFOPERAZONE              7 E 05-18-05 05-18-05 7
  SIG: TAKE 1 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
5 100004155    DESIPRAMINE 25MG          90 S 02-23-07 02-11-07 90
  SIG: TAKE ONE TABLET BY MOUTH TWICE A DAY
6 100004022$e  DIGOXIN 0.05MG/ML ELIX (60CC) 30 A 02-01-07 02-20-07 90
  SIG: 300 LB BY MOUTH EVERY FOUR HOURS
7 100004081    METAPROTERENOL 5% SOLUTION 10ML 15 DC 06-02-07 06-03-07 15
  SIG: TAKE 1 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
8 100004082    METAPROTERENOL 5% SOLUTION 10ML 10 DC 06-02-07 06-03-07 10
  SIG: TAKE 2 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
9 100004083e   METAPROTERENOL 5% SOLUTION 10ML 15 A 06-02-07 06-23-07 15
  SIG: TAKE 3 TABLESPOONFUL BY MOUTH Q4-6H AS NEEDED
  Enter ?? for more actions
CV Change View          PI Patient Information  SIG Show/Hide SIG
GS Group by Status      PU Patient Record Update
Select: Quit//

```

## NDC Validation

The initial validation of the NDC can be performed by a pharmacy technician. This functionality only applies to local fills that are not sent to OPAI. This function provides a pharmacy technician the ability to manually enter the prescription number or scan the bar code of the existing prescription label. Then the user may manually enter or scan the NDC of the stock bottle used to fill the prescription. When the system matches the NDC, confirmation is provided to the pharmacy tech and allows the technician to continue processing. However, if the system detects a mismatch and the NDC of the stock bottle has an associated entry in the synonym file, the NDC will be updated in Prescription file (#52) for the fill. The system will then prompt the technician to press enter to continue, a new label will be printed, the original electronic claim reversed, and a new claim submission will be transmitted with the new NDC. In the event that the revised NDC prompts an RTS/DUR rejection or a Reject Resolution Required rejection, the system will immediately send the item to the Reject Worklist.

In a case where the NDC entered is not defined for the drug in the Drug File, the system prompts the technician that a mismatch has occurred, and the prescription needs to be validated by a pharmacist. The system notes that the NDC had not been validated and allows the pharmacy tech to move to the next prescription. In the event of a change of NDC prompted a rejection, the system immediately sends the item to the Reject Worklist.

The releasing pharmacist will receive a notation that NDC has been validated by technician when processing. If the NDC change has prompted a claim reversal and produced an RTS/DUR rejection or a Reject Resolution Required rejection, which gives screens for reject processing, the pharmacist will be presented with a Reject Processing screen at release.

### Example: Matched NDC:

```
Select ePharmacy Menu Option: NV  NDC Validation

Prescription: 101310      DIPYRIDAMOLE 25MG TAB
Rx: 101310      Fill: 0      Patient: OPPATIENT,ONE
Drug: DIPYRIDAMOLE 25MG TAB      NDC: 00597-0017-10
Prescription label NDC: 00597-0017-10
Stock NDC: 00597001710

NDC match confirmed

Prescription:
```

### Example: Non-matched NDC:

```
Prescription: 101341      BIPERIDEN 2MG TAB
Rx: 101341      Fill: 0      Patient: OPPATIENT,ONE
Drug: BIPERIDEN 2MG TAB      NDC: 00044-0120-05
Prescription label NDC: 00044-0120-05
Stock NDC: 00044012006
Due to a change in NDC, a claims reversal and resubmission will be performed.

Veteran Prescription 101341 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
E PAYABLE

Prescription:
```

## ePharmacy Medication Profile Division Preferences [PSO PMP SITE PREFERENCES]

This option allows the user to specify certain settings that will control how the *ePharmacy Medication Profile* option works for that user. Below is the list of settings that can be specified through this option:

- **EXP/CANCEL CUTOFF:** Indicates the maximum number of days for an expired and/or discontinued prescription to be cut from the profile.
- **SORT BY:** Indicates the default sorting column. The options are: Rx#, Drug Name, Issue Date or Last Fill Date.
- **SORT ORDER:** Indicates the order in which the column above will be sorted: Ascending or Descending.
- **DISPLAY SIG:** Indicates whether the SIG should be displayed under each prescription or if it should be hidden.
- **GROUP BY STATUS:** Indicates whether the list should be grouped by status (Active, Discontinued, Hold, etc....) or not.
- **DISPLAY ORDER COUNT:** Indicates whether the number of orders under each group should be displayed beside the group name. Example \_\_\_\_\_ACTIVE (3 orders)\_\_\_\_\_

```
Select ePharmacy Menu Option: PF ePharmacy Medication Profile Division Preferences
```

```
ANYTOWN ISC's current default view:
```

```
-----  
EXP/CANCEL CUTOFF : 200 DAYS  
SORT BY           : Rx#  
SORT ORDER        : ASCENDING  
DISPLAY SIG        : ON  
GROUP BY STATUS   : OFF  
DISPLAY ORDER COUNT: OFF
```

```
Delete this default view? NO// <Enter>
```

```
EXP/CANCEL CUTOFF: 200// <Enter> DAYS
```

```
SORT BY: RX// <Enter> Rx#
```

```
SORT ORDER: ASCENDING// ^EXP
```

```
EXP/CANCEL CUTOFF: 200// 120 DAYS
```

```
SORT BY: RX// <Enter> Rx#
```

```
SORT ORDER: ASCENDING// <Enter>
```

```
DISPLAY SIG: ON// <Enter>
```

```
GROUP BY STATUS: OFF// <Enter>
```

```
DISPLAY ORDER COUNT: OFF//<Enter>
```

```
Saving...OK!
```



If there is a set of preferences already on file for the division the user is logged under, the option to delete such preferences is presented to the user as seen above.

## ePharmacy Site Parameters

The ePharmacy Site Parameters file (#52.86) stores the ePharmacy Site parameters by division. The ePharmacy Site Parameters [PSO ePHARM SITE PARAMETERS] option can be accessed from the ePharmacy Menu [PSO EPHARMACY MENU].



This option requires the PSO EPHARMACY SITE MANAGER security key.

The following site parameters are definable in the General Parameters section:

- **REJECT WORKLIST DAYS:** This is the number of days an unresolved reject can remain on the Third Party Payer Rejects – Worklist without being included in the nightly reject worklist alert mail message.
- **EPHARMACY RESPONSE PAUSE:** This defines the length of an optional pause after the display of the claim transmission messages for rejects resolved from the Reject Worklist. The pause can be set to a value from zero (0) to three (3) seconds with a default of two (2) seconds. The delay appears at the end of claims transmission messaging and will allow the pharmacist to read the transmission messages before displaying the next screen.
- **IGNORE THRESHOLD:** This is the threshold value that is compared to the gross amount due for a rejected claim. If the gross amount due is greater than or equal to the IGNORE THRESHOLD, the EPHARMACY SITE MANAGER security key is required to ignore the reject. The value can be blank which will turn off the feature. If the value is set to 0, then no rejects can be ignored unless the user has the security key.

In the Transfer Reject Parameters section, the user may enter as many reject codes as they desire along with the manner in which each will be allowed to be placed on the Third Party Payer Rejects – Worklist. This is what appears in the Transfer Reject Parameters section:

- **REJECT CODE:** A valid third party claim reject code should be entered. A listing of these codes is provided when double question marks (??) are entered for this prompt. Valid codes are contained within the BPS NCPDP REJECT CODES file (#9002313.93). Also, a value defined in this field triggers definition of USER field (#2) and DATE OF LAST UPDATE field (#3).
- **AUTO SEND:** This prompt is a companion to the REJECT CODE prompt. Enter YES to allow the entered REJECT CODE to be automatically placed on the Pharmacy Reject Worklist or NO to require Outpatient Pharmacy Electronic Claims Coordinator (OPECC) intervention to do so. A null value will be treated the same as entering NO in this field.

In the Reject Resolution Required Parameters section, the user may enter as many reject codes as they desire along with the manner in which each will be allowed to be placed on the Third Party Payer Rejects – Worklist. This is what appears in the Reject Resolution Required Parameters section:

- **REJECT RESOLUTION REQUIRED CODE:** A valid third party claim reject code should be entered. A listing of these codes is provided when double question marks (??)

are entered for this prompt. Valid codes are contained within the BPS NCPDP REJECT CODES file (#9002313.93).

- **THRESHOLD AMOUNT:** This prompt is a companion to the Reject Resolution Required Code prompt. The threshold amount is compared to the gross amount due for the prescription. If the gross amount due is equal to or greater than the threshold amount, then the gross amount due has met the threshold.

If a reject code is specified as a reject resolution required code, and that reject code is received from a third party payer, the system will evaluate the prescription for Reject Resolution Required processing. The prescription will not be filled if these criteria are met: original fill, Veteran eligibility, not released, the reject is on the Reject Resolution Required list for the current division, and the total gross amount of the prescription is at or above the specified threshold.

The short format displays the status in an abbreviated form. The following is an explanation of the Site Parameter actions:

**Table 43: Site Parameters Actions**

Action	Description
Edit All Parameters [EA]	Edit all parameters on the screen. This action is a compilation of Edit General Parameters [EG], Edit Transfer Reject Code [ET], and Edit Rej. Resolution Required Code [ER].
Edit General Parameters [EG]	Edit the General Parameters section of the screen. Add, edit, or delete data.
Edit Transfer Reject Code [ET]	Edit the Transfer Reject Code section of the screen. Add, edit, or delete reject codes and the associated auto-send parameter.
Edit Rej. Resolution Required Code [ER]	Edit the Edit Rej. Resolution Required Code section of the screen. Add, edit, or delete reject codes and the associated threshold parameter.
Copy Parameters [CP]	The parameters for the division displayed on the screen will be copied to one or more selected divisions. All parameters for the destination divisions are overwritten when the copy action is used.
Display Site Parameters [DP]	Select multiple divisions to display parameters
Change Division [CD]	Select a division to display on the screen
Exit [EX]	Exit the ePharmacy Site Parameters option

**Example: ePharmacy Site Parameter Screen**

```
ePharmacy Site Parameters      Jun 19, 2015@15:28:44      Page:    1 of    2
Pharmacy Division: CHEYENNE VAM&ROC

Pharmacy Division: CHEYENNE VAM&ROC
General Parameters
Reject Worklist Days: 1
ePharmacy Response Pause: 0
Ignore Threshold: 1

Transfer Reject Codes
Code  Description                               Auto-Send
-----
```



```

56 Non-Matched Prescriber ID NO
57 Non-Matched PA/MC Number NO
58 Non-Matched Primary Prescriber NO
60 Product/Service Not Covered For Patient Age YES
61 Product/Service Not Covered For Patient Gender YES
62 Patient/Card Holder ID Name Mismatch YES

+ Enter ?? for more actions
EA Edit All Parameters CP Copy Parameters
EG Edit General Parameters DP Display Site Parameters
ET Edit Transfer Reject Code CD Change Division
ER Edit Rej. Resolution Required Code EX Exit
Select Action: Next Screen//

```

### Example: Edit General Parameters (EG) action

```

Select Action: Next Screen// EG Edit General Parameters
REJECT WORKLIST DAYS: 1// ??
The number of days an uncommented reject can remain on the reject
worklist without being included in the nightly reject worklist alert
mail message.

REJECT WORKLIST DAYS: 1//
EPHARMACY RESPONSE PAUSE: 2// ??
This field contains the number of seconds the claim status message will
be displayed on the screen after the transmission message. The number
of seconds to delay may be from 0 to 3 with the default of 2 seconds.

EPHARMACY RESPONSE PAUSE: 2//
IGNORE THRESHOLD: 1// ??
The value of the Ignore Threshold field is compared to the Gross Amount
Due of the prescription.
If the Gross Amount Due is greater than or equal to the value of this
field, then the user must hold the EPHARMACY SITE MANAGER security key in
order to Ignore the reject.
If the value of this field is set to 0, then no rejects can be Ignored
unless the user has the security key.
If the value of this field is left blank, the Gross Amount Due will not
be considered.

IGNORE THRESHOLD: 1//

```

### Example: ET (Edit Transfer Reject Code) action

```

Select Action: Next Screen// ET Edit Transfer Reject Code

All transfer rejects will automatically be placed on the Third Party Payer
Rejects - Worklist if the reject code is defined in the site parameter file
and the AUTO SEND parameter is set to yes. The OPECC must manually transfer
the reject if the reject code is defined in the site parameter file
and the AUTO SEND parameter is set to no. (To be used when Pharmacy can
possibly correct a locally filled or CMOP Rx.)

TRANSFER REJECT CODE: ??

Choose from:
10 M/I Patient Gender Code
11 M/I Patient Relationship Code
12 M/I Place of Service
13 M/I Other Coverage Code
14 M/I Eligibility Clarification Code
15 M/I Date of Service
16 M/I Prescription/Service Reference Number
17 M/I Fill Number
18 M/I Metric Quantity
.
.
.
TRANSFER REJECT CODE: 81 Claim Too Old

```

```

You are entering a new transfer reject code - 81.
TRANSFER REJECT CODE: 81//
AUTO SEND: NO// ??
    Enter YES to allow the Third Party claim reject code to be
    automatically placed on the Pharmacy Reject Worklist or NO
    to require Outpatient Pharmacy Electronic Claims
    Coordinator (OPECC) intervention to do so. A null value
    will be treated the same as entering NO in this field.

Choose from:
    0          NO
    1          YES
AUTO SEND: NO//

ANOTHER TRANSFER REJECT CODE:

```

### Example: ER (Edit Rej. Resolution Required Code) action

```

Select Action: Next Screen// ER   Edit Rej. Resolution Required Code

All Reject Resolution Required reject codes will automatically be placed
on the Third Party Payer Rejects - Worklist. This parameter applies to
rejects for original unreleased fills only. Prescriptions will not be filled
until the rejects identified by the Reject Resolution parameter are resolved.

REJECT RESOLUTION REQUIRED CODE: ??

Choose from:
10      M/I Patient Gender Code
11      M/I Patient Relationship Code
12      M/I Place of Service
13      M/I Other Coverage Code
14      M/I Eligibility Clarification Code
15      M/I Date of Service
16      M/I Prescription/Service Reference Number
17      M/I Fill Number
18      M/I Metric Quantity
19      M/I Days Supply
20      M/I Compound Code
21      M/I Product/Service ID
22      M/I Dispense As Written (DAW)/Product Selection Code
23      M/I Ingredient Cost Submitted
24      M/I SALES TAX
25      M/I Prescriber ID
26      M/I Unit Of Measure
27      Product Identifier not FDA/NSDE Listed
28      M/I Date Prescription Written
29      M/I Number Of Refills Authorized
.. . .

REJECT RESOLUTION REQUIRED CODE: 27          Product Identifier not FDA/NSDE Listed
You are entering a new reject resolution required code - 27.
REJECT RESOLUTION REQUIRED CODE: 27//
DOLLAR THRESHOLD: 0// ??
    If a Reject Resolution Required Code is received on an ECME claim reject,
    the value of this field is compared to the Gross Amount Due of the
    prescription.

    If the Gross Amount Due is greater or equal to the value of this field
    then the reject is transferred to the Third Party WorkList for Reject
    Resolution Required (RRR) processing.

    If the value of this field is left blank or set to 0, then all rejects
    with the RRR reject code will be transferred to the Third Party Worklist
    for RRR processing.

DOLLAR THRESHOLD: 0//

ANOTHER REJECT RESOLUTION REQUIRED CODE:

```

### Example: CP (Copy Parameters) action

```
Select Action: Next Screen// CP   Copy Parameters

The parameters will be copied from CHEYENNE VAM&ROC Division.

Select the Pharmacy Division(s) to overwrite.
You may select a single or multiple Pharmacy Divisions,
or enter ^ALL to select all Pharmacy Divisions.

Select a Pharmacy Division to be overwritten: ??

Choose from:
ANYTOWN CLINIC      442GC
ANYTOWN CLINIC      442GD
MOC - ANYTOWN       442HK
ANYTOWN CLINIC      442GB

Select a Pharmacy Division to be overwritten: FORT COLLINS CLINIC   442GC

ANOTHER ONE:

The parameters from Pharmacy Division CHEYENNE VAM&ROC
will overwrite the parameters in Pharmacy Division:

ANYTOWN CLINIC

Do you want to continue? NO//
```

### Third Party Payer Rejects – View/Process [PSO REJECTS VIEW/PROCESS]

This option provides information about rejects that have been on the Third Party Payer Rejects – Worklist. This option allows the user to find, display and reopen rejects previously resolved from the Third Party Payer Rejects – Worklist in order to take action on them again.

The user can choose to view rejects for one, multiple, or all Outpatient Pharmacy Divisions.

#### Example: Viewing and Resolving Open Rejects

```
Select ePharmacy Menu Option: VP Third Party Payer Rejects - View/Process

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION: ^ALL
```

The user can select one of the following selections to filter the data displayed:

```
DATE RANGE: Selects a date range (Default: Last 90 days).
BEGIN REJECT DATE: T-90// <Enter> (MAR 09, 2007)
END REJECT DATE: T// <Enter> (JUN 07, 2007)

(P)ATIENT: Selects a single patient, multiple patients, or all patients.
(D)RUG: Selects a single drug, multiple drugs, or all drugs.
(R)x: Selects single or multiple prescription numbers, or ECME number preceded by "E.".
(I)NSURANCE: Selects a single insurance, multiple insurances, or all insurances.
(C) REJECT CODE: Selects a single reject code, multiple reject codes, or all reject codes.
```

```

Select one of the following:

      P      PATIENT
      D      DRUG
      R      Rx
      I      INSURANCE
      C      Reject Code

By (P)atient, (D)rug, (R)x, (I)nsurance or Reject (C)ode: P// INSURANCE

You may select a single or multiple INSURANCES,
or enter ^ALL to select all INSURANCES.

INSURANCE: TEST
  1  TEST INS PLUS      111 STREET ADDRESS      CITY      MONTANA      Y
  2  TEST INSURANCE    123 MAIN ST      CHICAGO    ILLINOIS      Y
CHOOSE 1-2: 2  TEST INSURANCE    123 MAIN ST      CHICAGO    ILLINOIS
Y  TEST INSURANCE

ANOTHER ONE:

```

Next, the user can choose to display either Unresolved, Resolved, or Both types of rejects.

**Example: Viewing and Resolving Open Rejects (continued)**

```

Select one of the following:

      U      UNRESOLVED
      R      RESOLVED
      B      BOTH

(U)NRESOLVED, (R)ESOLVED or (B)OTH REJECT statuses: B// <Enter> BOTH
Please wait...

Rejects Processing Screen      Nov 21, 2005@08:27:37      Page: 1 of 1
Divisions: ALL
Selection: ALL REJECTS FOR TEST INS
# Rx#      PATIENT (ID) [^]      DRUG      REASON
1 100003872  OPPATIENT,FOUR(1322P      A AND Z OINTMENT      DUR:
Payer Message:
2 100003873  OPPATIENT,FOUR(1322P      PHYTONADIONE 5MG TAB 79 :REFILL TOO SO
Payer Message:
3 100003873  OPPATIENT,FOUR(1322P      PHYTONADIONE 5MG TAB DUR:
Payer Message:
4 100003785  OPPATIENT,TEN(3222)      ALBUMIN 5% 250ML      DUR:
Payer Message:
5 100003882  OPPATIENT,TEN(3222)      ALBUTEROL INHALER      DUR:
Payer Message:
6 100003884  OPPATIENT,TEN(3222)      TEMAZEPAM 15MG CAP      DUR:
Payer Message:

      Select the entry # to view or ?? for more actions
DR  Sort by Drug      RE  Sort by Reason      RX  Sort by Prescription
PA  Sort by Patient    RF  Screen Refresh      GI  Group by Insurance
Select: Quit//

```

The following options are available on the screen above:

- DR – Sorts the list by the drug name.
- PA – Sorts the list by the patient’s last name.
- RE – Sorts the list by the reject reason.
- RF – Refreshes the screen. (This selection retrieves DUR/ REFILL TOO SOON rejects that happened after the screen was originally populated.)

- RX – Sorts the list by Prescription number.
- GI – Groups the rejects by Insurance Company name.

The following hidden actions are also available (excluding standard ListManager hidden actions):

- TRI (Show/Hide TRICARE) – Toggle that indicates whether to display or hide TRICARE rejections.
- CVA (Show/Hide CHAMPVA) – Toggle that indicates whether to display or hide CHAMPVA rejections.
- PSX (Print to Excel) – Allows the current display list of rejection to output in a format that can easily be imported into a spreadsheet.



The following two sets of characters denote the order by which the list is being sorted: [^] for ascending and [v] for descending. The order inverts every time the user selects the same column by which the list is already ordered. Thus, if the list is currently ordered by Patient in an ascending order ([^]) and the user types “PA”, the list will be re-sorted in descending order and the order indicator will change to ([v]).

The user selects a specific record to display all relevant information about the prescription and the claim submitted to the payer.

#### Example: Viewing and Resolving Open Rejects (continued)

```

Reject Information(Veteran)Nov 21, 2005@08:29:30      Page: 1 of 2
Division :ANYTOWN  NPI#: 1234567890  NCPDP: 4150001P  TAX ID: XX-XXXXXXX
Patient  : OPPATIENT,FOUR (000-01-0000P)  Sex: M      DOB: JAN 13,1922(83)
Rx#     : 100003873/0      ECME#: 000000504455  Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA      NDC Code: 54629-0600-01

REJECT Information (Veteran)
Reject Type      : 79 - REFILL TOO SOON received on NOV 15, 2005@14:13:51
Reject Status   : OPEN/UNRESOLVED
Next Avail Fill: NOV 20,2005
Payer Adtl Msg : NEXT RFL 111805,DAYS TO RFL 3,LAST FILL 101805 AT YOUR PHARM,REFILL TOO SOON
Reason Code    : ER (OVERUSE PRECAUTION )
DUR Text       : RETAIL

OTHER REJECTS
29 - M/I Number Refills Authorized
39 - M/I Diagnosis Code

INSURANCE Information
Insurance      : TEST INS
Contact       : 1-800-555-5050
BIN / PCN     : RXINS / XXXXXXXXXXXXXXXX
+ Enter ?? for more actions
VW View Rx          IGN Ignore Reject          OVR Submit Override Codes
MP Medication Profile  RES Resubmit Claim          CSD Change Suspense Date
Select: Next Screen// IGN Ignore Reject

```

These options are available on the screen above:

- VW (View Rx) – Takes the user to the *View Prescription* option to review details for that prescription.
- MP (Medication Profile) – Invokes the patient’s list of medication.
- IGN (Ignore Reject) – Allows the user to close or resolve the DUR/REFILL TOO SOON Reject or the Reject Resolution Required Reject without resubmission to the payer. The user will be required to enter a free-text comment and his/her electronic signature. Comments from Ignored rejects will be displayed in the ECME Reject Log (Activity Log), including when a TRICARE or CHAMPVA non-billable prescription with open pseudo-rejection codes of eT or eC is ignored from the Reject Notification screen. If the gross amount due exceeds the Ignore Threshold, the user must have security key EPHARMACY SITE MANAGER to complete the ignore action.
- RES (Resubmit Claim) – Allows the user to re-submit the claim to the payer. This will automatically mark the reject resolved. The RES action can also be used to submit a claim for TRICARE and CHAMPVA non-billable prescriptions with open pseudo-rejection codes of eT and eC. The Reject Information screen only displays the RESUBMISSION indicator if the claim was resubmitted from the ECME User Screen.
- OVR (Submit Override Codes) – Allows the user to re-submit the claim by entering NCPDP override codes, which shall trigger a new claim submission be sent to the payer.
- CSD (Change Suspense Date) – Allows the user to change the fill date for suspended prescriptions. The user will not be allowed to enter a suspense date that is greater than the fill date plus 90 days. Dates where the fill date plus 90 days is greater than the expiration date will not be allowed entry, and dates prior to issue date will not be allowed. If the Bypass has been set for a prescription and the user performs the action CSD (Change Suspense Date) an alert will display: Currently Bypass 3/4 Day Supply is set to YES. If you continue, the prescription fill will transmit to CMOP on the new Suspense Date entered.
- DC (Discontinue Rx) – C (Discontinue Rx) – Allows the user to discontinue a TRICARE, CHAMPVA or Veteran prescription. Note that this is primary action when the prescription is for a TRICARE or CHAMPVA patient and a hidden action when the prescription is for a Veteran patient.

Hidden Actions:

- COM (Add Comments) – Allows the user to add reject-specific comments or patient specific comments. These comments are local to the Reject Worklist and View/Process options and are not transmitted to ECME. The reject-specific comments also display in the ECME Log section of the Activity Log and the patient-specific comments display on the reject notification screen.
- CLA (Submit Clarif. Code) – Allows the user to re-submit a claim with Clarification Codes.

- ED (Edit Rx) – Allows the user to edit the prescription. If, after editing the prescription, the fill date is equal to the current date or is in the future and the prescription is not already suspended, the user will get the LABEL prompt, which will allow the user to suspend the prescription.
- DC (Discontinue Rx) – Allows the user to discontinue a TRICARE, CHAMPVA or Veteran prescription. Note that this is primary action when the prescription is for a TRICARE or CHAMPVA patient and a hidden action when the prescription is for a Veteran patient.
- PA (Submit Prior Auth.) – Allows the user to re-submit a claim with Prior Authorization information.
- SMA (Submit Multiple Actions) – Allows the user to resubmit a claim with multiple actions, including the following information: Prior Authorization, Submission Clarification Code, Reason for Service Code, Professional Service Code, and Result of Service Code.
- ARI (View Addtnl Rej Info) – Allows the user to display additional reject information from the payer, if available.
- SDC (Suspense Date Calculation) – Allows the user to calculate a new suspense date based on Last Date of Service and Last Days Supply. The suspense date calculation will also consider the last prescription fill for the same patient and product regardless of prescription number, to allow calculation of a suspense date for a new prescription.
- VER (View ePharmacy Rx) – Allows the user to view and print information for one prescription, combining information from Outpatient Pharmacy, Integrated Billing and ECME.
- ECS (Edit Claim Submitted) – Allows the user to resubmit a claim with specified NCPDP fields. The user may select a date of service if the prescription is released. The action is available if the claim response was rejected or payable.

**Example: Viewing and Resolving Open Rejects (continued)**

```

Enter your Current Signature Code:      SIGNATURE VERIFIED
Comments: Changed quantity
    When you confirm this REJECT will be marked RESOLVED.
Confirm? ? NO// Y YES                [Closing...OK]
  
```

The following is a sample of the ECME Activity Log update that occurs when a reject is resolved:

**Example: ECME Activity Log entry: Reject Resolved**

```

Rx Activity Log          Nov 21, 2005@09:43:33          Page: 3 of 3
OPPATIENT, FOUR
  PID: 000-01-0000P          Ht (cm) : _____ (_____)
  DOB: JAN 13,1922 (83)      Wt (kg) : _____ (_____)
+
1  11/15/05@14:13:52  ORIGINAL          OPPHARMACIST4, THREE
Comments: Submitted to ECME:REJECT WORKLIST-DUR OVERRIDE CODES (DD/M0/1B) -E
PAYABLE
  
```

```

ECME REJECT Log:
#   Date/Time Rcvd       Rx Ref   Reject Type   STATUS   Date/Time Resolved
=====
1   12/11/05@19:03:31   ORIGINAL DUR           RESOLVED 12/12/05@16:45:21
Comments: CLAIM RE-SUBMITTED
2   5/30/06@19:13:57   REFILL 2 DUR           RESOLVED 5/31/06@15:58:32
Comments: CLAIM RE-SUBMITTED

      Enter ?? for more actions

Select Action:Quit//

```

## Third Party Payer Rejects – Worklist [PSO REJECTS WORKLIST]

This option gives the user the ability to process Third Party Payer Rejects, CHAMPVA Non-billable rejects and TRICARE Non-billable rejects for one, multiple, or all Outpatient Pharmacy Divisions. The user is also able to process rejects for dual eligible patients. Only OPEN/UNRESOLVED rejects that have clinical significance, such as DUR, Reject Resolution Required, and Refill Too Soon, and rejects transferred from the ECME User Screen, are added to the Worklist. Once the reject is marked CLOSED/RESOLVED, it is automatically removed from the Worklist.

### Example: Resolving Open Rejects

```

Select Rx (Prescriptions) Option: EPHARMACY Menu

IR   Ignored Rejects Report
MP   ePharmacy Medication Profile (View Only)
NV   NDC Validation
PF   ePharmacy Medication Profile Division Preferences
SP   ePharmacy Site Parameters
VP   Third Party Payer Rejects - View/Process
WL   Third Party Payer Rejects - Worklist
TC   TRICARE CHAMPVA Override Report
PR   Pharmacy Productivity/Revenue Report
PC   ePharmacy Patient Comment
VER  View ePharmacy Rx

Select ePharmacy Menu Option: WL Third Party Payer Rejects - Worklist

You may select a single or multiple DIVISIONS,
or enter ^ALL to select all DIVISIONS.

DIVISION: ^ALL

Insurance Rejects - Worklist   Nov 09, 2010@11:24:10           Page: 1 of 1
Divisions: ALL
Selection: ALL UNRESOLVED REJECTS
# Rx#   PATIENT (ID) [^]   DRUG   REASON
1 100003521  OPPATIENT,TWELVE(5444)  ACETYLCYSTEINE 20% 3 79 :REFILL TOO SO
Payer Message: PLAN = 8906 NEXT FILL: 20050429
2 100003521  OPPATIENT,TWELVE(5444)  ACETYLCYSTEINE 20% 3 79 :REFILL TOO SO
Payer Message: RTS - Rx: 9306343 DT: 31-MAR-2005 DS: 30 RD: 23-APRIL 2005
REJECT RESOLUTION REQUIRED
3 100003872  OPPATIENT,FOUR(1322P)  A AND Z OINTMENT 07 :M/I Cardholde
Payer Message:
CHAMPVA - Non-DUR/RTS
4 101358  OPCVACARE,ONE(7895)  BACLOFEN 10MG TABS 07 :M/I Cardholde
Payer Message:
5 100923  OPCVACARE,TWO(4933)  LORAZEPAM 1MG TAB 07 :M/I Cardholde

```



```

Payer Message:
                TRICARE - Non-DUR/RTS
6 101359          OPTRICARE,ONE(7894)          BACLOFEN 10MG TABS    07 :M/I Cardholde
Payer Message:
7 100924          OPTRICARE,TRI(4932)          LORAZEPAM 1MG TAB    07 :M/I Cardholde
Payer Message:
                OTHER REJECTS
8 101173          OPPATIENT,THREE(9877)          FENOPROFEN 300MG CAP 08 :M/I Person Co
Payer Message:

```

The following options are available on the screen above:

- DR – Sorts the list by the drug name.
- PA – Sorts the list by the patient’s last name.
- RE – Sorts the list by the reject reason.
- RF – Refreshes the screen. (This selection retrieves DUR/ REFILL TOO SOON rejects that happened after the screen was originally populated.)
- RX – Sorts the list by Prescription number.
- GI – Groups the rejects by Insurance Company name.

The following hidden actions are also available (excluding standard ListManager hidden actions):

- TRI (Show/Hide TRICARE) - When toggled to Show, TRICARE Non-DUR/RTS rejects will be automatically displayed at the end of the listing. Toggling the TRI action to Hide will remove them from the screen.
- CVA (Show/Hide CHAMPVA) - When toggled to Show, CHAMPVA Non-DUR/RTS rejects will be automatically displayed at the end of the listing. Toggling the CVA action to Hide will remove them from the screen.
- PSX (Print to Excel) – Allows the current display list of rejection to output in a format that can easily be imported into a spreadsheet.

After selecting a reject from the list, the following screen is displayed

**Example: Resolving Open Rejects (continued)**

```

Reject Information(Veteran)Nov 21, 2005@09:51:15          Page: 1 of 1
Division :ANYTOWN  NPI#: 1234567890  NCPDP: 4150001P  TAX ID: XX-XXXXXXX
Patient  : OPPATIENT,FOUR(000-01-0000P)  Sex: M          DOB: JAN 13,1922(83)
Rx#      : 100003872/0          ECME#: 000000504454  Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA          NDC Code: 54629-0600-01

REJECT Information BACK-BILL
Reject Type   : 88 - DUR REJECT received on NOV 15, 2005@14:11:51
Reject Status : OPEN/UNRESOLVED
Next Avail Fill: NOV 18, 2005
Payer Adtl Msg : DUR Reject Error
Reason Code   : UNNECESSARY DRUG
DUR Text     : RETAIL

INSURANCE Information
Insurance    : TEST INS
Contact     :
BIN / PCN   : 741852 / XXXXXXXXXXXX

```

```

Group Number : 12454
Cardholder ID : 000011322P

Enter ?? for more actions
VW View Rx          IGN Ignore Reject      OVR Submit Override Codes
MP Medication Profile  RES Resubmit Claim    CSD Change Suspense Date
Select: Quit// OVR Submit Override Codes
-----example continues-----

```

These options are available on the screen above:

- VW (View Rx) – Takes the user to the *View Prescription* option to review details for that prescription.
- MP (Medication Profile) – Invokes the patient’s list of medication.
- IGN (Ignore Reject) – Allows the user to close or resolve the DUR/REFILL TOO SOON Reject or the Reject Resolution Required Reject without resubmission to the payer. The user will be required to enter a free-text comment and his/her electronic signature. If the gross amount due exceeds the Ignore Threshold, the user must have security key EPHARMACY SITE MANAGER to complete the ignore action.
- RES (Resubmit Claim) – Allows the user to re-submit the claim to the payer. This will automatically mark the reject resolved. The RES action can also be used to submit a claim for TRICARE and CHAMPVA non-billable prescriptions with open pseudo-rejection codes of eT and eC. The Reject Information screen only displays the RESUBMISSION indicator if the claim was resubmitted from the ECME User Screen.
- OVR (Submit Override Codes) – Allows the user to re-submit the claim by entering NCPDP override codes, which shall trigger a new claim submission be sent to the payer.
- CSD (Change Suspense Date) – Allows the user to change the fill date for suspended prescriptions.
- DC (Discontinue Rx) – Allows the user to discontinue a TRICARE, CHAMPVA or Veteran prescription. Note that this is primary action when the prescription is for a TRICARE or CHAMPVA patient and a hidden action when the prescription is for a Veteran patient.

The following hidden actions are also available (excluding standard ListManager hidden actions):

- TRI (Show/Hide TRICARE) – Toggle that indicates whether to display or hide TRICARE rejections.
- CVA (Show/Hide CHAMPVA) – Toggle that indicates whether to display or hide CHAMPVA rejections.
- PSX (Print to Excel) – Allows the current display list of rejection to output in a format that can easily be imported into a spreadsheet.
- COM (Add Comments) – Allows the user to add reject specific comments or patient specific comments. These comments are local to the Reject Worklist and View/Process options and are not transmitted to ECME. The reject-specific comments also display in

the ECME Log section of the Activity Log and the patient-specific comments display on the reject notification screen.

- CLA (Submit Clarif. Code) – Allows the user to re-submit a claim with Clarification Codes.
- ED (Edit Rx) – Allows the user to edit the prescription.
- DC (Discontinue Rx) – Allows the user to discontinue a TRICARE, CHAMPVA or Veteran prescription. Note that this is primary action when the prescription is for a TRICARE or CHAMPVA patient and a hidden action when the prescription is for a Veteran patient.
- PA (Submit Prior Auth.) – Allows the user to re-submit a claim with Prior Authorization information.
- ARI (View Addtnl Rej Info) – Allows the user to display additional reject information from the payer, if available.
- SDC (Suspense Date Calculation) – Allows the user to calculate a new suspense date.
- SMA (Submit Multiple Actions) – Allows the user to resubmit a claim with multiple actions.
- ECS (Edit Claim Submitted) – Allows the user to resubmit a claim with specified NCPDP fields.
- The user may select a date of service if the prescription is released. The action is available if the claim response was rejected or payable.

When a claim is rejected, typically the Payer returns a “Reason for Service Code”, which becomes the default for the “Reason for Service Code” prompt. The user can use this reason to then select which code is entered for “Professional Service Code” and “Result of Service Code”.

Available codes for “Professional Service Code” include:

<b><u>Code</u></b>	<b><u>Description</u></b>
00	NO INTERVENTION
AS	PATIENT ASSESSMENT
CC	COORDINATION OF CARE
DE	DOSING EVALUATION/DETERMINATION
DP	DOSAGE EVALUATED
FE	FORMULARY ENFORCEMENT
GP	GENERIC PRODUCT SELECTION
M0	PRESCRIBER CONSULTED
MA	MEDICATION ADMINISTRATION
MB	OVERRIDING BENEFIT
MP	PATIENT WILL BE MONITORED
MR	MEDICATION REVIEW
P0	PATIENT CONSULTED
PA	PREVIOUS PATIENT TOLERANCE

PE	PATIENT EDUCATION/INSTRUCTION
PH	PATIENT MEDICATION HISTORY
PM	PATIENT MONITORING
PT	PERFORM LABORATORY REQUEST
R0	PHARMACIST CONSULTED OTHER SOURCE
RT	RECOMMENDED LABORATORY TEST
SC	SELF-CARE CONSULTATION
SW	LITERATURE SEARCH/REVIEW
TC	PAYER/PROCESSOR CONSULTED
TH	THERAPEUTIC PRODUCT INTERCHANGE
ZZ	OTHER ACKNOWLEDGEMENT

Available codes for “Result of Service Code” include:

<b>Code</b>	<b>Description</b>
00	NOT SPECIFIED
1A	FILLED AS IS, FALSE POSITIVE
1B	FILLED PRESCRIPTION AS IS
1C	FILLED, WITH DIFFERENT DOSE
1D	FILLED, WITH DIFFERENT DIRECTIONS
1E	FILLED, WITH DIFFERENT DRUG
1F	FILLED, WITH DIFFERENT QUANTITY
1G	FILLED, WITH PRESCRIBER APPROVAL
1H	BRAND-TO-GENERIC CHANGE
1J	RX-TO-OTC CHANGE
1K	FILLED, WITH DIFFERENT DOSAGE FORM
2A	PRESCRIPTION NOT FILLED
2B	NOT FILLED, DIRECTIONS CLARIFIED
3A	RECOMMENDATION ACCEPTED
3B	RECOMMENDATION NOT ACCEPTED
3C	DISCONTINUED DRUG
3D	REGIMEN CHANGED
3E	THERAPY CHANGED
3F	THERAPY CHANGED - COST INCREASE ACKNOWLEDGED
3G	DRUG THERAPY UNCHANGED
3H	FOLLOW-UP REPORT
3J	PATIENT REFERRAL
3K	INSTRUCTIONS UNDERSTOOD
3M	COMPLIANCE AID PROVIDED
3N	MEDICATION ADMINISTERED
4A	PRESCRIBED WITH ACKNOWLEDGEMENTS
4B	DISPENSED, PALLIATIVE CARE
4C	DISPENSED, HOSPICE
4D	DISPENSED, CANCER TREATMENT
4E	DISPENSED, CHRONIC PAIN
4F	DISPENSED, EXEMPT PER PRESCRIBER

4G	DISPENSED, SURGERY/TRAUMA
4H	DISPENSED, HOSPITAL ADMISSION/DISCHARGE
4J	DISPENSED, PATIENT IS NOT OPIOID NAIVE
4K	PRESCRIBER SPC EXMP-ONC OR NONHOSPICE PALIATV CARE
4L	PRESCRIBER SPECIALTY EXEMPTION-HOSPICE
4M	DISPENSE, SEX ASSIGNED AT BIRTH IS MALE
4N	DISPENSE, SEX ASSIGNED AT BIRTH IS FEMALE
4P	DISPENSE, SEX ASSIGNED AT BIRTH IS UNKNOWN
4Q	DISPENSE, SEX ASSIGNED AT BIRTH IS INTERSEX

Available codes for “Reason for Service Code” include:

<u>Code</u>	<u>Description</u>
AD	ADDITIONAL DRUG NEEDED
AN	PRESCRIPTION AUTHENTICATION
AR	ADVERSE DRUG REACTION
AT	ADDITIVE TOXICITY
CD	CHRONIC DISEASE MANAGEMENT
CH	CALL HELP DESK
CS	PATIENT COMPLAINT/SYMPTOM
DA	DRUG-ALLERGY
DC	DRUG-DISEASE (INFERRED)
DD	DRUG-DRUG INTERACTION
DF	DRUG-FOOD INTERACTION
DI	DRUG INCOMPATIBILITY
DL	DRUG-LAB CONFLICT
DM	APPARENT DRUG MISUSE
DP	PARTIAL LOT DRUG RECALL WARNING
DR	DOSE RANGE CONFLICT
DS	TOBACCO USE
ED	PATIENT EDUCATION/INSTRUCTION
ER	OVERUSE
EX	EXCESSIVE QUANTITY
HD	HIGH DOSE
IC	IATROGENIC CONDITION
ID	INGREDIENT DUPLICATION
LD	LOW DOSE
LK	LOCK IN RECIPIENT
LR	UNDERUSE
MC	DRUG-DISEASE (REPORTED)
MN	INSUFFICIENT DURATION
MS	MISSING INFORMATION/CLARIFICATION
MX	EXCESSIVE DURATION
NA	DRUG NOT AVAILABLE
NC	NON-COVERED DRUG PURCHASE
ND	NEW DISEASE/DIAGNOSIS

NF	NON-FORMULARY DRUG
NN	UNNECESSARY DRUG
NP	NEW PATIENT PROCESSING
NR	LACTATION/NURSING INTERACTION
NS	INSUFFICIENT QUANTITY
OH	ALCOHOL CONFLICT
PA	DRUG-AGE
PC	PATIENT QUESTION/CONCERN
PG	DRUG-PREGNANCY
PH	PREVENTIVE HEALTH CARE
PN	PRESCRIBER CONSULTATION
PP	PLAN PROTOCOL
PR	PRIOR ADVERSE REACTION
PS	PRODUCT SELECTION OPPORTUNITY
RE	SUSPECTED ENVIRONMENTAL RISK
RF	HEALTH PROVIDER REFERRAL
SC	SUBOPTIMAL COMPLIANCE
SD	SUBOPTIMAL DRUG/INDICATION
SE	SIDE EFFECT
SF	SUBOPTIMAL DOSAGE FORM
SR	SUBOPTIMAL REGIMEN
SX	DRUG-GENDER
TD	THERAPEUTIC
TN	LABORATORY TEST NEEDED
TP	PAYER/PROCESSOR QUESTION
UD	DUPLICATE DRUG

**Example: Resolving Open Rejects (continued)**

```

Professional Service Code: MR          MEDICATION REVIEW
Result of Service Code   : 1D          FILLED, WITH DIFFERENT DIRECTIONS

Reason for Service Code  : NN - UNNECESSARY DRUG
Professional Service Code: MR - MEDICATION REVIEW
Result of Service Code   : 1D - FILLED, WITH DIFFERENT DIRECTIONS

When you confirm, a new claim will be submitted for
the prescription and this REJECT will be marked
resolved.

Confirm? ? YES// <Enter>

Veteran Prescription 100003872 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
IN PROGRESS-Waiting to process response
E PAYABLE

```

The following is a sample of the ECME Activity Log update that occurs when a reject is resolved.

**Example: ECME Activity Log entry: Reject Resolved**

```

Rx Activity Log                               Nov 21, 2005@11:11:53           Page:    3 of    3
OPPATIENT,FOUR
  PID: 000-01-0000P                           Ht (cm) : _____ (_____)
  DOB: JAN 13,1922 (83)                       Wt (kg) : _____ (_____)
+
#   Date/Time           Rx Ref           Initiator Of Activity
=====
ECME Log:
1  11/15/05@14:08:35   ORIGINAL        OPPHARMACIST4,THREE
Comments: ECME: WINDOW FILL(NDC: 00085-0096-04)-pOPP INSURANCE
2  11/21/05@11:01:37   ORIGINAL        OPPHARMACIST4,THREE
Comments: ECME: DUR OVERRIDE CODES(MR/NN/1D)-pOPP INSURANCE

ECME REJECT Log:
#   Date/Time Rcvd           Rx Ref           Reject Type       STATUS           Date/Time Resolved
=====
1  12/11/05@19:03:31   ORIGINAL        DUR               RESOLVED        12/12/05@16:45:21
Comments: CLAIM RE-SUBMITTED
2  5/30/06@19:13:57   REFILL 2        DUR               RESOLVED        5/31/06@15:58:32
Comments: CLAIM RE-SUBMITTED

Enter ?? for more actions
Select Action:Quit//
  
```

The following is an example of a prescription being resolved for prior authorization submission.

**Example: Prior Authorization Submission**

```

Reject Information(Veteran)Nov 21, 2005@09:51:15           Page:    1 of    1
Division :ANYTOWN   NPI#: 1234567890   NCPDP: 4150001P   TAX ID: XX-XXXXXXX
Patient  : OPPATIENT,FOUR(000-01-0000P)   Sex: M           DOB: JAN 13,1922(83)
Rx#      : 100003872/0   ECME#: 000000504454   Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA           NDC Code: 54629-0600-01

REJECT Information (Veteran)
Reject Type      : 88 - DUR REJECT received on NOV 15, 2005@14:11:51
Reject Status    : OPEN/UNRESOLVED
Payer Addl Msg  : DUR Reject Error
Reason Code     : UNNECESSARY DRUG
DUR Text        : RETAIL

INSURANCE Information
Insurance       : TEST INS
Contact        :
BIN / PCN      : 741852 / XXXXXXXXXX
Group Number   : 12454
Cardholder ID  : 000011322P

Enter ?? for more actions
VW View Rx           IGN Ignore Reject           OVR Submit Override Codes
MP Medication Profile RES Resubmit Claim       CSD Change Suspense
Select: Quit// ??
  
```

```

The following actions are also available:
COM Add Comments      UP Up a Line           ADPL Auto Display(On/Off)
CLA Submit Clarif. Code FS First Screen       QU Quit
ED Edit Rx           LS Last Screen       ARI View Addtnl Rej Info
PA Submit Prior Auth. GO Go to Page           SDC Suspense Date Calc
SMA Submit Mult. Actions RD Re Display Screen  VER View ePharmacy Rx
+ Next Screen        PS Print Screen     ECS Edit Claim Submitted
- Previous Screen    PT Print List
DN Down a Line       SL Search List
Select: Quit// PA Send Prior Auth.

Prior Authorization Type: 0// ?
  
```

```

Choose from:
0      NOT SPECIFIED
1      PRIOR AUTHORIZATION #
2      ML-MEDICAL CERTIFIED
3      EPSDT
4      EXEMPT FROM COPAY
5      EXEMPT FROM RX LIMITS
6      FAMILY PLANNING
7      AFDC
8      PAYER DEFINED EXEMPTION

```

### Example: Prior Authorization Submission (continued)

```

Prior Authorization Type: 0// 1 PRIOR AUTHORIZATION #
Prior Authorization Number: 12345678901

When you confirm, a new claim will be submitted for
the prescription and this REJECT will be marked
resolved.

Confirm? ? YES// <Enter>

Veteran Prescription 787480 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting

```

The following is an example of a prescription being resolved for clarification code submission.

### Example: Clarification Code Submission

```

Reject Information(Veteran)Nov 21, 2005@09:51:15      Page: 1 of 1
Division :ANYTOWN  NPI#: 1234567890  NCPDP: 4150001P  TAX ID: XX-XXXXXXX
Patient  : OPPATIENT,FOUR(000-01-1322P)  Sex: M      DOB: JAN 13,1922(83)
Rx#      : 100003872/0      ECME#: 00000504454  Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA      NDC Code: 54629-0600-01

REJECT Information (Veteran)
Reject Type      : 88 - DUR REJECT received on NOV 15, 2005@14:11:51
Reject Status   : OPEN/UNRESOLVED
Payer Adtl Msg  : DUR Reject Error
Reason Code     : UNNECESSARY DRUG
DUR Text        : RETAIL

INSURANCE Information
Insurance       : TEST INS
Contact        :
BIN / PCN      : 741852 / XXXXXXXXX
Group Number   : 12454
Cardholder ID  : 000011322P

Enter ?? for more actions
VW View Rx      IGN Ignore Reject      OVR Submit Override Codes
MP Medication Profile  RES Resubmit Claim      CSD Change Suspense
Select: Quit// ??

```

```

The following actions are also available:
COM Add Comments      UP Up a Line      ADPL Auto Display(On/Off)
CLA Submit Clarif. Code  FS First Screen  QU Quit
ED Edit Rx            LS Last Screen   ARI View Addtnl Rej Info
PA Submit Prior Auth.  GO Go to Page    SDC Suspense Date Calc
SMA Submit Mult. Actions  RD Re Display Screen  VER View ePharmacy Rx
+ Next Screen          PS Print Screen   ECS Edit Claim Submitted
- Previous Screen      PT Print List
DN Down a Line         SL Search List

```



The following is an example of the Additional Reject Information display for a prescription.

**Example: Viewing Additional Reject Information**

```
Select: Quit// ??

The following actions are also available:
COM Add Comments          UP   Up a Line          ADPL Auto Display(On/Off)
CLA Submit Clarif. Code   FS   First Screen      QU   Quit
ED  Edit Rx              LS   Last Screen       ARI  View Addtnl Rej Info
PA  Submit Prior Auth.   GO   Go to Page        SDC  Suspense Date Calc
SMA Submit Mult. Actions  RD   Re Display Screen VER  View ePharmacy Rx
+   Next Screen          PS   Print Screen      ECS  Edit Claim Submitted
-   Previous Screen      PT   Print List
DN  Down a Line          SL   Search List
Select: Quit// ARI      View Addtnl Rej Info

Additional Reject Info      Aug 02, 2011@12:24:51      Page: 1 of 8
Division : CHEYENNE VAM&ROC      NPI#: 4020000012
Patient : ECMETEST,JCH(5454) Sex: M      DOB: JAN 2,1968(43)
Rx# : 2054809/1      ECME#: 000001614676      Date of Service: Jun 08, 2011
CMOP Drug: DOCUSATE NA 100MG CA      NDC Code: 54629-0600-01

Payer Msg: THIS PRESCRIPTION CANNOT BE FILLED BECAUSE IT IS A DISCONTINUED DRUG.
RECOMMEND GENERIC VERSION.

Payer Adtl Msg: POSSIBLE REPLACEMENTS ARE THE FOLLOWING:
DRUG A
DRUG B

DUR Response: 1
Reason Code: TD (THERAPEUTIC )
Clinical Significance Code: MINOR
Other Pharmacy Indicator: OTHER PHARMACY SAME CHAIN
+   Enter ?? for more actions

Select Action: Next Screen//

Additional Reject Info      Aug 02, 2011@12:26:32      Page: 2 of 8
Division : CHEYENNE VAM&ROC      NPI#: 4020000012
Patient : ECMETEST,JCH(5454) Sex: M      DOB: JAN 2,1968(43)
Rx# : 2054809/1      ECME#: 000001614676      Date of Service: Jun 08, 2011
CMOP Drug: DOCUSATE NA 100MG CA      NDC Code: 54629-0600-01
+
Previous Date of Fill:
Quantity of Previous Fill: 9999999987
Database Indicator: OTHER
Other Prescriber Indicator: OTHER PRESCRIBER
DUR Text: POSSIBLE DRUG INTERACTION
DUR Add Text: CHECK MEDICATION HISTORY

DUR Response: 2
Reason Code: TD (THERAPEUTIC )
Clinical Significance Code: MINOR
Other Pharmacy Indicator: OTHER PHARMACY SAME CHAIN
Previous Date of Fill: July 15, 2011
Quantity of Previous Fill: 0000090000
Database Indicator: OTHER
+   Enter ?? for more actions

Select Action: Next Screen//
```

One important advantage of having the additional DUR information is the inclusion of the PPS Response information. The information in red above can be used to calculate the next fill date

when resolving DUR rejects where the next date of fill is not returned by the payer. The use of this information eliminates a call to the third party in these cases.

#### Example: Clarification Code Submission (continued)

```
Select: Quit// CLA Submit Clarif. Code

Submission Clarification Code 1: ?

Choose from:
0 NOT SPECIFIED
1 NO OVERRIDE
2 OTHER OVERRIDE
3 VACATION SUPPLY
4 LOST PRESCRIPTION
5 THERAPY CHANGE
6 STARTER DOSE
7 MEDICALLY NECESSARY
8 PROCESS COMPOUND
9 ENCOUNTERS
99 OTHER

Submission Clarification Code 1: 3 VACATION SUPPLY
Submission Clarification Code 2: 5 THERAPY CHANGE
Submission Clarification Code 3: 4 LOST PRESCRIPTION

When you confirm, a new claim will be submitted for
the prescription and this REJECT will be marked
resolved.

Confirm? ? YES// <Enter>

Veteran Prescription 787480 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Waiting for packet build
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
```

The following is an example of comments added to a rejected prescription.

#### Example: Rejected Prescription –Adding Comments

```
Select: Quit// ??

The following actions are also available:
COM Add Comments UP Up a Line ADPL Auto Display(On/Off)
CLA Submit Clarif. Code FS First Screen QU Quit
ED Edit Rx LS Last Screen ARI View Addtnl Rej Info
PA Submit Prior Auth. GO Go to Page SDC Suspense Date Calc
SMA Submit Mult. Actions RD Re Display Screen VER View ePharmacy Rx
+ Next Screen PS Print Screen ECS Edit Claim Submitted
- Previous Screen PT Print List
DN Down a Line SL Search List
Select: Quit// COM Add Comments

Select one of the following:
R Reject
P Patient Billing

Comment Type: Reject

Comment: ALREADY CALLED INSURANCE COMPANY AND THEY WILL GET
BACK TO ME ON MONDAY.
```

```

Reject Information(Veteran)Nov 21, 2005@09:51:15      Page: 1 of 1
Division :ANYTOWN  NPI#: 1234567890  NCPDP: 4150001P  TAX ID: XX-XXXXXXX
Patient : OPPATIENT,FOUR(000-01-1322P)  Sex: M  DOB: JAN 13,1922(83)
Rx# : 100003872/0  ECME#: 000000504454  Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA  NDC Code: 54629-0600-01

```

```

REJECT Information (Veteran)
Reject Type : 88 - DUR REJECT received on NOV 15, 2005@14:11:51
Reject Status : OPEN/UNRESOLVED
Payer Adtl Msg : DUR Reject Error
Reason : UNNECESSARY DRUG
DUR Text : RETAIL

```

**COMMENTS - REJECT**

```

- JUN 2, 2007@2:30:10 - ALREADY CALLED INSURANCE COMPANY AND THEY WILL GET
  BACK TO ME ON MONDAY (OPUSER,ONE)
- JUN 3, 2007@1:28:10 (OPECC) - INSURANCE COMPANY CONTACTED OPECC WITH ADDITIONAL
  INFORMATION (BPSUSER,TWO)

```

**COMMENTS - PATIENT**

```

- JUN 3, 2007@1:32:54 - CALLED INSURANCE COMPANY TO CLARIFY BENEFITS (PSOUSER,ONE)

```

**INSURANCE Information**

```

Insurance : TEST INS
Contact :
Group Name : RXINS
Group Number : 12454
Cardholder ID : 000011322P

```

Enter ?? for more actions

```

VW View Rx          IGN Ignore Reject          OVR Submit Override Codes
MP Medication Profile  RES Resubmit Claim  CSD Change Suspense
Select: Quit//

```

Comments are either added by the pharmacist in Outpatient Pharmacy or added by the OPECC in ECME. Both types of comments display in reverse chronological order in the COMMENTS - REJECT section of the Reject Information screen. An indicator of (OPECC) marks OPECC comments.

**Example: Rejected Prescription – Reject Information Indicators**

```

Reject Information(Veteran)Nov 21, 2005@09:51:15      Page: 1 of 1
Division :ANYTOWN  NPI#: 1234567890  NCPDP: 4150001P  TAX ID: XX-XXXXXXX
Patient : OPPATIENT,FOUR(000-01-1322P)  Sex: M  DOB: JAN 13,1922(83)
Rx# : 100003872/0  ECME#: 000000504454  Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA  NDC Code: 54629-0600-01

```

**REJECT Information BACK-BILL**

```

Reject Type : 88 - DUR REJECT received on NOV 15, 2005@14:11:51
Reject Status : OPEN/UNRESOLVED
Payer Adtl Msg : DUR Reject Error
Reason : UNNECESSARY DRUG
DUR Text : RETAIL

```

```

Reject Information(Veteran)Nov 21, 2005@09:51:15      Page: 1 of 1
Division :ANYTOWN  NPI#: 1234567890  NCPDP: 4150001P  TAX ID: XX-XXXXXXX
Patient : OPPATIENT,FOUR(000-01-1322P)  Sex: M  DOB: JAN 13,1922(83)
Rx# : 100003872/0  ECME#: 000000504454  Date of Service: Nov 15, 2005
CMOP Drug: DOCUSATE NA 100MG CA  NDC Code: 54629-0600-01

```

**REJECT Information RESUBMISSION**

```

Reject Type : 88 - DUR REJECT received on NOV 15, 2005@14:11:51
Reject Status : OPEN/UNRESOLVED
Payer Adtl Msg : DUR Reject Error
Reason : UNNECESSARY DRUG

```

The REJECT Information line may display an indicator of BACK-BILL or RESUBMISSION. BACK-BILL: The indicator is present if the claim has been back-billed.

RESUBMISSION: The indicator is present if the claim has been resubmitted from the ECME User screen. A resubmission from Outpatient Pharmacy will not trigger the RESUBMISSION indicator. If a non-billable prescription has been resubmitted from the ECME User screen, the indicator will display even if the prescription remains non-billable.

**Example: Payable Veteran Prescription**

```

REJECT Information (Veteran)
Reject Type      :
Reject Status    : ** E PAYABLE **
Payer Adtl Msg  : EMD 1000: CLAIM PAID RX:000004317021FILL:2013-05-20 BIN:610144
                 PCN:TEST
Reason Code      :
    
```

To easily identify a payable claim, a payable Veteran prescription on the Reject Information screen will display “\*\* E PAYABLE \*\*” on the Reject Status line. The Reject Type will be blank.

Select ED (Edit Rx) and the following hidden actions are available for use.

**Example: Resubmitting an ePharmacy Claim**

AL	Activity Logs (OP)	REJ	View REJECT	>	Shift View to Right
VF	Verify (OP)	VER	View ePharmacy Rx	ADPL	Auto Display (On/Off)
CO	Copy (OP)	RES	Resubmit Claim	DN	Down a Line
TR	Convert Titration Rx	REV	Reverse Claim	FS	First Screen
TM	Titration Mark/Unmark	IN	Intervention Menu	GO	Go to Page
RP	Reprint (OP)	DA	Display Drug Allergies	LS	Last Screen
HD	Hold (OP)	DIN	Drug Restr/Guide (OP)	PS	Print Screen
UH	Unhold (OP)	EP	Print eRx	PT	Print List
PI	Patient Information	ECS	Edit Claim Submitted	QU	Quit
PP	Pull Rx (OP)	+	Next Screen	RD	Re Display Screen
IP	Inpat. Profile (OP)	-	Previous Screen	SL	Search List
OTH	Other OP Actions	<	Shift View to Left	UP	Up a Line

Resubmit Claim is a hidden action used to resubmit a claim to the third-party payer. Claims are almost always resubmitted by the ePharmacy Site Manager and not by untrained Pharmacy staff members. A resubmission is not allowed for the following:

- TRICARE non-billable prescription with a pseudo-rejection of eT
- CHAMPVA non-billable prescription with a pseudo-rejection of eC
- Any prescription with a primary and secondary claim

The action will prompt for a fill number with a default value of the most recent fill.

If a user resubmits a claim and resolves a Reject Resolution Required rejection, additional information will display below the claim processing message. The additional information only displays if the resubmit occurs from Outpatient Pharmacy, not ECME.

If a user resubmits a claim that is marked as non-billable in Claims Tracking a message "Reason Not Billable (RNB) must be removed from Claims Tracking prior to resubmitting" is displayed.

If a user attempts to resolve a reject that has a bill in Claims Tracking a message "OPECC to Cancel Existing Bill in IB & Resubmit Claim" is appended to the existing message of "Existing IB Bill in CT".

#### Example: Resubmitting an ePharmacy Claim to Resolve a Reject Resolution Required rejection

```
Veteran Prescription 100937 successfully submitted to ECME for claim generation.

Processing Primary claim...

Claim Status:
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
E PAYABLE

Total Amount Paid: 40.00          Ingredient Cost Paid: 0.00
Amount of Copay/Coinsurance: 9.00  Dispensing Fee Paid: 0.00
Amount Applied to Periodic Deductible: 0.00
Remaining Deductible Amount: 0.00

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

#### Example: Edit Claim Submitted

The following is an example of a prescription being resolved with Edit Claim Submitted. The prescription does not have to be rejected to use this action.

```
Select: Quit// ??

The following actions are also available:
COM Add Comments          UP Up a Line                ADPL Auto Display(On/Off)
CLA Submit Clarif. Code  FS First Screen          QU Quit
ED Edit Rx                LS Last Screen           ARI View Addtnl Rej Info
PA Submit Prior Auth.    GO Go to Page             SDC Suspense Date Calc
SMA Submit Mult. Actions RD Re Display Screen       VER View ePharmacy Rx
+ Next Screen            PS Print Screen          ECS Edit Claim Submitted
- Previous Screen        PT Print List
DN Down a Line           SL Search List

Select: Quit// ECS

Enter ^ at any prompt to exit

When you confirm, a new claim will be submitted for
the prescription and this REJECT will be marked
resolved.

Confirm? YES//

Rx is not released. Date of Service will be 7/20/2018.

Submit NCPDP Field Not on Payer Sheet (Y/N)? N// YES

Enter a valid NCPDP Field name or number. Enter '??' for
a list of possible choices. Fields already on the payer sheet
are excluded from the list of possible choices. Also excluded
are any fields that do not have logic to pull data from Vista
(i.e. fields that will always be <blank>).

NCPDP Field Name or Number: PRESCRIBER DEA NUMBER D01 PRESCRIBER DEA NUMBE
R
Value to transmit: MW0220690
```

```

Transmit with claim (Y/N)? Y// ES

NCPDP Field Name or Number:

Fields entered to transmit:
  D01-KV PRESCRIBER DEA NUMBER: MW0220690

A claim will be submitted now.

Are you sure (Y/N)? Y// ES

Payer Overrides are enabled at this site.  If this is production environment,
do not enter overrides (enter No at the next prompt) and disable this
functionality in the BPS SETUP table.

Entering No at the next prompt will delete any current overrides for the
request, if they exist.

Do you want to enter overrides for this request? NO//  No

CHAMPVA Prescription 2594765 submitted to ECME for claim generation.

Processing Primary claim...

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Building the claim
IN PROGRESS-Transmitting
E PAYABLE

Type <Enter> to continue or '^' to exit:

```

If the prescription is not released, the date of service will display for informational purposes. If the prescription is released, the system will present a list of dates to allow the user to override the default date of service. The default date of service is always the release date. If all of the dates are the same, the system does not prompt for a date selection.

```

Enter ^ at any prompt to exit

When you confirm, a new claim will be submitted for
the prescription and this REJECT will be marked
resolved.

Confirm? YES//

Select one of the following:

      1          5/23/2018 Fill Date
      2          5/23/2018 Date of Service
      3          5/24/2018 Release Date

Date of Service: 3//

```

## TRICARE CHAMPVA Override Report [PSO TRI CVA OVERRIDE REPORT]

This option provides information in a detail or summary report format that will list prescriptions where an Override was performed to enable processing of these TRICARE and CHAMPVA prescriptions. The user has the ability to list (I)npatient; (N)on-Billable Product; (R)ject Override; (P)artial Fill; or(A)ll. Besides allowing the selection of all types, the report allows the

selection of one or two types. For example, the user can select Non-billable and Reject for the same report.



This menu option is locked with the [PSO TRICARE/CHAMPVA MGR security key](#).

### Example: Accessing the TRICARE CHAMPVA Override Report

```
Select Rx (Prescriptions) Option: ePharmacy Menu

IR      Ignored Rejects Report
MP      ePharmacy Medication Profile (View Only)
NV      NDC Validation
PF      ePharmacy Medication Profile Division Preferences
SP      ePharmacy Site Parameters
VP      Third Party Payer Rejects - View/Process
WL      Third Party Payer Rejects - Worklist
TC      TRICARE CHAMPVA Override Report
PR      Pharmacy Productivity/Revenue Report
PC      ePharmacy Patient Comment
VER     View ePharmacy Rx

You've got PRIORITY mail!

Select ePharmacy Menu Option: TC  TRICARE CHAMPVA Override Report

Select one of the following:

      D      DIVISION
      A      ALL

Select Certain Pharmacy (D)ivisions or (A)LL:
```

### Example: TRICARE CHAMPVA Override Report Filters and Data Elements

```
Select one of the following:
      D      DIVISION
      A      ALL
Select Certain Pharmacy (D)ivisions or (A)LL: DIVISION
Select ECME Pharmacy Division(s): BATTLE CREEK
Selected:
      BATTLE CREEK
Select ECME Pharmacy Division(s): GRAND RAPIDS      MI      CBOC      515BY      VA GRAND RAPIDS OPC
515BY      VA GRAND RAPIDS OPC
Selected:
      BATTLE CREEK
      VA GRAND RAPIDS OPC
Select ECME Pharmacy Division(s):

Select one of the following:

      T      TRICARE
      C      CHAMPVA
      A      ALL

Display (T)RICARE, (C)HAMPVA or (A)LL Entries: ALL// ALL

Select one of the following:

      S      Summary
      D      Detail

Display (S)ummary or (D)etail Format: Detail//

START WITH TRANSACTION DATE: T-1// T-10 (APR 30, 2010)
GO TO TRANSACTION DATE: T// T-9 (MAY 01, 2010)
```

```
Select one of the following:

I      INPATIENT
N      NON-BILLABLE PRODUCT
R      REJECT OVERRIDE
P      PARTIAL FILL
A      ALL

Select one of the following: **Can select multiples - limit of 2** : <no default> ALL

Select one of the following:

S      SPECIFIC PHARMACIST(S)
A      ALL PHARMACISTS

Select Specific Pharmacist(s) or ALL Pharmacists: ALL//

Select one of the following:

S      SPECIFIC PROVIDER(S)
A      ALL PROVIDERS

Select Specific Provider(s) or include ALL Providers: ALL//

Select one of the following:

R      Pharmacist
P      Provider/Prescriber Name

Group/Subtotal Report by Pharmacy (R)Pharmacist or (P)rovider: <no default> Pharmacist

Do you want to capture report data for an Excel document? NO//

WARNING - THIS REPORT REQUIRES THAT A DEVICE WITH 132 COLUMN WIDTH BE USED.
IT WILL NOT DISPLAY CORRECTLY USING 80 COLUMN WIDTH DEVICES

DEVICE: HOME// 0;132;99  INCOMING TELNET

Please wait...
```

**\*\* When selecting from above, Specific Pharmacist(s), the user will be able to continue selecting Pharmacist(s) as necessary. This filter will have the same functionality as the Division/Insurance Company selection filters.**

**\*\* When selecting from above, Specific Provider(s), the user will be able to continue selecting Provider(s) as necessary. This filter will have the same functionality as the Division/Insurance Company selection filters.**



### Example of TRICARE CHAMPVA Override Report Summary

```

TRICARE CHAMPVA OVERRIDE AUDIT REPORT - SUMMARY Print Date: NOV 10, 2010@10:05:26 PAGE: 1
DIVISION(S): ALL
ELIGIBILITY: ALL
TC TYPES: INPATIENT, NON-BILLABLE, PARTIAL FILL, REJECT OVERRIDE
ALL PRESCRIPTIONS BY AUDIT DATE: From 10/31/10 through 11/10/10
=====
-----
DIVISION: DIVISION ONE
***** CHAMPVA INPATIENT *****

      PHARMACIST: PHARMACIST, ONE      -----
      SUB-TOTALS                        45.00
      RX COUNT                          1
      MEAN                              10.00

      PHARMACIST: PHARMACIST, TWO      -----
      SUB-TOTALS                        30.00
      RX COUNT                          1
      MEAN                              30.00
      -----

CHAMPVA INPATIENT
SUBTOTALS                75.00
RX COUNT                 2
MEAN                    37.50

***** CHAMPVA NON-BILLABLE *****

      PHARMACIST: PHARMACIST, THREE    -----
      SUB-TOTALS                       20.00
      RX COUNT                          1
      MEAN                              20.00

CHAMPVA NON-BILLABLE
SUBTOTALS                20.00
RX COUNT                 1
MEAN                    20.00

***** CHAMPVA PARTIAL FILL *****

      PHARMACIST: PHARMACIST, FOUR     -----
      SUB-TOTALS                       16.20
      RX COUNT                          2
      MEAN                              8.10

      PHARMACIST: PHARMACIST, FIVE     -----
  
```

SUB-TOTALS	8.00
RX COUNT	1
MEAN	8.00
PHARMACIST: PHARMACIST, SIX	-----
SUB-TOTALS	23.58
RX COUNT	1
MEAN	23.58
CHAMPVA PARTIAL FILL	
SUBTOTALS	47.78
RX COUNT	4
MEAN	11.95
***** CHAMPVA REJECT OVERRIDE *****	
CHAMPVA REJECT OVERRIDE	
SUBTOTALS	0.00
RX COUNT	0
MEAN	0.00
***** TRICARE INPATIENT *****	
TRICARE INPATIENT	
SUBTOTALS	11.93
RX COUNT	1
MEAN	11.93
***** TRICARE NON-BILLABLE *****	
PHARMACIST: OPPHARM, ONE	-----
SUB-TOTALS	8.03
RX COUNT	1
MEAN	8.03
TRICARE NON-BILLABLE	
SUBTOTALS	8.03
RX COUNT	1
MEAN	8.03
***** TRICARE PARTIAL FILL *****	
PHARMACIST: OPPHARM, FOUR	-----
SUB-TOTALS	8.54
RX COUNT	1
MEAN	8.54
PHARMACIST: OPPHARM, FIVE	-----
SUB-TOTALS	16.20

```

RX COUNT                2
MEAN                    8.10

TRICARE PARTIAL FILL
SUBTOTALS              24.74
RX COUNT                3
MEAN                    8.25

***** TRICARE REJECT OVERRIDE *****

PHARMACIST: OPPHARM, TWO -----
SUB-TOTALS              29.17
RX COUNT                3
MEAN                    9.72

PHARMACIST: OPPHARM, THREE -----
SUB-TOTALS              10.38
RX COUNT                1
MEAN                    10.38

TRICARE REJECT OVERRIDE
SUBTOTALS              39.55
RX COUNT                4
MEAN                    9.89

DIVISION DIVISION ONE -----
SUBTOTALS              154.51
RX COUNT                9
MEAN                    17.17
-----

GRAND TOTALS          154.51
RX COUNT                9
MEAN                    17.17
-----

REPORT HAS FINISHED
Press Return to continue, '^' to exit:

```

**Example of TRICARE CHAMPVA Override Report Detail**

TRICARE CHAMPVA OVERRIDE AUDIT REPORT -							DETAIL Print Date: OCT 31, 2010@11:59:22	Page: 1
DIVISION(S): DIVISION ONE, DIVISION TWO								
ELIGIBILITY: ALL								
TC TYPES: INPATIENT, NON-BILLABLE, PARTIAL FILL, REJECT OVERRIDE								
ALL PRESCRIPTIONS BY AUDIT DATE: From 09/01/10 through 09/30/10								
BENEFICIARY NAME/ID	RX#	REF/ECME#	RX DATE	RX INFO				
ACTION DATE	USER NAME	\$BILLED	QTY	NDC#	DRUG			
-----								
DIVISION: DIVISION ONE								
***** CHAMPVA INPATIENT *****								
CVAPATIENT, TWO/xxxx	10750570B\$	0/000009300476	02/13/10	C RT AC/N				
02/13/10	POSTMASTER	45.00	180	06524328809	METFORMIN HCL 500MG TAB			
CHAMPVA INPATIENT/DISCHARGE								
CVAPATIENT, THREE/xxxx	10750570B\$	0/000009300476	02/13/10	C RT AC/N				
02/13/10	POSTMASTER	30.00	180	06524328809	METFORMIN HCL 500MG TAB			
CHAMPVA INPATIENT/DISCHARGE								
CHAMPVA INPATIENT								
SUBTOTALS		75.00						
RX COUNT		2						
MEAN		37.50						
***** CHAMPVA NON-BILLABLE *****								
CVAPATIENT, ONE/xxxx	10750570B\$	0/000009300476	02/13/10	C RT AC/N				
02/13/10	POSTMASTER	20.00	180	06524328809	DOCUSATE NA 100MG CA			
eC:CHAMPVA-NON BILLABLE								
Fill Per Provider								
PSOUSER, ONE								
SUB-TOTALS		20.00						
RX COUNT		1						
MEAN		20.00						
CHAMPVA NON-BILLABLE								
SUBTOTALS		20.00						
RX COUNT		1						
MEAN		20.00						
***** CHAMPVA PARTIAL FILL *****								
OPCVA, TWO/272P	2719140	0/N/A	07/27/11	W ** AC/N				

07/27/11	PSOUSER,THREE		8.18	60	51111048893	ACETAMINOPHEN 325MG TAB
eC:CHAMPVA-NON BILLABLE						
CHAMPVA Partial Fill						
OPCVA, TWO/272P		2719141	0/000004315966	07/27/11	W ** AC/N	
07/27/11	PSOUSER,THREE		8.02	1	58177032404	NITROGLYCERIN 0.4MG SL T
79:Refill Too Soon						
CHAMPVA Partial Fill						
PSOUSER, ONE						
SUBTOTALS			16.20			
RX COUNT			2			
MEAN			8.10			
TCOUSER, TWO/265P		2719348	0/N/A	09/08/11	W ** AC/N	
09/08/11	PSOUSER,FOUR		8.00	1	51111048893	ACETAMINOPHEN 325MG TAB
CHAMPVA Partial Fill						
PSOUSER, TWO						
SUBTOTALS			8.00			
RX COUNT			1			
MEAN			8.00			
TCOUSER, TWO/265P		2719354	0/000004316183	09/08/11	W ** AC/N	
09/08/11	PSOUSER,FOUR		23.58	30	00052047260	CALCIFEDIOL 20MCG CAPS
79:Refill Too Soon						
22:M/I Dispense As Written (DAW)/Product Selection Code						
23:M/I Ingredient Cost Submitted						
24:M/I SALES TAX						
25:M/I Prescriber ID						
26:M/I Unit Of Measure						
CHAMPVA Partial Fill						
PSOUSER, FIVE						
SUBTOTALS			23.58			
RX COUNT			1			
MEAN			23.58			
CHAMPVA PARTIAL FILL						
SUBTOTALS			47.78			
RX COUNT			4			
MEAN			11.95			
***** CHAMPVA REJECT OVERRIDE *****						
CHAMPVA REJECT OVERRIDE						
SUBTOTALS			0.00			
RX COUNT			0			

```

MEAN                                0.00
***** TRICARE INPATIENT *****
OPPATIENT,TRIONE/XXXX              10750XXXX$      0/000009300XXX    09/10/10      C RT AC/N
09/10/10      POSTMASTER              45.00            180      06XXX3XXXXX      METFORMIN HCL 500MG TAB
TRICARE Inpatient/Discharge

TRICARE INPATIENT
SUBTOTALS                                45.00
RX COUNT                                  1
MEAN                                       45.00

***** TRICARE NON-BILLABLE *****
OPPATIENT,TRITWO/XXXX              1075XXXXX$      0/00000930XXXX    09/10/10      C RT AC/N
09/10/10      OPPHARM,ONE              20.00            180      06XXX3XXXXX      DOCUSATE NA 100MG CA
eT:TRICARE-NON BILLABLE
Fill Per Provider

OPPHARM,ONE
SUB-TOTALS                                20.00
RX COUNT                                  1
MEAN                                       20.00

TRICARE NON-BILLABLE
SUBTOTALS                                20.00
RX COUNT                                  1
MEAN                                       20.00

***** TRICARE REJECT OVERRIDE *****
OPPATIENT,TRIFOUR/XXXX              107XXXX0B$      0/00000930XXXX    09/10/10      C RT AC/N
09/10/10      OPPHARM,ONE              20.00            180      06524328809      DOCUSATE NA 100MG CA
50:Non-Matched Pharmacy Number
25:M/I Prescriber ID

OPHARM,ONE
SUB-TOTALS                                20.00
RX COUNT                                  1
MEAN                                       20.00

TRICARE REJECT
SUBTOTALS                                20.00
RX COUNT                                  1
MEAN                                       20.00

DIVISION: DIVISION ONE
SUBTOTALS                                -----
                                           180.00

```

```

RX COUNT          6
MEAN              30.00
                -----

DIVISION: DIVISION TWO

***** CHAMPVA INPATIENT *****
CVAPATIENT, TWO/xxxx          10750570B$          0/000009300476          02/13/10          C RT AC/N
02/13/10          POSTMASTER          10.00          180          06524328809          METFORMIN HCL 500MG TAB
CHAMPVA INPATIENT/DISCHARGE
SUB-TOTALS          10.00
RX COUNT          1
MEAN              10.00

CVAPATIENT, THREE/xxxx          10750570B$          0/000009300476          02/13/10          C RT AC/N
02/13/10          POSTMASTER          40.00          180          06524328809          METFORMIN HCL 500MG TAB
CHAMPVA INPATIENT/DISCHARGE

SUB-TOTALS          40.00
RX COUNT          1
MEAN              40.00

CHAMPVA INPATIENT
SUBTOTALS          50.00
RX COUNT          2
MEAN              25.00

***** CHAMPVA NON-BILLABLE *****
CVAPATIENT, ONE/xxxx          10750570B$          0/000009300476          02/13/10          C RT AC/N
02/13/10          POSTMASTER          60.00          180          06524328809          DOCUSATE NA 100MG CA
eC:CHAMPVA-NON BILLABLE
Fill Per Provider

OPUSER, SIX
SUB-TOTALS          60.00
RX COUNT          1
MEAN              60.00

CHAMPVA NON-BILLABLE
SUBTOTALS          60.00
RX COUNT          1
MEAN              60.00

***** CHAMPVA PARTIAL FILL *****
OPCVA, TWO/272P          2719140          0/N/A          07/27/11          W ** AC/N
07/27/11          OPUSER, THREE          8.18          60          51111048893          ACETAMINOPHEN 325MG TAB
eC:CHAMPVA-NON BILLABLE

```

```

CHAMPVA Partial Fill
OPCVA,TWO/272P          2719141          0/000004315966    07/27/11          W ** AC/N
07/27/11          OPUSER,THREE          8.02          1          58177032404          NITROGLYCERIN 0.4MG SL T
79:Refill Too Soon
CHAMPVA Partial Fill

          OPUSER,TWO
          SUBTOTALS          16.20
          RX COUNT          2
          MEAN          8.10

CHAMPVA PARTIAL FILL
SUBTOTALS          16.20
RX COUNT          2
MEAN          8.10

***** CHAMPVA REJECT OVERRIDE *****

CHAMPVA REJECT OVERRIDE
SUBTOTALS          0.00
RX COUNT          0
MEAN          0.00

***** TRICARE INPATIENT *****

OPPATIENT,TRISIX/XXXX          107XXXXXX$          0/00000930XXXX          09/10/10          C RT AC/N
09/10/10          POSTMASTER          10.00          180          06XXXXXXXXXX          METFORMIN HCL 500MG TAB
PATIENT IS CURRENTLY ON A WEEKEND PASS AND WILL RETURN ON MONDAY 09/13/2010.

OPPATIENT,TRISEVEN/XXXX          107XXXXXB$          0/0000093XXXXX          09/10/10          C RT AC/N
09/10/10          POSTMASTER          40.00          180          06XXXXXXXXXX          METFORMIN HCL 500MG TAB
PATIENT IS CURRENTLY ON A WEEKEND PASS AND WILL RETURN ON MONDAY 09/13/2010.

TRICARE INPATIENT
SUB-TOTALS          50.00
RX COUNT          2
MEAN          50.00

***** TRICARE NON-BILLABLE *****

OPPATIENT,TRIEIGHT/XXXX          107XXXXXX$          0/000009300XXX          09/10/10          C RT AC/N
09/10/10          OPPHARM,THREE          60.00          180          06XXX3XXXXX          DOCUSATE NA 100MG CA
eT:TRICARE-NON BILLABLE
Fill Per Provider

          OPHRAM,THREE
          SUBTOTALS          60.00
          RX COUNT          1
          MEAN          60.00

```



```

TRICARE NON-BILLABLE
SUBTOTALS                60.00
RX COUNT                  1
MEAN                      60.00

***** TRICARE REJECT OVERRIDE *****

OPPATIENT,TRININE/XXXX    107XXXXXX$    0/0000930XXXX    09/10/10    C RT AC/N
09/10/10 OPHARM,TWO      20.00    180    06XXXXXXXXXX    METFORMIN HCL 500MG TAB
Claim ID: VA2005-056XXX-XXXXXX-0007XXX
50:Non-Matched Pharmacy Number
25:M/I Prescriber ID

      OPPHARM,TWO
      SUBTOTALS                20.00
      RX COUNT                  1
      MEAN                      20.00

      TRICARE REJECT
      SUBTOTALS                20.00
      RX COUNT                  1
      MEAN                      20.00

DIVISION: DIVISION TWO
SUBTOTALS                200.00
RX COUNT                  7
MEAN                      28.57
-----
GRAND TOTALS              380.00
RX COUNT                  13
MEAN                      29.23
-----

REPORT HAS FINISHED

Press RETURN to continue, '^' to exit:

```

## TRICARE/CHAMPVA Reject Processing

The Third Party Payer Rejects – Worklist [PSO REJECTS WORKLIST] and Third Party Payer Rejects – View/Process [PSO REJECTS VIEW/PROCESS] options have been modified in the following manner:

### Display of non-DUR/RTS rejects

- Non-DUR/RTS TRICARE and CHAMPVA rejections each will be segregated into distinct sections. They will be denoted with a "TRICARE – Non-DUR/RTS" or "CHAMPVA – Non-DUR/RTS" header. This header remains regardless of whether the GI – Group by Insurance action is toggled on or off. The TRICARE and CHAMPVA sections sort in the same manner as the main sort for non-TRICARE/CHAMPVA prescriptions (by Rx, drug, patient).

```
Insurance Rejects-Worklist Aug 13, 2008@16:04:05 Page: 1 of 1
Division :ANYTOWN ISC
Selection : ALL UNRESOLVED REJECTS
```

#	Rx#	PATIENT (ID) [^]	DRUG	REASON
1	101238	ECMEIBTEST,ONE (5566)	MEDROXYPROGESTRONE 1	79 :REFILL TOO SO
Payer Message:				
2	100739	ECMEPAT, TWO (8887)	BENZTROPINE 2MG TAB	79 :REFILL TOO SO
Payer Message:				
3	101960	OPTRICARE, ONE (4789)	ACETAZOLAMIDE 250MG	79 :REFILL TOO SO
Payer Message:				
<b>CHAMPVA – Non-DUR/RTS</b>				
4	101358	OPCVACARE, ONE (7895)	BACLOFEN 10MG TABS	07 :M/I Cardholde
Payer Message:				
5	100923	OPCVACARE, TWO (4933)	LORAZEPAM 1MG TAB	07 :M/I Cardholde
Payer Message:				
<b>TRICARE – Non-DUR/RTS</b>				
6	101980	OPTRICARE, ONE (4789)	DANTROLENE 25MG CAP	14 :M/I Eligibili
Payer Message:				
Select the entry # to view or ?? for more actions				
DR	Sort by Drug		RE	Sort by Reason
RX			Sort by Prescription	
PA	Sort by Patient		RF	Screen Refresh
GI			Group by Insurance	
Select: Quit//				

- TRICARE and CHAMPVA DUR/RTS rejects display with all other DUR/RTS rejects. See the boxed text in the example below. Sequences 5 and 9 are rejects for the same prescription. Also note that in the following example GI – Group by Insurance action is toggled OFF.

```
Insurance Rejects-Worklist Aug 13, 2008@16:10:22 Page: 1 of 1
Division :ANYTOWN ISC
Selection : ALL UNRESOLVED REJECTS
```

#	Rx#	PATIENT (ID) [^]	DRUG	REASON
1	101238	ECMEIBTEST,ONE (5566)	MEDROXYPROGESTRONE 1	79 :REFILL TOO SO
Payer Message:				
2	100739	ECMEPAT, TWO (8887)	BENZTROPINE 2MG TAB	79 :REFILL TOO SO
Payer Message:				
3	101358	OPCVACARE, ONE (7895)	BACLOFEN 10MG TABS	07 :REFILL TOO SO
Payer Message:				
4	101960	OPTRICARE, ONE (4789)	ACETAZOLAMIDE 250MG	79 :REFILL TOO SO
Payer Message:				
5	101981	OPTRICARE, ONE (4789)	ATENOLOL 100MG TAB	79 :REFILL TOO SO
Payer Message:				
<b>CHAMPVA – Non-DUR/RTS</b>				
6	101358	OPCVACARE, ONE (7895)	BACLOFEN 10MG TABS	07 :M/I Cardholde

```

Payer Message:
7 100923      OPCVACARE,TWO(4933)      LORAZEPAM 1MG TAB      07 :M/I Cardholde
Payer Message:
                TRICARE - Non-DUR/RTS
8 101980      OPTRICARE,ONE(4789)      DANTROLENE 25MG CAP    14 :M/I Eligibili
Payer Message:
9 101981      OPTRICARE,ONE(4789)      ATENOLOL 100MG TAB     14 :M/I Eligibili
Payer Message:

                Select the entry # to view or ?? for more actions
DR  Sort by Drug          RE  Sort by Reason          RX  Sort by Prescription
PA  Sort by Patient       RF  Screen Refresh          GI  Group by Insurance
Select: Quit//

```

When GI – Group by Insurance action is toggled ON, the headers "TRICARE" and "CHAMPVA" display, and these "TRICARE" and "CHAMPVA" sections sort alphabetically within RTS/DUR insurances. These TRICARE/CHAMPVA sections are separate from the Non-DUR/RTS section.

**Example with GI action toggled on:**

```

Insurance Rejects-Worklist      Aug 13, 2008@16:12:46      Page: 1 of 1
Division :ANYTOWN ISC
Selection : ALL UNRESOLVED REJECTS GROUPED BY INSURANCE
# R#  # PATIENT (ID) [^]      DRUG      REASON
                BLUE CROSS BLUE SHIELD
1 100739      ECMEPAT,TWO(8887)      BENZTROPINE 2MG TAB    79 :REFILL TOO SO
Payer Message:
                CHAMPVA
2 101358      OPCVACARE,ONE(7895)      BACLOFEN 10MG TABS    07 :REFILL TOO SO
Payer Message:
                TRICARE
3 101960      OPTRICARE,ONE(4789)      ACETAZOLAMIDE 250MG    79 :REFILL TOO SO
Payer Message:
                ZENITH ADMINISTRATORS
4 101238      ECMEIBTEST,ONE(5566)      MEDROXYPROGESTRONE 1  79 :REFILL TOO SO
Payer Message:
5 101981      OPTRICARE,ONE(4789)      ATENOLOL 100MG TAB     79 :REFILL TOO SO
Payer Message:
                CHAMPVA - Non-DUR/RTS
6 101358      OPCVACARE,ONE(7895)      BACLOFEN 10MG TABS    07 :M/I Cardholde
Payer Message:
7 100923      OPCVACARE,TWO(4933)      LORAZEPAM 1MG TAB     07 :M/I Cardholde
Payer Message:
                TRICARE - Non-DUR/RTS
8 101980      OPTRICARE,ONE(4789)      DANTROLENE 25MG CAP    14 :M/I Eligibili
Payer Message:
9 101981      OPTRICARE,ONE(4789)      ATENOLOL 100MG TAB     14 :M/I Eligibili
Payer Message:

                Select the entry # to view or ?? for more actions
DR  Sort by Drug          RE  Sort by Reason          RX  Sort by Prescription
PA  Sort by Patient       RF  Screen Refresh          GI  Group by Insurance
Select: Quit//

```

The TRI – Show/Hide TRICARE and CVA – Show/Hide CHAMPVA toggle actions can be found on the hidden menu on the Insurance Rejects screen. When the TRI action is toggled to Show, TRICARE Non-DUR/RTS rejects will automatically display in the listing. Toggling the TRI action to Hide will remove them from the screen. The CVA action behaves likewise for CHAMPVA Non-DUR/RTS rejects.

**Example with TRICARE and CHAMPVA rejects displayed:**

```

Insurance Rejects-Worklist      Aug 13, 2008@16:04:05          Page:    1 of    1
Division :ANYTOWN ISC
Selection : ALL UNRESOLVED REJECTS
# Rxx#      PATIENT (ID) [^]      DRUG      REASON
1 101238    ECMEIBTEST,ONE (5566)    MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
Payer Message:
2 100739    ECMEPAT,TWO (8887)      BENZTROPINE 2MG TAB 79 :REFILL TOO SO
Payer Message:
3 101960    OPTRICARE,ONE (4789)    ACETAZOLAMIDE 250MG 79 :REFILL TOO SO
Payer Message:
                                CHAMPVA - Non-DUR/RTS
4 101358    OPCVACARE,ONE (7895)    BACLOFEN 10MG TABS 07 :M/I Cardholde
Payer Message:
                                TRICARE - Non-DUR/RTS
5 101980    OPTRICARE,ONE (4789)    DANTROLENE 25MG CAP 14 :M/I Eligibili
Payer Message:

        Select the entry # to view or ?? for more actions
DR  Sort by Drug      RE  Sort by Reason      RX  Sort by Prescription
PA  Sort by Patient   RF  Screen Refresh      GI  Group by Insurance
Select: Quit// ??
The following actions are also available:
TRI Show/Hide TRICARE  DN  Down a Line      PT  Print List
CVA Show/Hide CHAMPVA FS  First Screen     SL  Search List
VER View ePharmacy Rx  LS  Last Screen     ADPL Auto Display (On/Off)
+   Next Screen       GO  Go to Page       QU  Quit
-   Previous Screen   RD  Re Display Screen
UP  Up a Line         PS  Print Screen

Enter RETURN to continue or '^' to exit:

```

**Example of TRICARE and CHAMPVA rejects removed from display:**

```

Insurance Rejects-Worklist      Aug 13, 2008@16:04:05          Page:    1 of    1
Division :ANYTOWN ISC
Selection : ALL UNRESOLVED REJECTS
# Rxx#      PATIENT (ID) [^]      DRUG      REASON
1 101238    ECMEIBTEST,ONE (5566)    MEDROXYPROGESTRONE 1 79 :REFILL TOO SO
Payer Message:
2 100739    ECMEPAT,TWO (8887)      BENZTROPINE 2MG TAB 79 :REFILL TOO SO
Payer Message:
3 101960    OPTRICARE,ONE (4789)    ACETAZOLAMIDE 250MG 79 :REFILL TOO SO
Payer Message:

        Select the entry # to view or ?? for more actions
DR  Sort by Drug      RE  Sort by Reason      RX  Sort by Prescription
PA  Sort by Patient   RF  Screen Refresh      GI  Group by Insurance
Select: Quit// ??
TRI Show/Hide TRICARE  DN  Down a Line      PT  Print List
CVA Show/Hide CHAMPVA FS  First Screen     SL  Search List
VER View ePharmacy Rx  LS  Last Screen     ADPL Auto Display (On/Off)
+   Next Screen       GO  Go to Page       QU  Quit
-   Previous Screen   RD  Re Display Screen
UP  Up a Line         PS  Print Screen

Enter RETURN to continue or '^' to exit:

```

## Processing of TRICARE and CHAMPVA Rejections – TRICARE/CHAMPVA Eligible Bypass/Override Functions

- A bypass function is provided to allow continued processing of prescriptions for TRICARE and CHAMPVA eligible inpatients who have Environmental Indicators at the time the prescription is issued.
- Whenever a TRICARE or CHAMPVA inpatient prescription is auto-reversed by the ECME NIGHTLY BACKGROUND JOB, the prescription will be recorded to the TRICARE CHAMPVA Override Report as payment will not be received for this prescription

In the following example a TRICARE patient has Military Sexual Trauma. The system displays the Non-Billable Reason “MILITARY SEXUAL TRAUMA” on the screen.

```

ISSUE DATE: JAN 27,2015//      (JAN 27, 2015)
FILL DATE: (1/27/2015 - 1/28/2016): JAN 27,2015//      (JAN 27, 2015) Nature of Order:
WRITTEN//      W
WAS THE PATIENT COUNSELED: NO//
Do you want to enter a Progress Note? No//      NO

Rx # 104897      01/27/15
OPTRICARE,TWO #360
TAKE TWO TABLETS BY MOUTH TWICE A DAY

BACLOFEN 10MG TABS
BLAESER,DAVE      BLAESER,DAVE
# of Refills: 3

Was treatment related to Military Sexual Trauma? y YES

Is this correct? YES//

MILITARY SEXUAL TRAUMA

Another New Order for OPTRICARE,TWO? YES//

```

The following is a sample of the View Prescription ECME Log update. The Non-Billable Reason “MILITARY SEXUAL TRAUMA” is now displayed on the View Prescription ECME Log. This allows the system to record why a TRICARE prescription was allowed to be bypassed.

### Example: View Prescription ECME Log entry: TRICARE INPATIENT/DISCHARGE

```

Rx View (Active)      Jun 25, 2015@16:13:31 Page: 5 of 5
OPTRICARE,TWO
PID: 666-55-8741      Ht (cm): (      )
DOB: OCT 20,1955 (59) Wt (kg): (      )
+
ECME Log:
#      Date/Time      Rx Ref Initiator Of Activity
=====
1      1/27/15@15:28:54      ORIGINAL      BLAESER,DAVE
Comments: TRICARE-Not ECME Billable: MILITARY SEXUAL TRAUMA

```

In a similar situation where a prescription is issued to a CHAMPVA patient with an Environmental Indicator would be displayed on the reject processing screen and in the View Prescription ECME Log.

### TRICARE/CHAMPVA Eligible Outpatient Override Function

- An override function is provided to allow continued processing of prescriptions for TRICARE or CHAMPVA eligible outpatients when a rejected response is received from the TRICARE or CHAMPVA payer/PBM.
- The Reject Action prompt will default to “Quit”. If the Q (Quit) action is selected, the rejected claim will go to the TRICARE or CHAMPVA section, as appropriate, of the Pharmacy Third Party Payer Rejects – Worklist. If the D (Discontinue) action is selected, the next prompt “Nature of Order” will default to “Service Reject”. The I (Ignore) action is available if the user holds the [“PSO TRICARE/CHAMPVA” security key](#) and if selected, continued processing will occur. If the gross amount due exceeds the Ignore Threshold, the user must also have security key EPHARMACY SITE MANAGER to complete the ignore action.

#### Example of Reject Notification Screen Non-DUR/RTS with the action of D (Discontinue)

```

IN PROGRESS-Transmitting
IN PROGRESS-Parsing response
E REJECTED
  21 - M/I Product/Service ID

*** TRICARE - REJECT RECEIVED FROM THIRD PARTY PAYER ***
-----
Division : XXXX DIVISION                NPI#: XXXXXXXXXX
Patient  : TRICARE,ONE(XXX-XX-XXXX) Sex: M    DOB: OCT 1,19XX(XX)
Rx/Drug  : XXX5341/0 - AMOXICILLIN 250MG CA   ECME#: 000002345678
Reject(s): M/I Product/Service ID (21) Received on NOV 01, 2010@09:30:03.

Insurance : EXPRESS SCRIPT                Contact:
Group Name : TRICARE                      Group Number: DODA
Cardholder ID: SI9844532
Patient Billing Comment(s):
MAR 01, 2008@12:22:42 - NON BILLABLE FILLS FOR DIABETIC SUPPLIES (USER,ONE)
-----
Select one of the following:

I      (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION
D      (D)iscontinue - DO NOT FILL PRESCRIPTION
Q      (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(I)gnore, (D)iscontinue, (Q)uit: Q//D (D)iscontinue - DO NOT FILL PRESCRIPTION
Nature of Order: SERVICE REJECT//

Requesting PROVIDER: VHAPROVIDER,ONE      111      PHYSICIAN

```

In the following example a prescription is rejected from the Third Party Payer with a reject code of (88) DUR REJECT. The pharmacist has the option to Discontinue, Ignore, Override or Quit.



The Ignore action is only displayed for holders of the [PSO TRICARE/CHAMPVA security key](#). If the gross amount due exceeds the Ignore Threshold, the user must also have security key EPHARMACY SITE MANAGER to complete the ignore action.

### Example of Reject Notification Screen DUR/RTS

```

88 - DUR Reject Error

*** TRICARE - REJECT RECEIVED FROM THIRD PARTY PAYER ***
-----
Division : XXXXXX                               NPI#: XXXXXXXXXX
Patient  : OPPATIENT,TRICARE (765-XX-XXXX)   Sex: F   DOB: OCT 17,19XX(XX)
Rx/Drug  : 2718XXX/0 - BALNETAR 7.5 OZ       ECME#: 00000431XXXX
Reject(s): DUR REJECT (88). Received on NOV 01, 2010@07:08:44.

Insurance : EXPRESS SCRIPTS                     Contact:
Group Name : TRICARE                           Group Number: DODA
Cardholder ID: SI9844532
Patient Billing Comment(s):
MAR 01, 2008@12:22:42 - NON BILLABLE FILLS FOR DIABETIC SUPPLIES (USER,ONE)
-----
Select one of the following:

O          (O)VERRIDE - RESUBMIT WITH OVERRIDE CODES
I          (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION
D          (D)iscontinue - DO NOT FILL PRESCRIPTION
Q          (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)

(O)verride, (I)gnore, (D)iscontinue, (Q)uit: Q// i (I)GNORE - FILL Rx WITHOUT CLAIM
SUBMISSION
Gross Amount Due is $67.29. Do you want to continue (Y/N)? NO// y YES
You are bypassing claims processing. Do you wish to continue? NO// y YES

```

- For Non-Billable TRICARE or CHAMPVA rejects, a Non-Billable Notification Screen is provided to allow continued processing of prescriptions. The Reject Action prompt will default to “Discontinue”. If the action D (Discontinue) is selected, the prompt “Nature of Order” will default to “Service Reject”. The I (Ignore) action is available if the user holds the [“PSO TRICARE/CHAMPVA” security key](#) and if it is selected, continued processing will occur. If the gross amount due exceeds the Ignore Threshold, the user must have security key EPHARMACY SITE MANAGER to complete the ignore action. If the action Q (Quit) is selected, the Non-Billable TRICARE or CHAMPVA eligible prescription will go to the **Pharmacy Third Party Payer Rejects – Worklist** utilizing either Reject Code “eT” with reject description “TRICARE- NON BILLABLE” or Reject Code “eC” with reject description “CHAMPVA-NON BILLABLE (The reject codes “eT” and “eC” are for use internal to the VistA system only and have no relation to any NCPDP reject code listing.) The new entry will be displayed in the TRICARE or CHAMPVA section of the **Pharmacy Third Party Payer Rejects – Worklist**, as applicable.

In the following example a TRICARE Active Duty patient with Outpatient status submits an OTC, Non-Billable drug or supplies prescription for dispensing. The pharmacist will have the option of Discontinuing the Rx, Ignoring the Rx or Quitting. Discontinue is the option displayed below.

## Example of Non-Billable Notification Screen

```

Is this correct? YES//
NOT BILLABLE

*** TRICARE - NON-BILLABLE ***
-----
Division : XXXX DIVISION                      NPI#: 9999999999
Patient  : TRICARE,ONE(XXXX) Sex: M           DOB: JAN 1,19XX(XX)
Rx/Drug  : XXX5339/0 - DOCUSATE NA 100MG CA
Date/Time: OCT 31, 2010@12:22:10
Reason   : Not Billable
-----

This is a non-billable TRICARE prescription.
Select one of the following:
  D      (D)iscontinue - DO NOT FILL PRESCRIPTION
  Q      (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)
  I      (I)gnore - FILL Rx WITHOUT CLAIM SUBMISSION

(D)iscontinue,(Q)uit, (I)gnore: D// Discontinue

Nature of Order: SERVICE REJECT//

Requesting PROVIDER: VHAPROVIDER,ONE          111    PHYSICIAN

```

In the following example a TRICARE Active Duty patient with Outpatient status submitted an OTC, Non-Billable drug, or Supplies prescription for dispensing. The pharmacist selected the Quit option to send the prescription to the worklist for further review. The Non-Billable drug is displayed on the Pharmacy Third Party Payer Rejects – Worklist with a reason code “eT”.

## Example of Pharmacy Third Party Payer Rejects – Worklist

```

Insurance Rejects-Worklist   Oct 31, 2010@09:15:58           Page:    2 of    5
Division :ANYTOWN ISC
Selection : ALL UNRESOLVED REJECTS
# Rx#      PATIENT(ID) [^]          DRUG                      REASON
Payer Message:
                TRICARE - Non-DUR/RTS
13 102xxx   OPTRICARE,ONE(4789)          DIAZOXIDE 300MG INJ      eT : TRICARE-NON B
Payer Message:
14 102xxx   OPTRICARE,ONE(4789)          MANNITOL 15% S.S. LV 22 :M/I Dispense
Payer Message:
15 1028xxx  OPTRICARE,ONE(4789)          METHOCARBAMOL 750MG    34 :M/I Submissio
Payer Message:
16 103xxx   OPTRICARE,ONE(4789)          BENZTROPINE 2MG TAB     07 :M/I Cardholde
Payer Message:
17 103xxx   OPTRICARE,ONE(4789)          DEXAMETHASONE 0.5MG    07 :M/I Cardholde
Payer Message:
18 102xxx   TRICARE,ONLYTRICAR(3939)    NEODECADRON OPHTMALI    07 :M/I Cardholde
Payer Message:
19 102xxx   TRICARE,ONLYTRICAR(3939)    GENTAMICIN OPHTHALMI    07 :M/I Cardholde
Payer Message:
+          Select the entry # to view or ?? for more actions
DR Sort by Drug           RE Sort by Reason       RX Sort by Prescription
PA Sort by Patient        RF Screen Refresh       GI Group by Insurance
Select: Next Screen//

```

- The Non-Billable TRICARE prescriptions will appear on the Reject Information screen shown in the example below once the TRICARE Non-Billable claim has been selected from the Pharmacy Third Party Payer Rejects – Worklist. The screen will display:
  - ECME# field – will be blank
  - Insurance Information – will be blank



- Reject code section will have the reject code eT and status will state “NO CLAIM SUBMITTED”
- Available Actions will be DC – Discontinue Rx, VW -View Rx, MP – Medication Profile, FIL – Fill Rx and IGN Ignore Reject (FIL and IGN will require [PSO TRICARE/CHAMPVA security key](#))
  - Available Hidden Actions will be COM – Add Comments, ED – Edit Rx, VER – View ePharmacy Rx and all other standard List Manager hidden actions
- If the action DC is chosen, the system will discontinue the prescription and the prompt “Nature of Order” will default to “SERVICE REJECT”
  - The following actions will ***not*** be selectable when processing a TRICARE or CHAMPVA eligible Non-Billable reject: Change Suspense Date (CSD)/Submit Override Codes (OVR)/Submit Clarif Code (CLA)/Submit Prior Auth (PA)/Suspense Date Calculation (SDC)/Submit Mult Actions (SMA). If selected for a TRICARE reject, an error message will appear: “[action] not allowed for TRICARE Non-Billable claim”. If selected for a CHAMPVA reject, an error message will appear: “[action] not allowed for CHAMPVA Non-Billable claim”. The only actions available are to Discontinue, Fill the prescription, View prescription, Resubmit Claim or Medication Profile.

#### Example of Non-Billable Reject Information Screen

```

Reject Information (TRICARE) Oct 30, 2010@10:15:01 Page: 1 of 1
Division :ANYTOWN NPI#: 1234567890 NCPDP: 4150001P TAX ID: XX-XXXXXXX
Patient : TRICARE,TWO(XXX-XX-XXXX) Sex: M DOB: JUL 1,19XX(XX)
Rx# : ###4928/0 ECME#: Date of Service: Mar 16, 2009
CMOP Drug: DOCUSATE NA 100MG CAP NDC Code: 54629-0600-01

REJECT Information (TRICARE)
Reject Type : TRICARE-NON BILLABLE received on OCT 17, 2010@13:19:22
Reject Status : NO CLAIM SUBMITTED
Payer Adtl Msg : Not ECME Billable: DRUG NOT BILLABLE
Reason Code :

COMMENTS - REJECT
- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

INSURANCE Information
Insurance :
Contact :
BIN / PCN :
Group Number :
Cardholder ID :

Enter ?? for more actions
VW View Rx FIL Fill Rx CSD Change Suspense Date
MP Medication Profile DC Discontinue Rx IGN Ignore Reject
RES Resubmit Claim OVR Submit Override Codes
Select Item(s): Next Screen//

```

**Example of Non-Billable Reject Information Screen displaying the action OVR (Submit Override Codes) error message**

```

Reject Information (TRICARE) Nov 11, 2010@12:37:30 Page: 1 of 2
Division :ANYTOWN NPI#: 1234567890 NCPDP: 4150001P TAX ID: XX-XXXXXXX
Patient : OPPATIENT,TRICARE(XXX-XX-XXXX) Sex: F DOB: OCT 7,19XX(XX)
Rx# : 27XXXXXX/0 ECME#: Date of Service: Sep 16, 2010
Drug : ALUMINUM HYDROXIDE GEL 320MG/5ML SUSP NDC Code: 00054-3035-63

REJECT Information (TRICARE)

Reject Type : TRICARE-NON BILLABLE received on SEP 16, 2010@13:07:12
Reject Status : NO CLAIM SUBMITTED
Payer Adtl Msg : Not ECME Billable: DRUG NOT BILLABLE

Reason Code :
DUR Text : _____

COMMENTS - REJECT
- SEP 16, 2010@13:07:12 - Transferred by (XXXXXXXX,XXXX)

INSURANCE Information
Insurance :
Contact :
BIN / PCN :
Group Number :
+ OVR not allowed for TRICARE Non-Billable claim
VW View Rx FIL Fill Rx CSD Change Suspense Date
MP Medication Profile DC Discontinue Rx IGN Ignore Reject
RES Resubmit Claim OVR Submit Override Codes
Select Item(s): Next Screen//
  
```

**TRICARE/CHAMPVA Without an Active Insurance Policy**

- For TRICARE or CHAMPVA rejects without an active TRICARE or CHAMPVA insurance policy on file, a reason of ‘Not Billable’ will be displayed on the Reject Notification Screen. The Reject Action prompt will default to Q (Quit) and reject sent to the **Pharmacy Third Party Payer Rejects – Worklist** utilizing either Reject Code “eT” with reject description “TRICARE-NON BILLABLE” or Reject Code “eC” with reject description “CHAMPVA-NON BILLABLE. The new entry will be displayed in the TRICARE or CHAMPVA section of the Pharmacy Third Party Payer Rejects – Worklist, as applicable.

In the following example a TRICARE patient without an active TRICARE insurance policy on file submitted a Billable drug or Supplies prescription for dispensing. The Reject Action prompt defaulted to Q (Quit) and the prescription will be sent to the Pharmacy Third Party Payer Rejects – Worklist with a reason code “eT”.

**Example of TRICARE reject without an active TRICARE insurance policy on file**

```

Not Insured:
*** TRICARE - NON-BILLABLE ***
-----
Division : XXXXXXXX XXX&XXX NPI: 999999999 NCPDP: 9999999
Patient : XXXX,XXXX(999X) Sex: M DOB: APR 10,1937(82)
Rx/Drug : 9999999/0 - CETIRIZINE HCL 5MG T
Date/Time: NOV 26, 2019@14:06:15
Reason : Not Billable
-----
  
```

This is a non-billable TRICARE prescription.

Select one of the following:

D (D)iscontinue - DO NOT FILL PRESCRIPTION  
Q (Q)UIT - SEND TO WORKLIST (REQUIRES INTERVENTION)  
I (I)GNORE - FILL Rx WITHOUT CLAIM SUBMISSION

(D)iscontinue, (Q)uit, (I)gnore: Q//

## Reject Information Screen – Electronic Signature and TRICARE/CHAMPVA Justification



This action requires the security key [PSO TRICARE/CHAMPVA](#).

- A user must hold the [“PSO TRICARE/CHAMPVA” security key](#) to perform the Fill Rx (FIL) and Ignore Reject (IGN) actions on the Third Party Payer Rejects – Worklist and the “Ignore” action on the TRICARE or CHAMPVA Reject Notification screen. If the gross amount due exceeds the Ignore Threshold, the user must have security key EPHARMACY SITE MANAGER to complete the ignore action. If the user holds the security key “PSO TRICARE/CHAMPVA”, the prompt will display: “You are bypassing claims processing. Do you wish to continue?” If the user enters (No=Default), the user will return to the reject notification screen. If the user selects Yes to continue, the system will mimic the current Ignore action/functionality and allow processing of the prescription. The user will be prompted to enter their electronic signature code and asked to enter data into the TRICARE Justification or CHAMPVA Justification field, which is required. The user will be allowed to “^” out of the process. If the user opts to “^” out of the process, they will be taken back to the Reject Information screen prompt.

In the following example a TRICARE patient with Outpatient status submits a prescription for processing and a rejected response is received from the TRICARE payer/PBM. The pharmacist initially sends the prescription to the Third Party Payer Rejects – Worklist then later decides to finish processing the prescription and chooses the FIL action.

### Example of Reject Information Screen – Electronic Signature and TRICARE Justification

```
Reject Information (TRICARE) Sep 30, 2010@10:25:13 Page: 1 of 1
Division :ANYTOWN NPI#: 1234567890 NCPDP: 4150001P TAX ID: XX-XXXXXXX
Patient : TRICARE,TWO (XXX-XX-XXXX) Sex: M DOB: JAN 1,19XX (XX)
Rx# : XXX4928/0 ECME#: 000001231234 Date of Service: Feb 08, 2009
CMOP Drug: ACARBOSE 25MG TAB NDC Code: 00026-2863-52

REJECT Information (TRICARE)
Reject Type : M/I Cardholder ID (07)
Reject Status : OPEN/UNRESOLVED - E REJECTED
Payer Adtl Msg :
Reason Code :
DUR Text :

COMMENTS - REJECT
- AUG 25, 2010@13:25:07 - Transferred by OPECC. (OPCLERK,ONE)

INSURANCE Information
Insurance : EXPRESS SCRIPTS
Contact :
BIN / PCN : 741852 / XXXXXXXXX
Group Number : DODA
Cardholder ID : XXXXXXXX
```

```

Enter ?? for more actions
VW View Rx          FIL Fill Rx          CSD Change Suspense Date
MP Medication Profile DC Discontinue Rx  IGN Ignore Reject
RES Resubmit Claim  OVR Submit Override Codes
Select Item(s): Quit//FIL

You are bypassing claims processing. Do you wish to continue (Y/N)? No//Yes

Enter your Current Signature Code: SIGNATURE VERIFIED

TRICARE Justification: Patient required medication

```

- If the user does not hold the security key [“PSO TRICARE/CHAMPVA”](#), an on-screen alert to the user will display “Action Requires <PSO TRICARE/CHAMPVA> security key” as displayed in the example below. The user will need to press any key to return to the Reject Information screen.

**Example of Reject Information Screen – Security Key – ALERT**

```

Reject Information (TRICARE) May 15, 2010@11:45:23 Page: 1 of 1
Division :ANYTOWN NPI#: 1234567890 NCPDP: 4150001P TAX ID: XX-XXXXXXX
Patient : TRICARE,TWO(XXX-XX-XXXX) Sex: M DOB: JAN 1,19XX(XX)
Rx# : XXX4928/0 ECME#: 000001231234 Date of Service: Mar 10, 2009
CMOP Drug: ACARBOSE 25MG TAB NDC Code: 00026-2863-52

REJECT Information (TRICARE)
Reject Type : M/I Cardholder ID (07)
Reject Status : OPEN/UNRESOLVED - E REJECTED
Payer Addl Msg :
Reason Code :
DUR Text :

INSURANCE Information
Insurance : EXPRESS SCRIPTS
Contact :
BIN / PCN : 741852 / XXXXXXXX
Group Number : DODA
Cardholder ID : XXXXXXXX

Action Requires <PSO TRICARE/CHAMPVA> Security Key
VW View Rx          FIL Fill Rx          CSD Change Suspense Date
MP Medication Profile DC Discontinue Rx  IGN Ignore Reject
RES Resubmit Claim  OVR Submit Override Codes
Select Item(s): Quit//

```

- The person that resolves TRICARE and CHAMPVA non-DUR/RTS rejects is dependent upon the type of reject. Dispense As Written (DAW) reject code 22 can be resolved by the pharmacy staff by editing the prescription and entering the appropriate DAW code that results in a claims resubmission. Other insurance-related rejects (missing eligibility or cardholder ID number) are resolved by the Outpatient Pharmacy Electronic Claims Coordinator (OPECC). Once the rejection has been resolved, the Reject Information screen under the pharmacy reject worklist shows the status of the prescription as E PAYABLE. At this point the user may select the FIL action, which will prompt for label print.

```

Reject Information (TRICARE) Aug 27, 2008@17:16:27 Page: 1 of 1
Division :ANYTOWN NPI#: 1234567890 NCPDP: 4150001P TAX ID: XX-XXXXXXX
Patient : OPTRICARE,ONE(666-55-4789) Sex: M DOB: OCT 18,1963(44)
Rx# : 102059/0 ECME#: 000000113288 Date of Service: Aug 27, 2008
Drug : IMIPRAMINE 25MG TAB NDC Code: 00779-0588-30

```

```

REJECT Information (TRICARE)
Reject Type      : M/I Cardholder ID Number (07)
Reject Status    : OPEN/UNRESOLVED - E PAYABLE
Payer Adtl Msg   :
Reason Code      :
DUR Text         :

INSURANCE Information
Insurance        : EXPRESS SCRIPTS
Contact          :
BIN / PCN        : 741852 / XXXXXXXXXX
Group Number     : DODA
Cardholder ID    : XXXXXXXX

Enter ?? for more actions
VW View Rx          FIL Fill Rx          OVR Submit Override Codes
MP Medication Profile DC Discontinue Rx  CSD Change Suspense Date
Select Item(s): Quit// FIL Fill Rx
                  [Closing all rejections for prescription 102059:
                  07 - ...OK]

Print Label? ? YES//

Select LABEL PRINTER: HOME// UCX/TELNET Right Margin: 80//

```

For rejects that remain in suspense, the user will be allowed to process the rejection as indicated above, however no labels will be printed until the prescription is pulled early or printed from suspense. Upon resolving the reject, the user will be notified of this information. CMOP prescriptions will function in the same manner.

## **Other Rejects**

### **[PSO REJECTS WORKLIST]**

Rejects under the OTHER REJECTS section of the screen are resolved in the same manner as DUR/RTS rejects. The comments section will denote whether the reject was transferred automatically as is the case in the example below or “Transferred by OPECC” would denote those rejects where the OPECC manually transferred them to pharmacy for resolution.

The following example shows the user selecting to resolve sequence 16 from the Third Party Payer Rejects – Worklist option shown above. The user selects ED to edit the DAW code for the prescription, then resubmits the claim afterward. Since the claim was payable, both the RTS reject in sequence 13 and the DAW reject in sequence 16 were marked resolved. Also both are removed from the worklist after submission. The user then proceeds to Patient Prescription Processing option to view the ECME logs which show that claim resubmission was payable and that both rejects have been resolved.

#### **Example: Resolving Other Rejects**

```

Reject Information (Veteran) Jul 30, 2008@14:54:51 Page: 1 of 2
Division : ANYTOWN NPI#: 1234567890 NCPDP: 4150001P TAX ID: XX-XXXXXXX
Patient : OPPATIENT, FOUR (XXXX) Sex: M DOB: OCT 20, 1965 (42)
Rx# : 2055203/1 ECME#: 000001615102 Date of Service: Jul 15, 2008
CMOP Drug: DANAZOL 50MG CAP NDC Code: 00024-0304-06

REJECT Information (Veteran)
Reject Type : 22 - M/I Dispense As Written- received on JUL 30, 2008@14:32:16
Reject Status : OPEN/UNRESOLVED
Payer Adtl Msg :

```

```

Reason Code      :
DUR Text        :

OTHER REJECTS
79 - Refill Too Soon

COMMENTS - REJECT
- JUL 30, 2008@14:32:16 - Automatically transferred due to override for reject
  code. (OPHARM,ONE)

+           Enter ?? for more actions
VW View Rx           IGN Ignore Reject           OVR Submit Override Codes
MP Medication Profile RES Resubmit Claim         CSD Change Suspense Date
Select: Next Screen// ed ED

Jul 30, 2008@14:54:53

```

### Example: Resolving Other Rejects (continued)

```

Rx #: 2055203$e
(1) *Orderable Item: DANAZOL CAP,ORAL
(2)   CMOP Drug: DANAZOL 50MG CAP
(3)   *Dosage: 50 (MG)
      Verb: TAKE
      Dispense Units: 1
      Noun: CAPSULE
      *Route: ORAL (BY MOUTH)
      *Schedule: BID
(4) Pat Instructions:
      SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
(5) Patient Status: OUTPT NON-SC
(6)   Issue Date: 07/11/08           (7) Fill Date: 07/11/08
      Last Fill Date: 07/15/08 (Window)
Select Action: Next Screen// NEXT SCREEN

Last Release Date:           (8) Lot #:
      Expires: 07/12/09           MFG:
(9)   Days Supply: 3           (10) QTY (CAP): 6
(11)  # of Refills: 11           Remaining: 10
(12)  Provider: OPProvider,ONE
(13)  Routing: MAIL           (14) Copies: 1
(15)  Clinic: Not on File
(16)  Division: CHEYENNE VAM&ROC (442)
(17)  Pharmacist:
(18)  Remarks: New Order Created by copying Rx # 2055182
(19)  Counseling: NO
(20)  Refill Data
(21)  DAW Code: 0 - NO PRODUCT SELECTION INDICATED
      Finished By: OPHARM,ONE
+           Enter ?? for more actions
DC (Discontinue)           PR (Partial)           RL (Release)
ED Edit                   RF (Refill)           RN (Renew)
Select Action: Next Screen// 21
DAW CODE: 0// ?

OP Medications (SUSPENDED) Jul 30, 2008@14:54:55 Page: 2 of 3
OPPATIENT,FOUR
PID: 666-55-9987           Ht (cm): _____ (_____)
DOB: OCT 20,1965 (42)     Wt (kg): _____ (_____)
+

Answer with BPS NCPDP DAW CODE
Choose from:
0 NO PRODUCT SELECTION INDICATED
1 SUBSTITUTION NOT ALLOWED BY PRESCRIBER
2 SUBSTITUTION ALLOWED-PATIENT REQUESTED PRODUCT DISPENSED
3 SUBSTITUTION ALLOWED-PHARMACIST SELECTED PRODUCT DISPENSED
4 SUBSTITUTION ALLOWED-GENERIC DRUG NOT IN STOCK

```

5 SUBSTITUTION ALLOWED-BRAND DRUG DISPENSED AS A GENERIC  
6 OVERRIDE  
7 SUBSTITUTION NOT ALLOWED-BRAND DRUG MANDATED BY LAW  
8 SUBSTITUTION ALLOWED-GENERIC DRUG NOT AVAILABLE IN MARKETPLACE  
9 OTHER

DAW CODE: 0// 1 - SUBSTITUTION NOT ALLOWED BY PRESCRIBER  
Are You Sure You Want to Update Rx 2055203? Yes// YES

OP Medications (SUSPENDED) Jul 30, 2008@14:55:21 Page: 2 of 3

OPPATIENT,FOUR

PID: 666-55-9987 Ht (cm): \_\_\_\_\_ (\_\_\_\_\_)  
DOB: OCT 20,1965 (42) Wt (kg): \_\_\_\_\_ (\_\_\_\_\_)

+

Last Release Date: (8) Lot #: \_\_\_\_\_  
Expires: 07/12/09 MFG: \_\_\_\_\_  
(9) Days Supply: 3 (10) QTY (CAP): 6  
(11) # of Refills: 11 Remaining: 10  
(12) Provider: OPHARM,ONE  
(13) Routing: MAIL (14) Copies: 1  
(15) Clinic: Not on File  
(16) Division: CHEYENNE VAM&ROC (442)  
(17) Pharmacist:  
(18) Remarks: New Order Created by copying Rx # 2055182  
(19) Counseling: NO  
(20) Refill Data  
(21) DAW Code: 1 - SUBSTITUTION NOT ALLOWED BY PRESCRIBER

Finished By: OPHARM,ONE

+

DC (Discontinue) PR (Partial) RL (Release)  
ED Edit RF (Refill) RN (Renew)

Select Action: Next Screen// ^

Reject Information (Veteran) Jul 30, 2008@14:55:28 Page: 1 of 2  
Division : CHEYENNE VAM&ROC NPI#: 1164471991  
Patient : OPPATIENT,FOUR(666-55-9987) Sex: M DOB: OCT 20,1965(42)  
Rx# : 2055203/1 ECME#: 000001615102 Date of Service: Jul 15, 2008  
CMOP Drug: DANAZOL 50MG CAP NDC Code: 00024-0304-06

REJECT Information (Veteran)

Reject Type : 22 - M/I Dispense As Written- received on JUL 30, 2008@14:32:16  
Reject Status : OPEN/UNRESOLVED  
Payer Adtl Msg :  
Reason Code :  
DUR Text :

OTHER REJECTS

79 - Refill Too Soon

COMMENTS

- JUL 30, 2008@14:32:16 - Automatically transferred due to override for reject code. (OPHARM,ONE)

+

Enter ?? for more actions  
VW View Rx IGN Ignore Reject OVR Submit Override Codes  
MP Medication Profile RES Resubmit Claim CSD Change Suspense Date  
Select: Next Screen// RES Resubmit Claim

When you confirm, a new claim will be submitted for the prescription and this REJECT will be marked resolved.

Confirm? YES//

**Example: Resolving Other Rejects (continued)**

```

TRICARE Prescription 2055203 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Transmitting
E PAYABLE

Please wait...

Insurance Rejects-Worklist Jul 30, 2008@14:38:38 Page: 2 of 3
Division : CHEYENNE VAM&ROC
Selection : ALL UNRESOLVED REJECTS
# Rx# PATIENT(ID) [v] DRUG REASON
Payer Message:
13 2055202 OPPATIENT,FOUR(9987) BACLOFEN 10MG TAB 79 :REFILL TOO SO
Payer Message:
14 2055155 OPPATIENT,FOUR(9987) BENAZEPRIL HCL 40MG 79 :REFILL TOO SO
Payer Message:
OTHER REJECTS
15 2055134A OPPATIENT,FOUR(9987) CALCIUM GLUCONATE 65 22 :M/I Dispense
Payer Message:

+ Select the entry # to view or ?? for more actions
DR Sort by Drug RE Sort by Reason RX Sort by Prescription
PA Sort by Patient RF Screen Refresh GI Group by Insurance
Select: Next Screen//^
    
```

Below is taken from Patient Prescription Processing option for the Rx in this example:

```

Medication Profile Jul 30, 2008@15:03:25 Page: 1 of 2
OPPATIENT,FOUR
PID: 666-55-9987 Ht (cm) : _____ (_____)
DOB: OCT 20,1965 (42) Wt (kg) : _____ (_____)
SEX: MALE
CrCL: <Not Found> (CREAT: Not Found) BSA (m2) : _____
ISSUE LAST REF DAY
# RX # DRUG QTY ST DATE FILL REM SUP
-----REFILL TOO SOON/DUR REJECTS (Third Party)-----
1 2055202$e BACLOFEN 10MG TAB 14 S> 07-08 12-12 11 3
2 2055155$e BENAZEPRIL HCL 40MG TAB 1 S> 06-24 06-26 10 1
3 2055134A$e CALCIUM GLUCONATE 650MG TAB 4 A> 06-16 07-30 10 2
-----ACTIVE-----
4 2055174$e ACEBUTOLOL HCL 200MG CAP 1 S> 06-26 06-27 11 1
5 2055123$e BACITRACIN 500 UNT/GM OPHTHALMIC OINT 1 AT 06-13 06-14 10 30
6 2055203$e DANAZOL 50MG CAP 6 S> 07-11 07-15 10 3
7 2055183$e FAMCICLOVIR 125MG TAB 2 AT 06-26 06-26 11 2
8 2055215$ GABAPENTIN 100MG CAP 6 S> 07-30 07-30 11 3
9 2055186$e HALOPERIDOL 0.5MG TAB 2 AT 06-26 06-26 11 4
+ Enter ?? for more actions
DC Discontinue PR Partial RL Release
ED Edit RF (Refill) RN RenewSelect Action: Next

Select Action: Next Screen// AL AL

OP Medications (SUSPENDED) Jul 30, 2008@15:03:25 Page: 1 of 3
OPPATIENT,FOUR
PID: 666-55-9987 Ht (cm) : _____ (_____)
DOB: OCT 20,1965 (42) Wt (kg) : _____ (_____)

Rx #: 2055203$e
(1) *Orderable Item: DANAZOL CAP,ORAL
(2) CMOP Drug: DANAZOL 50MG CAP
NDC: 00055-0633-02
(3) *Dosage: 50 (MG)
Verb: TAKE
    
```



```

Dispense Units: 1
Noun: CAPSULE
*Route: ORAL (BY MOUTH)
*Schedule: BID
(4)Pat Instructions:
    SIG: TAKE ONE CAPSULE BY MOUTH TWICE A DAY
(5) Patient Status: OUTPT NON-SC
(6) Issue Date: 07/11/08 (7) Fill Date: 07/11/08
    Last Fill Date: 07/15/08 (Window)
+ Enter ?? for more actions
DC Discontinue PR Partial RL Release
ED Edit RF (Refill) RN Renew
Select Action: Next Screen// AL AL

Select Activity Log by number
1. Refill 2. Partial 3. Activity 4. Labels
5. Copay 6. ECME 7. CMOP Events 8. All Logs: (1-8): 8// 6

Rx #: 2055203 Original Fill Released:
Routing: Mail Finished by: OPPHARM,ONE

ECME Log:
# Date/Time Rx Ref Initiator Of Activity
=====
1 7/11/08@10:13:11 ORIGINAL OPPHARM,ONE
Comments: ECME:PULLED FROM SUSPENSE (NDC:00024-0303-06)-E PAYABLE-pOPP INSURANCE
2 7/30/08@14:32:17 REFILL 1 OPPHARM,TWO
Comments: ECME:PULLED FROM SUSPENSE (NDC:00024-0303-06)-E REJECTED-pOPP INSURANCE
3 7/30/08@14:55:56 REFILL 1 OPPHARM,TWO
Comments: ECME:REJECT WORKLIST-E PAYABLE-pOPP INSURANCE
4 7/31/08@12:48:02 REFILL 1 OPPHARM,TWO
Comments: CHAMPVA-ECME RED Resubmit Claim w/Edits: Date of Service
(7/30/2008)-pOPP INSURANCE

ECME REJECT Log:
# Date/Time Rcvd Rx Ref Reject Type STATUS Date/Time Resolved
=====
1 7/30/08@14:32:16 REFILL 1 M/I Dispense As RESOLVED 7/30/08@14:55:40
Comments: AUTOMATICALLY CLOSED (CLAIM RE-SUBMITTED)
2 7/30/08@14:32:16 REFILL 1 REFILL TOO SOON RESOLVED 7/30/08@14:55:40
Comments: AUTOMATICALLY CLOSED (CLAIM RE-SUBMITTED)

Enter ?? for more actions
Select Action:Quit//

```

## View ePharmacy Rx [BPS RPT VIEW ECME RX]

The *View ePharmacy Rx* option allows you to view information for one prescription, combining information from Outpatient Pharmacy, Integrated Billing and ECME. More information on this report is available in the *Electronic Claims Management Engine (ECME) User Manual*.

## Bypass 3/4 Day Supply

### [PSO BYPASS 3/4 SUPPLY]

The *Bypass 3/4 Day Supply* option allows you to enter one or more prescriptions to bypass the 3/4 days supply processing. This option applies to the most current fill for billable prescriptions with third party insurance and the prescription must be on the CMOP Suspense Queue when setting the Bypass flag from the option on the **ePharmacy Menu**. If the RX is not on the CMOP suspense queue, an alert will display to notify the user.

- Similar to functionality on other ePharmacy screens, entering a prescription twice will remove it from the list. If an invalid prescription is entered, ?? will be displayed.

#### Example: Option BY Bypass 3/4 Day Supply

```
Select ePharmacy Menu Option: BY Bypass 3/4 Day Supply

Select one or more prescriptions currently on the CMOP suspense queue.
For each prescription entered, the 3/4 days Supply logic will be bypassed when
the CMOP process runs. This will apply only to the current fill on each ePharmacy
billable prescription selected.

Select PRESCRIPTION RX #: 888888 METFORMIN HCL 500MG 24HR SA TAB
Another one: 1111111A METFORMIN HCL 500MG 24HR SA TAB
Another one: 1234567 ??
Another one: 777777
RX is not on CMOP suspense queue
Another one: 555555
RX is not ePharmacy billable
Another one: 222222A METFORMIN HCL 500MG 24HR SA TAB
Another one: 999999 Aspirin
Another one: 999999 Aspirin
Remove RX 999999 from your list? Yes//
Another one: <enter>

Prescriptions Selected:
888888 METFORMIN HCL 500MG 24HR SA TAB Last Name, First Name
1111111A METFORMIN HCL 500MG 24HR SA TAB Last Name, First Name
222222A METFORMIN HCL 500MG 24HR SA TAB Last Name, First Name

When the CMOP suspense queue is run, the 3/4 Days Supply logic will be bypassed for the
current fill for each ePharmacy billable prescription selected.

Continue? Yes//

Rx Drug Patient New Suspense Date
888888 METFORMIN HCL 500MG 24HR SA TAB Last Name, First Name (NOV 19, 2020)
1111111A METFORMIN HCL 500MG 24HR SA TAB Last Name, First Name (NOV 19, 2020)
222222A METFORMIN HCL 500MG 24HR SA TAB Last Name, First Name (NOV 19, 2020)
```

- Bypass activity will be recorded in the activity log.

**Example of the Activity Log capturing Bypass activity:**

Activity Log:				
#	Date/Time	Reason	Rx Ref	Initiator Of Activity
1	9/01/20@14:39:16	SUSPENSE	ORIGINAL	LAST NAME, FIRST NAME
Comments: Bypass 3/4 Day Supply set to YES				
2	9/01/20@16:50:20	SUSPENSE	ORIGINAL	POSTMASTER
Comments: 3/4 Day Supply logic bypassed during CMOP processing				

**Productivity/Revenue Report  
[PSO PRODUCTIVITY REVENUE RPT]**

This option gives the user the ability to run a report for Pharmacy productivity or for Revenue associated with Reject Resolution Required.

The user can select one of the following parameters to filter the data on the report:

- **DIVISION:** Allows the user to select one, some or all divisions.
- **RRR Revenue or Productivity:** Allows the user to run the RRR Revenue report or the Productivity report.
- **Closed/Resolved:** Allows the user to choose a claim status of Closed/Resolved E PAYABLE, Closed/Resolved E REJECTED or both.
- **Begin Date Resolved:** Allows the user to pick the beginning date to begin the search. The beginning resolved date defaults to T-90.
- **End Date Resolved:** Allows the user to pick the ending date to end the search. The ending resolved date defaults to T.
- Any combination can be selected:
  - **PATIENT:** Allows the user to select a single, multiple or all patients.
  - **DRUG:** Allows the user to select a single, multiple or all drugs.
  - **RX:** Allows the user to select a single, multiple or all prescriptions.
  - **INSURANCE:** Allows the user to select a single, multiple or all insurances.
  - **REJECT CODE:** Allows the user to select a single, multiple or all reject codes.
- **Sort:** Allows the user to choose one option for the report sort. Options include:
  - Division
  - Date Resolved
  - Resolved By
  - Drug Name
  - Reject Code
- **Patient Name:** Allows the user to include or exclude the patient name on the report.

The report can also be exported to Excel.

For the Productivity option, prescriptions will be reported if the fill has a rejection that is displayed or has been displayed on the Pharmacy Worklist, or is an Auto-resolved reject. A reject is auto-resolved for:

- Refills or renewals only (no original fills)
- Back-billed or resubmitted prescriptions only
- All patient eligibilities
- Limit to rejects of 79
- Limit to rejects of 88 and 943 with a Reason for Service Codes of ID (INGREDIENT DUPLICATION) or ER (OVERUSE)
- Only rejected claims for prescriptions that have been released

Auto resolved rejects appear on the Productivity report with a message in the Action Taken field of "BACK-BILL/RESUBMISSION AUTO RESOLVED" and Resolved By will be "Postmaster".

#### Example: Productivity Report

Pharmacy Productivity Report		Print Date: Oct 20, 2015@15:52		Page: 1		
Selected Divisions: ALL						
Date Reject Resolved: 07/22/15 - 10/20/15						
Select by PATIENT: ALL						
Sort by DIVISION						
RX#/FILL DRUG	REL DATE	DT REJECTED	DT RESOLVED REJECTION	RESOLVED BY	ACTION TAKEN DIVISION	AMT PAID INSURANCE NAME
111822/0 FLUORESCHEIN 10% 5ML INJ	09/29/11	08/18/15	79 - Refill Too Soon	DAWSON,MARK R	CLAIM RE-SUBMITTED ANYTOWN ISC	0.00 ECPHARM INSURA
111938/0 DIGITOXIN 0.1MG S.T.	09/03/15	09/03/15	88 - DUR Reject Error	STILES,CINDY F	CLAIM RE-SUBMITTED ANYTOWN ISC	0.00 EXPRESS SCRIP CS, TRI

For the Revenue Report, prescriptions will be reported if a Reject Resolution Required reject has been resolved to a payable claim. The original fill and all subsequent refills associated with reject will display.

#### Example: Revenue Report

RRR Revenue Report		Print Date: Oct 20, 2015@15:55		Page: 1		
Selected Divisions: ALL						
Date Reject Resolved: 07/22/15 - 10/20/15						
Status: CLOSED/RESOLVED - E PAYABLE, E REJECTED						
Select by PATIENT: ALL						
Sort by DIVISION						
RX#/FILL DRUG	REL DATE	DT REJECTED	DT RESOLVED REJECTION	RESOLVED BY	ACTION TAKEN DIVISION	AMT PAID INSURANCE NAME
111822/0 FLUORESCHEIN 10% 5ML INJ	09/29/11	08/18/15	79 - Refill Too Soon	DAWSON,MARK R	CLAIM RE-SUBMITTED ANYTOWN ISC	0.00 ECPHARM INSURA
111938/0 DIGITOXIN 0.1MG S.T.	09/03/15	09/03/15	88 - DUR Reject Error	STILES,CINDY F	CLAIM RE-SUBMITTED ANYTOWN ISC	0.00 EXPRESS SCRIP CS, TRI

### ePharmacy Patient Comment

[PSO EPHARMACY PATIENT COMMENTS]

The patient comment option allows comments to be entered at the patient level rather than the prescription level. Patient comments display on the reject notification screen and the reject information screen.



This option requires the PSO EPHARMACY SITE MANAGER security key.

After selecting the option, select a patient to continue to the comment screen. The patient comment screen displays comments in reverse chronological order and existing comments cannot be edited. Use the Inactivate or Activate Comment action to inactivate if the comment is no longer needed.

**Example: ePharmacy Patient Comment**

```
ePharmacy Patient Comment      Jan 11, 2018@12:09:57      Page: 1 of 1
Patient: PSOPATIENT,ONE (XXXX)      Sex: M      DOB: 02/11/35 (82)
#      STATUS      DATE/TIME      USER
COMMENT
1      A      JAN 11, 2018@12:09:57      PSOUSER,TWO
The second patient comment goes here in reverse order.
2      A      JAN 11, 2018@12:09:31      PSOUSER,THREE
This is a patient comment.

Enter ?? for more actions
A      Add Patient Comment      C      Comment History
I      Inactivate or Activate Comment      EX      Exit
Select action: Quit//
```

These actions are available on the patient comment screen:

- A (Add Patient Comment) – Allows a user to add a patient comment.
- I (Inactivate or Activate Comment) – Comments cannot be deleted. Use this action to make a comment inactive to suppress display. Acting as a toggle, this action will inactivate comments that are active and vice versa.
- C (Comment History) –For a selected line number, display the history of add, inactivate, and activate.

**REJECT RESOLUTION REQUIRED Rejects**

**[PSO REJECTS WORKLIST]**

Rejects under the REJECT RESOLUTION REQUIRED section of the screen are resolved in the same manner as DUR/RTS rejects. The comments section will denote that the reject was transferred automatically to the Third Party Payer Rejects – Worklist for resolution.

The following is an example of the Reject Information Screen for Reject Resolution Required rejects.

```
Reject Information(Veteran)Jun 05, 2013@07:46:18      Page: 1 of 1
Division :ANYTOWN      NPI#: 1234567890      NCPDP: 4150001P      TAX ID: XX-XXXXXXX
Patient : OPORVET,J-CNF(061P)      Sex: M      DOB: NOV 20,1961(51)
Rx# : 2720321/0      ECME#: 000004317186      Date of Service: May 28, 2013
Drug : AMPICILLIN 1GM INJ      NDC Code: 00015-7404-99

REJECT Information BACK-BILL
Reject Type : 76 - Plan Limitations Exceeded - received on MAY 28, 2013@08:59
Reject Status : OPEN/UNRESOLVED - E PAYABLE
Payer Adtl Msg : EMD 1000: CLAIM PAID RX:000004317186FILL:2013-05-28 BIN:610144
PCN:TEST
```

```

Reason Code      :
+DUR Text       :

INSURANCE Information
Insurance       : EPOR7                               Coord. Of Benefits: PRIMARY
Contact        : 333-444-5555
BIN / PCN      : 610144 / XXXXXXXX
Group Number   : 777
Cardholder ID  : 152364859
                Enter ?? for more actions
Cardholder ID  : 152364859
                Enter ?? for more actions
VW View Rx     :          IGN Ignore Reject          OVR Submit Override Codes
MP Medication Profile  RES Resubmit Claim          CSD Change Suspense Date
(I)gnore,(Q)uit: Q//

COMMENTS - REJECT
- JUN 11, 2013@11:181 - Automatically transferred due to Reject Resolution Required
reject Code. (POSTMASTER)

```

## MailMan Message for Open/Unresolved Rejects

When prescriptions remain on the Third Party Payer Reject – Worklist over the specified number of days, the system will send a Mailman Message. This message will be sent to the PSO REJECTS BACKGROUND MESSAGE mail group. Those users needing access to this information will need to be added manually to this mail group.

The specified number of days referred to above is the number of days an uncommented reject can remain on the reject worklist without being included in the nightly reject worklist alert mail message. The number of days are defined in the EPHARMACY SITE PARAMETERS file (#52.86) as described in the EPHARMACY SITE PARAMETERS FILE section of this document.

The following are the criteria for generating a Mailman message regarding a rejected claim:

- Prescription is active
- Prescription is unreleased
- Claim is on the Reject Worklist for specified number of days or greater
- Claim has no comments added within date range.

Adding a comment to the reject will automatically reset the clock for the alert. The specified number of days will be site configurable and stored in EPHARMACY SITE PARAMETERS file (#52.86). The initial patch default setting will be five (5) days; however, the site will be able to reset the parameter between one (1) and thirty (30) to generate the alert message. MailMan message will be sent as a Priority message, and there will be a separate MailMan message for each division. The following is an example of the message:

```

Subj: ePharmacy - OPEN/UNRESOLVED REJECTS LIST for GENERIC SITE [#2417022]
11/17/14@13:18 70 lines
From: OUTPATIENT PHARMACY PACKAGE In 'IN' basket. Page 1
-----
No action has been taken within the past 3 days to resolve the rejects
listed in this message. They will continue to show on the Third Party
Payer Rejects - Worklist until acted upon. Please use the Third Party Payer
Rejects - Worklist option to resolve the rejection or add a comment to the
rejection.

```

Prescriptions will not be filled for Unresolved DUR, RTS, RRR, TRICARE and CHAMPVA rejects.

# RX/FILL	PATIENT(ID)	DRUG	FILL DATE	REJECT DATE
1 104523/1	OPPATIENT,ON(1111)	NITROGLYCERIN 0.3MG S.	2/28/13	11/11/14
	Rx Status: ACTIVE			
	Reason: 79 :Refill Too Soon			
2 104861/0	OPPATIENT,ON(1111)	AMYL NITRITE 0.3ML INH	11/12/14	11/12/14
	Rx Status: ACTIVE			
	Reason: 79 :Refill Too Soon			
3 104520/1	OPPATIENT,ON(1111)	CHAMPVA - Non-DUR/RTS AMOXICILLIN 250MG CAP	2/24/13	6/13/13
	Rx Status: ACTIVE			
	Reason: 07 :M/I Cardholder ID			
	COMMENTS: -JUN 13, 2013@08:53:37 - Automatically transferred due to override for reject code. (POSTMASTER)			
4 104522/1	OPPATIENT,ON(1111)	GUANETHIDINE 10MG S.T.	2/28/13	6/13/13
	Rx Status: ACTIVE			
	Reason: 07 :M/I Cardholder ID			
	COMMENTS: -JUN 13, 2013@08:53:43 - Automatically transferred due to override for reject code. (POSTMASTER)			
5 104836/0	OPPATIENT,TH(3333)	TRICARE - Non-DUR/RTS CASTOR OIL 60ML	7/10/14	7/10/14
	Rx Status: ACTIVE			
	Reason: eT :			
6 104463/1	OPPATIENT,TH(3333)	OTHER REJECTS ACTIVATED CHARCOAL USP		2/20/13
	Rx Status: ACTIVE			
	Reason: eC :			

Enter RETURN to continue or '^' to exit:

## Alerts for Discontinued CMOP Prescription

### Discontinued by a Background Process

When a CMOP prescription with a status of Transmitted or Retransmitted is discontinued by a background process to the Outpatient Pharmacy options, e.g., CPRS or Registration V. 5.3 packages, an email will be sent to the PSX EXTERNAL DISPENSE ALERTS mail group. If no recipients are defined in the new mail group, the message will be sent to PSXCMOPMGR key holders stating that a prescription was just discontinued and that the CMOP status for the discontinued prescription was either Transmitted or Retransmitted.

```
Subj: TROY - DC Alert on CMOP Rx 123456789 TRANSMITTED [#90494]
03/03/09@17:37 8 lines
From: POSTMASTER In 'IN' basket. Page 1 *New*
-----
Rx #: 123456789 Fill: 0
Patient: OUTPATIENT,DCONE (6660)
Drug: TAMOXIFEN CITRATE 10MG TABS
Rx Status: DISCONTINUED BY PROVIDER
Processing Status: TRANSMITTED to CMOP on 02/27/09
Provider: OPPROVIDER, PROV
```

```
***** Please contact CMOP or take appropriate action *****
Enter message action (in IN basket): Ignore//
-----
```

### Discontinued by a Foreground Pharmacy Process

When a CMOP prescription with a status of Transmitted or Retransmitted is discontinued by a foreground Pharmacy process due to a duplicate drug scenario that would trigger the duplicate to be discontinued, then the Processing Status field of the duplicate drug message is highlighted to alert the user.

```
-----
Duplicate Drug A AND Z OINTMENT in Prescription: 123456789
      Status: Active                               Issued: 11/27/09
Processing Status: Transmitted to CMOP on 11/27/09
      SIG: APPLY 1 TUBE TO AFFECTED AREA TWICE A DAY
      QTY: 1                                       # of refills: 5
      Provider: OP PROVIDER, PROV                 Refills remaining: 5
                                                Last filled on: 11/27/09
                                                Days Supply: 5
-----
Discontinue RX # 123456789?

In the above example, the line "Processing Status: Transmitted to CMOP on 11/27/09" is bold.
```

### List One Patient's Archived Rx's [PSO ARCHIVE LIST RX'S]

This option shows the basic patient demographics and the prescription numbers and dates of archiving for archived prescriptions for this patient.

### Manual Print of Multi-Rx Forms [PSO LM MULTI-RX PRINT]

This option allows the user to reprint the Multi-Rx Refill Request form on laser label stock without having to reprint the entire prescription labels. The user will receive a system confirmation that this form has been queued to print.

#### Example: Manually Printing Multi-Rx Forms

```
Select Rx (Prescriptions) Option: MANual Print of Multi-Rx Forms
Enter patient to reprint Multi-Rx refill form for: OPPATIENT2,ONE
Select LABEL DEVICE: LEX2 LEX2$PRT Bay Pines
Multi-Rx form queued to print
```



## OneVA Pharmacy Prescription Report [PSO REMOTE RX REPORT]



**Note:** For additional information regarding OneVA Pharmacy processing go to the VA Software Document Library (VDL), select the Clinical section then choose the “Pharm: Outpatient Pharmacy” page. Locate the “User Manual – OneVA Pharmacy” document.



**Note:** To account for copay billing, insurance billing, and subsequent refill capabilities all sites are asked to print to an OneVA Pharmacy Reports and manually release prescriptions filled by other stations. Recommended frequency of printing report is no less than weekly.

The OneVA Pharmacy OneVA Pharmacy patch PSO\*7\*454 – December 2016 introduces the new menu option for retrieving the OneVA Pharmacy Prescription Reports. The ‘ONEVA PHARMACY PRESCRIPTION REPORT [PSO REMOTE RX REPORT]’ menu is located on the ‘RX (PRESCRIPTIONS) [PSO RX]’ menu.

There are three new reports available on the menu with self-describing titles. They are:

1. Prescriptions dispensed for other Host Pharmacies
2. Our prescriptions, filled by other facilities as the Dispensing Pharmacy
3. All OneVA Pharmacy Prescription Activity

### **Example: OneVA Pharmacy Reports**

```
Patient Prescription Processing
FEE Fee Patient Inquiry
Check Drug Interaction
Complete Orders from OERR
Discontinue Prescription(s)
Edit Prescriptions
ePharmacy Menu ...
List One Patient's Archived Rx's
Manual Print of Multi-Rx Forms
OneVA Pharmacy Prescription Report
Reprint an Outpatient Rx Label
Signature Log Reprint
View Prescriptions

Select Rx (Prescriptions) Option: OneVA Pharmacy Prescription Ret Report

1. Prescriptions dispensed for other Host Pharmacies
2. Our prescriptions, filled by other facilities as the Dispensing Pharmacy
3. All OneVA Pharmacy Prescription Activity

Select item: (1-3):

Selecting 1 will display the list of prescriptions that our local facility has
dispensed on behalf of other host Pharmacy locations as part of the OneVA
Pharmacy program. Selecting 2 will display the list of prescriptions other VA
Pharmacy locations have filled as a dispensing site for a prescription that
originated from our location. Selecting 3 will list all prescriptions that
either we have filled for other Pharmacy locations as the dispensing site or
other Pharmacy locations have filled on our behalf.
```

Select item: (1-3): 1 Prescriptions dispensed for other Host Pharmacies

Select one of the following:

D DATE RANGE  
P PATIENT  
S SITE

Answer with 1, 2, or 3.

**Search by: DATE RANGE**

Enter start date: Jul 01, 2016// (JUL 01, 2016)

Examples of Valid Dates:

JAN 20 1957 or 20 JAN 57 or 1/20/57 or 012057  
T (for TODAY), T+1 (for TOMORROW), T+2, T+7, etc.  
T-1 (for YESTERDAY), T-3W (for 3 WEEKS AGO), etc.  
If the year is omitted, the computer assumes a date in the PAST.  
You may omit the precise day, as: JAN, 1957

Enter end date: Jul 31, 2016// (JUL 31, 2016)

**Search by: PATIENT**

Answer with PATIENT NAME, or SOCIAL SECURITY NUMBER, or last 4 digits  
of SOCIAL SECURITY NUMBER, or first initial of last name with last  
4 digits of SOCIAL SECURITY NUMBER

Select PATIENT NAME: PSOPATIENT,THREE

Select PATIENT NAME: PSOPATIENT,THREE PSOPATIENT,THREE 8-22-57  
666018227 NO NSC VETERAN

No Patient Warnings on file for PSOPATIENT,THREE.

Press RETURN to continue...

**Search by: SITE**

Select INSTITUTION NAME: ?

Answer with INSTITUTION NAME, or STATUS, or STATION NUMBER, or  
OFFICIAL VA NAME, or CURRENT LOCATION, or CODING SYSTEM/ID PAIR, or  
NPI, or STATUS, or NAME (CHANGED FROM), or CODING SYSTEM  
Do you want the entire INSTITUTION List?

Search by: SITE

Select INSTITUTION NAME: ANYTOWN

1 ANYTOWN OH VAMC 552  
2 ANYTOWN (NHCU) OH NHC 5529AA  
3 ANYTOWN NATIONAL CEMETARY OH NC 810  
4 ANYTOWNA BEACH OPC FL OPC 573BZ  
5 ANYTOWNA VETERANS NURSING HOME FL STNB 573DT

Press <RETURN> to see more, '^' to exit this list, OR  
CHOOSE 1-5: 1 ANYTOWN OH VAMC 552

**OneVA PHARMACY RX REPORT** Jul 31, 2016@13:14:45 Page: 1 of 4  
Our prescriptions, filled by other facilities as the Dispensing Pharmacy

#	DATE	PATIENT	DRUG NAME	TYPE	QTY	DSUP
1	JUL 07, 2016	PSOPATIENT,ONE	LISINOPRIL 2.5MG TAB	OP	3	3
2	JUL 07, 2016	PSOPATIENT,TWO	RALOXIFENE HCL 60MG	OP	5	5
3	JUL 07, 2016	PSOPATIENT,TWO	ATORVASTATIN CALCIUM	OP	5	5
4	JUL 07, 2016	PSOPATIENT,ONE	LISINOPRIL 2.5MG TAB	OP	7	27
5	JUL 08, 2016	PSOPATIENT,ONE	LISINOPRIL 2.5MG TAB	OP	1	1
6	JUL 08, 2016	PSOPATIENT,THREE	LISINOPRIL 5MG TAB	OP	7	27

7	JUL 08, 2016	PSOPATIENT,THREE	LISINOPRIL 5MG TAB	OP	8	28
8	JUL 08, 2016	PSOPATIENT,TWO	RALOXIFENE HCL 60MG	OP	5	5
9	JUL 08, 2016	PSOPATIENT,TWO	RAMIPRIL 10MG CAP	OR	30	30
10	JUL 08, 2016	PSOPATIENT,FOUR	FLUTICASONE PROP 50M	OR	2	30
11	JUL 09, 2016	PSOPATIENT,TWO	RALOXIFENE HCL 60MG	OP	5	5
12	JUL 10, 2016	PSOPATIENT,FIVE	IBUPROFEN 800MG TAB	OR	90	30
13	JUL 10, 2016	PSOPATIENT,THREE	EPSOM SALT	OP	2	3
14	JUL 10, 2016	PSOPATIENT,THREE	EPSOM SALT	OP	5	3
15	JUL 10, 2016	PSOPATIENT,THREE	EPSOM SALT	OP	2	3
16	JUL 10, 2016	PSOPATIENT,THREE	EPSOM SALT	OP	2	3

+ Enter ?? for more actions  
SI Select Item  
Select Action:Next Screen//

**OneVA PHARMACY RX REPORT** Jul 31, 2016@13:15:31 Page: 2 of 9  
All OneVA Pharmacy Prescription Activity

#	DATE	PATIENT	DRUG NAME	TYPE	QTY	DSUP
17	JUL 08, 2016	PSOPATIENT,SIX	RAMIPRIL 10MG CAP	RF	30	30
18	JUL 08, 2016	PSOPATIENT,SIX	IBUPROFEN 800MG TAB	PR	20	10
19	JUL 08, 2016	PSOPATIENT,SIX	TRAZODONE HCL 50MG T	PR	10	10
20	JUL 08, 2016	PSOPATIENT,SIX	VERAPAMIL HCL 120MG	PR	9	9
21	JUL 08, 2016	PSOPATIENT,TWO	RALOXIFENE HCL 60MG	OP	5	5
22	JUL 08, 2016	PSOPATIENT,TWO	CETIRIZINE HCL 10MG	PR	5	5
23	JUL 08, 2016	PSOPATIENT,TWO	RAMIPRIL 10MG CAP	OR	30	30
24	JUL 08, 2016	PSOPATIENT,TWO	RALOXIFENE HCL 60MG	RF	30	30
25	JUL 08, 2016	PSOPATIENT,FOUR	FLUTICASONE PROP 50M	OR	2	30
26	JUL 09, 2016	PSOPATIENT,TWO	LISINOPRIL 10MG TAB	PR	5	5
27	JUL 09, 2016	PSOPATIENT,TWO	RALOXIFENE HCL 60MG	OP	5	5
28	JUL 09, 2016	PSOPATIENT,SEVEN	VITAMIN B COMPLEX CA	PR	5	5
29	JUL 10, 2016	PSOPATIENT,FIVE	ASCORBIC ACID 500MG	PR	5	5
30	JUL 10, 2016	PSOPATIENT,TWO	CETIRIZINE HCL 10MG	RF	30	30
31	JUL 10, 2016	PSOPATIENT,FIVE	IBUPROFEN 800MG TAB	OR	90	30
32	JUL 10, 2016	PSOPATIENT,THREE	EPSOM SALT	OP	2	3

+ Enter ?? for more actions  
SI Select Item  
Select Action:Next Screen//

**OneVA PHARMACY RX REPORT** Jul 31, 2016@11:52:26 Page: 1 of 6  
Prescriptions dispensed for other Host Pharmacies

#	DATE	PATIENT	DRUG NAME	TYPE	QTY	DSUP
1	JUL 07, 2016	PSOPATIENT,ONE	CETIRIZINE HCL 10MG	PR	5	5
2	JUL 07, 2016	PSOPATIENT,TWO	CLOPIDOGREL BISULFAT	PR	5	5
3	JUL 07, 2016	PSOPATIENT,ONE	CETIRIZINE HCL 10MG	PR	5	5
4	JUL 07, 2016	PSOPATIENT,ONE	LISINOPRIL 10MG TAB	PR	5	5
5	JUL 07, 2016	PSOPATIENT,THREE	AMPHOTERICIN B 50MG/	PR	7	27
6	JUL 07, 2016	PSOPATIENT,THREE	AMPHOTERICIN B 50MG/	RF	3	27
7	JUL 08, 2016	PSOPATIENT,THREE	AMPHOTERICIN B 50MG/	PR	1	1
8	JUL 08, 2016	PSOPATIENT,THREE	CETIRIZINE HCL 10MG	PR	1	1
9	JUL 08, 2016	PSOPATIENT,FOUR	IBUPROFEN 800MG TAB	PR	20	10
10	JUL 08, 2016	PSOPATIENT,FIVE	RAMIPRIL 10MG CAP	RF	30	30
11	JUL 08, 2016	PSOPATIENT,FIVE	IBUPROFEN 800MG TAB	PR	20	10
12	JUL 08, 2016	PSOPATIENT,FIVE	TRAZODONE HCL 50MG T	PR	10	10
13	JUL 08, 2016	PSOPATIENT,FIVE	VERAPAMIL HCL 120MG	PR	9	9
14	JUL 08, 2016	PSOPATIENT,ONE	CETIRIZINE HCL 10MG	PR	5	5
15	JUL 08, 2016	PSOPATIENT,ONE	RALOXIFENE HCL 60MG	RF	30	30
16	JUL 09, 2016	PSOPATIENT,ONE	LISINOPRIL 10MG TAB	PR	5	5

+ Enter ?? for more actions  
SI Select Item  
Select Action:Next Screen//

**OneVA PHARMACY RX REPORT** Jul 31, 2016@11:53:34 Page: 1 of 2  
Prescriptions dispensed for other Host Pharmacies

#	DATE	PATIENT	DRUG NAME	TYPE	QTY	DSUP
1	JUL 07, 2016	PSOPATIENT,THREE	AMPHOTERICIN B 50MG/	PR	7	27
2	JUL 07, 2016	PSOPATIENT,THREE	AMPHOTERICIN B 50MG/	RF	3	27
3	JUL 08, 2016	PSOPATIENT,THREE	AMPHOTERICIN B 50MG/	PR	1	1

4	JUL 08, 2016	PSOPATIENT,THREE	CETIRIZINE HCL 10MG	PR	1	1
5	JUL 10, 2016	PSOPATIENT,THREE	MONTELUKAST 10MG TAB	RF	27	27
6	JUL 11, 2016	PSOPATIENT,THREE	NEOSPORIN OPHTH OINT	PR	2	10
7	JUL 11, 2016	PSOPATIENT,THREE	THIAMINE 100MG/ML IN	PR	1	3
8	JUL 14, 2016	PSOPATIENT,THREE	ATORVASTATIN CALCIUM	RF		
9	JUL 14, 2016	PSOPATIENT,THREE	CETIRIZINE HCL 10MG	RF		
10	JUL 14, 2016	PSOPATIENT,THREE	MONTELUKAST 10MG TAB	PR	10	10
11	JUL 19, 2016	PSOPATIENT,THREE	NEOSPORIN OPHTH OINT	PR	1	1
12	JUL 19, 2016	PSOPATIENT,THREE	MONTELUKAST 10MG TAB	PR	1	1
13	JUL 20, 2016	PSOPATIENT,THREE	NYSTATIN 100000 UNT/	RF	30	29
14	JUL 20, 2016	PSOPATIENT,THREE	ATORVASTATIN CALCIUM	RF	44	29
15	JUL 20, 2016	PSOPATIENT,THREE	NEOSPORIN OPHTH OINT	PR	1	1
16	JUL 20, 2016	PSOPATIENT,THREE	ATORVASTATIN CALCIUM	PR	3	2

+ Enter ?? for more actions  
SI Select Item  
Select Action:Next Screen//

**OneVA PHARMACY RX REPORT** Jul 31, 2016@11:56:55 Page: 1 of 2  
Prescriptions dispensed for other Host Pharmacies

#	DATE	PATIENT	DRUG NAME	TYPE	QTY	DSUP
1	JUL 15, 2016	PSOPATIENT,SIX	VERAPAMIL HCL 120MG	PR	1	1
2	JUL 19, 2016	PSOPATIENT,SIX	IBUPROFEN 800MG TAB	PR	1	1
3	JUL 19, 2016	PSOPATIENT,THREE	NEOSPORIN OPHTH OINT	PR	1	1
4	JUL 19, 2016	PSOPATIENT,SEVEN	TRAZODONE HCL 50MG T	PR	10	1
5	JUL 19, 2016	PSOPATIENT,SEVEN	TRAZODONE HCL 50MG T	RF	60	60
6	JUL 19, 2016	PSOPATIENT,SEVEN	TRAZODONE HCL 50MG T	PR	10	10
7	JUL 19, 2016	PSOPATIENT,SEVEN	TRAZODONE HCL 50MG T	PR	10	1
8	JUL 19, 2016	PSOPATIENT,SEVEN	TRAZODONE HCL 50MG T	PR	10	1
9	JUL 19, 2016	PSOPATIENT,SIX	IBUPROFEN 800MG TAB	RF	30	10
10	JUL 19, 2016	PSOPATIENT,SIX	IBUPROFEN 800MG TAB	PR	10	10
11	JUL 20, 2016	PSOPATIENT,THREE	NYSTATIN 100000 UNT/	RF	30	29
12	JUL 20, 2016	PSOPATIENT,THREE	ATORVASTATIN CALCIUM	RF	44	29
13	JUL 20, 2016	PSOPATIENT,THREE	NEOSPORIN OPHTH OINT	PR	1	1
14	JUL 20, 2016	PSOPATIENT,THREE	ATORVASTATIN CALCIUM	PR	3	2
15	JUL 20, 2016	PSOPATIENT,THREE	NEOSPORIN OPHTH OINT	PR	7	11
16	JUL 20, 2016	PSOPATIENT,THREE	NYSTATIN 100000 UNT/	PR	5	3

+ Enter ?? for more actions  
SI Select Item  
Select Action:Next Screen//

**OneVA PHARMACY RX REPORT** Jul 27, 2016@10:39:33 Page: 1 of 1  
Prescriptions dispensed for other Host Pharmacies

#	DATE	PATIENT	DRUG NAME	TYPE	QTY	DSUP
1	JUL 08, 2016	PSOPATIENT,SIX	IBUPROFEN 800MG TAB	PR	20	10
2	JUL 27, 2016	PSOPATIENT,SIX	IBUPROFEN 800MG TAB	RF	60	30
3	JUL 27, 2016	PSOPATIENT,SIX	CETIRIZINE HCL 10MG	PR	10	10

Total Cost for items in this report: \$13.71

+ Enter ?? for more actions  
SI Select Item  
Select Action:Quit//

Select Action:Quit// SI Select Item  
Enter a number (1-3): 2

**OneVA PHARMACY RX DETAILS** Jul 27, 2016@10:41:01 Page: 1 of 1  
Detailed report of Prescriptions dispensed for other Host Pharmacies

Request Date/Time: JUL 27, 2016@10:14:57  
Patient: PSOPATIENT,SIX  
RX #: 2718862  
Rx Hosted at Site: DAYTSHR TEST LAB

```

Request Type: REFILL
Requesting Pharmacist: LASTNAME, FIRSTNAME
Dispensed Date: JUL 27, 2016
Drug Name at Originating (Host) site: IBUPROFEN 800MG TAB
Local (matched) drug: IBUPROFEN 800MG TAB
Cost of Local Refill/Partial: $1.36

Enter ?? for more actions
Select Action:Quit//

Select Action:Quit// SI Select Item
Enter a number (1-3): 3

OneVA PHARMACY RX DETAILS Jul 27, 2016@10:42:06 Page: 1 of 1
Detailed report of Prescriptions dispensed for other Host Pharmacies

Request Date/Time: JUL 27, 2016@10:29:2
Patient: PSOPATIENT, SIX
RX #: 2718861
Rx Hosted at Site: DAYTSHR TEST LAB
Request Type: PARTIAL FILL
Requesting Pharmacist: LASTNAME, FIRSTNAME
Dispensed Date: JUL 27, 2016
Drug Name at Originating (Host) site: CETIRIZINE HCL 10MG TAB
Local (matched) drug: CETIRIZINE HCL 10MG TAB
Cost of Local Refill/Partial: $11.90

Enter ?? for more actions
Select Action:Quit//

```

## Reprint an Outpatient Rx Label [PSO RXRPT]

The label reprint function allows a single label or many copies of the same label to be reproduced. When the patient is enrolled in ScripTalk®, a message is displayed to the user indicating this and prompting the user to use the ScripTalk® label for the prescription bottle.

### Example: Reprinting an Outpatient Rx Label

```

Select Rx (Prescriptions) Option: REPRINT AN OUTPATIENT RX LABEL

Reprint Prescription Label: 400693 ADHESIVE TAPE WATERPROOF 1IN ROLL
Patient is a ScripTalk patient. Use ScripTalk label for prescription bottle.

Number of Copies? : (1-99): 1// <Enter>
Print adhesive portion of label only? N// <Enter> 0
Do you want to send to External Interface Device? No// ?

Enter either 'Y' or 'N'.

Do you want to send to External Interface Device? No// NO
Comments:

Rx # 400693 06/27/03 #1
OPPATIENT16, ONE

```

```
AS DIR ON AFFECTED AREA
ADHESIVE TAPE WATERPROOF 1IN ROLL
OPPROVIDER30,TWO          OPPHARMACIST4,THREE
# of Refills: 2
```

When reprinting, you can choose whether or not you want to resend to a dispensing device using an external interface. If you do choose to resend, then the prescription will be sent to the dispensing system, and an entry will be made in the label log. This documents that this was a reprint and also resent to the dispensing system device. If you do not resend the prescription to the dispensing device, then only one entry is made in the label log.

### Example: Reprinting an Outpatient Rx Label – Multiple Dispensing Device

```
Select Rx (Prescriptions) Option: REPRINT AN OUTPATIENT RX LABEL

Reprint Prescription Label: 100002987          BACLOFEN 10MG TABS
Number of Copies? : (1-99): 1//
Print adhesive portion of label only? ? No//  NO
Do you want to resend to Dispensing System Device? No// y  YES
Comments: Multiple dispensing devices

Rx # 100002987          05/02/11
OPPACIENT,TEN          #7

TAKE ONE TABLET BY MOUTH EVERY DAY FOR 7 DAYS

BACLOFEN 10MG TABS
OPPHARMACIST,FOUR          OPPHARMACIST,NINE
# of Refills: 7

Select LABEL DEVICE: LEXMARK5$PRT

LABEL(S) QUEUED TO PRINT

PRESCRIPTIONS SENT TO:
  SCRIPTPRO1
  100002987          BACLOFEN 10MG TABS

STORAGE DEVICES
  SCRIPTCENTER
  100002987          BACLOFEN 10MG TABS
```

## Printing a OneVA Pharmacy Label

OneVA Pharmacy patch PSO\*7\*479 modifies routine PSORRX2 to add the following text if no error message is returned when retrieving the label information from the host system. The following text is displayed just prior to the Label Device: ‘ prompt:

### Example: Printing a OneVA Pharmacy Label

For a refill:

```
TRANSACTION SUCCESSFUL... The refill for RX #763002 has been recorded on
the prescription at the host system.

Select a printer to generate the label or '^' to bypass printing.

QUEUE TO PRINT ON
DEVICE:
```

For a partial fill:

```
TRANSACTION SUCCESSFUL... The partial for RX #763002 has been recorded on
the prescription at the host system.

Select a printer to generate the label or '^' to bypass printing.

QUEUE TO PRINT ON
DEVICE:
```

## Signature Log Reprint [PSO SIGLOG REPRINT]

This option allows the user to reprint the Signature Log for a prescription. The system will prompt for a prescription number and printer device. The user will receive a system confirmation that this log has been queued to print.

### Example: Reprinting a Signature Log

```
Select Rx (Prescriptions) Option: Signature Log Reprint

Reprint Signature Log for Prescription: 100002277A PREDNISONE 20MG S.T.

Select LABEL DEVICE: LEX2 LEX2$PRT Bay Pines

Signature Log Reprint queued
```

## View Prescriptions [PSO VIEW]

View the most complete information available for a specific prescription. The activity log lists the date, reason, prescription reference (Rx Ref), the initiator of the activity, and comments. The label log lists the date, prescription (Rx Ref), the person who printed it, and comments. Prescriptions with a deleted status cannot be viewed.

Patient demographics and clinical alerts display in the header area when this option is selected. Refer to [Patient Demographics and Clinical Alerts](#) for more information.

## Restrictions to Providers on Controlled Substances Orders

As part of patch PSO\*7\*391, the Kernel patch XU\*8\*580 introduced new fields to the NEW PERSON file (#200). Apart from the DEA/VA requirement, DEA further classifies what CS schedule a provider is authorized to write. These new fields are:

```
55.1 SCHEDULE II NARCOTIC (S), [PS3;1]
55.2 SCHEDULE II NON-NARCOTIC (S), [PS3;2]
55.3 SCHEDULE III NARCOTIC (S), [PS3;3]
55.4 SCHEDULE III NON-NARCOTIC (S), [PS3;4]
55.5 SCHEDULE IV (S), [PS3;5]
55.6 SCHEDULE V (S), [PS3;6]
```

If one of the above fields is populated for a provider, then when placing a new order in backdoor pharmacy, the software will now check for the drug schedule with the provider privileges. If the provider does not have schedule II privileges, the software will display the following message:

"Provider not authorized to write Federal Schedule 2 prescriptions."

When placing an order for a CS Detoxification drug, the software will now check for a valid Detoxification number for the provider. If the provider does not have a Detoxification number, the software will display the following message:

"Provider must have a DETOX# to order this drug."

Prior to PSO\*7\*391, the default days supply for all drugs was based on Patient Rx Status. PSO\*7\*391 changes the default for CS schedule II drugs to be set to 30 (or to the current Patient Rx Status if lower than 30). The Integration Control Registration #3278 that returns day supply (DSUP^PSOSIGDS) is modified to return 30 for CS schedule II drugs.



# Chapter 27: ScripTalk® ‘Talking’ Prescription Labels

ScripTalk® is a registered trademark of En-Vision America.

The ScripTalk software generates prescription labels with speech synthesized patient information. This project helps to increase a patient’s (individuals with visual impairments, dyslexia, and reading problems) ability to comply with their doctor’s orders. Audible prescription information also reduces prescription errors thereby reducing hospital/emergency room visits.

Using the ScripTalk Talking Prescriptions involves the installation of a specialty printer that prints to microchip-embedded label stock. The label will have printed text on it, along with the microchip containing the contents of the label. Pharmacy or other designated staff will enroll patients to receive these labels and issue those patients a special reader. When the patient holds a ScripTalk® label near the reader and presses a button, the content of the label is read aloud.

If a patient is enrolled for ScripTalk and a prescription is ordered under a division that has a ScripTalk printer set-up for auto-print, then whenever a prescription is finished for that patient, a ScripTalk bottle label is automatically queued to print at the same time as the VistA label. The VistA label (either the old format or the new laser label format) will, by default, have the drug name on the bottle label voided out with the text "XXXXXX SCRIPTALK RX XXXXXX" to alert the pharmacist to use the actual bottle label from the ScripTalk® printer. However, the voided label options can be controlled by the Outpatient Site using the Void Label Setup [PSO SCRIPTALK VOID LABEL DEF'N] option in the ScripTalk Main Menu [PSO SCRIPTALK MAIN MENU] option.



The pharmacy should check each ScripTalk® label for accuracy by using the ScripTalk reader to read the label aloud. The printer encodes the chip while printing the label, but nothing in or attached to VistA can see or tell if the label is valid.

## ScripTalk Main Menu [PSO SCRIPTALK MAIN MENU]

The options on this menu are used for the implementation as well as the maintenance of the various files for the ScripTalk ‘talking’ software. These options allow the set up and testing of the ScripTalk equipment, enter new patients or edit existing patients as receivers of the ‘talking’ prescription labels, and run various reports.

PT	ScripTalk Patient Enter/Edit
QBAR	Queue ScripTalk Label by Barcode
QRX	Queue ScripTalk Label by Rx#
RPT	ScripTalk Reports...
	Reprint a non-voided Outpatient Rx Label
PARM	Set Up and Test ScripTalk Device...
	Void Label Setup

## ScripTalk Patient Enter/Edit [PSO SCRIPTALK PATIENT ENROLL]

This option allows the user to define a patient to receive ScripTalk ‘talking’ prescription labels or to change a patient to not receive the labels.

### Example: Enrolling a ScripTalk Patient

```
Select ScripTalk Main Menu Option: PT ScripTalk Patient Enter/Edit

Select PATIENT: OP
  1  OPPATIENT16,ONE 04-03-41      000246802      SC VETERAN
  2  OPPATIENT17,ONE 08-30-48      000123456      NON-VETERAN (OTHER)
CHOOSE 1-2: 1 OPPATIENT16,ONE 04-03-41      000246802      SC VETERAN
SCRIPTALK PATIENT? N// YES

REMINDER: CMOP does not fill ScripTalk prescriptions. Please select mail
status:  2 (DO NOT MAIL), 3 (LOCAL REGULAR MAIL) or 4 (LOCAL CERTIFIED MAIL) .
MAIL: 2 DO NOT MAIL

Select one of the following:

      B          BLIND VETERAN
      L          LOW VISION

INDICATION: // BLIND VETERAN
```



The “MAIL:” prompt above is only displayed when the patient is set to a Consolidated Mail Outpatient Pharmacy (CMOP) status or does not have a mail status defined.

A progress note can be automatically placed in the ScripTalk patient’s chart to be signed when that patient is enrolled. To invoke this feature, ask the Text Integration Utility/Computerized Patient Record System (TIU/CPRS) coordinator at the site to create a note entitled “SCRIPTALK ENROLLMENT”. The note contents will be “*Patient Name* was enrolled in ScripTalk today, and is now eligible to receive prescriptions with encoded speech-capable labels”.

## Queue ScripTalk Label by Barcode [PSO SCRIPTALK MANUAL INTERNAL]

This option is used to queue a ScripTalk label to print using the barcode number to identify the label.

### Example: Queuing a ScripTalk Label to Print by Barcode

```
Select ScripTalk Main Menu Option: QBAR Queue ScripTalk Label by Barcode
Enter Barcode Rx#:
```

## Queue ScripTalk Label by Rx# [PSO SCRIPTALK MANUAL EXTERNAL]

This option is used to queue a ScripTalk label to print using the prescription number to identify the label.

### Example: Queuing a ScripTalk Label to Print by Rx#

```
Select ScripTalk Main Menu Option: QRX Queue ScripTalk Label by Rx#
Select PRESCRIPTION RX #: 400675B ADHESIVE TAPE WATERPROOF 1IN ROLL

Queuing ScripTalk label

Select PRESCRIPTION RX #: 12345
  1 12345 NIACIN 250MG SR CAP
  2 1234567A DIGOXIN 0.05MG CAP
CHOOSE 1-2: 2 1234567A DIGOXIN 0.05MG CAP
Patient not enrolled in ScripTalk program.

Select PRESCRIPTION RX #:
```

## ScripTalk Reports

### [PSO SCRIPTALK REPORTS]

This menu option contains two reports containing ScripTalk® patient information.

- *AUD ScripTalk Audit History Report*
- *WHO Report of ScripTalk Enrollees*

## ScripTalk Audit History Report

### [PSO SCRIPTALK AUDIT HISTORY]

The *ScripTalk Audit History Report* option prints a report that contains all ScripTalk® enrollment activity for a patient.

### Example: ScripTalk Audit History Report

```
Select ScripTalk Reports Option: AUD ScripTalk Audit History Report
Select PATIENT: OPPATIENT29,ONE 09-12-19 000876543 SC VETERAN

You may queue the report to print, if you wish.

DEVICE: HOME// <Enter> GENERIC INCOMING TELNET
```

## Report of ScripTalk Enrollees

### [PSO SCRIPTALK ENROLLEES]

The *Report of ScripTalk Enrollees* option provides a report of patients who are defined to receive ScripTalk® ‘talking’ prescription labels for their outpatient medications. Patients who have a “no” answer to the ScripTalk® patient prompt can be excluded from the report.

### Example: Report of ScripTalk Enrollees

```
Select ScripTalk Reports Option: WHO Report of ScripTalk Enrollees

Do you want to report only active enrollees? Y// <Enter> ES

You may queue the report to print, if you wish.

DEVICE: HOME// <Enter> GENERIC INCOMING TELNET
```

Report of ScripTalk Enrollment		Date printed: Jun 24, 2003	Page: 1
Patient name	SSN	Enrollment last updated	
-----	-----	-----	
OPPACIENT11,ONE BLIND VETERAN	000-46-8024	Jun 16, 2003@11:57:39	
OPPACIENT9,ONE LOW VISION	000-76-5432	Jun 15, 2003@18:17:30	
OPPACIENT6,ONE LOW VISION	000-13-5790	Jun 18, 2003@03:52:18	
OPPACIENT29,ONE LOW VISION	000-87-6543	Jun 16, 2003@08:49:34	

### Reprint a non-voided Outpatient Rx Label [PSO SCRIPTALK REPRINT VISTA LB]

This option allows the user to reprint an Outpatient Rx label for a ScripTalk® patient without voiding out the drug name.

When reprinting, you can choose whether or not you want to resend to a dispensing device, using an external interface. If you do choose to resend, then the prescription will be sent to the dispensing system, and an entry will be made in the label log. This documents that this was a reprint and also resent to the dispensing system device. If you do not resend the prescription to the dispensing device, then only one entry is made in the label log.

#### Example: Reprinting a non-voided Outpatient Rx Label

```
Select ScripTalk Main Menu Option: REprint a non-voided Outpatient Rx Label

Reprint Prescription Label: 400675B          ADHESIVE TAPE WATERPROOF 1IN ROLL
Patient is a ScripTalk patient. Use ScripTalk label for prescription bottle.

Number of Copies? : (1-99): 1// <Enter>
Print adhesive portion of label only? N// <Enter> O
Do you want to send to External Interface Device? No// ?

Enter either 'Y' or 'N'.

Do you want to send to External Interface Device? No// NO
Comments:

Rx # 400675B          06/17/03
OPPACIENT29,ONE      #1

ON AFFECTED AREA AS DIR

ADHESIVE TAPE WATERPROOF 1IN ROLL
OPPROVIDER16,TWO      OPPHARMACIST24,THREE
# of Refills: 2

Select LABEL DEVICE: PRINTER #3

LABEL(S) QUEUED TO PRINT
```

## Set Up and Test ScripTalk Device [PSO SCRIPTALK SET-UP]

This menu option contains the options necessary to define, set up and test the ScripTalk® device, print a sample ScripTalk® prescription label, and reinitialize the printer.

- *ScripTalk Device Definition Enter/Edit*
- *Print Sample ScripTalk Label*
- *Test ScripTalk Device*
- *Reinitialize ScripTalk Printer*

## ScripTalk Device Definition Enter/Edit [PSO SCRIPTALK DEVICE DEF'N]

The *ScripTalk Device Definition Enter/Edit* option allows the user to define the ScripTalk® device for the division where it will be used and whether the labels should be automatically printed or will be queued for manual print. The printer must be installed and connected to the network server before using this option.

You may now tie a ScripTalk printer to a regular Pharmacy label printer(s) to control where the ScripTalk labels print for multi-divisions. A divisional ScripTalk device must be defined in order for the printer mapping functionality to work correctly. If there aren't any mapped printers, then the system defaults to the divisional printer.

### Example: Defining the ScripTalk® Device

```
Select Set Up and Test ScripTalk Device Option: SScripTalk Device Definition Enter/Edit

Define ScripTalk Printer by (D)ivision or (P)rinter mapping?: (D/P): Division

Division: TROY 514
SCRIPTALK DEVICE: L8150$PRT// <Enter>
SCRIPTALK AUTO-PRINT SETTINGS: ?
  Enter 'A' if ScripTalk label printing should be automatic, "M" if label
  will be queued manually.
  Choose from:
    A      AUTO PRINT
    M      MANUAL PRINT
SCRIPTALK AUTO-PRINT SETTINGS: A AUTO PRINT
SCRIPTALK PRINTER TYPE: 10K LABEL// ?
  Enter 2 if this ScripTalk printer is a 2K printer, enter 10 if this
  ScripTalk printer is a 10K printer.
  Choose from:
    2      2K LABEL
    10     10K LABEL
SCRIPTALK PRINTER TYPE: 10K LABEL//

Define ScripTalk Printer by (D)ivision or (P)rinter mapping?: (D/P): Printer
Select LABEL PRINTER TO BE MAPPED: LBL$PRT1 Birmingham PQ$:LBL$PRT1.TXT
  SCRIPTALK DEVICE: L8150$PRT CIOFO Birmingham PQ$: L8150$PRT.TXT
  SCRIPTALK PRINTER TYPE: 10 10K LABEL
Select LABEL PRINTER TO BE MAPPED: LBL$PRT2 Tuscaloosa PQ$:LBL$PRT2.TXT
```

```

SCRIPTALK DEVICE: L8150$PRT      CIOFO Birmingham      PQ$: L8150$PRT.TXT
SCRIPTALK PRINTER TYPE: 2 2K LABEL
Select LABEL PRINTER TO BE MAPPED:

Define ScripTalk Printer by (D)ivision or (P)rinter mapping?: (D/P):

```

The prompt, SCRIPTALK PRINTER TYPE, allows the site to define whether or not the printer is the 2K or the 10K model. This is determined by the En-Vision printer model type and controls the format and how much information can be ‘read’ via the label. The default is the 2k model printer.

If the device is defined for auto-print, and some patients are defined as ScripTalk® patients, then whenever a VistA label is queued, if the prescription belongs to a ScripTalk® patient, a ScripTalk® label should print at the same time.

## Print Sample ScripTalk Label

### [PSO SCRIPTALK SAMPLE LABEL]

After the printer is defined, a sample ScripTalk® label can be generated. The *Print Sample ScripTalk Label* option allows the user to print a test ScripTalk® label.

#### Example: Printing a sample ScripTalk® Label

```

Select Set Up and Test ScripTalk Device Option: Print Sample ScripTalk Label
The following test data will be sent to the ScripTalk printer:

^XA
^FO250,700^XGE:RX.GRF^FS
^FO250,700^XGE:RX.GRF^FS
^AFR,20,10^FO531,50^FR^CI0^FD7305 N. MILITARY TRL Exp: January 01,2002^FS
^AFR,20,10^FO503,50^FR^CI0^FDRX#82382787 January 01,2006 Fill 01 OF 01^FS
^AFR,20,10^FO475,50^FR^CI0^FDONE OPPATIENT23^FS
^AFR,20,10^FO447,50^FR^CI0^FDTAKE 1 CAPSULE THREE TIMES DAILY^FS
^AFR,20,10^FO419,50^FR^CI0^FD^FS
^AFR,20,10^FO391,50^FR^CI0^FD^FS
^AFR,20,10^FO363,50^FR^CI0^FD^FS
^AFR,20,10^FO335,50^FR^CI0^FDDr. TWO OPPROVIDER30 MD^FS
^AFR,20,10^FO279,50^FR^CI0^FDQTY: 24 TABS^FS
^AFR,20,10^FO251,50^FR^CI0^FDAMOXICILLIN 500MG CAP^FS
^RX01,ONE OPPATIENT23^FS
^RX02,AMOXICILLIN 500MG CAP^FS
^RX03,TAKE 1 CAPSULE THREE TIMES DAILY ^FS
^RX04,010101^FS
^RX05,00^FS
^RX06,020000^FS
^RX07,TWO OPPROVIDER30^FS
^RX08,2928993888^FS
^RX09,82382787^FS
^RX10, ^FS
^PQ1,0,1,Y
^XZ

Task Queued !

Select Set Up and Test ScripTalk Device Option:

```

If the printer did not print the label, check to make sure that the printer is closed very tightly. It may not have been closed completely after loading the labels.

If the printer printed a blank label or one that is extremely faint, use the *Reinitialize ScripTalk printer* option to reinitialize the printer. Then try printing the sample label again.

Once the sample label has printed, it is ready to be read by the reader. To read the label, place it near the face of the reader and hit the round power button on the reader. A series of ticks will be heard as the reader finds and retrieves the information on the label. Then the reader will begin speaking.

## Test ScripTalk Device

### [PSO SCRIPTALK TEST DEVICE]

The *Test ScripTalk Device* option can be used to send one Zebra Print Language (ZPL) test string to the ScripTalk® printer.

#### Example: Testing the ScripTalk® Device

```
Select Set Up and Test ScripTalk Device Option: Test ScripTalk Device
Enter ZPL test string: ^AFR,20,10^FO475,50^FR^CI0^FDONE OPPATIENT23^FS
Task Queued!
```

## Reinitialize ScripTalk Printer

### [PSO SCRIPTALK REINITIALIZE]

The *Reinitialize ScripTalk Printer* option is used when the printer printed a blank label or one that is extremely faint. The user can reinitialize the printer and then try printing the label again.

#### Example: Reinitializing the Printer

```
Select Set Up and Test ScripTalk Device Option: ?

    ScripTalk Device Definition Enter/Edit
    Print Sample ScripTalk Label
    Test ScripTalk Device
    Reinitialize ScripTalk Printer

Enter ?? for more options, ??? for brief descriptions, ?OPTION for help text.

Select Set Up and Test ScripTalk Device Option: Reinitialize ScripTalk Printer
Task Queued !
```

## Void Label Setup

### [PSO SCRIPTALK VOID LABEL DEF'N]

This option allows the user to elect to void printing labels. If this question is left blank, the default is set to void labels. This information is stored in the OUTPATIENT SITE file, field VOID OTHER LABELS (#107.3).

### Example: Void Label Setup

```
Select ScripTalk Main Menu Option: void Label Setup

      Division:      CHEYENNE VAM&ROC  442
VOID OTHER LABELS: YES// ?
Enter Yes to VOID non ScripTalk labels, No to not void.
Choose from:
  0          NO
  1          YES
```



# Chapter 28: Using the Supervisor Functions Menu

---

This chapter describes the *Supervisor Functions* menu options.

## Supervisor Functions [PSO SUPERVISOR]

The options on this menu are used for the implementation as well as the maintenance of the various files for the basic running of the Outpatient Pharmacy software. The following options are available on the Supervisor Menu:

- *Add New Providers*
- *Daily Rx Cost*
- *Delete a Prescription*
- *Edit Provider*
- *Initialize Rx Cost Statistics*
- *Inter-Divisional Processing*
- *Inventory*
- *Lookup Clerk by Code*
- *Lookup National Clean-up Utility Data*
- *Medication Status Check*
- *Monthly Rx Cost Compilation*
- *Patient Address Changes Report*
- *Pharmacist Enter/Edit*
- *Purge Drug Cost Data*
- *Recompile AMIS Data*
- *Site Parameter Enter/Edit*
- *State Prescription Monitoring Program (SPMP) Menu*
- *View Provider*

## Add New Providers [PSO PROVIDER ADD]

This option allows new providers to be entered. If at the "Enter NEW PERSON's name" prompt the name entered is repeated and the display returns to the menu, the provider name entered is already in the file. The *Edit Provider* option must then be used to change existing provider entries.

## Daily Rx Cost [PSO COSTDAY]

This option is used to compile pharmacy daily costs.

## Delete a Prescription

### [PSO RXDL]

Using this option, a prescription status can be changed to deleted. Deleted prescriptions do not appear on any profiles.



A released prescription can only be deleted after it has been returned to stock.

## Edit Provider

### [PSO PROVIDER EDIT]

Edit existing provider entries with this option in the NEW PERSON file.



If the inactive date given for the provider passes, the provider can no longer be used when entering a new prescription. However, the provider will still be available for refills beyond the inactivation date.

## Initialize Rx Cost Statistics

### [PSO COSTINIT]

This option allows the manager to initialize the system to automatically compile cost data for one day or a range of days.



The default date is today plus 1 at 1:00 a.m. (T+1@1:00). The date on the screen represents either a default date/time if the option has never been queued, or the current date/time this option has already been queued to run.

## Inter-Divisional Processing

### [PSO INTERDIV]

The user can permit or prevent processing between divisions with this option.

## Inventory

### [PSO INVENTORY]

Use to update the current inventory or set up a starting count of inventory for the pharmacy.



The ORDER UNIT file does not come with data. You must populate this file with your own data.

## Look-up Clerk by Code [PSO CLERK]

Identify the clerk by entering the identifying number. Clerk code-filing uses the internal identifying number of the clerk, which is determined at sign-on time and does not change.

## Medication Status Check [PSO MEDICATION STATUS CHECK]

This option searches for discontinued and expired medication orders, which are still active in the ORDERS (#100) file. The option is tasked after the user specifies the search criteria for a date range, type(s) of medication orders to evaluate, and whether erroneously active statuses in the ORDERS (#100) file should be corrected to match the status in the associated medication file.

The date range pertains to the original order date of the order as well as some (not all) activity dates on the order. Any activity which sets a date/time subscript into the **AF** cross reference of the ORDERS (#100) file will be included in the date range search.

After completion, an alert and MailMan message are sent to the user who invoked the option.

### Option Display Example:

```
Select OPTION NAME: PSO MEDICATION STATUS CHECK           Medication Status Check
Medication Status Check

NOTE: Because of the potential for journaling or other system
Issues, avoid searching large date ranges. This search routine
limits the search to a year's worth of orders, but that might
still be too large of a date range depending on your order volume.

Date to begin search:  T-30           DEC 07, 2018
Date to end search   :  T             JAN 06, 2019

Searching Inpatient, Outpatient, Non-VA, or a combination of order types?
(IV Medications are included in an Inpatient search.)
("Inpatient" and "Outpatient" refer to the order dialog used,
 not the patient's status.)

Select one of the following:

I      Inpatient
O      Outpatient
N      Non-VA
IN     Inpatient and Non-VA
ON     Outpatient and Non-VA
A      All

Enter response: All

INSTRUCTIONS FOR NEXT PROMPT
=====
If a medication is expired or discontinued in the associated medication
file (PRESCRIPTION (#52) file or PHARMACY PATIENT (#55) file) this
routine could correct the ORDERS (#100) file status to expired or
discontinued if the ORDERS (#100) file status is active.

Let the routine search to see how many affected orders exist per
date range. Then check a few in CPRS and FileMan.

After running the search option again and answering the following
```

```

prompt with "Y", verify that those orders have been corrected.

Should the status in the ORDERS (#100) file
be corrected automatically? NO//

PLEASE VERIFY:

Date to begin search:      DEC 07, 2018
Date to end search:      JAN 06, 2019

Type(s) of orders to search: All

ORDERS (#100) file status *** WILL NOT *** be corrected automatically.

Are these selections correct? NO// YES
Requested Start Time: NOW// (JAN 06, 2019@19:20:51)

Medication File(s) Status Search - TASK NUMBER: 1439764

You will receive an alert and a MailMan message when the search completes.

```

### MailMan Message Example – no issues found:

```

Subj: Medication File Search Finished [#300174] 04/06/20@14:59 29 lines
From: PSO ORDER STATUS MISMATCH SEARCH ROUTINE In 'IN' basket. Page 1 *New*
-----
SUMMARY
=====

Search of:
All - Inpatient, Outpatient, and Non-VA - Medication File(s)
from JAN 1,2014 to DEC 31,2014
The orders were *** NOT *** corrected at user's request.

Orders should be reviewed to confirm if it is appropriate for their statuses
to be matched. The report should then be rerun with the prompt "Should the
status in the ORDERS (#100) file be corrected automatically? NO//" answered
"YES" to have the corrections made.

Search performed was for orders with a status mismatch where the ORDERS (#100) file
status is active but the status is expired or discontinued in the
PHARMACY PATIENT (#55) or PRESCRIPTION (#52) file.

The orders are listed in a separate section below.

The list of affected order(s) is also stored in the global
^XTMP("PSOUTOR 9483" for 60 days.

Associated documentation can be found in:
Chapter 27 of the Outpatient Pharmacy (PSO) Manager's User Manual.

Detail: ORDERS (#100) File Active / Medication File Not Active
=====

No mismatches found.

Enter message action (in IN basket): Ignore//

```

### MailMan Message Example – issues found:

```

Subj: Medication File Search Finished [#300086] 04/02/20@17:27 45 lines
From: PSO ORDER STATUS MISMATCH SEARCH ROUTINE In 'IN' basket. Page 1
-----
SUMMARY
=====

Search of:

```

```

All - Inpatient, Outpatient, and Non-VA - Medication File(s)
from JAN 1,2017 to DEC 31,2017
The orders were corrected at user's request.

Orders should be reviewed to confirm if it is appropriate for their statuses
to be matched. The report should then be rerun with the prompt "Should the
status in the ORDERS (#100) file be corrected automatically? NO//" answered
"YES" to have the corrections made.

Search performed was for orders with a status mismatch where the ORDERS (#100) file
status is active but the status is expired or discontinued in the
PHARMACY PATIENT (#55) or PRESCRIPTION (#52) file.

The orders are listed in a separate section below.

The list of affected order(s) is also stored in the global
^XTMP("PSOUTOR 8110" for 60 days.

Associated documentation can be found in:
Chapter 27 of the Outpatient Pharmacy (PSO) Manager's User Manual.

Detail: ORDERS (#100) File Active / Medication File Not Active
=====

** 2 ** mismatches found.

Type: Non-VA
ORDERS Number Date/Time Ordered ORDERABLE ITEM Status Pkg Ref
#55 IEN Documented Date DRUG Status DC Date
-----
5596428 Jun 12, 2017@14:28 MULLEIN CAP,OR ACTIVE 1N
1N Jun 12, 2017@14:28 MULLEIN Discont. Jun 13, 2017@09:13

Type: Outpatient
ORDERS Number Date/Time Ordered ORDERABLE ITEM Status Pkg Ref
Rx IEN Issue Date DRUG Status Exp. Date
-----
5597821 Nov 30, 2017@10:19 ALBUTEROL TAB ACTIVE 2212355
2212355 Nov 30, 2017 ALBUTEROL SULF Expired Dec 30, 2017

Enter message action (in IN basket): Ignore//

```

## To Review:

Perform a FileMan inquiry in the ORDERS file (#100) and note the OBJECT OF ORDER (#.02), PACKAGE REFERENCE (#33), STATUS (#5) and STOP DATE (#22) fields. Next check in the appropriate pharmacy file (#52 or #55) for the order and compare the STOP DATE and STATUS.

For example – Unit Dose orders:

For Unit Dose orders, these will be in the PHARMACY PATIENT file (#55) in the UNIT DOSE multiple (#55.06). The PHARMACY PATIENT IEN is the OBJECT OF ORDER from file 100.

In the PHARMACY PATIENT (#55) file, inquire on the patient. Then:

- Find the UD order.
- Confirm it is the same order by comparing the ORDER FILE ENTRY number (#66) to the Order number from file 100 (should be the same).

- Then compare the STATUS from file 55 to the STATUS from file 100.
- If they differ, use the stop date to determine if the order should still be active, discontinued or expired. If the order is more than one year old, the status should not be Active. The status will need to be corrected in whichever file is still set as “Active”.
- After review of all orders, run the option again and answer ‘Yes’ to the “Should the status in the ORDERS (#100) file be corrected automatically?” prompt. This will allow the option to correct all orders which erroneously have an “Active” status in file 100.
- If some orders should not be corrected automatically, they will need to be corrected manually BEFORE rerunning the option and answering Yes to the question.

### **Status Correction:**

- ORDERS (#100) file: If an erroneously active ORDERS (#100) file entry should be corrected to “discontinued” or “expired”, then answer the question “Should the status in the ORDERS (#100) file be corrected automatically?” “NO//” with “YES”. Do not use FileMan to correct the status field of the ORDERS (#100) file, because not all of the cross references will be set correctly.

## **Lookup National Clean-Up Utility Data**

[PSO NATIONAL CLEAN UP UTIL]

Outpatient Pharmacy patch PSO\*7\*433 and Computerized Patient Record System (CPRS) Patch OR\*3\*378 address reported problems where the Drug Name and/or the date in VA FileMan format can mistakenly appear in the Dosage and Sig fields of an entry in PRESCRIPTION File (#52). If a correction is made or attempted by the utility, the original and modified dosage and SIG information will be stored in the NATIONAL DATA UTILITY CLEANUP multiple (#725) of the PRESCRIPTION file (#52). For those prescriptions where a correction was unsuccessful, an error or comment will be stored in COMMENTS field (#5) of the multiple.

This option allows the user to see modifications made for individual prescriptions.

## **Monthly Rx Cost Compilation**

[PSO COSTMONTH]

Use this option to gather information for reports of monthly pharmacy costs.

## **Patient Address Changes Report**

[PSO ADDRESS CHANGE REPORT]

This option provides a report that displays changes made to permanent and temporary mailing address information in the PATIENT file. Also, changes to the MAIL field and the MAIL STATUS EXPIRATION DATE field in the PHARMACY PATIENT file will be displayed. Changes can only be displayed if the edits were made using VA FileMan, and the Audit function was turned on for the field(s) at the time of the edit.

- For the PATIENT file, turn on auditing for:

- STREET ADDRESS [LINE 1] field
  - ZIP+4 field
  - STREET ADDRESS [LINE 2] field
  - STREET ADDRESS [LINE 3] field
  - CITY field
  - STATE field
  - ZIP CODE field
  - BAD ADDRESS INDICATOR field
  - TEMPORARY ADDRESS ACTIVE? field
  - TEMPORARY STREET [LINE 1] field
  - TEMPORARY ZIP+4 field
  - TEMPORARY STREET [LINE 2] field
  - TEMPORARY STREET [LINE 3] field
  - TEMPORARY CITY field
  - TEMPORARY STATE field
  - TEMPORARY ZIP CODE field
  - TEMPORARY ADDRESS START DATE field
  - TEMPORARY ADDRESS END DATE field
- For the PHARMACY PATIENT file, turn on auditing for:
    - MAIL field
    - MAIL STATUS EXPIRATION DATE field

**Example: Patient Address Changes Report**

```
Select Maintenance (Outpatient Pharmacy) Option: Patient Address Changes Report

This option provides a report that displays changes made to permanent and
temporary mailing address information in the PATIENT file (#2). Also changes
to the MAIL field (#.03) and the MAIL STATUS EXPIRATION DATE field (#.05)
in the PHARMACY PATIENT file (#55) will be displayed.
Changes can only be displayed if the edits were made using VA FileMan, and the
Audit function was turned on for the field(s) at the time of the edit.

Print report for a Single patient, or All patients: (S/A): Single// <Enter>

Select PATIENT:   OPPATIENT24,ONE           12-2-16           000345678   NSC VETERAN

This report will be sorted by Date/time of edit.
A beginning and ending date must now be entered for the search.

Beginning Date: T-100 (JUL 23, 2002)

Ending Date: T (OCT 31, 2002)
DEVICE: HOME// <Enter>   GENERIC INCOMING TELNET <Enter>

Address changes for OPPATIENT24,ONE (34-5678)                                PAGE: 1
made between JUL 23, 2002 and OCT 31, 2002
-----

Date/time of edit: OCT 31, 2002@11:10:18
Field edited: STREET ADDRESS [LINE 1]
Edited by: OPPHARMACY4,THREE
Option/Protocol: PSO LM BACKDOOR ORDERS/PSO PATIENT RECORD UPDATE
```

```

Old Value: <no previous value>
New Value: TEST ADDRESS LINE 1

Date/time of edit: OCT 31, 2002@11:10:21
Field edited: STREET ADDRESS [LINE 2]
Edited by: OPPHARMACY4,THREE
Option/Protocol: PSO LM BACKDOOR ORDERS/PSO PATIENT RECORD UPDATE
Old Value: <no previous value>
New Value: TEST ADDRESS LINE 2

Date/time of edit: OCT 31, 2002@11:10:25
Field edited: STREET ADDRESS [LINE 3]

Press Return to continue, '^' to exit:

```

## Pharmacist Enter/Edit [PSO RPH]

This option allows pharmacists to be identified to the system. Enter the name of the new pharmacist at the "Select Pharmacist" prompt. When the PSORPH key is shown as a default, press Return. This enters the pharmacist into the file and gives him/her the PSORPH security key. To delete a pharmacist, enter the name, then enter an @ symbol at the "KEY" prompt and press Return.

## Purge Drug Cost Data [PSO PURGE DRUG COST]

To purge drug cost data from the DRUG COST file, enter a starting and ending date. Then choose to run this job immediately or queue it.

### Example: Purge Drug Cost Data

```

Select Maintenance (Outpatient Pharmacy) Option: PURGE Drug Cost Data

Purge Cost Data Starting: FEB 1997// <Enter> (FEB 1997)
Purge Cost Data Ending: 3/97 (MAR 1997)

Are you sure you want to purge cost data
from 02/00/97 to 03/00/97? NO// Y YES

Do you want this option to run IMMEDIATELY or QUEUED? Q// <Enter> UEUED
Requested Start Time: NOW// <Enter> (MAY 06, 1997@10:31:23)
Task #223079 QUEUED.

```

## Recompile AMIS Data [PSO AMIS RECOMPILE]

Gather AMIS data from various sources with this option. It is recommended that this job should be queued to run during off-peak hours or at a time that is convenient for the site.



**Note:** Month/day/year may be specified for a current month report, but only month and year can be specified for reports of past months.



## Site Parameter Enter/Edit [PSO SITE PARAMETERS]

This option is used to establish and edit parameters for the Outpatient Pharmacy software application. The following table lists each parameter and its corresponding description.

**Table 44: PSO Site Parameter**

Site Parameter	Description
NAME	This field contains the name of the site.
MAILING FRANK STREET ADDRESS	This field is used for the address of the outpatient site.
AREA CODE	This field is used for the area code of the outpatient site.
PHONE NUMBER	This field is used for the telephone number of the outpatient site.
MAILING FRANK ZIP+4 CODE	This field is used for the zip code of the outpatient site. This field will allow zip+4 format (excluding the "-")
SITE NUMBER	This field is used to show the site/station number.
MAILING FRANK CITY	This field is used for the city in which the outpatient site is located.
MAILING FRANK STATE	This field is used to show the state in which the outpatient site resides.

The MAILING COMMENTS field is available for a site to enter any information that will show on the Mail Address label. For example, this free text entry might be “Forwarding service requested” or “Address service requested”. The comments will show after the MAIL field in the Mail Address Section of the label.

**Table 45: Mailing Comments**

Site Parameter	Description
MAILING COMMENTS	This field will be printed on the laser labels mailing address label. It can contain anything the site deems appropriate (i.e., whether mailing is "Forwarding service requested" or "Address service requested", etc.)
HOLD FUNCTION?	This site parameter is used to determine if the 'Hold' function will be used at the medical facility.
SUSPENSE FUNCTION?	This site parameter will be used to determine if the 'Suspense' feature will be used at the medical facility.
CANCEL DRUG IN SAME CLASS	Prescriptions with duplicate classes can only be discontinued if this site parameter is set to 'Yes' and if the Rx has not been put on hold through CPRS.
REFILL INACTIVE DRUG RXS	This will be used to determine if inactive drugs will be used to refill active prescriptions.
ASK METHOD OF PICKUP	This field will be used to determine if method of pickup will be asked for window prescriptions.
PASS MEDS ON PROFILE	This field is used to determine if pass medication within specified date range will be listed on profiles.
PROFILE `SORT BY' DEFAULT	This field will be used to determine the sort order of medications on profiles.
COPIES ON NEW	This field will be used to determine the number of copies for labels to print.

Site Parameter	Description
DRUG CHECK FOR CLERK	This field is used to determine if the duplicate drug warnings should be shown for non-pharmacist.
FEE BASIS SUPPORT	This field is used to determine if fee basis prescriptions are processed.
MULTI RX REQUEST FORM	This field is used to determine if the multiple prescription request forms are printed with medication labels.
BARCODES ON REQUEST FORMS	This field is used to determine if barcodes are printed on profiles, labels, and multi request forms.
BARCODES ON ACTION PROFILES	This field is used to indicate if barcodes are to print with the action profiles. The printer used must be setup or have barcode capabilities for the barcodes to print. Contact IRM to help determine which printers have barcode capabilities.
DISPLAY GROUP	This field is used to determine which bingo board display screen will be shown on the waiting room monitor.
SCREEN PROFILES	This field is used to determine if profiles are displayed when refilling and renewing medications.
EDIT PATIENT DATA	This field is used to determine if editing of patient data will be allowed.
EDIT DRUG	This field will be used to determine if drugs can be changed during prescription edit.
RENEWING RX'S ALLOWED	This field will be used to determine if renewing of medications will be allowed.
PASS MEDS CANCEL	This field is used to determine if pass medications are to be cancelled.
AUTO SUSPEND	This field is used to determine if medication that is refilled or renewed before the next possible fill date is to be placed in suspense automatically.
SHALL COMPUTER ASSIGN RX #S	This field is used to determine if the computer will auto generate prescription numbers.
PROFILE WITH NEW PRESCRIPTIONS	This field is used to determine if medication profiles are printed when new medication is ordered.
SLAVED LABEL PRINTING	This field will be used to allow printing of RX labels without being able to queue to a printer. This parameter is primarily for slaved printing of RX labels. If 'yes' is the answer the prompt or action to be taken on the label will include the '/PRINT' action.
METHADONE PROGRAM	This field will be used to determine if the site has a methadone program and if a particular drug should be prompted for.
METHADONE DRUG	This field will be used to show what drug is being used if the site has a methadone program.
DAYS TO PULL FROM SUSPENSE	This field defines the number of days to pull ahead (bundle) in addition to the NON-CS DAYS TO TRANSMIT field (#11) in the CMOP SYSTEM FILE (#550). It is used for both Non-CS CMOP transmissions and local suspense print. The range is 0 to 15 days.
DAYS TO PULL SUSPENSE CMOP CS	This field is used in the tasked SCHEDULED CS TRANSMISSION [PSXR SCHEDULED CS TRANS] option to pull ahead (bundle) a patient's controlled substance prescriptions from suspense for CMOP transmission for the specified number of days in addition to the CS DAYS TO TRANSMIT field (#12) in the CMOP SYSTEM FILE (#550) . The range is 0 to 15 days.

Site Parameter	Description
NEW LABEL STOCK	This field will be used to determine which medication label stock will be used.
EXTERNAL INTERFACE	This field allows sites to alter the characteristics of the external interface. The Set of Codes field have the following values: 0 – the external interface is off 1 – send all drugs to the external interface; print labels locally 2 – send all drugs to the external interface; don't print labels locally 3 – send only marked drugs to the external interface; don't print labels locally 4 – send only marked drugs to external interface and print labels through VistA.
BLANK LABEL BETWEEN PATIENTS	This field will determine if a blank label should print between patients on the label printers.
VERIFYING PHARMACIST ON LABELS	This site parameter will determine if the name of the verifying pharmacist or the name of the person who made the order request will print on the Rx label. If the parameter is set to Yes the verifying pharmacist name will print.


The CPRS ORDERING INSTITUTION field in the OUTPATIENT SITE file allows multiple Institutions to be entered for the local site. If more than one Institution is entered for a site, the user can select the appropriate Institution when using the *Complete Orders from OERR* option and complete Pending Orders from clinics that are associated with the specific Institution selected.

**Table 46: CPRS Ordering Institution**

Site Parameter	Description
CPRS ORDERING INSTITUTION	This field is used when completing orders from CPRS. If there is only one Institution entry, then when completing orders from CPRS under this Outpatient site, only those orders from that Institution will be shown. If there is more than one entry, then the Institution will be prompted for when completing orders from CPRS, and only those orders associated with that Institution selected will be shown.
RELATED INSTITUTION	Institution associated with the site.
LOGICAL LINK	This is a pointer to the Logical Link file (#870). This link is used to transmit messages to an external (client) application. This field is not filled in when messages are exchanged between DHCP applications on the same system. This field will be used as the Logical Link for the prescription if there is a Clinic associated with the prescription, and the Institution derived from that Clinic has an entry in this CPRS ORDERING INSTITUTION multiple with an associated Logical Link.
NPI INSTITUTION	This is the institution or division that has the National Provider Identifier (NPI) value for this Outpatient Site. No two Outpatient Site entries in this file should point to the same INSTITUTION file entry. (Note that the RELATED INSTITUTION field differs from this field and is the parent institution, which may be the same for any or all of the Outpatient Site entries.)

<b>Site Parameter</b>	<b>Description</b>
AUTOMATED DISPENSE	This field will determine what version of the automated dispense machine this site is running. If the machine is older than HL7 V.2.4, enter letter O, if HL7 V.2.4 has been installed, enter 2.4.
FILE RELEASE DATE/TIME	This field is used to indicate if the release date/time is to be filed for the prescription dispensed by an external interface.
ENABLE MASTER FILE UPDATE	This field will determine if the automated dispense macxxxx are ready to receive HL7 V.2.4 messages.
SCRIPTALK DEVICE	This field contains a pointer to the ScripTalk printer device in the device file.
SCRIPTALK AUTO-PRINT SETTINGS	Set this to 'A' to have a ScripTalk label automatically print for ScripTalk-enrolled patients whenever their regular medication label prints. Set to 'M' if ScripTalk labels will be printed manually.
LABEL/PROFILE MONITOR MAX 0	Maximum number of label/profiles to be stored in the Label/Profile Monitor list for each printer device. The default and minimum value for this number is 1000. Each time the printer is used an entry is made in the Label/Profile monitor and if the monitor holds more entries than specified by this parameter, the oldest entry is deleted.
NARCOTICS NUMBERED DIFFERENTLY	This field is used to determine if narcotics will be numbered differently from other medications/supplies.
NARCOTIC LOWER BOUND	This field is used to determine what prescription numbers narcotics are to start with if narcotics are numbered differently from other prescriptions/supplies.
NARCOTIC UPPER BOUND	This field is used to determine the highest prescription number used for narcotics if this type of medication is numbered differently from other medications/supplies.
LAST NARCOTIC NUMBER ISSUED	This field is used to indicate last number issue d for narcotic medications.
IB SERVICE/SECTION	Select the appropriate entry in the Service/Section file (#49) that is to be used for the Pharmacy Copayment/Integrated Billing procedures.
NARRATIVE FOR COPAY DOCUMENT	This field contains information from the site regarding the copayment procedures for the patient to follow upon receipt of the copay document. For example, information may include a telephone number to call regarding billing inquiries, a payment mailing address, etc.
NARRATIVE REFILLABLE RX	This field contains information from the site regarding procedures for the patient to obtain a refill of his refillable medication. May include the address, phone number, etc. that will assist the patient.
NARRATIVE NON-REFILLABLE RX	This field contains information from the site regarding procedures for the patient to obtain a new prescription for his non-refillable medication. This field may contain address, phone number, etc., that will assist the patient.
CHARGE LOCATION	This field is a pointer to the Hospital Location File (#44). Multi-division sites should populate this field for each division. This data could be obtained from the Business Office of the Medical Center.

The CHARGE LOCATION field is used to group charges in the COTS billing system according to the type of service.

	<b>***Important***</b>
	<p>Entering and defining the Charge Locations is crucial to the success of this function. Initially, however, a unique Outpatient Pharmacy Location must be entered in the HOSPITAL LOCATION file by Registration or Scheduling. It is recommended that the Location be coordinated with the Medical Center's business office. A Charge Location should be defined for every division currently in the OUTPATIENT SITE file, which means that there could be multiple hospital locations or one location for all divisions</p>

If a Charge Location is not defined for a particular division, Outpatient Pharmacy will search all active divisions in the OUTPATIENT SITE file for a Charge Location entry and use the first one it finds. If the PFSS switch is ON and no Charge Locations are defined in any divisions, the information will not be passed on to IB or the COTS billing system and no charge takes place.

Information in the CHARGE LOCATION field cannot be deleted, but it can be replaced with entry of another Charge Location.

**Table 47: Charge Location**

Site Parameter	Description
NCPDP NUMBER	This field is the site-specific National Council for Prescription Drug Programs number (NCPDP), formerly referred to as the National Association of Boards of Pharmacy Number (NABP).
PRESCRIPTION # LOWER BOUND	This field is used to enter the lowest prescription number for this site.
PRESCRIPTION # UPPER BOUND	This field is used to enter the highest prescription number for this site.
LAST PRESCRIPTION # ISSUED	This field is used to store the last RX number used.
INACTIVE DATE	This date will indicate that the Outpatient Site is no longer active and cannot be selected through the Outpatient Pharmacy options.
LOGICAL LINK	This is a pointer to the Logical Link file (#870). This link is used to transmit messages to an external (client) application. This field is not filled in when messages are exchanged between DHCP applications on the same system. This field will be used as the Logical Link for the prescription if there is no Clinic associated with the prescription, or if there is a Clinic associated with the prescription, but the Institution derived from that Clinic does not have an entry in the CPRS ORDERING INSTITUTION multiple with an associated Logical Link for that Outpatient Site entry.
DISPENSE DNS NAME	This is the DNS computer name of the automated dispensing machine that is used for this outpatient site division.
DISPENSE DNS PORT	Enter the DNS port number associated with the automated dispense machine for this outpatient pharmacy site division.
DISPENSING SYSTEM PRINTER	This field identifies the name of the dispensing system printer device. When the user selects this printer device and the external interface is in use, an HL7 message will be generated.

Site Parameter	Description
OPAI	This multiple field identifies the Automated Dispensing Device (ADD) associated with the DISPENSING SYSTEM PRINTER (#59.0200801) field. When the user selects a label printer during Patient Prescription Processing, and the external interface is in use, an HL7 messages will be generated and routed to the appropriate automated dispensing devices defined in this multiple.

The following example displays all of the prompts that are possible with the Site Parameter Enter/Edit option. The prompts displayed at each site will depend upon that site's settings.

**Example: Site Parameter Enter/Edit – all fields**

```
Select Maintenance (Outpatient Pharmacy) Option: SITE Parameter Enter/Edit

Select SITE NAME:ANYTOWN      500
Would you like to see all site parameters for this division? Y// NO

NAME:ANYTOWN// <Enter>
MAILING FRANK STREET ADDRESS: 114 ANYSTREET AVE// <Enter>
AREA CODE: 555// <Enter>
PHONE NUMBER: 555-1234// <Enter>
MAILING FRANK ZIP+4 CODE: 55555// <Enter>
SITE NUMBER: 123// <Enter>
NCPDP NUMBER: <Enter>
MAILING FRANK CITY: ANY CITY// <Enter>
MAILING FRANK STATE: ANY STATE// <Enter>
MAILING COMMENTS: <Enter>
INACTIVE DATE: <Enter>
HOLD FUNCTION?: NO// <Enter>
SUSPENSE FUNCTION?: YES// <Enter>
CANCEL DRUG IN SAME CLASS: YES// <Enter>
REFILL INACTIVE DRUG RXS: YES// <Enter>
ASK METHOD OF PICKUP: YES// <Enter>
PASS MEDS ON PROFILE: YES// <Enter>
PROFILE `SORT BY' DEFAULT: DATE// <Enter>
COPIES ON NEW: YES// <Enter>
DRUG CHECK FOR CLERK: YES// <Enter>
FEE BASIS SUPPORT: YES// <Enter>
MULTI RX REQUEST FORM: YES// <Enter>
BARCODES ON REQUEST FORMS: BOTH// <Enter>
BARCODES ON ACTION PROFILES: YES// <Enter>
VERIFICATION: YES// <Enter>
DISPLAY GROUP: OUTPATIENT// <Enter>
SCREEN PROFILES: YES// <Enter>
EDIT PATIENT DATA: YES// <Enter>
EDIT DRUG: YES// <Enter>
RENEWING RX'S ALLOWED: YES// <Enter>
PASS MEDS CANCEL: NO// <Enter>
```

**Example: Site Parameter Enter/Edit – all fields (continued)**

```
AUTO SUSPEND: YES// <Enter>
SHALL COMPUTER ASSIGN RX #S: YES// <Enter>
PROFILE WITH NEW PRESCRIPTIONS: NO// <Enter>
SLAVED LABEL PRINTING: YES// <Enter>
METHADONE PROGRAM: NO// <Enter>
METHADONE DRUG: METHADONE SOLUTION (METHADOSE)// <Enter>
DAYS TO PULL FROM SUSPENSE: 2// <Enter>
DAYS TO PULL SUSPENDED CS CMOP: <Enter>
NEW LABEL STOCK: YES// <Enter>
EXTERNAL INTERFACE: SEND ALL ORDERS AND PRINT LABEL
// <Enter>
Select DISPENSING SYSTEM PRINTER: PLANO5$PRT// <Enter>
DISPENSING SYSTEM PRINTER: PLANO5$PRT// <Enter>
DNS Name: OPTIFILL// <Enter>
```

```

CATEGORY: ANY// <Enter>
SELECT DNS NAME: <Enter>
Select DISPENSING SYSTEM PRINTER: <Enter>
BLANK LABEL BETWEEN PATIENTS: <Enter>
VERIFYING PHARMACIST ON LABELS: YES// <Enter>
AUTOMATED DISPENSE: HL7 V.2.4// <Enter>
FILE RELEASE DATE/TIME: YES// <Enter>
ENABLE MASTER FILE UPDATE: <Enter>
DISPENSE DNS NAME: <Enter>
DISPENSE DNS PORT: <Enter>
Select CPRS ORDERING INSTITUTION: TROY// <Enter>
  CPRS ORDERING INSTITUTION: TROY// <Enter>
  LOGICAL LINK: <Enter>
Select CPRS ORDERING INSTITUTION: <Enter>
RELATED INSTITUTION:ANYTOWN// <Enter>
NPI INSTITUTION: <Enter>
LABEL/PROFILE MONITOR MAX: 1000// <Enter>
NARCOTICS NUMBERED DIFFERENTLY: YES// <Enter>
NARCOTIC LOWER BOUND: 10000// <Enter>
NARCOTIC UPPER BOUND: 99999// <Enter>
PRESCRIPTION # LOWER BOUND: 100000999// <Enter>
PRESCRIPTION # UPPER BOUND: 500000000// <Enter>
IB SERVICE/SECTION: PHARMACY// <Enter>
NARRATIVE FOR COPAY DOCUMENT: <Enter>

The copay narrative displays here.

  Edit? NO//
NARRATIVE REFILLABLE RX:
*****
The narrative for refillable RXs displays here.
*****

  Edit? NO// <Enter>
NARRATIVE NON-REFILLABLE RX:. . .
. . .

The narrative for non-refillable RXs displays here.

=====

  Edit? NO// <Enter>
LOGICAL LINK: <Enter>
1.

```

The following example is illustrated for sites who want to utilize the multiple automated dispensing functionality. It displays the prompts answered when setting up multiple automated dispensing devices with the Site Parameter Enter/Edit [PSO SITE PARAMETERS] option.

**Example: Site Parameter Enter/Edit – Multiple Automated Dispensing Devices**

```

Select OPTION NAME: PSO SITE PARAMETERS           Site Parameter Enter/Edit
Site Parameter Enter/Edit
Outpatient Pharmacy software - Version 7.0

Division:   ANYTOWN  500

      You are logged on under the ANYTOWN division.

Select PROFILE PRINTER: HOME//   GENERIC INCOMING TELNET

Select LABEL PRINTER: HOME//   GENERIC INCOMING TELNET

OK to assume label alignment is correct? YES//

Bingo Board Display: OUTPATIENT//

```

```

Select SITE NAME:ANYTOWN      500
Would you like to see all site parameters for this division? Y// NO

NAME:ANYTOWN// ^DISPENS
  1  DISPENSE DNS NAME
  2  DISPENSE DNS PORT
  3  DISPENSING SYSTEM PRINTER
CHOOSE 1-3: 3  DISPENSING SYSTEM PRINTER
Select DISPENSING SYSTEM PRINTER: DEVINFO$PRT
DISPENSING SYSTEM PRINTER: DEVINFO$PRT //
Select DNS NAME: OPTIFILL1      14.4.146.1      9021
DNS NAME: OPTIFILL1//
CATEGORY: ANY//
Select DNS NAME: SCRIPTCENTER  14.4.239.2      9086
DNS NAME: SCRIPTCENTER //
CATEGORY: STORAGE//
Select DNS NAME:
Select DISPENSING SYSTEM PRINTER:

```

- Before adding a “DNS NAME”, the entry must first be added to the PHARMACY AUTOMATED DISPENSING DEVICES file (#52.53) using the Enter/Edit Automated Dispensing Devices [PSO AUTO DISPENSING DEVICE] option.
- The CATEGORY field is a set of codes and is a required field. Categories provide the flexibility of routing RXs to different automated dispensing devices. The following are the valid codes:

**Table 48: Category**

Code	Description
MCS	MAIL – CONTROLLED SUBSTANCE
MNCS	MAIL – NONCONTROLLED SUBSTANCE
MAIL	MAIL
WCS	WINDOW – CONTROLLED SUBSTANCE
WNCS	WINDOW – NONCONTROLLED SUBSTANCE
WIND	WINDOW
CS	CONTROLLED SUBSTANCE
NCS	NONCONTROLLED SUBSTANCE
A	ANY
S	STORAGE



**Note:** The “ANY” category is only allowed (with the exception of S-storage) if no other categories are selected for the automated dispensing device and vice versa (i.e., if any other category is selected for the automated dispensing device, then the “ANY” category shall not be selectable). The “ANY” category will not work with any other category except “STORAGE”.



**Note:** “STORAGE” denotes a 24/7 prescription pickup kiosk that stores prescriptions filled electronically by pharmacy and enables pharmacy customers to pick up their prescriptions without waiting in line. It enhances patient satisfaction, ensures the right



prescription is delivered to the right patient thus enhancing patient safety, saving pharmacy time, and giving inventory control over the medications dispensed.

The “S” category is allowed in combination with other categories and as standalone.

#### Example: Allowable Category Combinations

```
Allowable Category combinations when associating multiple automated dispensing devices to one dispensing printer:  
  
MCS, MNCS, WCS, WNCS, S*  
MCS, MNCS, WIND, S*  
WCS, WNCS, MAIL, S*  
CS, MNCS, WNCS, S*  
NCS, WCS, MCS, S*  
MAIL, WIND, S*  
CS, NCS, S*  
ANY, S*  
S*  
  
*Multiple storage devices can be associated with one dispensing printer.  
  
To avoid conflict, only certain category permutations shall be allowed.  
For example, users shall not be able to define categories of MCS to one automated dispensing device and MAIL for a different automated dispensing device linked to the same dispensing printer. Otherwise, a controlled substance Rx with a route of Mail would have the potential of being routed to two different automated dispensing devices, which presents a conflict.  
  
Within each set identified above, there can be any combination within each category (for example in #1, categories MCS and WNCS can both be defined for a dispensing printer).
```

Again, the “ANY” category will not work with any other category except “STORAGE”.

The software will not allow the same category to be defined for different automated dispensing devices associated with a printer.



**Note:** In order to exit the CATEGORY field, you must either enter ^ DNS NAME or select the “S” category.

## State Prescription Monitoring Program (SPMP) Menu [PSO SPMP MENU]

The State Prescription Monitoring Program (SPMP) transmits prescription information to state Prescription Drug Monitoring Program (PDMP) electronic databases that track controlled substance prescriptions in a state. States distribute data from the database to individuals authorized under state law to receive the information for purposes of their profession. The information must be reported using the American Society for Automation in Pharmacy (ASAP) data format, which was developed by the Alliance of States with Prescription Monitoring Programs and the National Association of State Controlled Substances Authorities.

Safety Updates for Medication/Prescription Management (SUMPM) patch PSO\*7\*408 added a new module to the Outpatient Pharmacy V. 7.0 application, enabling Veterans Health

Administration (VHA) pharmacies to comply with mandatory reporting to State Controlled Substance Rx Databases as required by the Consolidated Appropriations Act, 2012, PL 112-74.

In response to the COVID-19 pandemic, the Pharmacy Safety Updates (PSU) patch PSO\*7\*625 will simplify retransmission of rejected prescriptions to state PDMPs. It will allow VOIDs to be submitted to the state PDMP to correct duplicate records (transmitted to a state on different days) without requiring them to be returned to stock. Sites will be able to resend corrected records to PDMPs as a batch rather than one at a time. Sites will also be able to identify and transmit records that were missed in previous nightly transmissions. Finally, the software will send a Zero Report to state PDMPs when no Controlled Substances (CS) were dispensed during a reporting period, thereby eliminating the need for follow-up. Improved functionality to identify, correct and transmit CS prescription records will ensure that they are reported to the state PDMPs with as little intervention by Pharmacy staff as possible.

PSU patch PSO\*7\*625 adds two batch types to the Scheduled SPMP Data Export [PSO SPMP SCHEDULED EXPORT] nightly background job. In addition to the existing Scheduled batch type containing controlled substances, a Zero Report batch type was added to submit a Zero Report to the state when there are no controlled substances to transmit, and another Scheduled batch type was added to send a separate batch if any controlled substance prescriptions are found with release dates in the last 30 days that have not been transmitted to the state.

Also new to the Scheduled Export process is a review of CS prescriptions which need to be sent to a state, but the state's transmission parameters are missing from the SPMP STATE PARAMETERS file (#59.41). If such records exist, a MailMan message is sent to the PSO SPMP NOTIFICATIONS mail group stating the site does not transmit CS records because it is in a state that does not have the state parameters defined in VistA.

In addition, PSU patch PSO\*7\*625 adds three new options to the SPMP module:

- VD View/Export Void Prescriptions [PSO SPMP VOID RX VIEW/EXPORT];
- NT CS Prescriptions Not Transmitted [PSO SPMP RX NOT TRANSMITTED];
- MA Manual Export/Prescription Correction [PSO SPMP MANUAL EXPORT/RX FIX].

```
Select State Prescription Monitoring Program (SPMP) Menu Option:
```

```
ASAP  View/Edit ASAP Definitions
SP    View/Edit SPMP State Parameters
RX    View/Export Single Prescription
VD    View/Export Void Prescriptions
BAT   View/Export Batch
BP    Export Batch Processing
RP    Accounting Of Disclosures Report
SSH   Manage Secure SHell (SSH) Keys
UN    Unmark Rx Fill as Administered In Clinic
NT    CS Prescriptions Not Transmitted
MA    Manual Export/Prescription Correction
```

## View/Edit ASAP Definitions [PSO SPMP ASAP DEFINITIONS]

Patch PSO\*7\*451 renamed the View ASAP Definitions [PSO SPMP VIEW ASAP DEFINITIONS] option to View/Edit ASAP Definitions [PSO SPMP ASAP DEFINITIONS].

This option is used for viewing the ASAP data format and the data elements reported to the states. It provides detailed information about each segment and field for all ASAP format versions, and provides the ability to customize versions, segments, and elements for versions 3.0 and higher.

Patch PSO\*7\*625 adds Zero Reporting to the state when there are no prescription fills to report. A Zero Report indicates to a state that no controlled substances were dispensed during the required reporting period. Having a standard in place simplifies the process for system vendors having installations in more than one state (which is the norm), and for chains with their own systems that have pharmacies in multiple states. The Zero Report is sent when a batch file is normally sent for the reporting period.

Patch PSO\*7\*625 also adds ASAP Versions 4.1Z and 4.2Z used for Zero Reporting to the state. These two Zero Report ASAP format versions can be viewed and customized, consistent with other ASAP format versions 3.0 and above.

User key PSO SPMP ADMIN is used to control access to the SPMP options and is required to edit ASAP definitions.

```
Select State Prescription Monitoring Program (SPMP) Menu Option:
ASAP View/Edit ASAP Definitions

    American Society for Automation in Pharmacy (ASAP) Version

Select one of the following:

1995      ASAP Version 1995
3.0       ASAP Version 3.0
4.0       ASAP Version 4.0
4.1       ASAP Version 4.1
4.1Z     *ASAP Version 4.1Z (Zero Report)
4.2       ASAP Version 4.2
4.2Z     *ASAP Version 4.2Z (Zero Report)
```

Once an ASAP version is selected, the system administrator can copy ASAP versions, modify data elements or segments, and delete customizations and delimiters for that ASAP version. An asterisk is used to indicate when a data element, segment, delimiter or version has been customized. **Note: ASAP version 1995 cannot be modified.**

When an ASAP version is selected from the View/Edit ASAP Definitions [PSO SPMP ASAP DEFINITIONS] option, the detail view of that ASAP definition is then displayed. Actions that can be taken are:

CV	Copy ASAP Version	CE	Customize Element	ED	Edit Delimiters
CS	Customize Segment	DC	Delete Customization	SH	Show/Hide Details

## Show/Hide Details:

This option is used to change the level of detail displayed on the screen. The following high-level view is what is shown as the default when an ASAP Definition is selected:

```
ASAP Standard Version 4.0   Mar 01, 2016@10:35:05   Page: 1 of 1
Element Delimiter: *   Segment Terminator: \   End Of Line ESC: $C(13,10)
-----
MAIN HEADER
TH - Transaction Set Header
  IS - Information Source
    PHARMACY HEADER
      PHA - Pharmacy Header
        PATIENT DETAIL
          PAT - Patient Information
            PRESCRIPTION DETAIL
              DSP - Dispensing Record
                PRE - Prescriber Information
                  CDI - Compound Drug Ingredient Detail (Not Used)
                  AIR - Additional Information Reporting (Not Used)
            PHARMACY TRAILER
              TP - Pharmacy Trailer
MAIN TRAILER
TT - Transaction Trailer

-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version   CE Customize Element   ED Edit Delimiters
CS Customize Segment   DC Delete Customization SH Show/Hide Details
Select (s): Quit//
```

You can toggle between different levels of detail by entering “SH” at the prompt for the Show/Hide Details option. Entering “SH” at the prompt will expand the details shown to include the high-level view of the elements under each segment.

```
ASAP Standard Version 4.0   Mar 01, 2016@10:37:50   Page: 1 of 6
Element Delimiter: *   Segment Terminator: \   End Of Line ESC: $C(13,10)
-----
MAIN HEADER
TH - Transaction Set Header
  TH01 - Version / Release Number
  TH02 - Transaction Control Number
  TH03 - Transaction Type
  TH04 - Response ID
  TH05 - Creation Date
  TH06 - Creation Time
  TH07 - File Type
  TH08 - Composite Element Separator
  TH09 - Data Segment Terminator Character (Not Used)
  IS - Information Source
    IS01 - Unique Information Source ID
    IS02 - Information Source Entity Name
    IS03 - Message
    PHARMACY HEADER
      PHA - Pharmacy Header
-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version   CE Customize Element   ED Edit Delimiters
CS Customize Segment   DC Delete Customization SH Show/Hide Details
Select Item(s): Next Screen//
```

Entering “SH” a second time will expand the level of detail shown to include the details of each element.

```
ASAP Standard Version 4.0   Mar 01, 2016@10:38:18   Page: 1 of 37
Element Delimiter: *   Segment Terminator: \   End Of Line ESC: $C(13,10)
```

```

-----
MAIN HEADER
TH - Transaction Set Header
TH01 - Version / Release Number
Requirement: Required          Format: Alphanumeric          Maximum Length: 4
Code uniquely identifying the transaction. Format = x.x
Value: $$TH01^PSOASAP()

TH02 - Transaction Control Number
Requirement: Required          Format: Alphanumeric          Maximum Length: 10
Sender assigned code uniquely identifying a transaction.
Value: $$TH02^PSOASAP()

TH03 - Transaction Type
Requirement: Optional          Format: Numeric              Maximum Length: 2
Identifies the purpose of initiating the transaction.
  01 Send/Request Transaction
  02 Acknowledgment (Used in Response only.)
-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version          CE Customize Element          ED Edit Delimiters
CS Customize Segment          DC Delete Customization      SH Show/Hide Details
Select Item(s): Next Screen//

```

## Customize Segment:

This option can be used to edit or create new segments for ASAP versions 3.0 or higher. The following fields can be updated using this option:

### SEGMENT ID

- This field is the ASAP segment identifier that you enter. You can enter an existing segment ID if you wish to edit a currently defined segment, or you can enter a new segment ID to create a new segment.

### SEGMENT NAME

- This field is the segment name for your segment. The value must be 1-50 characters in length.

### PARENT SEGMENT

- This field is the segment's parent segment identifier.

### REQUIREMENT

- This field indicates if the segment is required (R), optional (O), or not used (N).

### POSITION

- This field is the position of the segment within the record.

### LEVEL

- This field is the level where the segment is placed within the ASAP definition.

### Example: Customizing an Existing Segment

```
ASAP Standard Version 4.2   Mar 01, 2016@01:31:13   Page: 1 of 1
Element Delimiter: *   Segment Terminator: ~   End Of Line ESC: $C(13,10)
-----
MAIN HEADER
TH - Transaction Header
  IS - Information Source
    PHARMACY HEADER
      PHA - Pharmacy Header
        PATIENT DETAIL
          PAT - Patient Information
            PRESCRIPTION DETAIL
              DSP - Dispensing Record
                PRE - Prescriber Information
                  CDI - Compound Drug Ingredient Detail (Not Used)
                    AIR - Additional Information Reporting
          PHARMACY TRAILER
            TP - Pharmacy Trailer
MAIN TRAILER
TT - Transaction Trailer

-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment      DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit// CS  Customize Segment

SEGMENT ID: PAT   Patient Information

REQUIREMENT: R// REQUIRED

Save Custom Segment? YES//           Saving...OK
```

### Example: Customizing a New Segment

```
ASAP Custom Version 4.2   Feb 25, 2016@20:21:06   Page: 1 of 1
Element Delimiter: *   Segment Terminator: \   End Of Line ESC: $C(13,10)
-----
MAIN HEADER
TH - Transaction Set Header
  IS - Information Source
    PHARMACY HEADER
      PHA - Pharmacy Header
        PATIENT DETAIL
          PAT - Patient Information
            PRESCRIPTION DETAIL
              DSP - Dispensing Record
                PRE - Prescriber Information
                  CDI - Compound Drug Ingredient Detail (Not Used)
                    AIR - Additional Information Reporting (Not Used)
          PHARMACY TRAILER
            TP - Pharmacy Trailer
MAIN TRAILER
TT - Transaction Trailer

-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment      DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit// CS  Customize Segment

SEGMENT ID: TST
Are you adding TST as a new segment ID? NO// YES
SEGMENT NAME: TEST
PARENT SEGMENT: PAT// PAT   Patient Information
REQUIREMENT: N// NOT USED
POSITION: 3// 3
LEVEL: 4// 4  PRESCRIPTION DETAIL

Save Custom Segment? YES//           Saving...OK
```

```

ASAP Custom Version 4.2      Feb 25, 2016@20:21:06      Page: 1 of 1
Element Delimiter: *      Segment Terminator: \      End Of Line ESC: $C(13,10)
-----
MAIN HEADER
TH - Transaction Set Header
  IS - Information Source
    PHARMACY HEADER
      PHA - Pharmacy Header
        PATIENT DETAIL
          PAT - Patient Information
            PRESCRIPTION DETAIL
              DSP - Dispensing Record
                PRE - Prescriber Information
                  CDI - Compound Drug Ingredient Detail (Not Used)
                    AIR - Additional Information Reporting (Not Used)
                      TST* - TEST (Not Used)
            PHARMACY TRAILER
              TP - Pharmacy Trailer
MAIN TRAILER
TT - Transaction Trailer

-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment      DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit//

```

## Customize Element:

This option can be used to edit or create new elements for ASAP versions 3.0 or higher. The following fields can be updated using this option:

### DATA ELEMENT ID

- The data element identifier consists of the segment ID followed by a number. You can enter an existing element or create a new element. When creating a new data element, a number from 01 to 999 is used as a suffix to the data segment name. The user is restricted to the addition of sequential data elements for a given segment. The user cannot skip a number between the new data element and the prior number. For example, DSP13 → DSP14 is acceptable; DSP13 → DSP15 is not acceptable.

### ELEMENT NAME

- This field is the data element name.

### DATA FORMAT

- This field designates the data format for the element. Valid values are alphanumeric (AN), numeric (N), decimal (D), date (DT), or time (TM).

### MAXIMUM LENGTH

- This field is the maximum length of the data element that you can designate for the field.

## REQUIREMENT

- This field is used to indicate if the segment is required (R), optional (O), or not used (N).

## TEXT FIELD

- This field is an open text field for the description of the element.

## M SET EXPRESSION

This field has been added for the purpose of defining a Fixed Value, or to use an M expression to modify a selected ASAP data element. The M SET EXPRESSION must resolve to a value that conforms with the data format for the data element.

In the example below, the standard data element AIR01 (State Issuing Rx Serial Number) is shown along with the field help text which shows examples of variables that can be used to build the M SET EXPRESSION.

### Example: Values and Variables for the M SET EXPRESSION

```
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment      DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit// CE Customize Element

DATA ELEMENT ID: AIR01   State Issuing Rx Serial Number
MAXIMUM LENGTH: 2// 2
REQUIREMENT: O// OPTIONAL
M SET EXPRESSION: $$AIR01^PSOASAP()// ??

This is the argument of a MUMPS SET command that will be used to retrieve the
value for the Data Element 'AIR01'.

Below are some examples of valid values for this field:

Null/Blank : Use "" (two quotes) to force a blank value. Another option to
----- force a blank value is to set the Data Element REQUIREMENT field
to 'N' (NOT USED).

Fixed Value: Use quotes to force a fixed value for this Data Element.
----- Examples: "AF290303", "SMITH", "12345", etc.

MUMPS Code : Use a Mumps expression that can be used as the argument of a SET
----- command. Examples: $P($$SITE^VASITE(),"^",2)
                        $E($$GET1^DIQ(52,RXIEN,.01),1,30)
                        $$ (FILLIEN>0:"REFILL",1:"ORIGINAL")
                        $$PHA03^PSOASAP()_"B"

NOTE: The value for a Standard Definition Data Element is returned by a
function in the format $$SEGNN^PSOASAP(), where 'SEG' is the 2 or
3-character segment identifier and 'NN' is the 2-digit element
identifier. Examples: $$PAT03^PSOASAP(), $$PRE08^PSOASAP(), etc.

The following variables are available at the PRESCRIPTION DETAIL level for
customizing this Data Element:

STATEIEN - State IEN. Pointer to STATE file (#5).
SITEIEN  - Pharmacy Division IEN. Pointer to OUTPATIENT SITE file (#59).
PATIEN   - Patient IEN. Pointer to the PATIENT file (#2).
RXIEN    - Prescription IEN. Pointer to the PRESCRIPTION file (#52).
DRUGIEN  - Drug IEN. Pointer to the DRUG File (#50)
FILLNUM  - Fill Number ('0': Original Fill,'1': Refill #1,'2': Refill #2,
'P1': Partial #1,'P2': Partial Fill #2, etc.)
FILLIEN  - Pointer to the REFILL sub-file (#52.1) or PARTIAL sub-file (#52.2)
```



```

('0': Original, N: Pointer to Refill or Partial fill)
RPHIEN - Pharmacist IEN. Pointer to NEW PERSON file (#200).
PREIEN - Prescriber IEN. Pointer to NEW PERSON file (#200).
RTSREC - Return To Stock Record? ('1': YES / '0': NO)

```

The system will truncate a value that has been generated using M Code if it exceeds the maximum data length set for that data element. The system administrator can create a non-standard ASAP data element for versions 3.0 and higher. Non-standard elements are created as the need arises to satisfy a specific situation (e.g., to be in compliance with a new drug law enacted at either the state or federal level).

### Example: Create a Customized Element

```

ASAP Standard Version 4.0   Feb 25, 2016@20:33:43   Page:   1 of 1
Element Delimiter: *      Segment Terminator: \      End Of Line ESC: $C(13,10)
-----
MAIN HEADER                                TH - Transaction Set Header
  IS - Information Source
    PHARMACY HEADER
      PHA - Pharmacy Header
        PATIENT DETAIL
          PAT - Patient Information
            PRESCRIPTION DETAIL
              DSP - Dispensing Record
                PRE - Prescriber Information
                  CDI - Compound Drug Ingredient Detail (Not Used)
                    AIR - Additional Information Reporting (Not Used)
                      TST* - TEST (Not Used)
            PHARMACY TRAILER
              TP - Pharmacy Trailer
MAIN TRAILER
TT - Transaction Trailer

-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment     DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit// CE  Customize Element

DATA ELEMENT ID: TST01
Are you adding 'TST01' as a new DATA ELEMENT? NO// YES
ELEMENT NAME: TEST

DATA FORMAT: ??

This is the data element data format according to the American Society for Automation
in Pharmacy (ASAP) data format definition.
Choose from:
AN      ALPHANUMERIC
N       NUMERIC
D       DECIMAL
DT      DATE
TM      TIME

DATA FORMAT: N

MAXIMUM LENGTH: ?

Type a number between 1 and 999, 0 decimal digits.

MAXIMUM LENGTH: 8
REQUIREMENT: ?

Indicate if the data is required, optional, or not used by the ASAP version.
Choose from:
R       REQUIRED
O       OPTIONAL

```

```

N      NOT USED

REQUIREMENT:

==[ WRAP ]==[ INSERT ]===== < >===== [ <PF1>H=Help ]===
This is a test to create an element

Do you want to save changes? Y

<=====T=====T=====T=====T=====T=====T=====T=====T=====T>=====T>=====

M SET EXPRESSION: 1234
Save Custom Data Element? YES//

```

### Example: Customizing Existing Element

```

ASAP Standard Version 4.0   Feb 25, 2016@20:33:43   Page: 1 of 1
Element Delimiter: *      Segment Terminator: \      End Of Line ESC: $C(13,10)
-----
MAIN HEADER
TH - Transaction Set Header
  IS - Information Source
    PHARMACY HEADER
      PHA - Pharmacy Header
        PATIENT DETAIL
          PAT - Patient Information
            PRESCRIPTION DETAIL
              DSP - Dispensing Record
                PRE - Prescriber Information
                  CDI - Compound Drug Ingredient Detail (Not Used)
                    AIR - Additional Information Reporting (Not Used)
          PHARMACY TRAILER
            TP - Pharmacy Trailer
MAIN TRAILER
TT - Transaction Trailer

-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment      DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit// CE   Customize Element

DATA ELEMENT ID: AIR01      State Issuing Rx Serial Number
MAXIMUM LENGTH: 2// 3
REQUIREMENT: O// OPTIONAL
M SET EXPRESSION: $$AIR01 ^PSOASAP()//

Save Custom Data Element? YES//                               Saving ... OK

```

### Copy ASAP Version:

This option can be used to copy and create new ASAP versions. If the ASAP version being copied contains customized elements and segments, the user will be given a choice to copy the customizations from the selected ASAP version or not.

### Example: Copy an ASAP Version

```

ASAP Standard Version 4.0   Jan 13, 2016@20:08:03   Page: 1 of 1
Element Delimiter: *      Segment Terminator: \      End Of Line ESC: $C(13,10)
-----
MAIN HEADER
TH - Transaction Set Header
  IS - Information Source
    PHARMACY HEADER
      PATIENT DETAIL
        PAT - Patient Information

```

```

        PRESCRIPTION DETAIL
        DSP - Dispensing Record
        PRE - Prescriber Information
        CDI - Compound Drug Ingredient Detail (Not Used)
        AIR - Additional Information Reporting (Not Used)
    PHARMACY TRAILER
    TP - Pharmacy Trailer
MAIN TRAILER
TT - Transaction Trailer

-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment      DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit// CV Copy ASAP Version

From ASAP Version: 4.0

    To ASAP Version: 6.0-TEST

Copy Customizations? YES//

Confirm Copy? NO// YES                               Copying...Done.

ASAP Custom Version 6.0-TEST* Mar 01, 2016@13:57:20      Page: 1 of 1
Element Delimiter: * Segment Terminator: ~ End Of Line ESC: $(13,10)
-----
MAIN HEADER
TH* - Transaction Header
    IS* - Information Source
        PHARMACY HEADER
        PHA* - Pharmacy Header
            PATIENT DETAIL
            PAT* - Patient Information
                PRESCRIPTION DETAIL
                DSP* - Dispensing Record
                PRE* - Prescriber Information
                CDI* - Compound Drug Ingredient Detail (Not Used)
                AIR* - Additional Information Reporting
        PHARMACY TRAILER
        TP* - Pharmacy Trailer
MAIN TRAILER
TT* - Transaction Trailer

-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment      DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit// QUIT

    American Society for Automation in Pharmacy (ASAP) Version

    Select one of the following:

        1995      ASAP Version 1995
        3.0       ASAP Version 3.0
        4.0       ASAP Version 4.0
        4.1       ASAP Version 4.1
        4.1Z      ASAP Version 4.1Z (Zero Report)
        4.2       ASAP Version 4.2
        4.2Z      ASAP Version 4.2Z (Zero Report)

ASAP VERSION:

```

## Edit Delimiters:

The Element Delimiter, Segment Terminator, and the End Of Line Escape characters used in the transmission of an ASAP data file can be modified. The currently defined Element Delimiter,

Segment Terminator, and End Of Line Escape characters are shown at the top of the display. The following fields can be updated using this option:

**DATA ELEMENT DELIMITER CHAR:**

This field is the character used to separate the ASAP data elements.

**SEGMENT TERMINATOR CHAR:**

This field is the character used to mark the end of an ASAP segment.

**END OF LINE ESCAPE CHAR(S):**

This field is the character escape sequence used for marking the end of a line in the data export file. This character escape sequence will be inserted at the end of each segment in the ASAP data file.

- Examples: \$C(10) - Line Feed
- \$C(13) - Carriage Return
- \$C(13,10)- Carriage Return & Line Feed (Default)

**Example: Edit Delimiters**

```

ASAP Standard Version 4.0   Jan 13, 2016@20:58:43   Page: 1 of 1
Element Delimiter: *   Segment Terminator: \   End Of Line ESC: $C(13,10)
-----
MAIN HEADER
TH - Transaction Set Header
  IS - Information Source
    PHARMACY HEADER
      PHA - Pharmacy Header
        PATIENT DETAIL
          PRESCRIPTION DETAIL
            DSP - Dispensing Record
              PRE - Prescriber Information
                CDI - Compound Drug Ingredient Detail (Not Used)
                  AIR - Additional Information Reporting (Not Used)
        PHARMACY TRAILER
          TP - Pharmacy Trailer
MAIN TRAILER
TT - Transaction Trailer

-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment      DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit// ED Edit Delimiters

ASAP Version 4.0 delimiters:

DATA ELEMENT DELIMITER CHAR: *// &
SEGMENT TERMINATOR CHAR: \\// )
END OF LINE ESCAPE CHAR(S): $C(13,10)// $C(10)

Save Changes? YES//                               Saving...OK
  
```

**Updated display after saving changes:**

```

ASAP Standard Version 4.0   Jan 13, 2016@20:59:15   Page: 1 of 1
Element Delimiter*: &   Segment Terminator*: )   End Of Line ESC*: $C(10)
  
```

## Delete Customization:

This option can be used to delete an entire version, a segment, an element, or the delimiters for ASAP versions 3.0 or higher.

### Example: Deleting Delimiters (Restore Standard Delimiters)

```
ASAP Standard Version 4.2   Feb 25, 2016@20:58:43   Page: 7 of 8
Element Delimiter*: %     Segment Terminator*: \   End Of Line ESC: $C(13,10)
-----
AIR01 - State Issuing Rx Serial Number
        AIR02 - State Issued Rx Serial Number
        AIR03 - Issuing Jurisdiction
        AIR04 - ID Qualifier of Person Dropping Off or Picking U
        AIR05 - ID of Person Dropping Off or Picking Up Rx
        AIR06 - Relationship of Person Dropping Off or Picking U
        AIR07 - Last Name of Person Dropping Off or Picking Up R
        AIR08 - First Name of Person Dropping Off or Picking Up
        AIR09 - Last Name or Initials of Pharmacist
        AIR10 - First Name of Pharmacist
        PATIENT DETAIL
        TST* - TEST SEGMENT (Not Used)
            TST01* - TEST ELEMENT 01 (Not Used)
        PHARMACY TRAILER
        TP - Pharmacy Trailer
            TP01 - Detail Segment Count
MAIN TRAILER

-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment     DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit// DC Delete Customization

        Select one of the following:

                D      ASAP 4.2 Delimiters (Restore)
                V      ASAP 4.2 Version
                S      ASAP 4.2 Segment
                E      ASAP 4.2 Data Element

Customization Selection: D  ASAP 4.2 Delimiters (Restore)

The customization for the ASAP Version '4.2' Delimiters will be deleted and the standard
delimiters will be restored to the following:

DATA ELEMENT DELIMITER CHAR: *
SEGMENT TERMINATOR CHAR: ~
END OF LINE ESCAPE CHAR(S): $C(13,10)
Confirm Deletion? NO//YES      Deleting...OK

ASAP Standard Version 4.2   Feb 25, 2016@20:58:43   Page: 7 of 8
Element Delimiter: *     Segment Terminator: ~   End Of Line ESC: $C(13,10)
-----
AIR01 - State Issuing Rx Serial Number
        AIR02 - State Issued Rx Serial Number
        AIR03 - Issuing Jurisdiction
        AIR04 - ID Qualifier of Person Dropping Off or Picking U
        AIR05 - ID of Person Dropping Off or Picking Up Rx
        AIR06 - Relationship of Person Dropping Off or Picking U
        AIR07 - Last Name of Person Dropping Off or Picking Up R
        AIR08 - First Name of Person Dropping Off or Picking Up
        AIR09 - Last Name or Initials of Pharmacist
        AIR10 - First Name of Pharmacist
        PATIENT DETAIL
        TST* - TEST SEGMENT (Not Used)
            TST01* - TEST ELEMENT 01 (Not Used)
        PHARMACY TRAILER
        TP - Pharmacy Trailer
```

```

TP01 - Detail Segment Count
MAIN TRAILER
-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment      DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit// Quit

```



**Note:** The user will only see the delete option for the delimiters (restore to standard delimiters) when there are customized delimiters on a standard ASAP definition that can be restored. The user will not see that option when he/she is on a completely custom ASAP version.

**Example: Deleting Data Elements**

```

ASAP Standard Version 4.2   Feb 25, 2016@20:58:43   Page: 7 of 8
Element Delimiter: * Segment Terminator: ~ End Of Line ESC: $C(13,10)
-----
AIR01 - State Issuing Rx Serial Number
      AIR02 - State Issued Rx Serial Number
      AIR03 - Issuing Jurisdiction
      AIR04 - ID Qualifier of Person Dropping Off or Picking U
      AIR05 - ID of Person Dropping Off or Picking Up Rx
      AIR06 - Relationship of Person Dropping Off or Picking U
      AIR07 - Last Name of Person Dropping Off or Picking Up R
      AIR08 - First Name of Person Dropping Off or Picking Up
      AIR09 - Last Name or Initials of Pharmacist
      AIR10 - First Name of Pharmacist
      PATIENT DETAIL
      TST* - TEST SEGMENT (Not Used)
      TST01* - TEST ELEMENT 01 (Not Used)
      PHARMACY TRAILER
      TP - Pharmacy Trailer
      TP01 - Detail Segment Count
MAIN TRAILER
-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment      DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit// DC Delete Customization

Select one of the following:

V      ASAP 4.2 Version
S      ASAP 4.2 Segment
E      ASAP 4.2 Data Element

Customization Selection: E  ASAP 4.2 Data Element

DATA ELEMENT ID: TST01  TEST

The Custom Data Element 'TST01' will be deleted.

Confirm Deletion? NO//YES           Deleting...OK

ASAP Standard Version 4.2   Feb 25, 2016@20:58:43   Page: 7 of 8
Element Delimiter: * Segment Terminator: ~ End Of Line ESC: $C(13,10)
-----
AIR01 - State Issuing Rx Serial Number
      AIR02 - State Issued Rx Serial Number
      AIR03 - Issuing Jurisdiction
      AIR04 - ID Qualifier of Person Dropping Off or Picking U
      AIR05 - ID of Person Dropping Off or Picking Up Rx
      AIR06 - Relationship of Person Dropping Off or Picking U
      AIR07 - Last Name of Person Dropping Off or Picking Up R
      AIR08 - First Name of Person Dropping Off or Picking Up

```

```

AIR09 - Last Name or Initials of Pharmacist
AIR10 - First Name of Pharmacist
PATIENT DETAIL
TST* - TEST SEGMENT (Not Used)
PHARMACY TRAILER
TP - Pharmacy Trailer
TP01 - Detail Segment Count
MAIN TRAILER

-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version CE Customize Element ED Edit Delimiters
CS Customize Segment DC Delete Customization SH Show/Hide Details
Select Item(s): Quit// Quit

```

**Example: Deleting Segments**

```

ASAP Standard Version 4.2 Feb 25, 2016@20:58:43 Page: 7 of 8
Element Delimiter: * Segment Terminator: ~ End Of Line ESC: $C(13,10)
-----
AIR01 - State Issuing Rx Serial Number
AIR02 - State Issued Rx Serial Number
AIR03 - Issuing Jurisdiction
AIR04 - ID Qualifier of Person Dropping Off or Picking U
AIR05 - ID of Person Dropping Off or Picking Up Rx
AIR06 - Relationship of Person Dropping Off or Picking U
AIR07 - Last Name of Person Dropping Off or Picking Up R
AIR08 - First Name of Person Dropping Off or Picking Up
AIR09 - Last Name or Initials of Pharmacist
AIR10 - First Name of Pharmacist
PATIENT DETAIL
TST* - TEST SEGMENT (Not Used)
PHARMACY TRAILER
TP - Pharmacy Trailer
TP01 - Detail Segment Count
MAIN TRAILER

-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version CE Customize Element ED Edit Delimiters
CS Customize Segment DC Delete Customization SH Show/Hide Details
Select Item(s): Quit// DC Delete Customization

Select one of the following:

V ASAP 4.2 Version
S ASAP 4.2 Segment
E ASAP 4.2 Data Element

Customization Selection: S ASAP 4.2 Segment
SEGMENT ID: TST TEST

The Custom Segment 'TST' and all of its data elements will be deleted.

Confirm Deletion? NO//YES Deleting...OK

ASAP Standard Version 4.2 Feb 25, 2016@20:58:43 Page: 7 of 8
Element Delimiter: * Segment Terminator: ~ End Of Line ESC: $C(13,10)
-----
AIR01 - State Issuing Rx Serial Number
AIR02 - State Issued Rx Serial Number
AIR03 - Issuing Jurisdiction
AIR04 - ID Qualifier of Person Dropping Off or Picking U
AIR05 - ID of Person Dropping Off or Picking Up Rx
AIR06 - Relationship of Person Dropping Off or Picking U
AIR07 - Last Name of Person Dropping Off or Picking Up R
AIR08 - First Name of Person Dropping Off or Picking Up
AIR09 - Last Name or Initials of Pharmacist
AIR10 - First Name of Pharmacist
PATIENT DETAIL
PHARMACY TRAILER
TP - Pharmacy Trailer

```

```

TP01 - Detail Segment Count
MAIN TRAILER
-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment      DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit// Quit

```

### Example: Deleting a Standard ASAP Version

```

Select State Prescription Monitoring Program (SPMP) Menu Option: ASAP
View/Edit ASAP Definitions

American Society for Automation in Pharmacy (ASAP) Version

Select one of the following:

1995      ASAP Version 1995
3.0       ASAP Version 3.0
4.0       ASAP Version 4.0
4.1       ASAP Version 4.1
4.1Z      ASAP Version 4.1Z
4.2       ASAP Version 4.2
4.2Z      ASAP Version 4.2Z

ASAP VERSION: 4.2

ASAP Standard Version 4.2   Mar 21, 2016@09:13:12   Page: 1 of 1
Element Delimiter: *      Segment Terminator: ~   End Of Line ESC: $C(13,10)
-----
MAIN HEADER
TH - Transaction Header
IS - Information Source
    PHARMACY HEADER
    PHA - Pharmacy Header
        PATIENT DETAIL
        PAT - Patient Information
            PRESCRIPTION DETAIL
            DSP - Dispensing Record
                PRE - Prescriber Information
                    CDI - Compound Drug Ingredient Detail (Not Used)
                    AIR - Additional Information Reporting (Not Used)
                    tst* - TEST (Not Used)
            PHARMACY TRAILER
            TP - Pharmacy Trailer
MAIN TRAILER
TT - Transaction Trailer
-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment      DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit// DC Delete Customization

Select one of the following:

V          ASAP 4.2 Version
S          ASAP 4.2 Segment
E          ASAP 4.2 Data Element

Customization Selection: V  ASAP 4.2 Version

ASAP Version: 4.2

The customization for the ASAP Version '4.2' and all of its custom Segments
and Data Elements will be deleted and the standard definition will be restored.

tst      TEST

Confirm Deletion? NO// YES           Deleting...OK

```



```

ASAP Standard Version 4.2   Mar 21, 2016@09:13:12   Page: 1 of 1
Element Delimiter: *   Segment Terminator: ~   End Of Line ESC: $C(13,10)
-----
MAIN HEADER
TH - Transaction Header
  IS - Information Source
    PHARMACY HEADER
      PHA - Pharmacy Header
        PATIENT DETAIL
          PAT - Patient Information
            PRESCRIPTION DETAIL
              DSP - Dispensing Record
                PRE - Prescriber Information
                  CDI - Compound Drug Ingredient Detail (Not Used)
                  AIR - Additional Information Reporting (Not Used)
        PHARMACY TRAILER
          TP - Pharmacy Trailer
MAIN TRAILER
TT - Transaction Trailer

-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment      DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit//

```

### Example: Deleting a Custom ASAP Version

```

American Society for Automation in Pharmacy (ASAP) Version

Select one of the following:

1995      ASAP Version 1995
3.0       ASAP Version 3.0
4.0       ASAP Version 4.0
4.1       ASAP Version 4.1
4.1Z      ASAP Version 4.1Z (Zero Report)
4.2       ASAP Version 4.2
4.2Z      ASAP Version 4.2Z (Zero Report)
NEW 4.0   ASAP NEW 4.0

ASAP VERSION: NEW 4.0

ASAP Custom Version NEW 4.0* Mar 21, 2016@09:18:21   Page: 1 of 1
Element Delimiter: @   Segment Terminator: @   End Of Line ESC: $C(1,1)
-----
MAIN HEADER
TH* - Transaction Set Header
  IS* - Information Source
    PHARMACY HEADER
      PHA* - Pharmacy Header
        PATIENT DETAIL
          PAT* - Patient Information
            PRESCRIPTION DETAIL
              DSP* - Dispensing Record
                PRE* - Prescriber Information
                  AIR* - Additional Information Reporting (Not Used)
        PHARMACY TRAILER
          TP* - Pharmacy Trailer
MAIN TRAILER
TT* - Transaction Trailer

-----Enter ?? for more actions|* Custom Segment/Element-----
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment      DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit// dc Delete Customization

Select one of the following:

V      ASAP NEW 4.0 Version
S      ASAP NEW 4.0 Segment
E      ASAP NEW 4.0 Data Element

```

```

Customization Selection: v  ASAP NEW 4.0 Version

ASAP Version: NEW 4.0

The custom ASAP Version 'NEW 4.0' and all of its Segments and Data Elements
will be deleted.
Element Delimiter:      Segment Terminator:      End Of Line ESC: <NULL>
AIR      Additional Information Reporting
AIR01    State Issuing Rx Serial Number
AIR02    State Issued Rx Serial Number
AIR03    Issuing Jurisdiction
AIR04    ID Qualifier of Person Dropping Off or Picking Up Rx
AIR05    ID of Person Dropping Off or Picking Up Rx
AIR06    Relationship of Person Dropping Off or Picking Up Rx
AIR07    Last Name of Person Dropping Off or Picking Up Rx
AIR08    First Name of Person Dropping Off or Picking Up Rx
AIR09    Last Name or Initials of Pharmacist
AIR10    First Name of Pharmacist
AIR11    KK
DSP      Dispensing Record
DSP01    Reporting Status
DSP02    Prescription Number
DSP03    Date Written
DSP04    Refills Authorized
DSP05    Date Filled
DSP06    Refill Number
Enter <RET> to continue or '^' to STOP: ^

Confirm Deletion? NO// y  YES           Deleting...OK

American Society for Automation in Pharmacy (ASAP) Version

Select one of the following:

1995      ASAP Version 1995
3.0       ASAP Version 3.0
4.0       ASAP Version 4.0
4.1       ASAP Version 4.1
4.1Z      ASAP Version 4.1Z (Zero Report)
4.2       ASAP Version 4.2
4.2Z      ASAP Version 4.2Z (Zero Report)

ASAP VERSION:

```

Refer to [Appendix A – ASAP Definitions](#) for examples of what parameters are provided in each version.



**Note:** The TRANSMIT RETURN TO STOCK parameter is visible only for ASAP version 1995. The SFTP PRIVATE KEY TEXT and SFTP PUBLIC KEY TEXT parameters are visible for all versions only when the SFTP TRANSMISSION MODE field is set to A – AUTOMATIC.

### Customizing the TH01 element for the Zero Report ASAP Version

Patch PSO\*7\*625 may require a customization to the ZERO REPORT ASAP VERSION for the TH01 element to match the state’s required ASAP version. Instructions listed below.

Identify the Zero Report ASAP Version that your site is using:

```
Select State Prescription Monitoring Program (SPMP) Menu Option: SP
View/Edit SPMP State Parameters
```

```
Select STATE: your state
```

```
ASAP VERSION           : 4.2A
ZERO REPORT ASAP VERSION : 4.2Z
INCLUDE NON-VETERAN PATIENTS: NO
REPORTING FREQUENCY IN DAYS : 1
OPEN VMS LOCAL DIRECTORY  : USER$:[SPMP]
UNIX/LINUX LOCAL DIRECTORY : /srv/vista/sup/user/hfs/
FILE NAME PREFIX         : FAKE_001
FILE EXTENSION           : .DAT
RENAME FILE AFTER UPLOAD  : NO
STATE SFTP SERVER IP ADDRESS: fakedns
STATE SFTP SERVER USERNAME : notreal@spmpsetup
STATE SFTP SERVER PORT #   : #####
STATE SFTP SERVER DIRECTORY : FAKE
SFTP TRANSMISSION MODE    : AUTOMATIC [SSH KEYS]
```

```
ASAP VERSION: 4.2// ^
```

Then use the View/Edit ASAP Definitions option to edit the TH01 data element of the Zero Report.

```
Select State Prescription Monitoring Program (SPMP) Menu Option: ASAP
View/Edit ASAP Definitions
```

```
American Society for Automation in Pharmacy (ASAP) Version
```

```
Select one of the following:
```

```
1995      ASAP Version 1995
3.0       ASAP Version 3.0
4.0       ASAP Version 4.0
4.1       ASAP Version 4.1
4.1Z      ASAP Version 4.1Z (Zero Report)
4.2       ASAP Version 4.2
4.2A      ASAP Version 4.2A *
4.2Z      ASAP Version 4.2Z (Zero Report)
```

```
ASAP VERSION: 4.2Z
```

Use the CE (Customize Element) action to set the TH01 data element to match the state's required ASAP version.

```
ASAP Standard Version 4.2Z   Mar 22, 2021@15:11:29      Page: 1 of 1
Element Delimiter: * Segment Terminator: ~ End Of Line ESC: $(13,10)
```

```
MAIN HEADER
```

```
TH - Transaction Header
```

```
IS - Information Source
```

```
  PHARMACY HEADER
```

```
    PHA - Pharmacy Header
```

```
      PATIENT DETAIL
```

```
        PAT - Patient Information
```

```
          PRESCRIPTION DETAIL
```

```
            DSP - Dispensing Record
```

```
              PRE - Prescriber Information
```

```
                CDI - Compound Drug Ingredient Detail
```

```
                  AIR - Additional Information Reporting
```

```
      PHARMACY TRAILER
```

```
        TP - Pharmacy Trailer
```

```
MAIN TRAILER
```

```
TT - Transaction Trailer
```

```

Enter ?? for more actions|* Custom Segment/Element
CV Copy ASAP Version      CE Customize Element      ED Edit Delimiters
CS Customize Segment      DC Delete Customization  SH Show/Hide Details
Select Item(s): Quit// CE Customize Element

DATA ELEMENT ID: TH01   Version / Release Number

MAXIMUM LENGTH: 4// 4
REQUIREMENT: R// REQUIRED
M SET EXPRESSION: "4.2"// "4.2A"

Save Custom Data Element? YES//          Saving...OK

```

## View/Edit SPMP State Parameters [PSO SPMP STATE PARAMETERS]

This option is used for viewing or editing the SPMP parameters for a specific state. PSO\*7\*630 added a new Export State Parameter, Send Export State Parameter. The following fields can be updated using this option:

### ASAP VERSION

This is the American Society for Automation in Pharmacy (ASAP) format version required for the State Prescription Monitoring Program (SPMP) data transmission.

- 1995    ASAP 1995
- 3.0    ASAP 3.0
- 4.0    ASAP 4.0
- 4.1    ASAP 4.1
- 4.2    ASAP 4.2

### TRANSMIT RETURN TO STOCK

If the ASAP Version is 1995, then this field will be prompted and will indicate whether Return To Stock fills should automatically be transmitted to the state (in a separate file), or if reporting of such records will be handled manually. This field will not be shown if the ASAP Version is other than 1995.

### ZERO REPORT ASAP VERSION

This is the American Society for Automation in Pharmacy (ASAP) format version for Zero Reporting to the State (no prescription fills to report). The parameter is blank if the state does not require Zero Reporting.

- 4.1Z    ASAP 4.1Z (Zero Report)
- 4.2Z    ASAP 4.2Z (Zero Report)

For more information about the Zero Report, see the introduction to the section “State Prescription Monitoring Program ([SPMP](#)) Menu” in this manual.

### INCLUDE NON-VETERAN PATIENTS

This field indicates whether controlled substances prescriptions dispensed to non-veteran patients should be included in the export file transmitted to the state.

- YES
- NO

#### REPORTING FREQUENCY IN DAYS

This is the frequency the state requires pharmacies to report data. The value represents the number of days between transmissions of data to the state.

#### OPEN VMS LOCAL DIRECTORY

This is the name of the local secure directory where the State Prescription Monitoring Program (SPMP) export file will be created before it can be transmitted to the state (e.g., USER\$:[SPMP]).



**Note:** If your site does not run the primary VistA database on an Open VMS operating system, this field can be left blank.



**Note:** The directory name chosen must have the appropriate READ, WRITE, EXECUTE and DELETE privileges. Further details can be found in the SPMP Installation Guide.

#### UNIX/LINUX LOCAL DIRECTORY

This is the name of the local Unix/Linux secure directory where the State Prescription Monitoring Program (SPMP) export file will be created before it can be transmitted to the state (e.g., /usr/spmp/).



**Note:** If your site does not run the primary VistA database on a Unix/Linux operating system, this field can be left blank.

#### WINDOWS/NT LOCAL DIRECTORY

This is the name of the local Windows/NT secure directory where the State Prescription Monitoring Program (SPMP) export file will be created before it can be transmitted to the state (e.g., D:\SPMP\).



**Note:** If your site does not run the primary VistA database on a Windows/NT operating system, this field can be left blank.

#### FILE NAME PREFIX

This is the prefix that will be appended to the name of the export file transmitted to the state (e.g., for New Jersey “NJ\_561”).

- FILE EXTENSION
- This is the extension of the export file transmitted to the state.
  - .TXT
  - .DAT

## RENAME FILE AFTER UPLOAD

This field indicates whether the data export file should be created and uploaded with a .DAT (or .TXT) extension directly, or if the file should be created and uploaded with a .UP extension and renamed with a .DAT (or .TXT) extension when the upload is completed.

NO - File will be uploaded as .DAT/.TXT directly (no renaming)

YES - File will be uploaded as .UP and then renamed to .DAT/.TXT

Choose from:

0 NO

1 YES

## STATE SFTP SERVER IP ADDRESS

This is the secure FTP IP address of the State Prescription Monitoring Program (SPMP) server where the export file will be transmitted to.



**Note:** This should be obtained from the State reporting authority.

## STATE SFTP SERVER USERNAME

This is the secure FTP username at the State Prescription Monitoring Program (SPMP) server where the export file will be transmitted to.



**Note:** This should be obtained from the State reporting authority.

## STATE SFTP SERVER PORT #

This is the secure FTP port number used by the State Prescription Monitoring Program (SPMP) server to receive the export file. If left blank, the default secure FTP port 22 will be used.

- STATE SFTP SERVER DIRECTORY

This is the name of the remote secure directory at the State Prescription Monitoring Program (SPMP) server where the export file will be saved.

## SFTP TRANSMISSION MODE

This field indicates whether the sFTP transmissions will happen automatically by a scheduled background job using RSA encryption keys, or if it will be performed manually by a user.

A AUTOMATIC [RSA KEYS]

M MANUAL [PASSWORD]



**Note:** If Automatic is selected, the automatic batch will run overnight (around 1a.m. local time) on a daily schedule based on the REPORTING FREQUENCY IN DAYS parameter value. If the batch process is turned off and then turned back on at a later time, or is initiated for the first time for a site, the last run date for the batch may be null, or it may be a long time in the past. If the batch was run LESS than 30 days

ago, running the automatic batch will process the number of days up to the last time the batch was run. If the batch was run MORE than 30 days ago, running the automatic batch will process the number of days identified in the REPORTING FREQUENCY IN DAYS parameter plus 1 day. Historical records beyond 30 days will need to be transmitted manually.

## SEND EXPORT STATE PARAMETER

The Send Export State Parameter field determines how states will be identified for receiving the SPMP batch exports. This is a new parameter added with PSO\*7\*630.

- Null or 0 - Use the geographic pharmacy state.
- 1 - Use both geographic state and state of patient delivery.
- 2 - Use the state of patient delivery. Appropriate for Meds by Mail only.

The following example displays all of the prompts that are possible with the View/Edit SPMP State Parameters [PSO SPMP STATE PARAMETERS] option. The prompts displayed at each site will depend upon that site's settings.

### Example: View/Edit SPMP State Parameters – ASAP VERSION

```
Select State Prescription Monitoring Program (SPMP) Menu Option: SP
View/Edit SPMP State Parameters

Select STATE: YOUR STATE//

ASAP VERSION           : 4.2
ZERO REPORT ASAP VERSION : 4.2Z
INCLUDE NON-VETERAN PATIENTS: YES
REPORTING FREQUENCY IN DAYS : 1
OPEN VMS LOCAL DIRECTORY  : USER$:[SPMP]
UNIX/LINUX LOCAL DIRECTORY :
WINDOWS/NT LOCAL DIRECTORY :
FILE NAME PREFIX         : TESTIK_
FILE EXTENSION           : .DAT
RENAME FILE AFTER UPLOAD  : NO
STATE SFTP SERVER IP ADDRESS: fakedns
STATE SFTP SERVER USERNAME : fakeusername
STATE SFTP SERVER PORT #  :
STATE SFTP SERVER DIRECTORY :
SFTP TRANSMISSION MODE    : AUTOMATIC [RSA KEYS]
SEND EXPORT STATE PARAMETER : SEND TO STATE OF PATIENT DELIVERY

ASAP VERSION: 4.2// 4.2  ASAP 4.2
```

## View/Export Single Prescription [PSO SPMP SINGLE RX VIEW/EXPORT]

This option is used for viewing a specific prescription and the data related to a specific fill that is transmitted to the state in the ASAP format.

The View/Export Single Prescription option contains the following actions:

VW View Rx	AS View ASAP Definition
MP Medication Profile	EXP Export Rx Fill

The following examples display what is presented in the actions.

**Example: View/Export Single Prescription – View Rx Action**

```

View/Export Single Prescription
PRESCRIPTION:      100002329      BUPRENORPHINE 2MG/NALOXONE 0.5MG SL TAB

  Select one of the following:

      0      Original  (1/9/14)  MAIL

View/Export Prescription      Jul 22, 2014@16:27:10      Page:      1 of      6
Rx: 100002329 - BUPRENORPHINE 2MG/NALOXONE 0.5MG SL TAB      (Fill: Original)
Patient: PSOPATIENT,ONE      ASAP Version: 4.2
-----
TH Transaction Header
TH*4.2*500-0*01**20140722*162710*T***~
4.2      TH01 Version / Release Number
500-0      TH02 Transaction Control Number
01      TH03 Transaction Type
*      TH04 NOT USED
20140722      TH05 Creation Date
162710      TH06 Creation Time
T      TH07 File Type
*      TH08 NOT USED
~      TH09 Data Segment Terminator Character

IS Information Source
IS*VA500*~
VA500      IS01 Unique Information Source ID
*      IS02 Information Source Entity Name

+-----Enter ?? for more actions-----
VW View Rx      AS View ASAP Definition
MP Medication Profile      EXP Export Rx Fill

Select Item(s): Next Screen//VW

Rx Activity Log      Jul 22, 2014@16:27:21      Page:      1 of      5
PSOPATIENT,ONE
  PID: 000-00-0001      Ht (cm) : _____ (_____)
  DOB: (MMDDYYYY)      Wt (kg) : _____ (_____)

      Rx #: 100002329
      Orderable Item: BUPRENORPHINE/NALOXONE TAB,SUBLINGUAL
      Drug: BUPRENORPHINE 2MG/NALOXONE 0.5MG SL TAB
      Verb: DISSOLVE
      *Dosage: ONE TABLET
      *Route: ORAL (BY MOUTH)
      *Schedule: Q24H
Patient Instructions:
      SIG: DISSOLVE ONE TABLET UNDER TONGUE BY MOUTH EVERY 24
      HOURS
      Patient Status: SC
      Issue Date: 01/09/14      Fill Date: 01/09/14
      Last Fill Date: 01/09/14 (Mail)
      Last Release Date:      Lot #:
      Expires: 07/12/14      MFG:
      Days Supply: 5      QTY (TAB): 5
+      Digitally Signed Order
  
```



**Example: View/Export Single Prescription– Medication Profile Action**

```
Select Item(s): Quit// MP Medication Profile

Patient Medication Profile Jul 22, 2014@16:27:52 Page: 1 of 2
PSOPATIENT,ONE
PID: 000-00-0001 HEIGHT(cm): NOT AVAILABLE
DOB: (MMDDYYYY) WEIGHT(kg): NOT AVAILABLE
SEX: MALE EXP/CANCEL CUTOFF: 120 DAYS

1 100002393 ACETAMINOPHEN AND CODEINE 3 10 A 07-21-14 07-21-14 0 30
2 100002336 BUPRENORPHINE 2MG/NALOXONE 7 E 01-16-14 01-16-14 2 30
3 100002394 CLONOPIN 1 MG TAB 20 A 07-21-14 07-21-14 3 30
4 10091 COCAINE 135MG TABS 20 A 07-22-14 07-22-14 0 10
5 10088 CODEINE SULFATE 30MG C.T. 30 A 07-21-14 07-21-14 0 30
6 10090 HYDROMORPHONE 2MG C.T. 30 A 07-22-14 07-22-14 0 30
7 10089 MORPHINE ORAL 10MG/5ML CC 35 A 07-21-14 07-21-14 0 7
8 100002395 TAMOXIFEN CITRATE 10MG TABS 31 A 07-21-14 07-21-14 2 31
PENDING (4 orders)
9 BUPRENORPHINE 2MG/NALOXONE 0.5MG PATCH 1 NW 01-10-14 0 1
10 CAPTOPRIL 100MG TABS 62 NW 09-21-11 0 31
11 CORTISONE CREAM, TOP 1 NW 09-17-12 0 10
+ Select the entry # to view or ?? for more actions
CV Change View PI Patient Information SIG Show/Hide SIG
GS Group by Status PU Patient Record Update

Select: Quit//
```

Holders of the PSO SPMP ADMIN key may export released prescriptions (that have not been marked Returned to Stock) with the VOID record type. Users that do not hold the PSO SPMP ADMIN key are shown the VOID record type but are informed the PSO SPMP ADMIN key is required to export the prescription with a VOID record type.

**Example: View/Export Single Prescription – Export Released Rx Fill Action for Holders of the PSO SPMP ADMIN Key**

```
Select Item(s): Next Screen// EX Export Rx Fill

Enter the type of record to be sent for this prescription fill:

N NEW
R REVISE
V VOID

Record Type: NEW// ?

Enter a code from the list.

Enter the type of record to be sent for this prescription fill:

N NEW
R REVISE
V VOID

Record Type: NEW// ??

Required when reporting a change or cancellation of a previously
transmitted prescription record. 00 indicates a new prescription
dispensing transaction. 01 would be used when information on the
original prescription, including patient information, has been changed.
02 would be used when the prescription was not picked up and returned to
stock.
N - 00 New Record (Not available for ASAP 4.0)
R - 01 Change/Revise
V - 02 Cancel/Void (Rx not picked up and returned to stock)
03 Purged (Rx reported in error) (Available in 4.0 only)
```

```

Enter the type of record to be sent for this prescription fill:

N      NEW
R      REVISE
V      VOID

Record Type: NEW//

The Prescription Fill will be transmitted to the State

Confirm? N// YES

Creating Batch #9 for YOUR STATE...Done.

Exporting Batch #9:

Writing to file USER$:[SPMP]TESTIK_20140722162808.up...Done.
Transmitting file to the State (fakedns)...
Warning: Need basic cursor movement capability, using vt100
Warning: Converting file spmp_ftp_20140722162808.dat to Stream_LF.
Warning: File spmp_ftp_20140722162808.dat converted successfully to Stream_LF.
sftp> put TESTIK_20140722162808.up
TESTIK_20140722162808.up      | 334B | 0.3 kB/s | TOC: 00:00:01 | 100%
sftp> rename TESTIK_20140722162808.up TESTIK_20140722162808.DAT
sftp> exit

File Successfully Transmitted.

```

### Example: View/Export Single Prescription – Selection of a Released Rx Fill for Users Not Holding the PSO SPMP ADMIN Key

```

Select Item(s): Next Screen// EX  Export Rx Fill

Enter the type of record to be sent for this prescription fill:

N      NEW
R      REVISE
(V)    VOID

Record Type: NEW// V

The 'PSO SPMP ADMIN' key is required to select this record type.

Enter a code from the list.

Enter the type of record to be sent for this prescription fill:

N      NEW
R      REVISE
(V)    VOID

Record Type: NEW//

```

### View/Export Void Prescriptions [PSO SPMP VOID RX VIEW/EXPORT]

This option is used for selecting prescriptions by prescription number that will be placed into a batch for transmission to the state. For each prescription selected, users will be prompted to specify the record type (New, Revised, or Void) when transmitting the prescription. Users holding the PSO SPMP ADMIN key may export released prescriptions (that have never been marked Return to Stock) with the VOID record type. Users that do not hold the PSO SPMP ADMIN key cannot access this option.

The screen prompts the user for a prescription fill and its record type; entering multiple prescriptions adds the records to the batch. Pressing the <ENTER> key at the PRESCRIPTION prompt indicates the end of the batch. The screen displays the system-generated batch number and the state for which the prescription(s) will be voided.

**Example: View/Export Void Prescriptions – Prescription, Fill, and Record Type Prompts**

```

View/Export Void Prescriptions
PRESCRIPTION: 800025          ALPRAZOLAM 0.5MG TABS

  Select one of the following:

      0          Original  (11/4/20)  WINDOW

Fill: 0//  Original  (11/4/20)  WINDOW

Enter the type of record to be sent for this prescription fill:

N      NEW
R      REVISE
V      VOID

Record Type: NEW// VOID
PRESCRIPTION: 800026          CLONOPIN 1 MG TAB

  Select one of the following:

      0          Original  (11/15/20) WINDOW

Fill: 0//  Original  (11/15/20) WINDOW

Enter the type of record to be sent for this prescription fill:

N      NEW
R      REVISE
V      VOID

Record Type: NEW//
PRESCRIPTION:

Creating Batch #713 for YOUR STATE...Done.

```

Once the batch is created, the Export Batch Processing screen will automatically launch (See example below). Also see the Export Batch Processing [PSO SPMP BATCH PROCESSING] option for more information.

**Example: View/Export Void Prescriptions – Export Batch**

```

Export Batch Processing          Mar 19, 2021@16:27:02          Page: 1 of 1
State: YOUR STATE              Date Range: 3/20/21 - 3/19/21
#  BATCH#  DATE/TIME CREATED  REL. DATE RANGE  TYPE  Rx's  EXPORTED?
1   713    03/19/21@16:27:02    SINGLE RX        SINGLE RX        2    NO

  Enter ?? for more actions
Select Item(s): Quit// 1          Please wait...

View/Export Batch              Mar 19, 2021@16:27:05          Page: 1 of 1
Batch #: 713  State: YOUR STATE  Type: SINGLE RX  Exported? NO
Created on: MAR 19, 2021@16:27:02  Exported on:
File:
Created by: OPProvider,ONE TWO JR
#  Rx#      FILL  DRUG                                SCH TYPE
1  800025    0     ALPRAZOLAM 0.5MG TABS              4 VOID
2  800026    0     CLONOPIN 1 MG TAB                   4 NEW

```

```

                Enter ?? for more actions
RAW View Raw Data                EXP Export Batch   DEL Delete Batch
Select Item(s): Quit// EX   Export Batch

Indicate whether the transmission should be queued to run on the Background
via TaskMan, on the Foreground (Terminal Screen) or in Debug Mode (Foreground)

                Select one of the following:

                B           Background
                F           Foreground
                D           Debug Mode (Foreground)

Running Mode: F// Background

The Batch will be transmitted to the state of (YOUR STATE).
Confirm? N// YES

Export Background Job Queued to Run.

Press Return to continue:

```

## View/Export Batch [PSO SPMP BATCH VIEW/EXPORT]

The View/Export Batch option is used for viewing information contained in a single batch as well as the list of prescriptions in it when the batch number is known. This option may also be used to export the batch to the state. Exporting can be done in the Foreground where the details are shown on the screen, in the Background where the batch is queued, or in Debug Mode which is also in the Foreground but shows an expanded level of detail to the screen.

Patch PSO\*7\*625 updated the View/Export Batch [PSO SPMP BATCH VIEW/EXPORT] and the Export Batch Processing [PSO SPMP BATCH PROCESSING] options to allow holders of the PSO SPMP ADMIN key to clear the old known host file if the vendor server changes its host key. Below is an example of the message that appears during a manual transmission when the host key has change and the Vista system issues a warning:



**Note:** In the screen text below, everything after the @s is the Warning message.

```

Exporting Batch #1042:

Writing to file /srv/vista/XXX/user/sftp/spmp/XXX531_20171201112430.UP...Done.

Transmitting file to the State (fakedns)...
@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@
@  WARNING: REMOTE HOST IDENTIFICATION HAS CHANGED!  @
@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@@
IT IS POSSIBLE THAT SOMEONE IS DOING SOMETHING NASTY!
Someone could be eavesdropping on you right now (man-in-the-middle attack)!
It is also possible that the RSA host key has just been changed.
The fingerprint for the RSA key sent by the remote host is
(deleted info).
Please contact your system administrator.
Add correct host key in /home/xxxvista/.ssh/known_hosts to get rid of this message.
Offending key in /home/xxxvista/.ssh/known_hosts:1
Password authentication is disabled to avoid man-in-the-middle attacks.
Keyboard-interactive authentication is disabled to avoid man-in-the-middle attacks

```

The following two prompts are displayed if the batch export is selected to run in debug mode and it is not a single Rx batch:

- "Do you want to flush the known hosts key? N//". If this prompt is answered with "Yes", the software will perform the flush of the known host keys before the export starts.
- "Reason for Debug:". The user will be prompted to enter a reason if the previous prompt 'flush host keys' answered with "Yes". User entry will be required.



**Warning:** Before flushing the host key, please confirm with vendor/state that their host key did change and it is safe to flush this key. Flushing the key without confirming the action with the vendor poses a security risk to VistA data.

If a batch was previously exported in Debug Mode and a Debug Reason was entered, that reason will be displayed in the header section.

```
Select State Prescription Monitoring Program (SPMP) Menu Option: BAT
View/Export Batch

Export Batch #: ?
Answer with SPMP EXPORT BATCH BATCH NUMBER
Choose from:
1      SINGLE RX      Jul 22,2014@11:40:19
2      MANUAL         Jul 22,2014@13:51:40
3      MANUAL         Jul 22,2014@13:57:33
4      MANUAL         Jul 22,2014@14:51:52
5      VOID ONLY      Jul 22,2014@14:58:13
6      VOID ONLY      Jul 22,2014@14:59:01
7      MANUAL         Jul 22,2014@14:59:52
8      SINGLE RX      Jul 22,2014@16:23:13
9      SINGLE RX      Jul 22,2014@16:28:08

View/Export Batch      Jul 22, 2014@16:28:29      Page:      1 of      1
Batch #: 2      State: YOUR STATE      Type: MANUAL      Exported? YES
Created on: JUL 22, 2014@13:51:40      Exported on: JUL 22, 2014@13:51:44
File: TESTIK_20140722135140.DAT      Debug Reason: Test reason

1 10090      0 HYDROMORPHONE 2MG C.T.      2 REVISE

Enter ?? for more actions
RAW View Raw Data      EXP Export Batch
Select Item(s): Quit//
```

**Example: View/Export Batch – View Raw Data**

```
Select State Prescription Monitoring Program (SPMP) Menu Option: BAT
View/Export Batch

Export Batch #: 185      SCHEDULED      Jun 5,2016@01:00:11

View/Export Batch      Jun 06, 2016@15:02:27      Page:      1 of      1
Batch #: 185      State: YOUR STATE      Type: SCHEDULED      Exported? NO
Created on: JUN 05, 2016@01:00:11      Exported on:
File:      Debug Reason: Test reason
# Rx#      FILL DRUG      SCH TYPE
1 100002612      0 BUPRENORPHINE 2MG/NALOXONE 0.5MG PATCH      3 NEW
```

```

Enter ?? for more actions
RAW View Raw Data                               EXP Export Batch
Select Item(s): Quit// RAW   View Raw Data

Before continuing, set up your terminal to capture the ASAP
formatted data. On some terminals, this can be done by clicking
on the 'File' menu above, then click on 'Logging...' and check
'Logging on' and 'Disk'.

Note: To avoid undesired wrapping of the data saved to the
file, please enter '0;256;9999' at the 'DEVICE:' prompt.

DEVICE: HOME// ;;9999  SSH VIRTUAL TERMINAL   Right Margin: 80//

-----
TH*4.0*500-185*01**20160606*150236*T*\
IS*VA500*\
  PHA**0123456*#####SITE*FACILITY ADDRESS**CITY*STATE*ZIP*#####\
  PAT*US*07*000000001***TESTPATNM*ONE*****M*01*10\
  DSP**100002612*20160603*5*20160603*0*01*12496128302*1*30*01*02**05\
  PRE*#####PROVIDER*ONE*\
  TP*5\
TT*500-185*8\
-----

Press Return to continue:

```

**Example: View/Export Batch – Export (Foreground)**

```

Export Batch #: 181          MANUAL          Jun 2, 2016@14:42:21

View/Export Batch          Jun 06, 2016@14:57:47          Page: 1 of 2
Batch #: 181          State: YOUR STATE          Type: MANUAL          Exported? YES
Created on: JUN 02, 2016@14:42:21          Exported on: JUN 02, 2016@14:42:30
File: HC_TSP_20160602144221.TXT          Debug Reason: Test reason

# Rx#          FILL  DRUG          SCH TYPE
1 10000####          0  FIORINAL TAB          3 NEW
2 10000####          1  FIORINAL TAB          3 NEW
3 10000####          0  PAREGORIC, USP          3 NEW
4 10000####          0  STANZOLOL 2MG          3 NEW
5 10000####          1  STANZOLOL 2MG          3 NEW
6 10000####          2  STANZOLOL 2MG          3 NEW
7 10000####          0  FIORINAL TAB          3 NEW
8 10000####          0  AMIODARONE          3 NEW
9 10000####          0  PAREGORIC, USP          3 NEW
10 10000####          0  AMIODARONE          3 NEW
11 10####          0  CODEINE 30MG & ASPIRIN C.T.          2 VOID
12 10####          0  MORPHINE ORAL 10MG/5ML  CC          2 NEW
13 10####          0  DIGOXIN 0.25MG          2 NEW
14 10####          0  OPIUM & BELLADONNA SUPP.          2 NEW
15 10####          0  CODEINE 30MG & ASPIRIN C.T.          2 NEW
16 10####          0  CODEINE 30MG & ASPIRIN C.T.          2 VOID
+ Enter ?? for more actions
RAW View Raw Data                               EXP Export Batch
Select Item(s): Next Screen// EXP   Export Batch

Indicate whether the transmission should be queued to run on the Background
via TaskMan, on the Foreground (Terminal Screen) or in Debug Mode (Foreground)

Select one of the following:

B          Background
F          Foreground
D          Debug Mode (Foreground)

Running Mode: F//

The Batch will be transmitted to the state of YOUR STATE.

```

```

Confirm? N// YES                               Please wait...

Exporting Batch #181:

Writing to file USER$:[SPMP]HC_TSP_20160606150016.UP...Done.

Transmitting file to the State (fakedns)...
Warning: Need basic cursor movement capability, using vt100
Warning: Converting file spmp_ftp_20160606150016.inp to Stream_LF.
Warning: File spmp_ftp_20160606150016.inp converted successfully to Stream_LF.
sftp> put HC_TSP_20160606150016.UP
HC_TSP_20160606150016.UP
| 2.6kB | 2.6 kB/s | TOC: 00:00:01 | 100%
sftp> rename HC_TSP_20160606150016.UP HC_TSP_20160606150016.TXT
sftp> lrm HC_TSP_20160606150016.UP
sftp> exit

File Successfully Transmitted.

```

### Example: View/Export Batch – Export (Background)

```

Select Item(s): Next Screen// EXP   Export Batch

Indicate whether the transmission should be queued to run on the Background
via TaskMan, on the Foreground (Terminal Screen) or in Debug Mode (Foreground)

    Select one of the following:

        B           Background
        F           Foreground
        D           Debug Mode (Foreground)

Running Mode: F// Background

The Batch will be transmitted to the state of YOUR STATE.

Confirm? N// YES

Export Background Job Queued to Run.

```

### Example: View/Export Batch – Export (Debug Mode)

When exporting a batch, holders of the PSO SPMP ADMIN key will be asked if the known hosts key should be flushed; answering “YES” will clear the old known hosts file (if the vendor server changes its host key) and require a reason for doing so at the “Reason for Debug” prompt.

```

Select Item(s): Next Screen// EXP   Export Batch

Indicate whether the transmission should be queued to run on the Background
via TaskMan, on the Foreground (Terminal Screen) or in Debug Mode (Foreground)

    Select one of the following:

        B           Background
        F           Foreground
        D           Debug Mode (Foreground)

Running Mode: F// Debug Mode (Foreground)

The Batch will be transmitted to the state of YOUR STATE.

Confirm? N// YES                               Please wait...

Do you want to flush the known hosts key? N// YES
Reason for Debug:
This is a required response. Enter '^' to exit
Reason for Debug: Test reason

```

```

/home/cdvvista/.ssh/known_hosts updated.
Original contents retained as /home/cdvvista/.ssh/known_hosts.old

Exporting Batch #181:

Writing to file USER$:[SPMP]HC_TSP_20160606150118.UP...Done.

Transmitting file to the State (fakedns)...

Sftp2/SFTP2.C:5585: CTRL version (SYS$SHARE:DECC$SHARE ident) is: V8.3-01

    <<< Debug log details removed >>>>

File Successfully Transmitted.

```

## Export Batch Processing [PSO SPMP BATCH PROCESSING]

This option is used for monitoring all batches of data transmitted to the states. When users select a date range, a list of batches is presented from which they can select different actions to perform on a specific batch. The user can edit the state parameters, manually export a batch, or delete a batch.

```

Select State Prescription Monitoring Program (SPMP) Menu Option: BP
Export Batch Processing

STATE: YOUR STATE//

BATCH CREATED BEGIN DATE: T-1 (JUL 21, 2014)

Export Batch Processing      Jul 22, 2014@16:29:37      Page: 1 of 1
State: YOUR STATE           Date Range: 7/21/14 - 7/22/14

  1      1  07/22/14@11:40:19  SINGLE RX          SINGLE RX          1  YES
  2      2  07/22/14@13:51:40  07/22/14-07/22/14  MANUAL             1  YES
  3      3  07/22/14@13:57:33  07/22/14-07/22/14  MANUAL             1  YES
  4      4  07/22/14@14:51:52  07/22/14-07/22/14  MANUAL             1  YES
  5      5  07/22/14@14:58:13  07/22/14-07/22/14  VOID ONLY          1  YES
  6      6  07/22/14@14:59:01  07/22/14-07/22/14  VOID ONLY          1  YES
  7      7  07/22/14@14:59:52  07/22/14-07/22/14  MANUAL             1  YES
  8      8  07/22/14@16:23:13  SINGLE RX          SINGLE RX          1  YES
  9      9  07/22/14@16:28:08  SINGLE RX          SINGLE RX          1  YES

Enter ?? for more actions
SP State Parameters      MA Manual Export      DEL Delete Batch

```

The Export Batch Processing option contains the following actions:

```

SP State Parameters      MA Manual Export      DEL Delete Batch

```

**SP State Parameters** – See the View/Edit SPMP State Parameters [PSO SPMP STATE PARAMETERS] section for more information.

**MA Manual Export** – See the Manual Export/Prescription Correction [PSO SPMP MANUAL EXPORT/RX FIX] section for more information.



DEL Delete Batch – The DEL Delete Batch action is used to delete the batch that was just created; the deletion will be permanent. This new action provides the ability to delete a batch that has not been previously exported.

The following example displays what is presented in the actions.

#### Example: Export Batch Processing - Manual Export Action

```
STATE: YOUR STATE//
Export Rx's Starting with RELEASE DATE (2/11/13 to 3/15/21): T-1 (MAR 15, 2021)
    Prescriptions released today will be included in the next scheduled batch.
Export Rx's Ending with RELEASE DATE (3/15/21 to 3/15/21): TODAY-1// (MAR 15, 2021)
Select prescriptions by one of the following criteria:
    PA    Patient
    PR    Prescriber
    DR    Drug
    DV    Division
    RX    Prescription
    NC    No criteria (unfiltered). All Rx's within the date range selected.
Filter Selection: DR Drug
You may enter one or more DRUGS in succession.
Select DRUG GENERIC NAME: ALPRAZOLAM 0.25MG TABS          CN302
    Another DRUG: METHADONE 5MG TAB          CN101
    Another DRUG:
Enter the type of record to be sent for released prescription fills:
    N    NEW
    R    REVISE
Record Type: NEW//
Gathering CS prescription fills...(this may take a few minutes)
4 prescription fill(s) found for the date range.
These prescription fills will be transmitted to the state of YOUR STATE.
Confirm? N// YES          Please wait...
Creating Batch #445 for YOUR STATE...Done.
Exporting Batch #445:
Writing to file /srv/vista/cdv/user/sftp/spmp/BOI000_20210115095318.DAT...Done.
Transmitting file to the State (fakedns)
```

### Accounting Of Disclosures Report [PSO SPMP DISCLOSURE REPORT]

This option is used for generating a list of prescriptions transmitted to states. This option prompts the user for the following criteria:

- a 'begin' and 'end' date;
- one, multiple or all states; and,
- one, multiple or all patients.

The report is sorted by state, and then by patient in each state.

```
Select State Prescription Monitoring Program (SPMP) Menu Option: RP
Accounting Of Disclosures Report

BEGIN DATE: T-1 (JUL 21, 2014)

END DATE: TODAY// (JUL 22, 2014)

You may select a single or multiple STATES,
or enter ^ALL to select all STATES.

Select STATE: YOUR STATE//
Another STATE:

You may select a single or multiple PATIENTS,
or enter ^ALL to select all PATIENTS.

Select PATIENT: ^ALL

Accounting Of Disclosures Rpt Jul 22, 2014@16:30:33          Page: 1 of 2
Date Range: 7/21/14 - 7/22/14
State(s): YOUR STATE          Patient(s): ALL

# DT DISC PATIENT          Rx#          DRUG

Disclosed to:YOUR STATE
Info Disclosed: Name, DOB, SSN, Prescription Data, Home Address, Phone Number
1 7/22/14 PSOPATIENT,ONE(####) 10000#### BUPRENORPHINE 2MG/NALOXON
2 7/22/14 PSOPATIENT,ONE(####) 10000#### BUPRENORPHINE 2MG/NALOXON
3 7/22/14 PSOPATIENT,ONE(####) 10000#### ACETAMINOPHEN AND CODEINE
4 7/22/14 PSOPATIENT,ONE(####) 10000#### CLONOPIN 1 MG TAB
5 7/22/14 PSOPATIENT,ONE(####) 100#### CODEINE SULFATE 30MG C.T.
6 7/22/14 PSOPATIENT,ONE(####) 100#### MORPHINE ORAL 10MG/5ML
7 7/22/14 PSOPATIENT,ONE(####) 100#### HYDROMORPHONE 2MG C.T.
8 7/22/14 PSOPATIENT,ONE(####) 100#### HYDROMORPHONE 2MG C.T.
```

The Accounting Of Disclosures Report option contains the following action:

```
PR Print Report
```

**Example: Accounting Of Disclosures Report – Print Report Action**

```
Select Item(s): Next Screen// PR Print Report
DEVICE: HOME// ;;9999 SSH VIRTUAL TERMINAL
Accounting Of Disclosures Rpt Jul 22, 2014@16:30:42          Page: 1 of 1
Date Range: 7/21/14 - 7/22/14
State(s): YOUR STATE          Patient(s): ALL

# DT DISC PATIENT          Rx#          DRUG
-----
Disclosed to: YOUR STATE
Info Disclosed: Name, DOB, SSN, Prescription Data, Home Address, Phone Number
1 7/22/14 PSOPATIENT,ONE(####) 10000#### BUPRENORPHINE 2MG/NALOXON
2 7/22/14 PSOPATIENT,ONE(####) 10000#### BUPRENORPHINE 2MG/NALOXON
3 7/22/14 PSOPATIENT,ONE(####) 10000#### ACETAMINOPHEN AND CODEINE
4 7/22/14 PSOPATIENT,ONE(####) 10000#### CLONOPIN 1 MG TAB
```

## Manage Secure SHell (SSH) Keys [PSO SPMP SSH KEY MANAGEMENT]

This option is used for updating and managing the security key functionality to prevent a security incursion of data transmitted to the states. An authorized user can view, create, delete, or access help regarding an SSH Key. User key PSO SPMP ADMIN is used to control access to the SPMP options, and is required for creating and deleting keys.

The user's current encrypted Signature Code is required to create or delete an SSH key pair.

```
Select State Prescription Monitoring Program (SPMP) Menu Option: SSH
Manage Secure SHell (SSH) Keys

Select STATE: YOUR STATE//

Select one of the following:

      V      View Public SSH Key
      N      Create New SSH Key Pair
      D      Delete SSH Key Pair
      H      Help with SSH Keys
```

### Help with SSH Keys:

This option is used to view the online help text for SSH Keys.

#### Example: Display SSH Key Help

```
Action: V// Help with SSH Keys

Secure SHell (SSH) Encryption Keys are used to automate the data transmission
to the State Prescription Monitoring Programs (SPMPs). Follow the steps below
to successfully setup SPMP transmissions from Vista to the state/vendor server:

Step 1: Select the 'N' (Create New SSH Key Pair) Action and follow the prompts
to create a new pair of SSH keys. If you already have an existing SSH
Key Pair you can skip this step.
You can check whether you already have an existing SSH Key Pair
through the 'V' (View Public SSH Key) Action.

Encryption Type: DSA or RSA?
-----
Digital Signature Algorithm (DSA) and Rivest, Shamir & Adleman (RSA)
are two of the most common encryption algorithms used by the IT
industry for securely sharing data. The majority of SPMP servers can
handle either type; however there are vendors that accept only one
specific type. You will need to contact the SPMP vendor support to
determine which type to select.

Step 2: Share the Public SSH Key content with the state/vendor. In order to
successfully establish SPMP transmissions the state/vendor will have
to install/configure the new SSH Key created in step 1 for the
user id they assigned to your site. Use the 'V' (View Public SSH Key)
Action to retrieve the content of the Public SSH key. The Public SSH
Key should not contain line-feed characters, therefore after you copy
& paste it from the terminal emulator into an email or text editor
make sure it contains only one line of text (no wrapping).
```

## View Public SSH Key:

This option is used to view an existing Public SSH key.

### Example: View Public SSH Key

```
Select State Prescription Monitoring Program (SPMP) Menu Option:SSH
Manage Secure Shell (SSH) Keys

Select STATE: YOUR STATE//

    Select one of the following:

        V          View Public SSH Key
        N          Create New SSH Key Pair
        D          Delete SSH Key Pair
        H          Help with SSH Keys

Action: V// View Public SSH Key

TEST_STATE's Public SSH Key (RSA) content (does not include dash lines):
ssh-rsa<key would be shown here>
```

## Create New SSH Key Pair:

This option is used to create a new SSH Key Pair. The user can choose between a Digital Signature Algorithm (DSA) type key or a Rivest, Shamir & Adleman (RSA) type key.



**Note:** With the release of patch PSO\*7\*625, sites will not be able to create new DSA keys; DSA keys are no longer supported with current versions of the operating systems. If a site already has a DSA key, there is no need to change it until advised by the state or by VistA support.

### Example: Create a new SSH Key Pair

```
Action: V// N Create New SSH Key Pair

Enter your Current Signature Code: *****

Select one of the following:

DSA          Digital Signature Algorithm (DSA)
RSA          Rivest, Shamir & Adleman (RSA)

SSH Key Encryption Type: RSA//?

Digital Signature Algorithm (DSA) and Rivest, Shamir & Adleman (RSA) are two of the most
common encryption algorithms used by the IT industry for securely sharing data. The
majority of SPMP servers can handle either type; however there are vendors that accept
only one specific type. You will need to contact the SPMP vendor support to
determine which type to select.

Select one of the following:

DSA          Digital Signature Algorithm (DSA)
RSA          Rivest, Shamir & Adleman (RSA)
```

```
SSH Key Encryption Type: RSA//RSA
Confirm Creation of SSH Keys for YOUR STATE? NO//?
Enter either 'Y' or 'N'.Y

[Verify that new SSH keys are created successfully.]
```

## Delete SSH Key Pair:

This option is used to delete an existing SSH Key Pair.

### Example: Delete an existing SSH Key Pair

```
Select State Prescription Monitoring Program (SPMP) Menu Option: SSH
Manage Secure SHell (SSH) Keys

Select STATE: YOUR STATE//

    Select one of the following:

        V      View Public SSH Key
        N      Create New SSH Key Pair
        D      Delete SSH Key Pair
        H      Help with SSH Keys

Action: V// Delete SSH Key Pair

Enter your Current Signature Code: *****

WARNING: You may be deleting SSH Keys that are currently in use.

Confirm deletion of <YOUR STATE>'s SSH Keys? YES

[Verify that the SSH Key Pair is successfully deleted.]
```

## CS Prescriptions Not Transmitted [PSO SPMP RX NOT TRANSMITTED]

This option displays controlled substance prescriptions that have not been transmitted. It is manually run and reports controlled substance prescriptions by date range that are not included in a batch but meet the criteria to be sent to the state. When using this option, date ranges should be small enough to limit a batch to less than 10,000 records. This option also provides the ability to transmit records that were not previously transmitted to the state.

The CS Prescriptions Not Transmitted option prompts the user for the State, Begin Release Date and End Release Date. If controlled substance prescriptions exist that have not been transmitted, the user is then prompted to create a batch. If "Yes", the batch is created and the user is given the option to export the batch; answering "Yes" to the export prompt will launch the batch export process.

### Example: CS Prescriptions Not Transmitted

```
Select State Prescription Monitoring Program (SPMP) Menu Option: NT
CS Prescriptions Not Transmitted

STATE: YOUR STATE//

Begin Release Date: 10/1/18 (OCT 01, 2018)
# BATCH# DATE/TIME CREATED REL. DATE RANGE TYPE Rx's EXPORTED?
End Release Date: TODAY-1//10/1/20 (OCT 01, 2020)
DEVICE: Linux Telnet /SSH
```

```

CS Prescriptions Not Transmitted Report

Rx #           Fill #       Release Date      STATE
10000####     0           8/27/19@11:24:36 YOUR STATE
557####       0           5/20/20@07:18:30 YOUR STATE

Do you want to create a batch? No// YES

Creating Batch #437 for YOUR STATE...Done.
Do you want to launch Export Batch Processing? No// YES

STATE: YOUR STATE//

BATCH CREATED BEGIN DATE: T (JAN 13, 2021)

BATCH CREATED END DATE: TODAY// (JAN 13, 2021)

Export Batch Processing      Jan 13, 2021@12:03:07      Page: 1 of 1
State: YOUR STATE           Date Range: 1/13/21 - 1/13/21
#  BATCH#  DATE/TIME CREATED  REL. DATE RANGE  TYPE      Rx's  EXPORTED?
1   433    01/13/21@01:00:07  01/12/21-01/12/21  SCHEDULED  1    NO
2   434    01/13/21@01:00:09  01/12/21-01/12/21  ZERO RPT   0    NO
3   437    01/13/21@12:02:36  10/01/18-10/01/20  MANUAL     2    NO

Enter ?? for more actions
SP State Parameters      MA Manual Export      DEL Delete Batch

```

## Manual Export/Prescription Correction [PSO SPMP MANUAL EXPORT/RX FIX]

This option allows the user to resend one or more previously submitted corrected prescriptions to the state for a selected date range using filtering criteria such as patient, prescriber (provider), drug, location of patient, and list of prescription numbers. This option mitigates the situation where the prescription transmitted the first time, but was rejected and needed correction.

When selecting the PA, PR, DR, DV or RX filter, the option will gather only those prescriptions that exist in another batch. When selecting the NC filter, the option will gather all prescriptions in the date range regardless of them having been previously submitted.

The MA Manual Export action located on the EXPORT BATCH PROCESSING screen was updated with PSO\*7\*625 and now performs the same functionality as the Manual Export/Prescription Correction [PSO SPMP MANUAL EXPORT/RX FIX] option.

### Example – Select Prescriptions by Prescriber (Provider)

```

Select State Prescription Monitoring Program (SPMP) Menu Option:

Manual Export/Prescription Correction

STATE: YOUR STATE//
Export Rx's Starting with RELEASE DATE (2/11/13 to 3/15/21): T-1 (MAR 15, 2021)

Prescriptions released today will be included in the next scheduled batch.

Export Rx's Ending with RELEASE DATE (3/15/21 to 3/15/21): TODAY-1// (MAR 15, 2021)

Select prescriptions by one of the following criteria:

```

```

PA      Patient
PR      Prescriber
DR      Drug
DV      Division
RX      Prescription
NC      No criteria (unfiltered). All Rx's within the date range selected.

Filter Selection: PR  Prescriber

You may enter one or more PRESCRIBERS in succession.
Select PRESCRIBER:  PROVIDER,ONE
Another PRESCRIBER:

Enter the type of record to be sent for released prescription fills:

N      NEW
R      REVISE

Record Type: NEW//

Gathering CS prescription fills...(this may take a few minutes)

3 prescription fill(s) found for the date range.

These prescription fills will be transmitted to the state of (YOUR STATE).

Confirm? N// YES           Please wait...

Creating Batch #444 for YOUR STATE...Done.

Exporting Batch #444:

Writing to file /srv/vista/cdv/user/sftp/spmp/BOI000_20210115094607.DAT...Done.

Transmitting file to the State (fakedns)...Press Return to continue:

```

**Example – Select Prescriptions by Drug**

```

Select State Prescription Monitoring Program (SPMP) Menu Option:

Manual Export/Prescription Correction

STATE: YOUR STATE//

Export Rx's Starting with RELEASE DATE (2/11/13 to 3/15/21): T-1  (MAR 15, 2021)

    Prescriptions released today will be included in the next scheduled batch.

Export Rx's Ending with RELEASE DATE (3/15/21 to 3/15/21): TODAY-1//  (MAR 15, 2021)

Select prescriptions by one of the following criteria:

PA      Patient
PR      Prescriber
DR      Drug
DV      Division
RX      Prescription
NC      No criteria (unfiltered). All Rx's within the date range selected.

Filter Selection: DR  Drug

You may enter one or more DRUGS in succession.
Select DRUG GENERIC NAME: ALPRAZOLAM 0.25MG TABS           CN302
Another DRUG: METHADONE 5MG TAB           CN101
Another DRUG:

Enter the type of record to be sent for released prescription fills:

```

```

N      NEW
R      REVISE

Record Type: NEW//

Gathering CS prescription fills...(this may take a few minutes)

4 prescription fill(s) found for the date range.

These prescription fills will be transmitted to the state of (YOUR STATE) .

Confirm? N// YES           Please wait...

Creating Batch #445 for YOUR STATE...Done.

Exporting Batch #445:

Writing to file /srv/vista/cdv/user/sftp/spmp/BOI000_20210115095318.DAT...Done.

Transmitting file to the State

```

## Unmark Rx Fill as Administered In Clinic [PSO SPMP UNMARK ADMIN CLINIC]

This option is used to unmark prescriptions previously marked as 'Administered In Clinic'. Controlled substance prescriptions administered in a clinic are not transmitted to the states. This option enables the user to unmark fills that have been mistakenly marked as 'Administered In Clinic' and subsequently transmit them to the state.

```

Select State Prescription Monitoring Program (SPMP) Menu Option: UN
Unmark Rx Fill as Administered In Clinic

PRESCRIPTION:      100002329      BUPRENORPHINE 2MG/NALOXONE 0.5MG SL TAB

  Select one of the following:

      0      Original (1/9/14) MAIL

Fill: 0// Original (1/9/14) MAIL

Prescription Fill not marked as 'Administered in Clinic'.

```

## View Provider [PSO PROVIDER INQUIRE]

This option provides a way to quickly look up basic data for a single provider.

```

Select Provider: PROVIDER,ADDA C      ANYTOWN      WYOMING

      Provider: PROVIDER,ADDA C

INITIALS:
NON-VA PRESCRIBER: YES      TAX ID: 99-9999999
EXCLUSIONARY CHECK PERFORMED: YES      ON EXCLUSIONARY LIST: NO
DATE EXCLUSIONARY LIST CHECKED: APR 29, 2021
EXCLUSIONARY CHECKED BY: HARRIS,JAMES CALVIN JR

AUTHORIZED TO WRITE MED ORDERS: YES      DEA NUMBER: XP1966007
VA#: XA7006619      PROVIDER CLASS: FELLOW
PROVIDER TYPE: FEE BASIS      NPI: 1231231386
DEA EXPIRATION DATE: APR 29, 2022      DETOX NUMBER: XX1966007
SCHEDULE II NARCOTIC: No      SCHEDULE II NON-NARCOTIC: Yes
SCHEDULE III NARCOTIC: No      SCHEDULE III NON-NARCOTIC: Yes

```



SCHEDULE IV: Yes

SCHEDULE V: Yes

STREET ADDRESS 1: 1 MAIN

STREET ADDRESS 2: SUITE A

STATE: WYOMING

CITY: Cheyenne

PHONE (HOME): 8005551212

ZIP CODE: 82009

## Chapter 29: Using the Suspense Functions

---

This chapter describes the *Suspense Functions* menu options used for handling suspended prescriptions.

### Suspense Functions [PSOPND]

The *Suspense Functions* menu allows the user to print or delete various entries and print out statistics about entries in the RX SUSPENSE file. This file contains prescription labels that have been suspended for printing at a later time. Each prescription label has with it an associated suspense date which is the same as the fill or refill date.

There are eight *Suspense Functions* options that allow the user to manipulate the data in the RX SUSPENSE file:

- *Auto-delete from Suspense*
- *Change Suspense Date*
- *Count of Suspended Rx's by Day*
- *Delete Printed Rx's from Suspense*
- *Log of Suspended Rx's by Day (this Division)*
- *Print from Suspense File*
- *Pull Early from Suspense*
- *Reprint Batches from Suspense*

### Auto-delete from Suspense [PSO PNDEL]

The *Auto-delete from Suspense* option is the same as the V. 6.0 option *Delete from Suspense File*. This option allows deletion of the records of all the prescriptions that have already been printed prior to the user specified number of days. This specified number of days must be set from 7 to 90 days at the "DAYS PRINTED RX STAYS IN 52.5" prompt in the *Site Parameter Enter/Edit* option. The task is set to run every 7 days at the user specified time. The user may also re-queue or de-queue this task using this option. Once a prescription is deleted from suspense, it cannot be reset for reprinting. This option will delete based on the date the prescription was printed from suspense, not the date that it was originally suspended for. The reason for this is that one batch may print on a certain day with prescriptions with different original suspense dates. This job will therefore never delete only part of a printed batch.

#### Example: Auto-delete from Suspense

```
Select Suspense Functions Option: Auto-delete from Suspense
                                     Edit Option Schedule
Option Name: PSO PNDEL1
Menu Text: Auto-delete from Suspense           TASK ID: 1091148

QUEUED TO RUN AT WHAT TIME: JUL 13,1997@01:00
```

```
DEVICE FOR QUEUED JOB OUTPUT:
QUEUED TO RUN ON VOLUME SET:
    RESCHEDULING FREQUENCY: 8D
    TASK PARAMETERS:
    SPECIAL QUEUEING:
COMMAND:                                     Press <PF1>H for help   Insert
```

## Change Suspense Date [PSO PNDCHG]

This option allows the suspense date for a specific prescription or all prescriptions for a patient to be changed. The new suspense date will become the fill/refill date automatically. The user is also given the opportunity to delete a specific prescription, or all prescriptions for a patient, from suspense while in this option. If a refill is deleted from suspense that has not yet been printed, the refill information will be deleted from the prescription, and the various fill dates will be adjusted accordingly. This option does not produce a label.

## Count of Suspended Rx's by Day [PSO PNDCNT]

This option allows printing of a list showing the total number of prescriptions in the RX SUSPENSE file for every day in the specified time period.

This option can help the pharmacy anticipate the workload for particular days.

## Delete Printed Rx's from Suspense [PSO PNDPRI]

With this option printed prescriptions can be deleted from suspense manually. Basically, it does the same thing as the *Auto-delete from Suspense* option, but it prompts the user to delete a single prescription, all prescriptions for one patient, all prescriptions for a given date range, or all prescriptions that have printed in a batch.

A batch is the group of labels that printed for a particular Print from Suspense File job. For example, if for one day, the *Print from Suspense File* option is queued 3 times, three batches will be printed for that day. (See the *Print from Suspense File* option.)

If it is necessary to reset and reprint the suspense labels and only selected labels are wanted, those not wanted can be deleted from the batch. The deleted labels will not be reprinted as part of the batch.

## Log of Suspended Rx's by Day (this Division) [PSO PNDLOG]

Using this option, the manager can print a report by division of all suspended prescriptions sorted either by patient or identification number. The log contains the prescription number, patient name, drug name, type, and print status.

The *Log of Suspended Rx's by Day (this Division)* [PSO PNDLOG] option is updated to add a new column showing the B/D/F (Bad Address Indicator/ Do Not Mail/ Foreign Address) status of the prescription.

## Print from Suspense File [PSO PNDLBL]

This option allows the user to print labels from the RX SUSPENSE file. First, enter the "Print Through" date. Any prescriptions with a suspense date on or before the date entered will print. Additionally, if a patient has at least one prescription on or before the date entered, any other prescriptions for that patient that are in suspense for the specified number of days defined in the DAYS TO PULL FROM SUSPENSE field (#3) of the OUTPATIENT SITE file (#59) will be pulled from suspense and printed.

For example, if today's date is entered and Patient A has a prescription to be printed through today, all of Patient A's prescriptions for today plus the number of days in the DAYS TO PULL FROM SUSPENSE field (#3) in the OUTPATIENT SITE file (#59) will be printed. If there are no prescriptions for Patient A through today, no labels will print.

Labels can be sorted by the patient name, the SSN, or the DEA Special Handling code. If sorted by DEA, the labels must then sort by patient name or SSN. Sorting by DEA will send the labels to the printer in three groups:

- **First group** – will contain all the prescriptions with drugs that contain an "A" (narcotics and alcoholics) or a "C" (controlled substances-non narcotic) in the DEA Special Handling field.
- **Second group** – will contain all the prescriptions with drugs containing an "S" (supply) in the DEA Special Handling field.
- **Third group** – will contain all others. If a patient has suspended prescriptions in more than one group, that patient's labels will not print consecutively.

Only one job is tasked for all of the prescriptions in the batch; therefore, if the job is queued by mistake, only one tasked job must be undone. Any prescription that is put in suspense for the "Print Through Date" between the times the job was queued until the time it actually runs will be included in the job.

Labels for each job printed from suspense will be part of a batch. Each batch is identified by the Division, the user who queued the batch, and the date/time that the job was queued to begin.



Prescriptions pulled early from suspense will not be part of a batch, so they will not be able to be reprinted through the *Reprint Batches from Suspense* option.

A short profile for every patient for whom a label for a new prescription is being printed will also be printed if the local Profile with New Prescriptions site parameter is set to Yes.



If a patient has partial prescriptions with regular fills, only one set of trailing documents will print for that patient. (In V. 6.0 trailer documents were printed after each partial.)

If the patient has remote prescriptions, then the text “THIS PATIENT HAS PRESCRIPTIONS AT OTHER FACILITIES” will appear on the report as shown in the following example.

```

PRESCRIPTION PROFILE AS OF 12/30/2008

NAME: PSOPATIENT, ONE

THIS PATIENT HAS PRESCRIPTIONS AT OTHER FACILITIES

PHARMACIST: _____ DATE: _

```

If a prescription is determined to be an ePharmacy prescription (e.g., third party electronically billable), an electronic claim will be sent by ECME to the third party payer. TRICARE and CHAMPVA prescriptions are exceptions, as noted in the TRICARE and CHAMPVA section. The communication events between Outpatient Pharmacy and ECME are recorded in the ECME Log section of each prescription. The ECME log can be viewed in the patient Medication Profile screen (Activity Log option – AL) and also from the View Prescriptions option. If the claim submission returns a Refill Too Soon (79) reject, a Reject Resolution Required reject, or a Drug Utilization Review (88) reject, the label is not printed for the prescription and it is moved to the Refill Too Soon/DUR or the Reject Resolution Required section of the patient Medication Profile screen until the user resolves the reject. The prescription will also display on the Third Party Payer Reject – Worklist.

### Print from Suspense by Category

Labels can be printed from the RX SUSPENSE file by category. When using the Print from Suspense File [PSO PNDLBL] option, the prompt “Select Print Category: (A/N/C/S/R/D/V/E)//ALL” displays. This prompt enables selecting a category to limit the number of labels that print.

The available categories display with a description when “?” is typed at the prompt. The print categories include:

- *ALL (A)*
- *Non-Controlled Drugs (N)*
- *Controlled Substances (C)*
- *Supplies (S)*
- *Refrigerated Items (R)*
- *Drugs (D)*

- *VA Classifications (V)*
- *Exit (E)* without selecting a category

A variety of prompts follow. Responses to the prompts help refine the labels to print.



**Note:** Expanded help text is available for prompts that specify including or excluding Refrigerated Items and Supplies. The help text displays when the user types “?” at these prompts and helps clarify the result of a YES or NO response at each prompt.



**Note:** Refrigerated Items are designated in the Drug File (#50) by the presence of a “Q” in the DEA Special Handling field (#3). Supplies are designated by the presence of an “S” in the DEA Special Handling field.

### **¾ Days Supply Hold**

Because of the great number of refill-too-soon third party claim rejections that can occur due to prescriptions being filled too early, the system verifies that ¾ of the days supply has elapsed on the previous fill before the ePharmacy prescription may be refilled. The following list describes this functionality.

- ePharmacy prescriptions are delayed from being sent to CMOP and printed for local mail until ¾ of the days supply has elapsed. For CMOP suspense and local mail suspense, a partial day will be rounded up (ex.: ¾ of 30 days will be 23 days).
- When checking a prior prescription for the same patient and product, the prior prescription cannot be in a non-verified status, the prior prescription must have a release date, and the prior prescription must have an expiration date no earlier than 120 days prior to the current date. The ¾ days' supply change applies to prescriptions that are renewed, locally suspended, suspended via CMOP or modified using the SDC - Suspense Date Calc action.
- An activity log entry states the date/time that the prescription will be allowed to be removed from suspense. The activity log is defined on the initial evaluation. The following is an example of the log entry:

```
4 06/18/08  SUSPENSE  REFILL 2  OPHARM,ONE
Comments: 3/4 of Days Supply SUSPENSE HOLD until 6/20/08.
```

- To fill the prescription earlier, users may pull these types of prescriptions early from suspense.

The ¾ days supply processing can be bypassed for billable prescriptions with third party insurance by using the hidden action “BY” on the Outpatient Medications Screen or selecting option “BY” on the ePharmacy Menu. Refer to “*Bypass ¾ Supply*” section in this document for the ePharmacy Menu option “BY”. The user will have the ability to undo the Bypass from the Outpatient Medications Screen.

**Example of the Bypass set to “NO” on the Outpatient Medications Screen. If the user continues, the Bypass will be set to “YES”:**

```
Select Action: Next Screen// BY BY

Currently Bypass 3/4 Day Supply is set to NO.

If you continue, Bypass 3/4 Day Supply will be set to YES and the 3/4 Days
Supply logic will be bypassed when the RX is sent to CMOP.

Continue? Yes//
```

**Example of the Bypass set to “YES” on the Outpatient Medications Screen. If the user continues, the Bypass will be set to “NO”, undoing the Bypass:**

```
Select Action: Next Screen// BY BY

Currently Bypass 3/4 Day Supply is set to YES.

If you continue, Bypass 3/4 Day Supply will be set to NO and the 3/4 Days
Supply logic will apply when the RX is sent to CMOP.

Continue? Yes//
```

- Bypass activity will be recorded in the activity log capturing each time the Bypass has been set or undone and at the time 3/4 Day Supply was bypassed during CMOP processing.

**Example of the Activity Log capturing Bypass activity:**

Activity Log:				
#	Date/Time	Reason	Rx Ref	Initiator Of Activity
1	9/01/20@14:39:16	SUSPENSE	ORIGINAL	LAST NAME, FIRST NAME
Comments: Bypass 3/4 Day Supply set to YES				
2	9/01/20@14:40:17	SUSPENSE	ORIGINAL	LAST NAME, FIRST NAME
Comments: Bypass 3/4 Day Supply set to NO				
3	9/01/20@14:45:19	SUSPENSE	ORIGINAL	LAST NAME, FIRST NAME
Comments: Bypass 3/4 Day Supply set to YES				
4	9/01/20@16:50:20	SUSPENSE	ORIGINAL	POSTMASTER
Comments: 3/4 Day Supply logic bypassed during CMOP processing				

- If the Bypass value has been set to “YES” for a prescription and the user performs the action CSD (Change Suspense Date) the following alert will display:

*Currently Bypass 3/4 Day Supply is set to YES. If you continue, the prescription fill will transmit to CMOP on the new Suspense Date entered.*

**Host Errors**

Prescriptions (ePharmacy only) will be prevented from being filled/sent to CMOP when a host processing error occurs as a claim is submitted through ECME. Host processing errors are identified by reject codes M6, M8, NN, and 99, which are returned by the third party payer. The following conditions apply when this scenario occurs.

- The transmission of the prescription fill will be delayed 1 day in hopes that the host processing issues will be resolved by the third party payer.
- An activity log entry will state the date/time along with a comment stating that the Rx/fill was left in suspense hold due to a host processing error. The following is an example of the log entry:

```
2 06/25/08 SUSPENSE ORIGINAL OPPHARM,TWO
Comments: SUSPENSE HOLD until 6/26/08 due to host reject error.
```

- The Pull Early from Suspense function is not impacted by this added functionality. Users may pull these type prescriptions early from suspense.

There is no user interaction for this function. It initiates when the Print from Suspense [PSO PNDLBLE] option is initiated for CMOP prescriptions.

## TRICARE and CHAMPVA

If there is an override or bypass for a TRICARE or CHAMPVA prescription and there are no open claim rejections for that prescription, then an electronic claim is not generated from suspense, and the label will be printed when the prescription is processed from suspense.

This exception applies to TRICARE and CHAMPVA ePharmacy billable prescriptions and non-billable prescriptions.

If a claim is submitted from suspense for a TRICARE or CHAMPVA prescription, the prescription will be displayed on the Third Party Payer Reject worklist if the claim submission returns any type of reject. Also, non-billable TRICARE and CHAMPVA prescriptions will be displayed on the Third Party Payer Reject Worklist. A user must resolve the reject or submit an override before the prescription can be processed through suspense.

## Pull Early from Suspense [PSO PNDRX]

This option is used to pull a specific prescription or all prescriptions for a patient early. If a prescription is pulled early using this option, it will not be associated with any printed batch, and the user will not be able to reprint a label with the *Reprint Batches from Suspense* option. Since prescriptions that are pulled early from suspense do not belong to any printed batch and cannot be reprinted from suspense, there is no reason to leave them in suspense.

The user may also edit the “Method of Pickup”. For the prompt "Pull Rx(s) and delete from Suspense", the user should answer **YES** to pull the prescriptions, and they will always be deleted from suspense.

If the Label Log indicates that a Label has already printed for this prescription and fill, then the user is asked whether to continue. If the user chooses “No”, the label will not print. In addition, the prescription shall be removed from Suspense unless the suspense queue indicates that a user



has previously requested a reprint of the suspended prescription. If the user chooses “Yes”, the prescription shall continue and will print the label. In the example below, the label will not print but the Prescription will be left on Suspense.

```
Label for Rx#104872 Fill#0 has already been printed  
Do you want to continue? No// NO  
Reprint Flag is on. Prescription left on suspense.
```



If the routing is changed to “Window” when pulling from suspense early and the bingo board is being used, those prescriptions will be sent to the bingo board.

If a prescription is determined to be an ePharmacy prescription (e.g., third party electronically billable), an electronic claim will be sent by ECME to the third party payer. The communication events between Outpatient Pharmacy and ECME are recorded in the ECME Log section of each prescription. The ECME log can be viewed in the patient Medication Profile screen (Activity Log option – AL) and also from the *View Prescriptions* option. If the claim submission returns a Refill Too Soon (79), Reject Resolution Required, or Drug Utilization Review (88) reject, the label is not printed for the prescription and it is moved to the Refill Too Soon/DUR or the Reject Resolution Required section of the patient Medication Profile screen until the user resolves the reject. The prescription will also display on the Third Party Payer Reject worklist.

## Queue CMOP Prescription [PSO RX QUEUE CMOP]

The *Queue CMOP Prescription* option allows the users (including pharmacy technicians) to put mail-routed prescription(s) for CMOP drugs on suspense for CMOP.

### Example: Queue CMOP Prescription

```
Select Suspense Functions Option: QUEUE CMOP Prescription  
Enter the Rx # to queue to CMOP: 300486
```

If the prescription does not have a routing of Mail, has already been released, or is not for a CMOP drug, and does not pass all the other normal checks for CMOP, it will not be put on suspense for CMOP.

## Reprint Batches from Suspense [PSO PNRPT]

This option enables the user to reset the RX SUSPENSE file so that labels in a batch that have already been printed once can be printed again. This option is useful if certain portions of the previously printed labels are unusable.

A prompt is shown for a date range, and within the date range entered all of the batches that have printed from suspense and all the labels associated with each batch are shown. Next, the user can choose to reprint any number of batches. Whichever batch or batches is chosen to reprint, only the labels printed with that batch will be reprinted in the same order they were printed originally.

If a prescription or prescriptions have been deleted using the *Delete Printed Rx's from Suspense* option, it will be excluded from the batch to be reset and reprinted.



Prescriptions pulled early from suspense will not be part of a batch, so they will not be able to be reprinted through the Reprint Batches from Suspense option.

# Chapter 30: Updating a Patient's Record

This chapter describes the option used for updating a patient's record.

## Update Patient Record [PSO PAT]

Use this option to update the patient information currently in the computer and to update patient records being viewed by using the *Patient Record Update* screen action. If implementing Other Language Modifications, use either to set a patient's other language preference.

In support of Registration patch DG\*5.3\*522, the Outpatient Pharmacy software provides for the automatic population of city, state, and county based on entry of a zip code.

### Example: Updating a patient record

```
Select Outpatient Pharmacy Manager Option: UPDATE Patient Record

Select Patient:   OPPATIENT, ONE   12-4-53   000007890   YES   SC VETERAN

OPPATIENT, ONE           ID#:   000-00-7890
4500 S MAIN ST           DOB:   DEC 4,1953
ADDRESS LINE2
LINE 3 OF ADDRESS
MADISON                 PHONE: 555-555-1653
WISCONSIN 53705         ELIG:  SC LESS THAN 50%
                        SC%:   10

WEIGHT (Kg):             HEIGHT (cm):
CrCL: <Not Found> (CREAT: Not Found)   BSA (m2):
DISABILITIES: ARTHRITIS-10% (SC), FOREARM CONDITION-5% (NSC),
              FOREARM CONDITION-4% (NSC), BENIGN EYE GROWTH-0% (NSC),
              LOSS OF FIELD OF VISION-20% (SC),

ALLERGIES:

ADVERSE REACTIONS:
```

If the PSO site parameter is set to allow editing of patient data, this prompt, “Do you want to update the Permanent address/phone? //N”, is displayed. If the user enters “NO”, then the software will not allow the user to update the permanent address and Bad Address Indicator fields.

```
Do you want to update the address/phone? N// Y YES
Update (P)ermanent address, (T)emporary, or (B)oth: BOTH// <Enter>
STREET ADDRESS [LINE 1]: 4500 S MAIN ST// 4800 S MAIN ST
STREET ADDRESS [LINE 2]: ADDRESS LINE2// <Enter> ADDRESS LINE2
STREET ADDRESS [LINE 3]: LINE 3 OF ADDRESS// <Enter> LINE 3 OF ADDRESS
ZIP+4: 53705// <Enter> 53705

Select one of the following:

1          MADISON*

CITY: MADISON// <Enter> *
STATE: WISCONSIN
COUNTY: DANE
PHONE NUMBER [RESIDENCE]: 555-555-1653// <Enter> 555-555-1653
PHONE NUMBER [WORK]:
```

```

BAD ADDRESS INDICATOR: ?<Enter>

Please enter 1 if the address is 'UNDELIVERABLE', 2 if the patient
is 'HOMELESS', or 3 for 'OTHER' bad address reasons.
Choose from:
1         UNDELIVERABLE
2         HOMELESS
3         OTHER
Are you sure that you want to save the above changes? YES
Change saved.

```

Changes to the permanent address/Bad Address Indicator will not be saved until the prompt “Are you sure that you want to save the above changes?” is answered YES.

```

Press ENTER to continue: <Enter>

Temporary Address:

TEMPORARY ADDRESS ACTIVE?: NO// <Enter> NO

Press Return to continue: <Enter>
PHONE NUMBER [CELLULAR]: <Enter>
CNH CURRENT: <Enter>
FEE HOSPITAL I.D.: <Enter>
REMARKS: <Enter>

>>PHARMACY PATIENT DATA<<

CAP: <Enter>
MAIL: <Enter>
MAIL STATUS EXPIRATION DATE: <Enter>
DIALYSIS PATIENT: <Enter>
NARRATIVE: <Enter>
Eligibility: COLLATERAL OF VET. <Enter>
Disabilities: <Enter>
PATIENT STATUS: SERVICE CONNECTED// <Enter>
COMMUNITY NURSING HOME: <Enter>
NURSING HOME CONTRACT: <Enter>
LAST DATE OF CONTRACT: <Enter>
RESPITE PATIENT START DATE: <Enter>
RESPITE PATIENT END DATE: <Enter>
OTHER LANGUAGE PREFERENCE: <Enter>
PMI LANGUAGE PREFERENCE: <Enter>

```

# Chapter 31: Verifying Prescriptions

---

This chapter describes the option and methods used for verifying prescriptions.

## Verification

[PSO VER]

Pharmacists use the *Verification* menu to verify prescriptions with a non-verified status; obtain a listing of those remaining non-verified prescriptions; or calculate the number of non-verified prescriptions by entering the patient or the clerk.

The following options are available on the *Verification* menu:

- *List Non-Verified Scripts*
- *Non-Verified Counts*
- *Rx Verification by Clerk*

If the verification site parameter is set to “YES”, new prescriptions entered by a non-pharmacist (i.e., someone who does not hold the PSORPH key) will be put in a non-verified status, entered into the non-verified orders file, and will not be made active (nor will labels be printed) until they are reviewed and verified by a pharmacist. When new and renewed prescriptions for a patient are verified, all labels for that patient will be printed together. If a patient has refills only, these labels will be printed as they are entered.

A pharmacist may choose to verify all entries made by a particular technician rather than all the prescriptions for an individual patient.



Prescriptions in a non-verified status cannot be canceled, edited, or deleted through the usual options. If a non-verified prescription is auto canceled on admission, it can be reinstated, but it returns to the non-verified status.

Verifying an ePharmacy order is similar to finishing an order. For an example, see “[Verifying ePharmacy Orders](#)” at the end of the “Verification through Patient Prescription Processing” section.

## List Non-Verified Scripts

[PSO VRPT]

This option allows the user to obtain a list of all scripts remaining in a status of 'Non-Verified' by either patient or entering clerk.

### Example: Non-verified prescriptions (sorted by patient)

```
Select Outpatient Pharmacy Manager Option: Verification

Select Verification Option: List Non-Verified Scripts
Sort By Patient or Clerk: P// <Enter> ATIENT
DEVICE: HOME// [Select Print Device]

                                NON-VERIFIED PRESCRIPTIONS
                                AS OF JUL 16,2007@14:49:54
                                SORTED BY PATIENT
                                (# indicates Order Check)

Patient name                                Page: 1
Rx #      Issued      Drug                                Entry By
-----
OPPATIENT,FIVE
100001860A  04/01/04  ACETAMINOPHEN 1000MG TABLET          10000000028

OPPATIENT,FOUR
100001591A  07/27/98  ASPIRIN BUFFERED 325MG TAB              11733

OPPATIENT,ONE
100001853   10/23/02  ERYTHRITYL TETRANIT. 10MG TAB          10000000022

OPPATIENT,TWELVE
100001854   11/25/02  ACETAMINOPHEN 1000MG TABLET          10000000022
100001798A  04/19/99  INSULIN NPH U-100 INJ (PORK)           100

Select Verification Option:
```

### Non-Verified Counts [PSO NVCNT]

This option allows the user to obtain a count of the number of prescriptions remaining in a status of non-verified.

### Example: Total of Non-verified prescriptions

```
Select Verification Option: NON-Verified Counts
DEVICE: HOME// [Select Print Device]

                                NON-VERIFIED PRESCRIPTION COUNTS
                                JUL 16,2007@14:57:34

TOTAL NUMBER OF NON-VERIFIED PRESCRIPTIONS : 12

NUMBER OF PATIENTS WITH ONE OR MORE NON-VERIFIED PRESCRIPTIONS : 9

(NOTE: Total number of patients listed here may not always equal the number at
the bottom, since some patients at the bottom may be counted more than once,
possibly having non-verified Rx's entered on different days.)

Date      # of      # of
-----  Non-verified Rx's  Different Patients
07-27-98          1              1
05-18-99          2              1
06-22-00          2              2
TOTAL              5              4

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

## Rx Verification by Clerk [PSO VR]

This option verifies prescriptions in the non-verified status by entering the clerk.

## Verification through Patient Prescription Processing

Prescriptions can be verified through the *Patient Prescription Processing* option. The following screen shows that the patient has already been chosen and the Patient Information screen is displayed. Sequence **92** in the Non-Verified section is being chosen to be verified.

```

Medication Profile      Oct 26, 2004@15:54:11      Page: 9 of 9
OPPATIENT,ONE          <A>
  PID: 000-33-9521      Ht(cm): 175.26 (08/10/2004)
  DOB: OCT 10, 1970 (34) Wt(kg): 75.45 (08/10/2004)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 1.91

                                     ISSUE  LAST REF DAY
+
84 100476      PHENYTOIN 30MG CAP      180 DC 04-02 04-02 0 90
85 101064A$    POVIDONE IODINE SCRUB (OZ) 12 DC 07-09 08-03 0 15
86 101427      PREDNISONE 1MG TAB      180 DC 10-25 10-25 3 90
87 101152      PROBENECID 500MG TAB    180 DC 07-26 08-03 3 90
88 100307      QUININE SULFATE 200MG CAP 180 DC>02-22 02-22 3 90
89 100308      RIFAMPIN 300MG CAP      180 DC 02-22 02-22 3 90
90 100561      SYRINGE 5CC             90 DC 04-07 04-07 0 90
91 100626      VITAMIN A 25000 UNT CAP 180 DC>04-23 04-23 3 90
-----NON-VERIFIED-----
92 101435      CALCITRIOL 0.25MCG CAP   180 N> 10-26 10-26 3 90

+      Enter ?? for more actions
PU Patient Record Update      NO New Order
PI Patient Information        SO Select Order
Select Action: Quit// 92
  
```

The prescription information displays, and **VF** for Verification is entered to begin the verification process.

```

OP Medications (NON-VERIFIED) Oct 26, 2004@18:01:44      Page: 1 of 2
OPPATIENT,ONE          <A>
  PID: 000-33-9521      Ht(cm): 175.26 (08/10/2004)
  DOB: OCT 10, 1970 (34) Wt(kg): 75.45 (08/10/2004)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)      BSA (m2): 2.09

      Rx #: 101435
(1) *Orderable Item: CALCITRIOL CAP,ORAL
(2)      CMOP Drug: CALCITRIOL 0.25MCG CAP
(3)      *Dosage: 0.25 (MCG)
      Verb: TAKE
      Dispense Units: 1
      Noun:
      *Route: ORAL
      *Schedule: BID
(4) Pat Instructions:
      SIG: TAKE ONE CAPSULE BY MOUTHTWICE A DAY
(5) Patient Status: SC LESS THAN 50%
(6) Issue Date: 10/26/04      (7) Fill Date: 10/26/04
      Last Fill Date: 10/26/04 (Window)
  
```

```

+          Enter ?? for more actions
DC (Discontinue)      PR (Partial)          RL (Release)
ED (Edit)             RF (Refill)           RN (Renew)
Select Action: Next Screen// VF

```

The system displays the verification screen. The user can respond **Y** to edit, **N** not to edit or **P** to display a profile. In this example, **Y** is entered to edit the prescription.

```

RX: 101435  PATIENT: OPPATIENT,ONE (000-33-9521)
STATUS: Non-Verified
  DRUG: CALCITRIOL 0.25MCG CAP
  QTY: 180    90 DAY SUPPLY
  SIG: TAKE ONE CAPSULE BY MOUTHTWICE A DAY
  LATEST: 10/26/2004          # OF REFILLS: 3  REMAINING: 3
  ISSUED: 10/26/04           PROVIDER:
  LOGGED: 10/26/04           CLINIC: NOT ON FILE
  EXPIRES: 10/27/05          DIVISION:ANYTOWN ISC (500)
  CAP: NON-SAFETY            ROUTING: WINDOW
  ENTRY BY: OPPROVIDER,ONE   VERIFIED BY:

PATIENT STATUS : SC LESS THAN 50%      COPIES : 1
EDIT: (Y/N/P): N// Y

```

The prescription displays in edit mode.

```

OP Medications (NON-VERIFIED) Oct 26, 2004@18:04:46      Page: 1 of 2
OPPATIENT,ONE                                           <A>
  PID: 000-33-9521                                     Ht (cm): 175.26 (08/10/2004)
  DOB: OCT 10, 1970 (34)                               Wt (kg): 75.45 (08/10/2004)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)                 BSA (m2): 2.09

  Rx #: 101435
  (1) *Orderable Item: CALCITRIOL CAP,ORAL
  (2)   CMOP Drug: CALCITRIOL 0.25MCG CAP
  (3)   *Dosage: 0.25 (MCG)
        Verb: TAKE
        Dispense Units: 1
        Noun:
        *Route: ORAL
        *Schedule: BID
  (4) Pat Instructions:
        SIG: TAKE ONE CAPSULE BY MOUTHTWICE A DAY
  (5) Patient Status: SC LESS THAN 50%
  (6) Issue Date: 10/26/04          (7) Fill Date: 10/26/04
  Last Fill Date: 10/26/04 (Window)
+          Enter ?? for more actions
DC Discontinue      PR (Partial)          RL (Release)
ED Edit            RF (Refill)           RN (Renew)
Select Action: Next Screen// 1

```

By selecting the orderable item or drug, the user can edit and/or enter the ICD Diagnosis Codes that apply to the prescription. The following shows **1** for orderable item was selected for editing, and the orderable item was not changed. The ICD codes are entered and accepted.

```

OP Medications (NON-VERIFIED) Oct 26, 2004@18:04:46      Page: 2 of 2
OPPATIENT,ONE                                           <A>
  PID: 000-33-9521                                     Ht (cm): 175.26 (08/10/2004)
  DOB: OCT 10, 1970 (34)                               Wt (kg): 75.45 (08/10/2004)

Current Orderable Item: CALCITRIOL CAP,ORAL
Select PHARMACY ORDERABLE ITEM NAME: CALCITRIOL//  CALCITRIOL CAP, ORAL

```



```

Previously entered ICD-9 diagnosis codes:
  Primary:

Select Primary ICD Code: 121.1 121.1      CLONORCHIASIS
  ...OK? Yes// <Enter> (Yes)

Select Secondary ICD Code: 121.2 121.2      PARAGONIMIASIS
  ...OK? Yes// <Enter> (Yes)

Select Secondary ICD Code: 121.3 121.3      FASCIOLIASIS
  ...OK? Yes// <Enter> (Yes)

Select Secondary ICD Code: <Enter>
Are You Sure You Want to Update Rx 101435? Yes// <Enter> YES

```

Once the information is accepted, the prescription appears in Edit mode, and the verification process may begin again by entering VF.

```

OP Medications (NON-VERIFIED) Oct 26, 2004@18:06:05      Page: 1 of 2
OPPATIENT,ONE                                          <A>
  PID: 000-33-9521                                     Ht (cm): 175.26 (08/10/2004)
  DOB: OCT 10, 1970 (34)                               Wt (kg): 75.45 (08/10/2004)
  SEX: MALE
  CrCL: <Not Found> (CREAT: Not Found)                 BSA (m2): 2.09

          Rx #: 101435
(1) *Orderable Item: MAGNESIUM CITRATE LIQUID,ORAL
(2)      CMOP Drug: CALCITRIOL 0.25MCG CAP
(3)      *Dosage: 0.25 (MCG)
          Verb: TAKE
          Dispense Units: 1
          Noun:
          *Route: INTRAVENOUS SUBCUTANEOUS INTRATHECAL
          *Schedule: BID
(4) Pat Instructions:
          SIG: TAKE ONE IV SC INTH TWICE A DAY
(5) Patient Status: SC LESS THAN 50%
(6) Issue Date: 10/26/04 (7) Fill Date: 10/26/04
    Last Fill Date: 10/26/04 (Window)
+ Enter ?? for more actions
DC Discontinue      PR (Partial)          RL (Release)
ED Edit            RF (Refill)           RN (Renew)
Select Action: Next Screen// VF

```

The Verification screen appears and “NO” is entered for the edit prompt. By entering “YES” to the Verify prompt, verification is completed, and the prescription is moved from the Non-Verified section to the Active section of the Medication Profile.

```

RX: 101435 PATIENT: OPPATIENT,ONE (000-00-0659)
STATUS: Non-Verified
  DRUG: CALCITRIOL 0.25MCG CAP
  QTY: 180 90 DAY SUPPLY
  SIG: TAKE ONE IV SC INTH TWICE A DAY
  LATEST: 10/26/2004 # OF REFILLS: 3 REMAINING: 3
  ISSUED: 10/26/04 PROVIDER:
  LOGGED: 10/26/04 CLINIC: NOT ON FILE
  EXPIRES: 10/27/05 DIVISION: ANYTOWN ISC (500)
  CAP: NON-SAFETY ROUTING: WINDOW
  ENTRY BY: OPPHARMACIST,ONE VERIFIED BY:

PATIENT STATUS : SC LESS THAN 50% COPIES : 1
EDIT: (Y/N/P): N// NO

OPPATIENT,ONE ID#:000-00-9807 RX#: 101435

```

RX #	DRUG	QTY	ST	ISSUE DATE	LAST FILL	REF REM	DAY SUP
-----DISCONTINUED-----							
100476	PHENYTOIN 30MG CAP	180	DC	04-02	04-02	0	90
101064A\$	POVIDONE IODINE SCRUB (OZ)	12	DC	07-09	08-03	0	15
101427	PREDNISONE 1MG TAB	180	DC	10-25	10-25	3	90
101152	PROBENECID 500MG TAB	180	DC	07-26	08-03	3	90
100307	QUININE SULFATE 200MG CAP	180	DC	>02-22	02-22	3	90
100308	RIFAMPIN 300MG CAP	180	DC	02-22	02-22	3	90
100561	SYRINGE 5CC	90	DC	04-07	04-07	0	90
100626	VITAMIN A 25000 UNT CAP	180	DC	>04-23	04-23	3	90
-----NON-VERIFIED-----							
3240\$	CALCITRIOL 0.25MCG CAP	60	N	01-06	01-06	11	30

Press Return to continue:

Now doing remote order checks. Please wait...

Remote data not available - Only local order checks processed.

Now doing allergy checks. Please wait...

Now processing Clinical Reminder Order Checks. Please wait ...

Now Processing Enhanced Order Checks! Please wait...

Press Return to Continue:

OPPATIENT,ONE ID#:000-00-9807 RX#: 101435  
 CALCITRIOL 0.25MCG CAP  
 VERIFY FOR OPPATIENT,ONE ? (Y/N/Delete/Quit): Y// <Enter>

## Verifying ePharmacy Orders

Verifying an ePharmacy order is similar to finishing an order. After the user reviews the ePharmacy order and chooses to accept the order, the billing data is sent to ECME, which sends a message back to Outpatient Pharmacy displaying the status of the claim. The ECME section of the Activity Log is also updated.

```

RX: 101435 PATIENT: OPPATIENT,FOUR (000-01-1322P)
STATUS: Non-Verified
  DRUG: ENTEX CAP
  QTY: 10 10 DAY SUPPLY
  SIG: TAKE 25MG BY MOUTH EVERY DAY FOR 10 DAYS WITH FOOD
  LATEST: 11/05/2005 # OF REFILLS: 0 REMAINING: 0
  ISSUED: 11/05/2005 PROVIDER:
  LOGGED: 11/05/2005 CLINIC: NOT ON FILE
  EXPIRES: 11/15/2005 DIVISION:ANYTOWN ISC (500)
  CAP: NON-SAFETY ROUTING: WINDOW
  ENTRY BY: OPPHARMACIST,ONE VERIFIED BY:

PATIENT STATUS : SC LESS THAN 50% COPIES : 1
EDIT: (Y/N/P): N// NO

OPPATIENT,FOUR ID#:000-01-1322P RX#: 101435

  RX # DRUG QTY ST ISSUE DATE LAST FILL REM SUP
  -----ACTIVE-----
100476 PHENYTOIN 30MG CAP 180 DC 04-02 04-02 0 90

```

```

101064A$      POVIDONE IODINE SCRUB (OZ)          12 DC 07-09 08-03  0 15
-----NON-VERIFIED-----
101435$      ENTEX CAP                            10 N  11-05 11-05  0 10

Press Return to continue:

Remote data not available - Only local order checks processed.
Now doing allergy checks.  Please wait...
Now processing Clinical Reminder Order Checks. Please wait ...
Now Processing Enhanced Order Checks! Please wait...

Press Return to Continue:

OPPATIENT,FOUR                                ID#:000-01-1322P  RX#: 101435
ENTEX CAP

VERIFY FOR OPPATIENT,FOUR ? (Y/N/Delete/Quit): Y// <Enter>.

Veteran Prescription 100003840 successfully submitted to ECME for claim generation.

Claim Status:
IN PROGRESS-Waiting to start
IN PROGRESS-Gathering claim info
IN PROGRESS-Packet being built
IN PROGRESS-Waiting for transmit
IN PROGRESS-Transmitting
E PAYABLE

Another New Order for OPPATIENT,FOUR? YES//

```

## Chapter 32: Meds by Mail – Virtual Pharmacy Services

Because Virtual Pharmacy Services (VPS) users have to sign into multiple VistA systems across the nation to support the Meds by Mail (MBM) program, a Class I menu option was delivered with patch PSO\*7\*630 to improve and standardize processing outpatient pending prescription queues regardless of the facility assigned.

The MbM-VPS Pharmacy Users Menu [PSO MBM-VPS PHARMACY MENU] and the MbM-VPS Productivity Report [PSO MBM-VPS PRODUCTIVITY RPT] were delivered with patch PSO\*7\*630. With the exception of the MbM-VPS Productivity Report, the other 4 options listed under this menu are pre-existing options.

### Example of new menu and options:

```
MbM-VPS Pharmacy Users Menu  PSO MBM-VPS PHARMACY MENU      M
bM-VPS Pharmacy Users Menu

C      Complete Orders from OERR
P      Patient Prescription Processing
V      View Prescriptions
L      Lookup into Dispense Drug File
R      MbM-VPS Productivity Report
```

Selecting **R MbM-VPS Productivity Report** allows the user to run the new report. The following are more details of the report implementation:

- User is prompted for beginning and ending FINISH DATE/TIME
- The resulting report is created per date range provided and includes columns for Finishing Person and Prescriptions Finished.
  - a. Selected date range is shown at the top of the report.
  - b. Result is sorted by Finishing Person.
  - c. Grand total of all Prescriptions Finished is provided at the bottom of the report.

### Example of running the MbM-VPS Productivity Report:

```
Select MbM-VPS Pharmacy Users Menu <TEST ACCOUNT> Option: R  MbM-VPS Productivit
y Report

This report prints a listing of people who finished the order in pharmacy
in the user-selected date range.

Starting with Date: 1/1  (JAN 01, 2021)
Ending with Date: TODAY  (MAY 06, 2021)
DEVICE: HOME// ;;999  Linux Telnet /SSh

VPS Productivity Report                                Run Date: MAY 06, 2021@15:51
Rx Orders finished from JAN 01, 2021 through MAY 06, 2021      Page: 1

      Finishing Person                                Prescriptions
-----
PHARMACIST,ONE                                         13
```

PHARMACIST, TWO	2
PHARMACIST, THREE	33
PHARMACIST, FOUR	11
PHARMACIST, FIVE	6
PHARMACIST, SIX	14
PHARMACIST, SEVEN	63
	=====
Grand Total:	142

# **Chapter 33: CPRS Order Checks: How They Work**

## **Introduction**

In CPRS, Order Checks occur by evaluating a requested order against existing patient data. Most order checks are processed via the CPRS Expert System. A few are processed within the Pharmacy, Allergy Tracking System, and Order Entry packages. Order Checks are a real-time process that occurs during the ordering session and is driven by responses entered by the ordering provider. Order Check messages are displayed interactively in the ordering session.

Order Checks review existing data and current events to produce a relevant message, which is presented to patient caregivers. Order Checks use the CPRS Expert System (OCX namespace), to define logical expressions for this evaluation and message creation. In addition to the expert system Order Checks have some hard-coded algorithms. For example, the drug-drug interaction order check is made via an entry point in the pharmacy package whereas Renal Functions for Patients 65 and Over is defined as a rule in the CPRS Expert System.

## **Order Check Data Caching**

Data caching was recently added to improve the speed of order checks. Before data caching, order checks could be slow because each order check retrieved data from the other VistA packages - even if the order checks used the same data. With data caching, the first order check in an ordering session retrieves data from other VistA packages, uses the data to evaluate whether it should display a warning, and then stores the retrieved data in the ^XTMP("OCXCACHE" global for five minutes. The order checks that occur in the next five minutes can use the cached data, if it is the appropriate data, instead of retrieving data from the other packages. After five minutes, the cached data expires, and order checks must retrieve new data from the VistA packages.

For example, before data caching was implemented, if an order check took 3 seconds to retrieve data from other VistA packages, and there were 12 order checks, clinicians might wait 36 seconds to sign orders. With data caching, the first order check might take 3 seconds to retrieve the data, but subsequent order checks could use the cache and might take only .03 seconds each. That would be 3.33 seconds compared to 36 seconds. The numbers in this example are for illustration only and do not reflect real system speed. However, data caching should speed up order checks.

To avoid using all available disk space for storing data from order checks, there are several ways to clear the ^XTMP("OCXCACHE" global. ORMTIME removes data from the global when it runs. The suggested frequency for running ORMTIME is every 30 minutes, but not every site runs it that frequently. Kernel clean up utilities also remove data from the cache when they run, which is usually every 24 hours. If needed, users that have access to the programmer's prompt can manually clear the cache from that prompt by using PURGE^OCXCACHE.

## Hash Counts and DEA Certification

When processing a digitally signed pending order, the integrity of the original order placed in CPRS is now being checked to ensure that the data fields listed below are not altered from the time the order is signed in CPRS and later selected for processing in backdoor pharmacy. This is done by passing the data elements listed below to a Kernel Application Programming Interface (API), Integration Control Registration (ICR) #3539 along with the CPRS hash count provided by ICR #5709. The Kernel API compares these two hash values and returns an "OK" if the pending order is unaltered; otherwise, a "-1^error code^error message" is returned.

**Example: "-1^89802016^Mismatched digital signature hash values."**

The following fields are used in the hash check:

- Date of Issuance
- Full Name and Address of the Patient
- Drug Name
- Quantity Prescribed
- Directions for Use
- Prescriber Name
- Prescriber Address (site address)
- Prescriber DEA/VA Registration Number
- Order Number (CPRS)

The Kernel API will also check for the validity of the PIV card certificate. If the certificate is revoked or expired, the API will return the appropriate error code. If the error code is related to hash mismatch, or the PIV card certificate is revoked, the following events will be triggered during pending order processing:

- The order will be auto discontinued.
- First line of the pending order screen will have the message "Digital Signature Failed: Corrupted (Hash mismatch)" or " Rx NOT processed: PIV Card Certificate Revoked", and the message will be highlighted.
- The status bar of the screen will have the message "Signature Failed: Corrupted (Hash mismatch)" or "PIV Certificate Revoked".

A mail message will be generated to the holders of the PSDMGR key notifying that the order has been auto-discontinued (similar to the example listed below). If the discontinuation is due to a hash mismatch as a result of altering one of the fields listed above, the mail message will show the altered fields with the discrepancies as shown in the following example.

### Example: Mail Message of Discontinuation Due to Hash Mismatch

```
Subj: DIGITALLY SIGNED NEW ORDER AUTO DISCONTINUED [#196353]
      03/20/12@17:1024 lines
From: POSTMASTER In 'IN' basket. Page 1 *New*
```

Following order was auto discontinued when finishing a pending order due to Corrupted (Hash mismatch) - 89802016

Division : GREELEY CLINIC  
CPRS Order # : 5587651  
Issue Date : MAR 7,2012  
Patient : TEST,PATIENT (0908)  
Address : P.O. BOX 31  
ANYTOWN, CA 95981  
Drug : CODEINE SULFATE 60MG TAB  
Dosage Ordered: 120 (MG)  
Dosage Form : TABLETS  
Quantity : 54  
Provider : TEST,PROVIDER  
DEA# : TA1234563  
Site Address : 2360 E PERSHING BLVD  
2360 East Pershing Boulevard  
ANYTOWN

Differences in CPRS and Pharmacy Pending File

Data Name	CPRS File	Pharmacy Pending File
QTY PRESCRIBED	15	30

If the error code is related to 'certificate expired', the pending order will be processed (will not be auto-discontinued), and a notification will be sent to the provider with the message, " Rx processed: PIV Card Cert Expired - NO ACTION REQ"

The following changes have been made for finishing a CS order:

When finishing a pending CS order, if the user does not hold the new PSDRPH security key, the order will be marked as 'Non-Verified'. To verify a 'Non-Verified' CS order, the PSDRPH security key is now required. To discontinue a pending CS order, the PSDRPH security key is now required.

- The pending order screen will now display the provider's DEA/VA #, the DETOX# (if available), and the site address.
- When finishing a new pending CS order, the dosage, provider name, or the number of refills will not be allowed editing; however, the user will be allowed to select other possible dosages for the same drug if available. If the changes to the dispense drug results in creating a new order, the user will be notified by the message " Digitally Signed Order – No such changes allowed". If pharmacy wants to make such changes, then they have to discontinue (DC) the pending order and start a new order. However, the user will be allowed to select other possible dosages for the same drug that does not change the prescribed dosage.
- When finishing a new pending CS order, the day supply or the quantity will not be allowed to increase but can be decreased. If the day supply is decreased, the number of refills will also be adjusted accordingly depending on the drug setup (maximum refills, not refillable, etc.). The quantity may be auto-calculated to a higher quantity by the system only when the dosage remains the same, but the dispense drug strength is changed – i.e., 2mg tablets #30 is changed to 1mg tablets, the Sig is updated, and the system changes the quantity to 60. A manual change to a higher quantity is not allowed.



- When finishing a pending CS order or verifying a CS order by the PSDRPH key holder, any edit to some of the key fields, such as dispense drug, dosage, dispense units, issue date, day's supply, quantity, or number of refills, will now be captured and stored in the activity log.



**Note:** In patch PSO\*7\*99, a change was made for pending orders not to recalculate the quantity for CS drugs on selecting a different strength of the same drug and resulting in the same prescribed dosage. This change is removed in patch PSO\*7\*391.

# Chapter 34: Error Messages

## Error Information

The text in the error message and reason column will be displayed to the user. The type of error is displayed in column 1.

## Three Levels of Error Messages

**Table 49: Error Messages**

Level	Message
System	When such an error occurs, no Drug Interaction, Duplicate Therapy, or Dosing order checks will be performed. Other order checks that do not use the COTS database (FDB) will still be performed such as allergy/ADRs, duplicate drug (for outpatient only) and new CPRS order checks, etc.
Drug	<p>The second error level is for the drug and no Drug Interaction, Duplicate Therapy, or Dosing order checks will be performed for a specific drug. Drug level errors can occur for the prospective drug (drug being processed) or the profile drug. If a drug level error occurs on the prospective drug, no profile drug errors will be displayed. The only exception to this is when you are processing an IV order with multiple prospective drugs (i.e. multiple IV Additives). Profile drug level errors will only be shown once per patient session.</p> <p>There are two reasons that a drug level error is generated; the drug is not matched to NDF or the drug is matched to NDF, but the VA Product to which it is matched does not have a GCNSEQNO assigned or the GCNSEQNO assigned does not match up to the GCNSEQNO in the COTS database. The latter (GCNSEQNO mismatch) is rare.</p>
Order	The third error level is for the order. Order level errors will only occur with dosing order checks. Please see the <i>Dosing Order Check User Manual</i> for more information.

**Table 50: Message Reasoning**

Error Level	Error Message	Reason	Why message is being displayed.
System	No Enhanced Order Checks can be performed.	Vendor Database cannot be reached.	The connectivity to the vendor database has gone down. A MailMan message is sent to the G. PSS ORDER CHECKS mail group when the link goes down and when it comes back up.
System	No Enhanced Order Checks can be performed.	The connection to the vendor database has been disabled.	A user has executed the Enable/Disable Vendor Database Link [PSS ENABLE/DISABLE DB LINK] option and disabled the interface.
System	No Enhanced Order Checks can be performed	Vendor database updates are being processed	The vendor database (custom and standard data) is being updated using the DATUP (Data Update) process.

<b>Error Level</b>	<b>Error Message</b>	<b>Reason</b>	<b>Why message is being displayed.</b>
System	“Signature Failed – Order Auto Discontinued”	Hash Mismatch	Original digitally signed CS order placed in CPRS is checked to ensure data fields are not altered from the time the order is signed in CPRS and later selected for processing in backdoor pharmacy.
System	“DEA certificate expired. Renew your certificate.”	Validity of the DEA certificate.	Kernel API check for the validity of the DEA certificate. If certificate is revoked or expired, the API will return the appropriate error code.
System	No Enhanced Order Checks can be performed	An unexpected error has occurred	There is a system network problem and the vendor database cannot be reached or a software interface issue.
System	No Dosing Order Checks can be performed	Dosing Order Checks are disabled	A user has executed the Enable/Disable Dosing Order Checks [PSS Dosing Order Checks] option.
Drug	Enhanced Order Checks cannot be performed for Local or Local Outpatient Drug: <DRUG NAME>	Drug not matched to NDF	The local drug being ordered/ or on profile has not been matched to NDF. Matching the drug to a VA Product will eliminate this message.
Drug	Order Checks could not be done for Remote Drug: <DRUG NAME>, please complete a manual check for Drug Interactions and Duplicate Therapy. Remote order indicator		If this error message is displayed, it means that the VA product that the local or remote drug being ordered/or on the local or remote profile does not have a GCNSEQNO or in rare cases, the GCNSEQNO assigned to the VA Product does not match up with a GCNSEQNO in the vendor database.
Drug	Enhanced Order Checks cannot be performed for Orderable Item: <OI NAME>	No active Dispense Drug found	Highly unlikely that this error would be seen. At the time the order check was being performed the orderable item did not have an active dispense drug associated.

## Chapter 35: Security Keys

---

A security key is a unique entry in the Security Key file (^DIC(19.1), which may prevent access to a specific option or action by including the key as part of the option's entry in the Option file (^DIC(19,)). Only users entered in the Holder field of the Security Key file may access the option or action.

### Security Keys

#### PSO TRICARE/CHAMPVA

PSO\*7\*385 renamed the PSO TRICARE security key to PSO TRICARE/CHAMPVA. Please see [TRICARE/CHAMPVA Eligible Outpatient Override Function](#) for further information on this security key.

#### PSO TRICARE/CHAMPVA MGR

PSO\*7\*385 renamed the PSO TRICARE MGR security key to PSO TRICARE/CHAMPVA MGR. Please see [TRICARE CHAMPVA Override Report](#) for further information on this security key.

#### PSO TECH ADV

PSO\*7\*386 added the PSO TECH ADV security key for use of holding and unholding prescriptions. Please see [Holding and Unholding a Prescription](#) for further information on this security key.

#### PSO EPHARMACY SITE MANAGER

PSO\*7\*421 added the PSO EPHARMACY SITE MANAGER security key for use of changing ePharmacy Site Parameters. Please see [ePharmacy Site Parameters](#) for further information on this security key.

#### PSO SPMP ADMIN

The PSO SPMP ADMIN security key is used for controlling access to the SPMP options. Please see the [State Prescription Monitoring Program \(SPMP\) Menu \[PSO SPMP MENU\]](#) option for further information on this security key.

# Appendix A: ASAP Definitions

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Safety Updates for Medication/Prescription Management (SUMP) adds a new module to the Outpatient Pharmacy V. 7.0 application, which enables Veterans Health Administration (VHA) pharmacies to comply with mandatory reporting to State Controlled Substance Rx Databases as required by the Consolidated Appropriations Act, 2012, PL 112-74.

The information must be reported using the American Society for Automation in Pharmacy (ASAP) data format, which was developed by the Alliance of States with Prescription Monitoring Programs and the National Association of State Controlled Substances Authorities. Depending on what state the VHA facility is located, one of the following ASAP versions will be used:

- 1995
- 3.0
- 4.0
- 4.1
- 4.2

This appendix provides the views a user will see with each of the various ASAP versions. This appendix also provides the views a user will see with each of the various Zero Reporting ASAP versions.

## ASAP Version 1995

```
ASAP Standard Version 1995 Jul 23, 2014@10:59:14 Page: 1 of 2
POSITION DESCRIPTION
(001-003) Transmission Type Identifier
(004-009) Bank Identification Number ('VA'_Site#)
(010-011) ASAP Version ('A2': 1995)
(012-013) Transaction Code ('01': Controlled Sub)
(014-025) Pharmacy DEA Number
(026-045) Patient ID (SSN)
(046-048) Patient's Zip Code (first 3 digits)
(049-056) Patient's DOB (Format: YYYYMMDD)
(057-057) Patient's Gender ('1':Male/'2':Female)
(058-065) Date Filled (Release Date) (YYYYMMDD)
(066-072) Prescription Number (last 7 of Rx IEN)
(073-074) Rx Fill Number
(075-079) Rx Quantity
(080-082) Rx Days Supply
(083-083) Compound Flag (Always '1':Not Compound)
(084-094) NDC (Format: 9999999999)
(095-104) Prescriber's DEA #
(105-108) Prescriber's DEA Suffix (Not Used)
(109-116) Date Written (Format: YYYYMMDD)
(109-116) Date Written (Format: YYYYMMDD)
(109-116) Date Written (Format: YYYYMMDD)
(117-118) Refills Authorized
(119-119) Origin Code(0:Unknown,1:Written,2:Phone)
(120-121) Customer Location ('03':Outpatient)
(122-128) Diagnosis Code (Not Used)
(129-138) Alternate Prescriber's # (VA #)
(139-153) Patient's Last Name
```

(154-168) Patient's First Name  
(169-198) Patient's Address  
(199-200) Patient's State  
(201-209) Patient's Zip Code

## ASAP Standard Version 3.0

### MAIN HEADER

TH - Transaction Set Header  
TH01 - Version / Release Number  
TH02 - Business Partner Implementation Version (Not Used)  
TH03 - Transaction Set Control Number  
TH04 - Transaction Type (Not Used)  
TH05 - Message Type (Not Used)  
TH06 - Response ID (Not Used)  
TH07 - Project ID (Not Used)  
TH08 - Creation Date  
TH09 - Creation Time  
TH10 - File Type  
TH11 - Message (Not Used)  
TH12 - Composite Element Separator  
TH13 - Data Segment Terminator Character (Not Used)

IS - Information Source  
IS01 - Unique Information Source ID  
IS02 - Information Source Entity Name  
IS03 - Address Information - 1 (Not Used)  
IS04 - Address Information - 2 (Not Used)  
IS05 - City Address (Not Used)  
IS06 - State Address (Not Used)  
IS07 - Zip code Address (Not Used)  
IS08 - Phone Number (Not Used)  
IS09 - Contact Name (Not Used)  
IS10 - Message (Not Used)  
IS11 - Data Entry Terminal ID (Not Used)

IR - Information Receiver  
IR01 - Unique Information Receiver ID  
IR02 - Information Receiver Entity Name  
IR03 - Address Information - 1 (Not Used)  
IR04 - Address Information - 2 (Not Used)  
IR05 - City Address (Not Used)  
IR06 - State Address (Not Used)  
IR07 - Zip code Address (Not Used)  
IR08 - Phone Number (Not Used)  
IR09 - Contact name (Not Used)  
IR10 - Message (Not Used)

PHARMACY HEADER  
PHA - Pharmacy Header  
PHA01 - National Provider Identifier (NPI)  
PHA02 - NCPDP/NABP Provider ID  
PHA03 - DEA Number  
PHA04 - Pharmacy Name  
PHA05 - Address Information - 1  
PHA06 - Address Information - 2  
PHA07 - City Address  
PHA08 - State Address  
PHA09 - ZIP Code Address  
PHA10 - Phone Number  
PHA11 - Contact Name  
PHA12 - Reporting Frequency (Not Used)  
PHA13 - Message (Not Used)

PATIENT DETAIL  
PAT - Patient Information  
PAT01 - Reporting Status (Not Used)  
PAT02 - Program Participation Status (Not Used)  
PAT03 - Unique System ID - Patient (Not Used)  
PAT04 - Social Security Number  
PAT05 - Additional Patient ID Qualifier  
PAT06 - Additional ID

PAT07 - Last Name  
 PAT08 - First Name  
 PAT09 - Middle Name  
 PAT10 - Name Prefix  
 PAT11 - Name Suffix  
 PAT12 - Address Information - 1  
 PAT13 - Address Information - 2  
 PAT14 - City Address  
 PAT15 - State Address  
 PAT16 - ZIP Code Address  
 PAT17 - Phone Number  
 PAT18 - Email Address (Not Used)  
 PAT19 - Date Of Birth  
 PAT20 - Gender Code  
 PAT21 - Patient Location Code (Not Used)  
 PAT22 - Primary Prescription Coverage Type (Not Used)  
 PAT23 - Secondary Prescription Coverage Type (Not Used)  
 PAT24 - Language Code (Not Used)  
 PAT25 - Work Phone Number (Not Used)  
 PAT26 - Alternate Phone Number (Not Used)  
 PAT27 - Driver's License Number  
 PAT28 - Facility Code (Not Used)  
 PAT29 - Unit Identifier (Not Used)  
 PAT30 - Room Number (Not Used)  
 PAT31 - Bed (Not Used)  
 PAT32 - Medical Record Number (Not Used)  
 PAT33 - Admission Date (Not Used)  
 PAT34 - Admission Time (Not Used)  
 PAT35 - Discharge Date (Not Used)  
 PAT36 - Discharge Time (Not Used)  
 PAT37 - Primary Coverage Start Date (Not Used)  
 PAT38 - Primary Coverage Stop Date (Not Used)  
 PAT39 - Secondary Coverage Start Date (Not Used)  
 PAT40 - Secondary Coverage Stop Date (Not Used)

PRESCRIPTION DETAIL

RX - Prescription Order

- RX01 - Reporting Status
- RX02 - Program Participation Status (Not Used)
- RX03 - Prescription Number
- RX04 - Unique System ID - RPh (Not Used)
- RX05 - Unique System ID - Patient (Not Used)
- RX06 - Unique System ID - Prescriber (Not Used)
- RX07 - Unique System ID - Drug (Not Used)
- RX08 - Date Rx Written
- RX09 - Rx Start Date (Not Used)
- RX10 - Rx End Date (Not Used)
- RX11 - Diagnosis Code Qualifier
- RX12 - Diagnosis Code
- RX13 - Product ID Qualifier
- RX14 - Product ID
- RX15 - Product Description (Not Used)
- RX16 - DAW Code (Not Used)
- RX17 - Quantity Prescribed
- RX18 - Days Supply
- RX19 - Basis of Days Supply Determination (Not Used)
- RX20 - Refills Authorized
- RX21 - Refills Authorized Through Date (Not Used)
- RX22 - DEA Schedule (Not Used)
- RX23 - Unit Dose Indicator (Not Used)
- RX24 - Compound Indicator (Not Used)
- RX25 - Origin Code (Not Used)
- RX26 - Brand Versus Generic Indicator (Not Used)
- RX27 - Original Fill Date (Not Used)
- RX28 - Alternate Rx Identifier (Not Used)
- RX29 - Previous Rx Number (Not Used)

DSP - Dispensing Record

- DSP01 - Reporting Status
- DSP02 - Program Participation Status (Not Used)
- DSP03 - Prescription Number
- DSP04 - Refill Number
- DSP05 - Unique System ID - RPh (Not Used)

DSP06 - Unique System ID - Patient (Not Used)  
 DSP07 - Unique System ID - Prescriber (Not Used)  
 DSP08 - Unique System ID - Drug (Not Used)  
 DSP09 - Date Filled  
 DSP10 - Time Filled (Not Used)  
 DSP11 - Product ID Qualifier  
 DSP12 - Product ID  
 DSP13 - Product Description (Not Used)  
 DSP14 - Quantity Dispensed  
 DSP15 - Days Supply  
 DSP16 - Basis of Days Supply Determination  
 DSP17 - Refills Remaining (Not Used)  
 DSP18 - Refills Authorized Through Date (Not Used)  
 DSP19 - Previous Fill Date (Not Used)  
 DSP20 - Previous Fill Quantity Dispensed (Not Used)  
 DSP21 - Level of Service Code (Not Used)  
 DSP22 - Brand or Generic Indicator (Not Used)  
 DSP23 - Patient Advisory Leaflet (Not Used)  
 DSP24 - Warning/Auxiliary Labels (Not Used)  
 DSP25 - Warning/Auxiliary Labels (Not Used)  
 DSP26 - Warning/Auxiliary Labels (Not Used)  
 DSP27 - Warning/Auxiliary Labels (Not Used)  
 DSP28 - Warning/Auxiliary Labels (Not Used)  
 DSP29 - Bar Code on Vial Label (Not Used)  
 DSP30 - Group Identifier (Not Used)  
 DSP31 - Group Rx Count (Not Used)  
 DSP32 - Partial Fill Indicator (Not Used)  
 DSP33 - Priority (Not Used)  
 PRE - Prescriber  
     PRE01 - Reporting Status (Not Used)  
     PRE02 - Unique System ID - Prescriber (Not Used)  
     PRE03 - National Provider Identifier (NPI)  
     PRE04 - DEA Number  
     PRE05 - DEA Number Suffix  
     PRE06 - Prescriber State License Number  
     PRE07 - Prescriber Alternate ID (Not Used)  
     PRE08 - Last Name  
     PRE09 - First Name  
     PRE10 - Middle Name  
     PRE11 - Name Prefix (Not Used)  
     PRE12 - Name Suffix (Not Used)  
     PRE13 - Address Information - 1 (Not Used)  
     PRE14 - Address Information - 2 (Not Used)  
     PRE15 - City Address (Not Used)  
     PRE16 - State Address (Not Used)  
     PRE17 - Zip Code Address (Not Used)  
     PRE18 - Phone Number (Not Used)  
     PRE19 - Prescriber Specialty (Not Used)  
     PRE20 - Prescriber Fax Number (Not Used)  
 RPH - Pharmacist  
     RPH01 - Reporting Status (Not Used)  
     RPH02 - Unique System ID (Not Used)  
     RPH03 - National Provider Identifier (NPI)  
     RPH04 - Pharmacist State License Number (Not Used)  
     RPH05 - Pharmacist Alternate ID (Not Used)  
     RPH06 - Last Name  
     RPH07 - First Name  
     RPH08 - Middle Name  
     RPH09 - Name Prefix (Not Used)  
     RPH10 - Name Suffix (Not Used)  
     RPH11 - Pharmacist Title (Not Used)  
 PLN - Third-Party Plan (Not Used)  
     PLN01 - Reporting Status (Not Used)  
     PLN02 - Plan Coverage Status to Patient (Not Used)  
     PLN03 - Unique System ID - Plan (Not Used)  
     PLN04 - Classification Code for Plan Type  
     PLN05 - Plan Name (Not Used)  
     PLN06 - Processor BIN (Not Used)  
     PLN07 - Processor Control Number (Not Used)  
     PLN08 - Plan ID (Not Used)  
     PLN09 - Group Number (Not Used)



```

        PLN10 - Cardholder ID (Not Used)
        PLN11 - Person Code (Not Used)
        PLN12 - Relationship Code (Not Used)
    CDI - Compound Drug Ingredient Detail (Not Used)
        CDI01 - Compound Drug Ingredient Sequence Number
        CDI02 - Product ID Qualifier
        CDI03 - Product ID
        CDI04 - Component Ingredient Product Description (Not Us
        CDI05 - Component Ingredient Quantity
        CDI06 - Component Ingredient Cost (Not Used)
        CDI07 - Component Ingredient Basis of Cost Determination
        CDI08 - Compound Drug Dosage Units Code (Not Used)
    CSR - Controlled Substance Reporting (Not Used)
        CSR01 - State Issuing Rx Serial Number
        CSR02 - State Issued Rx Serial Number
        CSR03 - ID Qualifier
        CSR04 - ID of Person Picking Up Rx
        CSR05 - Relationship of Person Picking Up Rx
        CSR06 - Last Name of Person Picking Up Rx
        CSR07 - First Name of Person Picking Up Rx
    PHARMACY TRAILER
    TP - Pharmacy Trailer
        TP01 - Detail Segment Count
MAIN TRAILER
TT - Transaction Trailer
    TT01 - Transaction Control Number
    TT02 - Segment Count

```

## ASAP Standard Version 4.0

```

MAIN HEADER
TH - Transaction Set Header
    TH01 - Version / Release Number
    TH02 - Transaction Control Number
    TH03 - Transaction Type
    TH04 - Response ID
    TH05 - Creation Date
    TH06 - Creation Time
    TH07 - File Type
    TH08 - Composite Element Separator
    TH09 - Data Segment Terminator Character (Not Used)
    IS - Information Source
        IS01 - Unique Information Source ID
        IS02 - Information Source Entity Name
        IS03 - Message
    PHARMACY HEADER
    PHA - Pharmacy Header
        PHA01 - National Provider Identifier (NPI)
        PHA02 - NCPDP/NABP Provider ID
        PHA03 - DEA Number
        PHA04 - Pharmacy Name
        PHA05 - Address Information - 1
        PHA06 - Address Information - 2
        PHA07 - City Address
        PHA08 - State Address
        PHA09 - ZIP Code Address
        PHA10 - Phone Number
        PHA11 - Contact Name
        PHA12 - Chain Site ID
    PATIENT DETAIL
    PAT - Patient Information
        PAT01 - ID Qualifier of Issuing Jurisdiction
        PAT02 - ID Qualifier
        PAT03 - ID of Patient
        PAT04 - Additional ID Qualifier of Issuing Jurisdiction
        PAT05 - Additional Patient ID Qualifier
        PAT06 - Additional ID
        PAT07 - Last Name
        PAT08 - First Name

```

PAT09 - Middle Name  
 PAT10 - Name Prefix  
 PAT11 - Name Suffix  
 PAT12 - Address Information - 1  
 PAT13 - Address Information - 2  
 PAT14 - City Address  
 PAT15 - State Address  
 PAT16 - ZIP Code Address  
 PAT17 - Phone Number  
 PAT18 - Date of Birth  
 PAT19 - Gender Code  
 PAT20 - Species Code  
 PAT21 - Patient Location Code  
 PRESCRIPTION DETAIL  
 DSP - Dispensing Record  
   DSP01 - Reporting Status  
   DSP02 - Prescription Number  
   DSP03 - Date Written  
   DSP04 - Refills Authorized  
   DSP05 - Date Filled  
   DSP06 - Refill Number  
   DSP07 - Product ID Qualifier  
   DSP08 - Product ID  
   DSP09 - Quantity Dispensed  
   DSP10 - Days Supply  
   DSP11 - Drug Dosage Units Code  
   DSP12 - Transmission Form of Rx Origin Code  
   DSP13 - Partial Fill Indicator  
   DSP14 - Pharmacist National Provider Identifier (NPI)  
   DSP15 - Pharmacist State License Number  
   DSP16 - Classification Code for Payment Type  
 PRE - Prescriber Information  
   PRE01 - National Provider Identifier (NPI)  
   PRE02 - DEA Number  
   PRE03 - DEA Number Suffix  
   PRE04 - Prescriber State License Number  
   PRE05 - Last Name  
   PRE06 - First Name  
   PRE07 - Middle Name  
 CDI - Compound Drug Ingredient Detail (Not Used)  
   CDI01 - Compound Drug Ingredient Sequence Number  
   CDI02 - Product ID Qualifier  
   CDI03 - Product ID  
   CDI04 - Component Ingredient Quantity  
   CDI05 - Compound Drug Dosage Units Code  
 AIR - Additional Information Reporting (Not Used)  
   AIR01 - State Issuing Rx Serial Number  
   AIR02 - State Issued Rx Serial Number  
   AIR03 - Issuing Jurisdiction  
   AIR04 - ID Qualifier of Person Dropping Off or Picking U  
   AIR05 - ID of Person Dropping Off or Picking Up Rx  
   AIR06 - Relationship of Person Dropping Off or Picking U  
   AIR07 - Last Name of Person Dropping Off or Picking Up R  
   AIR08 - First Name of Person Dropping Off or Picking Up  
   AIR09 - Last Name or Initials of Pharmacist  
   AIR10 - First Name of Pharmacist  
  
 PHARMACY TRAILER  
 TP - Pharmacy Trailer  
   TP01 - Detail Segment Count  
 MAIN TRAILER  
 TT - Transaction Trailer  
   TT01 - Transaction Control Number  
   TT02 - Segment Count

## ASAP Standard Version 4.1

### MAIN HEADER

#### TH - Transaction Header

- TH01 - Version / Release Number
- TH02 - Transaction Control Number
- TH03 - Transaction Type
- TH04 - Response ID
- TH05 - Creation Date
- TH06 - Creation Time
- TH07 - File Type
- TH08 - Routing Number
- TH09 - Data Segment Terminator Character

#### IS - Information Source

- IS01 - Unique Information Source ID
- IS02 - Information Source Entity Name
- IS03 - Message

### PHARMACY HEADER

#### PHA - Pharmacy Header

- PHA01 - National Provider Identifier (NPI)
- PHA02 - NCPDP/NABP Provider ID
- PHA03 - DEA Number
- PHA04 - Pharmacy Name
- PHA05 - Address Information - 1
- PHA06 - Address Information - 2
- PHA07 - City Address
- PHA08 - State Address
- PHA09 - ZIP Code Address
- PHA10 - Phone Number
- PHA11 - Contact Name
- PHA12 - Chain Site ID

### PATIENT DETAIL

#### PAT - Patient Information

- PAT01 - ID Qualifier of Patient Identifier
- PAT02 - ID Qualifier
- PAT03 - ID of Patient
- PAT04 - ID Qualifier of Additional Patient Identifier
- PAT05 - Additional Patient ID Qualifier
- PAT06 - Additional ID
- PAT07 - Last Name
- PAT08 - First Name
- PAT09 - Middle Name
- PAT10 - Name Prefix
- PAT11 - Name Suffix
- PAT12 - Address Information - 1
- PAT13 - Address Information - 2
- PAT14 - City Address
- PAT15 - State Address
- PAT16 - ZIP Code Address
- PAT17 - Phone Number
- PAT18 - Date of Birth
- PAT19 - Gender Code
- PAT20 - Species Code
- PAT21 - Patient Location Code
- PAT22 - Country of Non-U.S. Resident
- PAT23 - Name of Animal

### PRESCRIPTION DETAIL

#### DSP - Dispensing Record

- DSP01 - Reporting Status
- DSP02 - Prescription Number
- DSP03 - Date Written
- DSP04 - Refills Authorized
- DSP05 - Date Filled
- DSP06 - Refill Number
- DSP07 - Product ID Qualifier
- DSP08 - Product ID
- DSP09 - Quantity Dispensed
- DSP10 - Days Supply
- DSP11 - Drug Dosage Units Code
- DSP12 - Transmission Form of Rx Origin Code

```

DSP13 - Partial Fill Indicator
DSP14 - Pharmacist National Provider Identifier (NPI)
DSP15 - Pharmacist State License Number
DSP16 - Classification Code for Payment Type
DSP17 - Date Sold (Not Used)
DSP18 - RxNorm Code
DSP19 - Electronic Prescription Reference Number
PRE - Prescriber Information
    PRE01 - National Provider Identifier (NPI)
    PRE02 - DEA Number
    PRE03 - DEA Number Suffix
    PRE04 - Prescriber State License Number
    PRE05 - Last Name
    PRE06 - First Name
    PRE07 - Middle Name
CDI - Compound Drug Ingredient Detail (Not Used)
    CDI01 - Compound Drug Ingredient Sequence Number
    CDI02 - Product ID Qualifier
    CDI03 - Product ID
    CDI04 - Component Ingredient Quantity
    CDI05 - Compound Drug Dosage Units Code
AIR - Additional Information Reporting (Not Used)
    AIR01 - State Issuing Rx Serial Number
    AIR02 - State Issued Rx Serial Number
    AIR03 - ID Issuing Jurisdiction
    AIR04 - ID Qualifier of Person Dropping Off or Picking U
    AIR05 - ID of Person Dropping Off or Picking Up Rx
    AIR06 - Relationship of Person Dropping Off or Picking U
    AIR07 - Last Name of Person Dropping Off or Picking Up R
    AIR08 - First Name of Person Dropping Off or Picking Up
    AIR09 - Last Name or Initials of Pharmacist
    AIR10 - First Name of Pharmacist

PHARMACY TRAILER
TP - Pharmacy Trailer
    TP01 - Detail Segment Count
MAIN TRAILER
TT - Transaction Trailer
    TT01 - Transaction Control Number
    TT02 - Segment Count

```

## ASAP Version 4.2

```

MAIN HEADER
TH - Transaction Header
    TH01 - Version / Release Number
    TH02 - Transaction Control Number
    TH03 - Transaction Type
    TH04 - Response ID
    TH05 - Creation Date
    TH06 - Creation Time
    TH07 - File Type
    TH08 - Routing Number
    TH09 - Data Segment Terminator Character
IS - Information Source
    IS01 - Unique Information Source ID
    IS02 - Information Source Entity Name
    IS03 - Message
PHARMACY HEADER
PHA - Pharmacy Header
    PHA01 - National Provider Identifier (NPI)
    PHA02 - NCPDP/NABP Provider ID
    PHA03 - DEA Number
    PHA04 - Pharmacy Name
    PHA05 - Address Information - 1
    PHA06 - Address Information - 2
    PHA07 - City Address
    PHA08 - State Address
    PHA09 - ZIP Code Address
    PHA10 - Phone Number

```

PHA11 - Contact Name  
 PHA12 - Chain Site ID  
 PATIENT DETAIL  
 PAT - Patient Information  
   PAT01 - ID Qualifier of Patient Identifier  
   PAT02 - ID Qualifier  
   PAT03 - ID of Patient  
   PAT04 - ID Qualifier of Additional Patient Identifier  
   PAT05 - Additional Patient ID Qualifier  
   PAT06 - Additional ID  
   PAT07 - Last Name  
   PAT08 - First Name  
   PAT09 - Middle Name  
   PAT10 - Name Prefix  
   PAT11 - Name Suffix  
   PAT12 - Address Information - 1  
   PAT13 - Address Information - 2  
   PAT14 - City Address  
   PAT15 - State Address  
   PAT16 - ZIP Code Address  
   PAT17 - Phone Number  
   PAT18 - Date of Birth  
   PAT19 - Gender Code  
   PAT20 - Species Code  
   PAT21 - Patient Location Code  
   PAT22 - Country of Non-U.S. Resident  
   PAT23 - Name of Animal  
 PRESCRIPTION DETAIL  
 DSP - Dispensing Record  
   DSP01 - Reporting Status  
   DSP02 - Prescription Number  
   DSP03 - Date Written  
   DSP04 - Refills Authorized  
   DSP05 - Date Filled  
   DSP06 - Refill Number  
   DSP07 - Product ID Qualifier  
   DSP08 - Product ID  
   DSP09 - Quantity Dispensed  
   DSP10 - Days Supply  
   DSP11 - Drug Dosage Units Code  
   DSP12 - Transmission Form of Rx Origin Code  
   DSP13 - Partial Fill Indicator  
   DSP14 - Pharmacist National Provider Identifier (NPI)  
   DSP15 - Pharmacist State License Number  
   DSP16 - Classification Code for Payment Type  
   DSP17 - Date Sold (Not Used)  
   DSP18 - RxNorm Product Qualifier  
   DSP19 - RxNorm Code  
   DSP20 - Electronic Prescription Reference Number  
   DSP21 - Electronic Prescription Order Number  
 PRE - Prescriber Information  
   PRE01 - National Provider Identifier (NPI)  
   PRE02 - DEA Number  
   PRE03 - DEA Number Suffix  
   PRE04 - Prescriber State License Number  
   PRE05 - Last Name  
   PRE06 - First Name  
   PRE07 - Middle Name  
   PRE08 - Phone Number  
   PRE09 - Provider DETOX Number\*  
 CDI - Compound Drug Ingredient Detail (Not Used)  
   CDI01 - Compound Drug Ingredient Sequence Number  
   CDI02 - Product ID Qualifier  
   CDI03 - Product ID  
   CDI04 - Component Ingredient Quantity  
   CDI05 - Compound Drug Dosage Units Code  
 AIR - Additional Information Reporting (Not Used)  
   AIR01 - State Issuing Rx Serial Number  
   AIR02 - State Issued Rx Serial Number  
   AIR03 - ID Issuing Jurisdiction  
   AIR04 - ID Qualifier of Person Dropping Off or Picking U

```

AIR05 - ID of Person Dropping Off or Picking Up Rx
AIR06 - Relationship of Person Dropping Off or Picking U
AIR07 - Last Name of Person Dropping Off or Picking Up R
AIR08 - First Name of Person Dropping Off or Picking Up
AIR09 - Last Name or Initials of Pharmacist
AIR10 - First Name of Pharmacist
AIR11 - Dropping Off/Picking Up Identifier Qualifier

PHARMACY TRAILER
TP - Pharmacy Trailer
TP01 - Detail Segment Count

MAIN TRAILER
TT - Transaction Trailer
TT01 - Transaction Control Number
TT02 - Segment Count

```

\* Pharmacy Safety Updates patch PSO\*7\*630 adds the PRE09 data element to ASAP Version 4.2. The PRE09 data element will contain the provider's Detox/Maintenance ID Number, when the drug being referenced on the DSP08 data element references a buprenorphine-containing product indicated for detox.

## Zero Report ASAP Version 4.1Z

```

MAIN HEADER
TH - Transaction Header
TH01 - Version / Release Number
TH02 - Transaction Control Number
TH03 - Transaction Type
TH04 - Response ID
TH05 - Creation Date
TH06 - Creation Time
TH07 - File Type
TH08 - Routing Number
TH09 - Data Segment Terminator Character
IS - Information Source
IS01 - Unique Information Source ID
IS02 - Information Source Entity Name
PHARMACY HEADER
PHA - Pharmacy Header
PHA01 - National Provider Identifier (NPI)
PHA02 - NCPDP/NABP Provider ID
PHA03 - DEA Number
PATIENT DETAIL
PAT - Patient Information
PAT01 - ID Qualifier of Patient Identifier
PAT02 - ID Qualifier
PAT03 - ID of Patient
PAT04 - ID Qualifier of Additional Patient Identifier
PAT05 - Additional Patient ID Qualifier
PAT06 - Additional ID
PAT07 - Last Name
PAT08 - First Name
PAT09 - Middle Name
PAT10 - Name Prefix
PAT11 - Name Suffix
PAT12 - Address Information - 1
PAT13 - Address Information - 2
PAT14 - City Address
PAT15 - State Address
PAT16 - ZIP Code Address
PAT17 - Phone Number
PAT18 - Date of Birth
PAT19 - Gender Code
PRESCRIPTION DETAIL
DSP - Dispensing Record
DSP01 - Reporting Status
DSP02 - Prescription Number
DSP03 - Date Written

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        DSP04 - Refills Authorized
        DSP05 - Date of Report
        DSP06 - Refill Number
        DSP07 - Product ID Qualifier
        DSP08 - Product ID
        DSP09 - Quantity Dispensed
        DSP10 - Days Supply
        PRE - Prescriber Information
            PRE01 - National Provider Identifier (NPI)
            PRE02 - DEA Number
        CDI - Compound Drug Ingredient Detail
            CDI01 - Compound Drug Ingredient Sequence Number
            CDI02 - Product ID Qualifier
            CDI03 - Product ID
            CDI04 - Component Ingredient Quantity
        AIR - Additional Information Reporting
    PHARMACY TRAILER
    TP - Pharmacy Trailer
        TP01 - Detail Segment Count
MAIN TRAILER
TT - Transaction Trailer
    TT01 - Transaction Control Number
    TT02 - Segment Count

```

## Zero Report ASAP Version 4.2Z

```

MAIN HEADER
TH - Transaction Header
    TH01 - Version / Release Number
    TH02 - Transaction Control Number
    TH03 - Transaction Type
    TH04 - Response ID
    TH05 - Creation Date
    TH06 - Creation Time
    TH07 - File Type
    TH08 - Routing Number
    TH09 - Data Segment Terminator Character
IS - Information Source
    IS01 - Unique Information Source ID
    IS02 - Information Source Entity Name
    IS03 - Date Range for Zero Reports
PHARMACY HEADER
PHA - Pharmacy Header
    PHA01 - National Provider Identifier (NPI)
    PHA02 - NCPDP/NABP Provider ID
    PHA03 - DEA Number
PATIENT DETAIL
PAT - Patient Information
    PAT01 - ID Qualifier of Patient Identifier
    PAT02 - ID Qualifier
    PAT03 - ID of Patient
    PAT04 - ID Qualifier of Additional Patient Identifier
    PAT05 - Additional Patient ID Qualifier
    PAT06 - Additional ID
    PAT07 - Last Name
    PAT08 - First Name
    PAT09 - Middle Name
    PAT10 - Name Prefix
    PAT11 - Name Suffix
    PAT12 - Address Information - 1
    PAT13 - Address Information - 2
    PAT14 - City Address
    PAT15 - State Address
    PAT16 - ZIP Code Address
    PAT17 - Phone Number
    PAT18 - Date of Birth
    PAT19 - Gender Code
PRESCRIPTION DETAIL
DSP - Dispensing Record

```

```

DSP01 - Reporting Status
DSP02 - Prescription Number
DSP03 - Date Written
DSP04 - Refills Authorized
DSP05 - Date of Report
DSP06 - Refill Number
DSP07 - Product ID Qualifier
DSP08 - Product ID
DSP09 - Quantity Dispensed
DSP10 - Days Supply
DSP11 - Drug Dosage Units Code
DSP12 - Transmission Form of Rx Origin Code
DSP13 - Partial Fill Indicator
DSP14 - Pharmacist National Provider Identifier (NPI)
DSP15 - Pharmacist State License Number
DSP16 - Classification Code for Payment Type
DSP17 - Date Sold (Not Used)
PRE - Prescriber Information
    PRE01 - National Provider Identifier (NPI)
    PRE02 - DEA Number
CDI - Compound Drug Ingredient Detail
    CDI01 - Compound Drug Ingredient Sequence Number
    CDI02 - Product ID Qualifier
    CDI03 - Product ID
    CDI04 - Component Ingredient Quantity
AIR - Additional Information Reporting
    AIR01 - State Issuing Rx Serial Number
    AIR02 - State Issued Rx Serial Number
PHARMACY TRAILER
    TP - Pharmacy Trailer
        TP01 - Detail Segment Count
MAIN TRAILER
    TT - Transaction Trailer
        TT01 - Transaction Control Number
        TT02 - Segment Count

```



# Glossary

The following table provides definitions for common acronyms and terms used in this manual.

**Table 51: Terms**

Acronym/Term	Definition
Action Profile	A list of all active and recently canceled or expired prescriptions for a patient sorted by classification. This profile also includes a signature line for each prescription to allow the physician to cancel or renew it.
Activity Log	A log, by date, of changes made to or actions taken on a prescription. An entry is made in this log each time the prescription is edited, canceled, reinstated after being canceled, or renewed. An entry will be made into this log each time a label is reprinted. A CMOP activity log will contain information related to CMOP dispensing activities.
ADD	Automated Dispensing Device
Allergy/ADR Information	Includes non-verified and verified allergy and/or adverse reaction information as defined in the Adverse Reaction Tracking (ART) package. The allergy data is sorted by type (DRUG, OTHER, FOOD). If no data is found for a category, the heading for that category is not displayed.
Allergy Order Check	The process that compares the drugs prescribed for a patient against that patient's recorded allergies
AMIS	Automated Management Information System
Answer Sheet	An entry in the DUE ANSWER SHEET file. It contains the questions and answers of a DUE questionnaire. This term is also used to refer to the hard copy representation of a DUE ANSWER SHEET entry.
API	Application Programming Interfaces
APSP	Originally Indian Health Service Pharmacy's name space now owned by the Outpatient Pharmacy software.
ASAP	American Society for Automation in Pharmacy
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.
Bypass	Take no action on a medication order.
CHAMPVA	CHAMPVA (Civilian Health and Medical Program of the Department of Veterans Affairs) is a cost-shared health benefits program established for the dependents and survivors of certain severely disabled and/or deceased veterans.
Clinical Reminder Order Checks	CPRS Order Checks that use Clinical Reminder functionality, both reminder terms and reminder definitions, to perform checks for groups of orderable items.
CMOP	Consolidated Mail Outpatient Pharmacy.

Acronym/Term	Definition
CPRS	Computerized Patient Record System. CPRS is an entry point in VistA that allows the user to enter all necessary orders for a patient in different packages (e.g., Outpatient Pharmacy, Inpatient Pharmacy, etc.) from a single entry point.
CrCL	Creatinine Clearance. The CrCL displays in the pharmacy header is identical to the CrCL value calculated in CPRS. The formula approved by the CPRS Clinical Workgroup is the following: Modified Cockcroft-Gault equation using Adjusted Body Weight in kg: (if ht > 60in) This calculation is not intended to be a replacement for independent clinical judgment.
Critical	Interactions with severe consequences that require some type of action (finding facts, contacting prescribers) to prevent potential serious harm.
DATUP	Data Update (DATUP). Functionality that allows the Pharmacy Enterprise Customization System (PECS) to send out VA custom and standard commercial-off-the-shelf (COTS) vendor database changes to update the production and pre-production centralized MOCHA databases at Austin and Philadelphia.
DEA	Drug Enforcement Agency
DEA Special Handling	The Drug Enforcement Agency special Handling code used for drugs to designate if they are over-the counter, narcotics, bulk compounds, supply items, etc.
DHCP	See VistA.
DIF	Drug Information Framework
Dispense Drug	The Dispense Drug name has the strength attached to it (e.g., Acetaminophen 325 mg). The name alone without a strength attached is the Orderable Item name.
Dosage Ordered	After the user has selected the drug during order entry, the dosage ordered prompt is displayed.
Drug/Drug Interaction	The pharmacological or clinical response to the administration of a drug combination different from that anticipated from the known effects of the two agents when given alone.
DUE	Drug Usage Evaluation
Expiration/Stop	The date on which a prescription is no longer active. Typically, this date is 30 days after the issue date for narcotics, 365 days after the issue date for other medications and 365 days after the issue date for supplies.
FDB	First DataBank
Finish	Term used for completing orders from Order Entry/Results Reporting V. 3.0.
GUI	Acronym for Graphical User Interface.
Issue Date	The date on which the prescription was written. This date is usually, but not always, the same as the first fill date. This date cannot be later than the first fill date.
HDR/CDS	Health Data Repository/Clinical Data Services Repository
HFS	Host File Server.

Acronym/Term	Definition
Health Insurance Portability and Accountability Act of 1996 (HIPAA)	A Federal law that makes a number of changes that have the goal of allowing persons to qualify immediately for comparable health insurance coverage when they change their employment relationships. Title II, Subtitle F, of HIPAA gives HHS the authority to mandate the use of standards for the electronic exchange of health care data; to specify what medical and administrative code sets should be used within those standards; to require the use of national identification systems for health care patients, providers, payers (or plans), and employers (or sponsors); and to specify the types of measures required to protect the security and privacy of personally identifiable health care information. Also known as the Kennedy-Kassebaum Bill, the Kassebaum-Kennedy Bill, K2, or Public Law 104-191.
JCAHO	Acronym for Joint Commission on Accreditation of Healthcare Organizations
Label/Profile Monitor	A file for each printer that records, in the order in which they were printed, the last 1000 labels or profiles printed on that printer. This allows a rapid reprint of a series of labels or profiles that were damaged by a printer malfunction or other event.
Local Possible Dosages	Free text dosages that are associated with drugs that do not meet all of the criteria for Possible Dosages.
Medication Instruction File	The MEDICATION INSTRUCTION file is used by Unit Dose and Outpatient Pharmacy. It contains the medication instruction name, expansion and intended use.
Medication Order	A prescription.
Medication Profile	A list of all active or recently canceled or expired prescriptions for a patient sorted either by date, drug, or classification. Unlike the action profile, this profile is for information only and does not provide a signature line for a physician to indicate action to be taken on the prescription.
Medication Routes File	The MEDICATION ROUTES file contains medication route names. The user can enter an abbreviation for each route to be used at the local site. The abbreviation will most likely be the Latin abbreviation for the term.
Med Route	The method in which the prescription is to be administered (e.g., oral, injection).
NCCC	Acronym for National Clozapine Coordinating Center.
Non-Formulary Drugs	The medications, which are defined as commercially available drug products not included in the VA National Formulary.
Non-VA Meds	Term that encompasses any Over-the-Counter (OTC) medications, Herbal supplements, Veterans Health Administration (VHA) prescribed medications but purchased by the patient at an outside pharmacy, and medications prescribed by providers outside VHA. All Non-VA Meds must be documented in patients' medical records.
OPAI	Outpatient Pharmacy Automated Interface
OneVA Pharmacy	Prescriptions that originated from another VistA instance other than the site dispensing the prescription.
Order	Request for medication.
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).

Acronym/Term	Definition
Partial Prescription	A prescription that has been filled for a quantity smaller than requested. A possible reason for a partial fill is that a patient is to return to the clinic in ten days, but the prescription calls for a thirty-day supply. Partials do count as workload but do not count against the total number of refills for a prescription.
Payer	In health care, an entity that assumes the risk of paying for medical treatments. This can be an uninsured patient, a self-insured employer, or a health care plan or Health Maintenance Organization (HMO).
PDMP	Prescription Drug Monitoring Program
Pending Order	A pending order is one that has been entered by a provider through CPRS without Pharmacy finishing the order. Once Pharmacy has finished the order, it will become active.
Pharmacy Narrative	OUTPATIENT NARRATIVE field that may be used by pharmacy staff to display information specific to the patient.
Polypharmacy	The administration of many drugs together.
POE	Acronym for Pharmacy Ordering Enhancements (POE) project. Patch PSO*7*46 contains all the related changes for Outpatient Pharmacy.
Possible Dosages	Dosages that have a numeric dosage and numeric dispense units per dose appropriate for administration. For a drug to have possible dosages, it must be a single ingredient product that is matched to the DRUG file. The DRUG file entry must have a numeric strength and the dosage form/unit combination must be such that a numeric strength combined with the unit can be an appropriate dosage selection.
Prescription	This term is now referred to throughout the software as medication orders.
Prescription Status	<p>A prescription can have one of the following statuses:</p> <p>Active – A prescription with this status can be filled or refilled.</p> <p>Canceled – This term is now referred to throughout the software as Discontinued. (See Discontinued)</p> <p>Discontinued – This status is used when a prescription was made inactive either by a new prescription or by the request of a physician.</p> <p>Discontinued (Edit) – Discontinued (Edit) is the status used when a medication order has been edited and causes a new order to be created due to the editing of certain data elements.</p> <p>Deleted – This status is used when a prescription is deleted. Prescriptions are no longer physically deleted from the system but marked as deleted. Once a prescription is marked deleted no access is allowed other than view.</p> <p>Expired – This status indicates the expiration date has passed.</p> <p>*Note: A prescription that was canceled or has expired more recently than the date specified by the cutoff date, typically 120 days in the past, can still be acted upon.</p> <p>Hold – A prescription that was placed on hold due to reasons determined by the pharmacist.</p> <p>Non-verified – There are two types of non-verified statuses. Depending on a site parameter, prescriptions entered by a technician do not become active until a pharmacist reviews them. Until such review, they remain non-verified and cannot be printed, canceled, or edited except through the <i>Verification</i> menu.</p> <p>The second non-verified status is given to prescriptions when a drug/drug interaction is encountered during the new order entry or editing of a prescription.</p>

Acronym/Term	Definition
	Pending – A prescription that has been entered through OERR. Refill – A second or subsequent filling authorized by the provider. Suspended – A prescription that will be filled at some future date.
Progress Notes	A component of Text Integration Utilities (TIU) that can function as part of CPRS.
Provider	The person who authorized an order. Only users identified as providers who are authorized to write medication orders may be selected.
Reprinted Label	Unlike a partial prescription, a reprint does not count as workload.
Questionnaire	An entry in the DUE QUESTIONNAIRE file. This file entry contains the set of questions related to a DUE as well as the drugs being evaluated.
Schedule	The frequency by which the doses are to be administered, such as Q8H, BID, NOW, etc.
Sig	The instructions printed on the label.
Significant	The potential for harm is either rare or generally known so that it is reasonable to expect that all prescribers have taken this information into account.
Speed Actions	See Actions
SPMP	State Prescription Monitoring Program
Suspense	A prescription may not be able to be filled on the day it was requested. When the prescription is entered, a label is not printed. Rather, the prescription is put in the RX SUSPENSE file to be printed at a later date.
Third (3 <sup>rd</sup> ) Party Claims	Health care insurance claims submitted to an entity for reimbursement of health care bills.
Time In	This is the time that the patient's name was entered in the computer.
Time Out	This is the time that the patient's name was entered on the bingo board monitor.
Titration	Titration is the process of gradually adjusting the dose of a medication until optimal results are reached.
TIU	Text Integration Utilities; a package for document handling, that includes Consults, Discharge summary, and Progress Notes, and will later add other document types such as surgical pathology reports. TIU components can be accessed for individual patients through the CPRS, or for multiple patients through the TIU interface.
TRICARE	TRICARE is the uniformed service health care program for: active duty service members and their families retired service members and their families members of the National Guard and Reserves and their families survivors, and others who are eligible There are differences in how prescriptions for TRICARE beneficiaries are processed versus how prescriptions are processed for Veterans.
Units per Dose	The number of Units (tablets, capsules, etc.) to be dispensed as a Dose for an order. Fractional numbers will be accepted for medications that can be split.
VistA	Acronym for Veterans Health Information Systems and Technology Architecture, the new name for Decentralized Hospital Computer Program (DHCP).

<b>Acronym/Term</b>	<b>Definition</b>
Wait Time	This is the amount of time it took to fill the prescription. It is the difference between Time In and Time Out. For orders with more than one prescription, the wait time is the same for each.